**Post-Test (7 Questions, Including Case Study Applications)**

**Instructions**: Complete the following questions after the lecture. Questions 1–5 are multiple-choice; questions 6–7 are short-answer based on case studies. Time: 10 minutes.

1. **What is a Hospital-Acquired Pressure Injury (HAPI)?**  
   a) A skin injury present on admission  
   b) A pressure injury that develops during a hospital stay  
   c) A surgical wound infection  
   d) A burn caused by medical equipment  
   **Answer**: b
2. **Which tool is commonly used to assess pressure injury risk?**  
   a) Glasgow Coma Scale  
   b) Braden Scale  
   c) Morse Fall Scale  
   d) Pain Assessment Scale  
   **Answer**: b
3. **A patient with a Braden Score of 14 is considered:**  
   a) Low risk  
   b) Moderate risk  
   c) High risk  
   d) No risk  
   **Answer**: c
4. **How often should high-risk patients be repositioned to prevent pressure injuries?**  
   a) Every 6 hours  
   b) Every 4 hours  
   c) Every 2 hours  
   d) Once daily  
   **Answer**: c
5. **Which of the following is an evidence-based PIP strategy?**  
   a) Using high-friction bed linens  
   b) Providing adequate protein and hydration  
   c) Limiting skin inspections to weekly  
   d) Avoiding patient education  
   **Answer**: b
6. **Case Study Application: Mrs. Jones**  
   **Scenario**: Mrs. Jones, 82 years old, admitted for pneumonia. Bedbound, incontinent, BMI 18, Braden Score: 12.  
   **Question**: Name two PIP strategies you would prioritize for Mrs. Jones and explain why.  
   **Sample Answer**:
   * **Repositioning every 2 hours**: Her immobility and low Braden Score indicate high risk, and frequent repositioning reduces pressure on vulnerable areas.
   * **Nutritional consult**: Her low BMI and poor oral intake suggest malnutrition, which impairs skin integrity and healing.  
     **Scoring**: 1 point for each appropriate strategy with a valid explanation (total: 2 points).
7. **Case Study Application: Mr. Smith**  
   **Scenario**: Mr. Smith, 55 years old, post-hip replacement. Limited mobility, Braden Score: 16. No skin breakdown on admission.  
   **Question**: How would patient education contribute to Mr. Smith’s PIP plan? Provide one specific example.  
   **Sample Answer**: Patient education encourages Mr. Smith to participate in his care, such as performing self-repositioning when possible (e.g., shifting weight every 30 minutes while seated). This reduces pressure and enhances compliance.  
   **Scoring**: 1 point for a specific, relevant example with explanation (total: 1 point).

**Scoring**: 1 point per correct answer for questions 1–5; 2 points for question 6 (1 per strategy); 1 point for question 7 (total: 8 points). Record scores anonymously using participant IDs.

**3. Feedback Survey**

**Instructions**: Complete this anonymous survey after the lecture to provide feedback. Time: 3 minutes.

1. **Was the lecture clear and easy to understand?**
   * Strongly Agree / Agree / Neutral / Disagree / Strongly Disagree
2. **Was the lecture relevant to your clinical practice?**
   * Strongly Agree / Agree / Neutral / Disagree / Strongly Disagree
3. **Did the case studies help you apply PIP strategies?**
   * Strongly Agree / Agree / Neutral / Disagree / Strongly Disagree
4. **How confident do you feel in identifying high-risk patients after the lecture?**
   * Very Confident / Confident / Neutral / Not Confident / Not at All Confident
5. **What was the most valuable part of the lecture?** (Open-ended)