Flex Therapist CEUs

Wheelchairs - Clinical Perspectives

- 1. Which of the following is not a factor clinicians should consider when determining whether to prescribe a manual or power wheelchair?
- A. The patient's intrinsic factors such as strength and cognition
- B. The patient's environmental and activity-related needs
- C. The wheelchair's mechanical and design characteristics
- D. The patient's preferred wheelchair color
- 2. A 42-year-old patient with good upper extremity strength but limited endurance requires a wheelchair for long-distance community use. Which type of wheelchair would most likely be appropriate?
- A. Standard wheelchair
- B. Power wheelchair
- C. Ultra lightweight manual wheelchair
- D. Tilt-in-space dependent wheelchair
- 3. What is the primary difference between a manual wheelchair and a power wheelchair?
- A. Manual wheelchairs are only for pediatric use, while power wheelchairs are for adults
- B. Power wheelchairs are temporary mobility solutions, while manual wheelchairs are permanent
- C. Manual wheelchairs require propulsion by the user or caregiver, while power wheelchairs use a battery-powered mechanism
- D. Manual wheelchairs are only used indoors, while power wheelchairs are for outdoor mobility
- 4. A clinician is prescribing a wheelchair for a patient who lives in a small apartment with narrow hallways. Which power wheelchair configuration would be most appropriate for this environment?
- A. Mid-wheel drive
- B. Front-wheel drive
- C. Rear-wheel drive
- D. Transport wheelchair
- 5. A standing power wheelchair may offer several health benefits, such as improved respiratory function and pressure relief. However, which of the following would be a contraindication for prescribing this type of chair?
- A. Mild postural asymmetry

- B. Contractures or skeletal deformities preventing safe standing
- C. History of urinary tract infections
- D. Reduced endurance with self-propulsion

6. A 72-year-old patient with diminished muscle mass, reduced respiratory function, and mild cognitive decline needs a new wheelchair. Which of the following is MOST important to consider during selection?

- A. Ability to perform wheelies for curb navigation
- B. Lightweight frame for high propulsion efficiency
- C. Compact turning radius for outdoor mobility
- D. Added support and safety features for reduced endurance and cognition

7. When positioning the wheelchair axle more anteriorly, which of the following benefits occurs?

- A. Decreased rolling resistance and better propulsion efficiency
- B. Improved backward stability
- C. Greater shoulder strain and energy expenditure
- D. Decreased independence and control

8. A clinician notes that a patient demonstrates a posterior pelvic tilt when seated. What adjustment might best address this issue?

- A. Increase the seat depth to support the thighs
- B. Add a lumbar wedge or shorten seat depth
- C. Build up under the high side of the pelvis
- D. Provide a lateral thigh support

9. Which of the following is a primary goal of the seating examination during a wheelchair evaluation?

- A. To assess upper extremity coordination for propulsion
- B. To evaluate vision and hearing deficits
- C. To identify the need for power versus manual mobility
- D. To determine the most appropriate type of pressure relief cushion

10. A clinician is working with a patient who cannot reposition independently and has a high risk for pressure sores. Which type of cushion would be most appropriate?

- A. Passive cushion
- B. Gel cushion
- C. Dynamic cushion
- D. Foam cushion

11. Hip flexion range of motion should be greater than 90 degrees for which of the following reasons?

- A. To allow the patient to perform wheelchair pushups
- B. To achieve optimal pelvic position and neutral alignment
- C. To prevent cognitive decline during wheelchair use
- D. To increase shoulder range of motion

12. Which of the following can help maintain neutral pelvic alignment for patients with increased or decreased lower extremity tone?

- A. Calf panels and ankle straps
- B. Swing-away leg rests with heel loops
- C. Standard fixed footrests only
- D. Arm troughs

13. How often will insurance or Medicare generally reimburse for a new wheelchair, assuming no exceptions?

- A. Every 2 years
- B. Every 3 years
- C. Every 5 years
- D. Every 10 years

14. Why might a patient with Multiple Sclerosis be issued a heavier, less adjustable manual wheelchair initially?

- A. Because clinicians anticipate slow disease progression and consider it an intermediate step
- B. Because heavy wheelchairs are required for pressure relief
- C. Because power wheelchairs are never recommended for MS patients
- D. Because standard wheelchairs are more expensive

15. What is a key consideration for wheelchair prescription for a patient who uses one or both feet to propel their manual wheelchair?

- A. Fixed forward axle position for optimal turning radius
- B. Dynamic pressure relief cushion with motorized support
- C. Elevated seat-to-back angle to prevent sliding
- D. A lower seat height or adjustable seat slope to allow the foot to rest flat on the ground

16. What is the main benefit of properly prescribed wheelchair armrests?

A. To prevent any need for pressure relief exercises

- B. To optimize postural alignment, assist transfers, and provide a support surface for functional tasks
- C. To restrict movement of the upper extremities
- D. To serve as a permanent placement for medical devices

17. How is the seat height of a wheelchair typically measured?

- A. From the bottom of the heel to the popliteal fossa behind the knee, plus two inches for footrests and cushion height
- B. From the top of the cushion to the floor
- C. From the back of the knees to the seat back
- D. From the hip to the top of the cushion

18. Which type of manual wheelchair frame offers the most customizability and lowest long-term maintenance costs, suitable for self-propulsion?

- A. Standard wheelchair
- B. Lightweight wheelchair
- C. Ultra-lightweight wheelchair
- D. Transport wheelchair

19. Why is it important to properly adjust the footrests and legrests on a wheelchair?

- A. To increase the wheelchair weight for stability
- B. To optimize lower extremity positioning, prevent pelvic sliding, and accommodate medical conditions
- C. To restrict movement of the lower extremities
- D. To allow the wheelchair to fold more easily

20. For a patient with functional use of their upper extremities, where should the backrest ideally be positioned?

- A. Above the head
- B. At the level of the posterior superior iliac crests only
- C. At the top of the seat cushion
- D. Below the inferior angle of the scapula

21. In acute care settings, which type of wheelchair is most likely to be used for short-term patient mobility?

- A. Ultra-lightweight manual wheelchair
- B. Transport wheelchair
- C. Power wheelchair
- D. Custom contoured wheelchair

22. Which propulsion technique is considered the most efficient for manual wheelchair users?

- A. Semicircular pattern with hands hovering below the top of the rim
- B. Single-looping technique with hands hovering above the rim
- C. Pushing from 12 o'clock to 3 o'clock
- D. Propelling with only the lower extremities

23. Which factor is least relevant when selecting the preferred transfer method for a wheelchair user?

- A. Strength of the patient
- B. Skin integrity
- C. Patient's favorite color
- D. Range of motion and coordination

24. How often should nuts and bolts on a manual wheelchair be inspected to ensure proper function?

- A. Daily
- B. Weekly
- C. Monthly
- D. Yearly

25. Which strategy helps reduce energy expenditure for a manual wheelchair user?

- A. Using solid tires instead of pneumatic tires
- B. Inflating tires below recommended pressure
- C. Performing transfers to higher surfaces whenever possible
- D. Selecting a properly sized, lightweight, and adjustable wheelchair

26. What is the primary purpose of a letter of medical necessity when requesting a wheelchair for a patient?

- A. To describe the patient's social history and hobbies
- B. To provide a comprehensive depiction of the patient's medical needs and justify specialized equipment for third-party funding
- C. To instruct the vendor on wheelchair assembly
- D. To compare different wheelchair brands

27. Which of the following is not typically required in a letter of medical necessity?

- A. Patient's favorite color for wheelchair customization
- B. Patient's current abilities and limitations
- C. Justification for custom or specialized wheelchair components

D. Tests and	outcome	measures	supporting	equipment	needs
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28. After third-party funding approval, what is the vendor's role in the wheelchair process?

- A. Prescribing the appropriate wheelchair based on the patient's needs
- B. Performing the patient's functional mobility assessment
- C. Determining the patient's medical diagnosis
- D. Assembling and delivering the wheelchair according to the therapist's specifications, and providing small adjustments during training
- 29. A 55-year-old patient with progressive multiple sclerosis is struggling to safely ambulate in their home and experiences fatigue after short distances. The therapist is preparing a letter of medical necessity for a wheelchair. Which of the following should the therapist include in the letter to ensure third-party funding approval?
- A. Only the patient's diagnosis and age
- B. A comparison of wheelchair brands available in the clinic
- C. A detailed description of the patient's functional limitations, tests and outcome measures, and justification for the recommended wheelchair type
- D. The patient's favorite colors and personal preferences for accessories
- 30. During a rehabilitation session, a patient using a manual wheelchair struggles with shoulder fatigue and inefficient propulsion over outdoor surfaces. The clinician wants to reduce energy expenditure and prevent overuse injury. Which intervention is most appropriate?
- A. Recommend switching immediately to a power wheelchair without further assessment
- B. Teach semicircular propulsion technique, review optimal hand placement, and ensure wheelchair is properly sized and lightweight
- C. Advise the patient to propel the wheelchair only short distances indoors
- D. Increase daily shoulder exercises without addressing wheelchair mechanics

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