OT Mastery

Occupational Therapy Interventions for COPD

1. Which of the following is NOT an outcome that may be associated with shortness of breath?

A. Inability to complete household tasks
B. Low endurance
C. Difficulty socializing
D. Poor sleep/rest

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2. What COPD symptoms have the biggest impact on functional performance?

A. Poor sleep, muscle weakness, high blood pressure
B. Chronic cough, increased sputum production, muscle weakness
C. Increased sputum production, chronic fatigue, poor sleep
D. Shortness of breath, low endurance, chronic fatigue

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3. What is the most common place for someone with COPD to receive pulmonary rehab?

A. Group outpatient
B. Home health
C. Acute care
D. Work simplification program

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4. What category of exercises are most often included in pulmonary rehab?

A. Tai chi, yoga, strength training
B. Weight loss exercises, resistance training
C. Breathing exercises, weight training, exercise machines
D. Behavior training, breathing exercises, resistance training

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5. What aspects of pulmonary rehab are designed to assist with mental health (directly or indirectly)?

A. Stress management, emotion regulation training, lifestyle changes
B. Weight training, smoking cessation programs, weight loss programs
C. Use of community resources, referral to specialist providers, use of exercise machines
D. Breathing retraining exercises, strength training, nutritional counseling

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6. How can the Numeric Rating Scale be modified to assess non-pain symptoms of COPD?

A. By rating their chronic fatigue on the Numeric Rating Scale, patients with COPD can predict and potentially even avoid exacerbations by engaging in too many activities
B. The Numeric Rating Scale can help patients with COPD to set goals to better manage their COPD symptoms
C. Patients can use the Numeric Rating Scale to express their breathlessness on a scale of 1 to 10 where 0 means no breathlessness and 10 means the most breathlessness they've experienced
D. The Numeric Rating Scale has no clinical applications for patients with COPD

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7. Within hospital settings, the Global Initiative for Chronic Obstructive Lung Disease (GOLD) combined COPD assessment is the leading medical evaluation for this condition. Which of the following is NOT included in the GOLD combined assessment?

A. A ranking of airflow limitation
B. The number of hospital-related exacerbations in the last 6 months
C. Exacerbation risk and symptom burden
D. Spirometry

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8. Which statement from COPD research is true?

A. AOTA has indicated that ADL function is the most essential skill for patients with COPD and other chronic diseases
B. There are no major differences between self-reported ADL deficits and observed ADL deficits in patients with COPD
C. Breath control exercises and energy conservation techniques lack sufficient evidence to be used in this population
D. OTs are variably included as team members in pulmonary rehabilitation programs, despite research supporting their benefit in such roles

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9. Which of the following executive functioning skills (also one of the 4 Ps of energy conservation) is perhaps one of the most valuable in the proper management of COPD?

A. Planning
B. Praxis
C. Prioritization
D. Presentation

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10. A patient is being educated on the importance of body mechanics as part of energy conservation. They predominantly work from their standing desk for around 3 hours out of each day, but this is proving too taxing for them, so they ask their OT about other beneficial positions. They are reluctant to sit for this part of their work day since they "know how bad it can be for the body." The OT should educate this patient that which positions tend to worsen COPD symptoms the most?

A. Lying in supine, sitting edge of bed, standing idly

B. Squatting, bending, over-extended reaching
C. Overhead work, sitting, walking
D. Lying in prone, sitting edge of bed, laying in side-lying

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11. If patients can obtain the support, delegation can assist with managing energy levels and easing COPD symptoms. What aspect of energy conservation does delegating fall under?

A. Preparing
B. Prioritization
C. Planning
D. Pushing

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12. When an individual with COPD is planning out their schedule for the week, they will need to think about the tasks that are time-sensitive or most important to get done. This falls under what part of energy conservation?

A. Processing
B. Picking
C. Participating
D. Prioritization

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13. When leading individuals with COPD through endurance-building exercises, what is the most important safety guideline therapists should remember?

A. Rather than strictly following guidelines from governing bodies, therapists must make all exercise recommendations and programs client-centered to ensure safety and proper engagement
B. The most effective way for patients with COPD to build endurance related to exercise is to participate in at least 10 minutes of vigorous exercise daily, 6 days per week
C. Therapists should ensure patients do not exceed an 8 on the modified RPE Scale or a 10 on the original Borg scale during endurance training exercises
D. Severe shortness of breath during endurance-training exercises is normal and patients should work through that to build their tolerance for physical activity

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14. Various organizations (including the American Thoracic Society, World Health Organization, American Lung Association) state that individuals with COPD should aim to get what type of exercise intensity several times each week?

A. Mild intensity
B. Moderate intensity
C. Vigorous intensity
D. Variable intensity

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15. It is important that patients with COPD know what signs indicate they shouldn't exercise. What is NOT one of those signs?

A. Severe chest pain or severe shortness of breath
B. Loss of balance or dizziness
C. Headache
D. Fever or active infection

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16. What activity modification is NOT necessary for someone with COPD to make regarding cleaning?

A. Avoid scented candles or other odor-masking products with heavy fragrances
B. Delegate all cleaning to ensure it is done as thoroughly as someone with COPD needs
C. Avoid harsh chemicals that can worsen breathing
D. Regularly clean and maintain air filters, fans, purifiers, and other appliances that trap allergens

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17. What general household maintenance task is NOT helpful for the health of someone with COPD?

A. Testing for harmful gases such as carbon monoxide and radon
B. Securing all doors and windows in the home so they can properly keep out allergens, especially during peak seasons such as spring
C. Regular checking for mold
D. Only using air conditioning instead of ceiling fans

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18. A homebound patient with COPD recently started using supplemental oxygen. She is using a large, rolling tank. Her OT wants to train her on safe use of the tank during household tasks. Which tasks should the OT prioritize?

A. Eating, toileting, sleeping
B. Cooking, dressing, bathing, and ambulation
C. Grocery shopping, driving, laundry
D. Grocery shopping, air travel, doctor's appointments

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19. What kitchen modification can help with energy conservation?

A. Placing most-used items on countertops rather than in cabinets
B. Ordering from a grocery or meal delivery service
C. Using a wheeled cart to carry items from room to room
D. Keeping one of each frequently used item in each room

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20. What position should people with COPD aim to complete most activities in when they are experience an increase in symptoms?

A. Sidelying
B. Standing
C. Seated
D. Edge of bed

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