

# **MDS Alert**

## **Continuing Education: Test Yourself and Earn Free Nursing CEUs**

**MDS Alert** is now offering nurses the opportunity to earn 4.5 contact hours in continuing education per quarter by reading the newsletter and submitting answers to a test.

Read the measurable objectives for the April, May and June 2006 issues below and take the test inserted in the July 2006 MDS Alert.

Testing will be available after the end of each quarter (March, June, September and December). **Eli Research/The Coding Institute** is providing this quarter's contact hours for free to all subscribers. Hereafter, subscribers can obtain the contact hours for a \$30 processing fee.

If you have any questions about the CE program, please contact editor Karen Lusky, MSN, RN, at 615-370-5042 or at <a href="mailto:EditorMON@aol.com">EditorMON@aol.com</a>.

#### **Measurable Learning Objectives**

#### June 2006 MDS Alert

- 1. Identify where in Section M you would code each of the following: a pressure ulcer, venous insufficiency ulcer, arterial ulcer and cancer lesion.
- 2. Discuss four strategies for helping frontline staff capture accurate information about a resident's activities of daily living.
- 3. Explain why overstating N2 (average time involved in activities) can cause problems under the revised survey guidance for the activities tag and Psychosocial Severity Outcome Guide.
- 4. Name four potential activities that could count as restorative nursing in P3.
- 5. Describe three strategies for encouraging a resident to reengage in his usual interests and socialization.

#### May 2006 MDS Alert

- 1. Name four diagnoses that would alert the MDS staff that a resident likely had an IV in the hospital lookback.
- 2. Identify the RAI manual requirements for excluding IV medications in Section P.
- 3. State the RAI manual definition for pneumonia coded in Section I2.
- 4. Describe four strategies to root out ADL coding inaccuracies.
- 5. Identify and describe how to use four MDS sections other than Section J for performing a pain assessment and evaluating a pain management program.

### April 2006 MDS Alert

1. Identify four "missing RUG drivers" that can cost a resident a RUG placement.



- 2. Identify the elements involved in the extensive count determination for SE1, SE2 and SE3.
- 3. Describe the physical performance test to further evaluate whether residents who trigger on the pressure ulcer RAP due to impaired bed mobility can turn and reposition independently or with cuing.
- 4. Explain how to code an OMRA on the MDS.
- 5. Explain why a balance problem coded at G3 can signal a fall risk that the MDS team may miss.