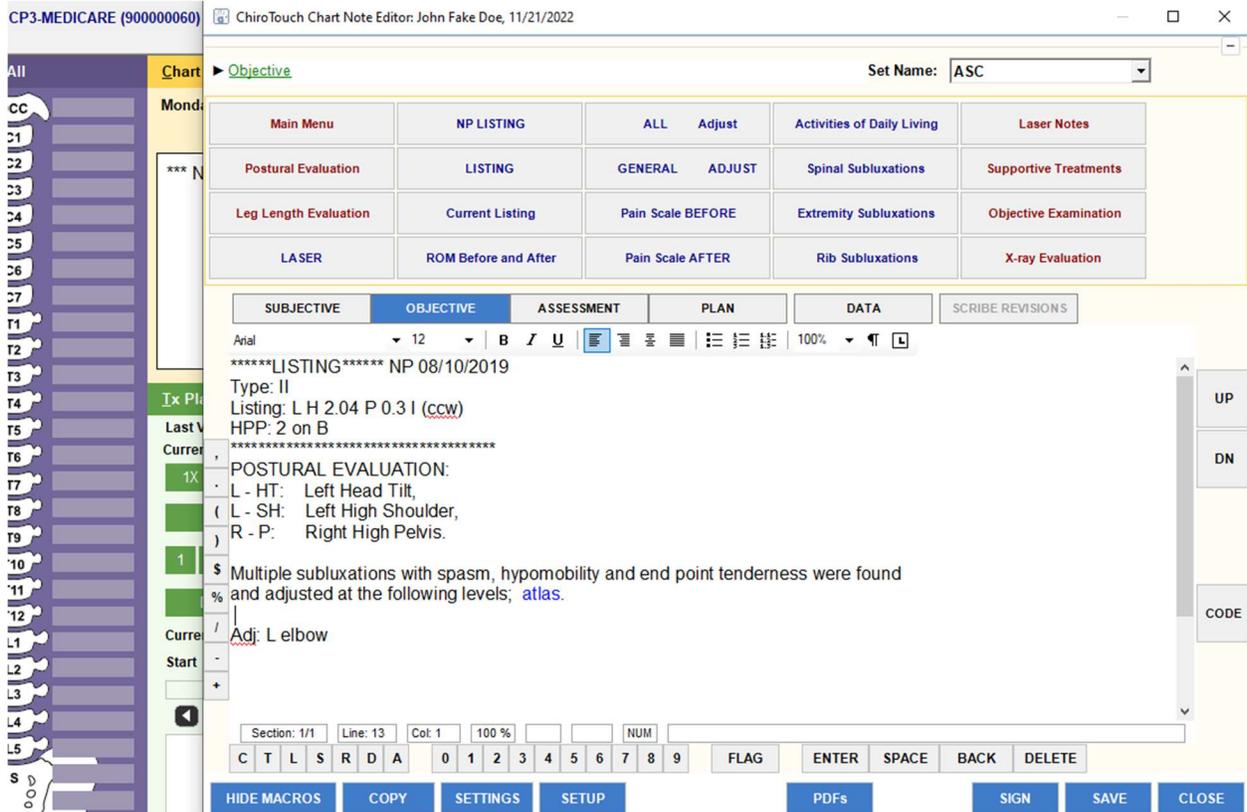


Runner/SOAP Notes Test:

1. What are the two things missing from the following “Objective Notes?”
 - a. Wrong Listing Information & Wrong Posture Evaluation
 - b. Leg Length Evaluation & points of adjustment
 - c. Places Iced & Next Appointment Recommendation
 - d. “Better After Treatment” & How the Patient is Feeling



2. What is the protocol when an alert appears on the screen stating, “Re-Exam 1 due 12/08” and the date is currently 12/01?
 - a. Tell the front office the patient is due for their exam next visit
 - b. Ignore the alert until 12/08
 - c. Tell the doctor the patient is due for their exam next visit
 - d. Both A & C
3. What does this letter stand for and what does the doctor use it for when adjusting?
Listing: L H 2.25 P 0.5 **I**(ccw)
 - a. Inferior; Let’s the doctor know his contact point on the patient
 - b. “I” Shouldn’t be in the listing, delete the letter.
 - c. Inferior; Let’s the doctor know his torque on the atlas with counterclockwise torque
 - d. None of these are correct
4. When is the best time to interject the doctor in the room when you have an alert stating, “REVIEW LATERAL CERVICAL?”

- a. While the doctor is doing the pre-posture or leg-length check.
 - b. While the doctor is measuring the listing
 - c. As the doctor is leaving the adjusting room
 - d. Do not mention it, just bring up the film comparison when entering the room
5. After a patient gets an extremity film taken, what are the standard steps for the room runner?
- a. Guide the patient to an open room
 - b. Ensure the room has orange and blue flagging
 - c. Confirm films were uploaded by X-Ray tech
 - d. Both B & D
 - e. Let the patient know that doc will review the films for their next visit
 - f. Options A, B, & C are correct
6. If a patient is a PIL/MEDPAY case and is a Re-Start due to a new fall, how would that be represented within the notes?
- a. Mark it as a Re-Start in their subjective notes.
 - b. Give all details of the new injury in subjective
 - c. Mark it as a “Re-Pre” and do not mention a new injury in their subjective notes
 - d. Mark it as a “Re-Pre” and do not mention a new injury in their objective notes
7. What do you when do when the following alert is seen?



- a. Inform the doctor of alert, pull up new nasium, transfer new listing information into patient's objective notes and prepare X-Ray slip.
- b. Disregard the alert since it does not affect the patient's current visit and delete the alert from the patient's file.

- c. Inform the front desk to schedule their post 2 at their next visit, then delete the alert from the patient's file.
 - d. None of these above are correct.
- 8. A patient has a fall, and the doctor sees the need for scans. What should the room runner do after the doctor tells the patient that scans are necessary?
 - a. Guide the patient to the exam chairs in the hallway/ "hotseats"
 - b. Dialpad the asc-staff channel so all staff is aware of the circumstance
 - c. Inform the patient that they can head to the front to schedule their scans for their next visit
 - d. Both A & B
 - e. Both B & C
- 9. What is the difference between a PIL Case and a MEDPAY Case?
 - a. Medpay is coverage brought on by the faulty party's insurance and payment is given to the PATIENT at the end of their care; PIL is coverage brought by the patient and is a delegated amount of medical coverage for the patient. For PIL patient DOES NOT pay, the office receives payment directly from the insurance company.
 - b. Medpay is coverage brought on by the faulty party's insurance and payment is given to the PATIENT throughout their care; PIL is coverage brought by the patient and is a delegated amount of medical coverage for the patient. For PIL patient DOES NOT pay, the office receives payment directly from the insurance company.
 - c. PIL is coverage brought on by the faulty party's insurance and payment is given to the PATIENT at the end of their care; MEDPAY is coverage brought by the patient and is a delegated amount of medical coverage for the patient. For MEDPAY patient DOES NOT pay, the office receives payment directly from the insurance company.
 - d. PIL is coverage brought on by the faulty party's insurance and payment is given to the PATIENT at the end of their care; MEDPAY is coverage brought by the patient and is a delegated amount of medical coverage for the patient. For MEDPAY patient DOES pay, the patient receives payment directly from the insurance company as reimbursement.
- 10. True or False: S.O.A.P stands for Symptom, Objective, Assessment, and Plan
 - a. True
 - b. False
- 11. What does this letter stand for and what does the doctor use it for when adjusting?

Listing: **L** H 2.25 P 0.5 I

 - a. Lateral; gives the doctor the location of the atlas on their neck
 - b. Low; gives the doctor the line of drive (High or Low) for their adjustment
 - c. Left; lets the doctor know that the patient will be adjusted right side down
 - d. Left; lets the doctor know that the patient will be adjusted left side down