DaVita Patient Care Technician (PCT) Practice Exam (Sample)

Study Guide



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Questions



- 1. What amount of fluid weight is considered excessive relative to the patient's target weight?
 - A. 2% of target weight
 - B. 5% of target weight
 - C. 10% of target weight
 - D. 15% of target weight
- 2. For a patient with an established AV fistula prescribed a blood flow rate of 450 ml/min, what is the appropriate needle gauge?
 - A. 14 gauge
 - B. 15 gauge
 - C. 16 gauge
 - D. 18 gauge
- 3. What aspect of patient care documentation is often overlooked in PCT duties?
 - A. Documenting usual patient behavior
 - B. Providing detailed descriptions of unusual findings
 - C. Documenting medication administration times
 - D. Collecting demographic data
- 4. What is the correct procedure for using hemostatic sponges, such as SureSeal, after achieving hemostasis?
 - A. Leave the sponge in place for 24 hours
 - B. Remove the sponge and dress the needle site with sterile gauze or a band-aid
 - C. Just apply a band-aid without removing the sponge
 - D. Rinse the area with saline before dressing
- 5. What is the "Reasonable and Prudent" Standard of care regarding PCT supervision?
 - A. The licensed nurse is responsible for ensuring PCTs follow physician orders only
 - B. The licensed nurse must ensure teammates perform procedures as per DaVita's Policies and Procedures
 - C. PCTs can perform tasks without any oversight
 - D. The licensed nurse has no responsibility for non-licensed personnel

- 6. What should be done when a laboratory test tube is received with double labeling?
 - A. The specimen will be processed normally
 - B. The specimen will be rejected for patient safety
 - C. The specimen will be flagged for review
 - D. The specimen will be tested only if confirmed by the patient
- 7. Left ventricular hypertrophy is commonly associated with which condition?
 - A. Hypotension
 - B. Sleep apnea
 - C. Hypertension
 - D. Diabetes
- 8. Prior to returning a patient's blood using a hand crank during a power failure, what is an important action?
 - A. Verify the pump speed
 - B. Remove the venous line from the line clamp
 - C. Check the blood pressure of the patient
 - D. Monitor the dialysate flow rate
- 9. What could be the immediate result if a surveyor sees a patient with covered vascular access?
 - A. Increased patient satisfaction
 - B. A warning to the facility
 - C. Immediate jeopardy
 - D. A commendation for cleanliness
- 10. What is the risk of performing a procedure "your way" instead of following DaVita's Policies and Procedures?
 - A. It enhances the quality of patient care
 - B. It can lead to civil liability if there is an adverse patient outcome
 - C. It is always acceptable as long as the results are satisfactory
 - D. It is not a concern as long as you have good intentions

Answers



- 1. B 2. B
- 3. B

- 3. B 4. B 5. B 6. B 7. C 8. B 9. C 10. B



Explanations



- 1. What amount of fluid weight is considered excessive relative to the patient's target weight?
 - A. 2% of target weight
 - B. 5% of target weight
 - C. 10% of target weight
 - D. 15% of target weight

An excessive amount of fluid weight relative to a patient's target weight is typically considered to be 5% of that target weight. This threshold is crucial in managing patients, particularly those on dialysis, as it helps prevent complications such as hypertension, pulmonary edema, and heart failure. When a patient's fluid retention exceeds 5% of their target weight, it signals that they are carrying too much excess fluid, which can impact their overall health negatively. For patients undergoing treatment, consistently maintaining their weight within a safe range ensures they are within optimal fluid balance, which is essential for their wellbeing. In clinical practice, monitoring weight gain helps staff make necessary adjustments to dietary intake and fluid removal during dialysis sessions, aiding in maintaining the patient's health and avoiding unnecessary hospitalizations. Thus, recognizing 5% of target weight as excessive is an important guideline in providing appropriate patient care.

- 2. For a patient with an established AV fistula prescribed a blood flow rate of 450 ml/min, what is the appropriate needle gauge?
 - A. 14 gauge
 - B. 15 gauge
 - C. 16 gauge
 - D. 18 gauge

For a patient with an established AV fistula and a prescribed blood flow rate of 450 ml/min, the appropriate needle gauge is vital for ensuring adequate blood flow during dialysis. A 15 gauge needle is designed to handle higher flow rates than a larger gauge (higher numbers mean smaller size), ensuring that the renal replacement therapy can be performed effectively and efficiently. The 15 gauge needle offers a balance between sufficient flow and manageable trauma to the vessel. It allows the necessary blood volume to be drawn and returned rapidly to the patient, which is crucial at higher rates like 450 ml/min. This gauge minimizes the risk of complications such as hemolysis, which can occur if the blood is drawn too forcefully through a needle that is too small. Conversely, larger gauges like 14 or smaller ones like 18 would either be excessive or insufficient for this flow requirement. Using a larger gauge than necessary may increase the risk of complications as well, while a smaller gauge would not provide enough flow for treatment efficiency. Therefore, the 15 gauge needle is most suitable for maintaining the prescribed rate while also ensuring patient safety and comfort during the procedure.

- 3. What aspect of patient care documentation is often overlooked in PCT duties?
 - A. Documenting usual patient behavior
 - B. Providing detailed descriptions of unusual findings
 - C. Documenting medication administration times
 - D. Collecting demographic data

Providing detailed descriptions of unusual findings is often a critical part of patient care documentation that may not receive the attention it deserves in PCT duties. This aspect is vital because unusual findings can indicate changes in a patient's condition, which may require immediate medical attention or adjustment to care plans. When a PCT observes an unusual sign or symptom, documenting it accurately ensures continuity of care, allows healthcare teams to respond effectively, and can contribute to diagnosing conditions more swiftly. By thoroughly documenting these observations, PCTs support comprehensive patient records that are essential for subsequent medical evaluation and interventions. This documentation becomes a key part of the communication process among healthcare providers, ensuring that any critical changes in a patient's health status are recognized and acted upon in a timely manner. While other types of documentation, such as medication administration times, demographic data, and usual patient behavior are important, unusual findings often require more immediate action and attention, highlighting their significance in patient care.

- 4. What is the correct procedure for using hemostatic sponges, such as SureSeal, after achieving hemostasis?
 - A. Leave the sponge in place for 24 hours
 - B. Remove the sponge and dress the needle site with sterile gauze or a band-aid
 - C. Just apply a band-aid without removing the sponge
 - D. Rinse the area with saline before dressing

The correct procedure for using hemostatic sponges, such as SureSeal, after achieving hemostasis is to remove the sponge and dress the needle site with sterile gauze or a band-aid. This is important because maintaining optimal wound care and ensuring a clean, infection-free environment is crucial for patient recovery. The hemostatic sponge is designed to assist in stopping bleeding, but it is not intended for long-term retention at the site. Once hemostasis is achieved, removing the sponge helps prevent potential complications such as localized infection or irritation. After removing the sponge, applying sterile gauze or a band-aid serves to protect the site, absorb any remaining fluid, and promote healing. Protocols generally emphasize the importance of monitoring the site after the sponge is removed to ensure that bleeding has completely stopped and that the area is clean. This step is vital in promoting efficient healing and minimizing the risk of further bleeding or infection.

- 5. What is the "Reasonable and Prudent" Standard of care regarding PCT supervision?
 - A. The licensed nurse is responsible for ensuring PCTs follow physician orders only
 - B. The licensed nurse must ensure teammates perform procedures as per DaVita's Policies and Procedures
 - C. PCTs can perform tasks without any oversight
 - D. The licensed nurse has no responsibility for non-licensed personnel

The "Reasonable and Prudent" standard of care emphasizes that the licensed nurse must ensure that patient care technicians (PCTs) perform their procedures according to established policies and guidelines set forth by the healthcare organization, in this case, DaVita. This standard reflects the responsibility of the licensed nurse to provide guidance and oversight, ensuring that all actions taken by PCTs adhere to best practices and protocols, which are in place to protect patient safety and assure high-quality care. This entails a thorough understanding of the policies and procedures that govern the practice environment. It requires the licensed nurse to actively engage in monitoring the PCTs' performance, offering necessary training and education, and being accountable for the overall care provided to patients. Upholding these standards not only meets regulatory requirements but also cultivates a safe and effective healthcare environment for both patients and team members. In this context, not ensuring adherence to the organization's policies could lead to increased risks and potential harm to patients, as well as liability issues for the healthcare professionals involved.

- 6. What should be done when a laboratory test tube is received with double labeling?
 - A. The specimen will be processed normally
 - B. The specimen will be rejected for patient safety
 - C. The specimen will be flagged for review
 - D. The specimen will be tested only if confirmed by the patient

When a laboratory test tube is received with double labeling, it is essential to prioritize patient safety. Double labeling can create confusion regarding the identity of the specimen, increasing the risk of errors in processing and reporting results. This could lead to serious consequences, such as a patient receiving the wrong diagnosis or treatment based on incorrect information. Rejection of the specimen is a standard practice in such situations to ensure the integrity of the testing process and to protect patient safety. It allows for verification and resolution of any discrepancies before further steps are taken. This fosters a quality assurance environment where only accurately identified specimens proceed, minimizing the risk of medical errors. In other scenarios, processing the specimen normally could compromise safety, as the ambiguity surrounding the labeling might lead to misinterpretations. Flagging the specimen for review may still pose risks, as it doesn't eliminate the fundamental issues arising from the double labels, and testing it only upon patient confirmation could delay critical care or lead to further complications in treatment. Therefore, rejecting the specimen is the most prudent and responsible action to take in this situation.

7. Left ventricular hypertrophy is commonly associated with which condition?

- A. Hypotension
- B. Sleep apnea
- C. Hypertension
- D. Diabetes

Left ventricular hypertrophy (LVH) is primarily associated with hypertension, which is a condition characterized by high blood pressure. When blood pressure is consistently elevated, the heart must work harder to pump blood against the increased resistance. This increased workload causes the muscle fibers in the left ventricle to grow and thicken, resulting in hypertrophy. In the context of hypertension, LVH is a compensatory response to maintain adequate cardiac output despite the increased systemic vascular resistance. Over time, LVH can lead to further cardiovascular complications, such as heart failure and arrhythmias, making it crucial to manage hypertension effectively to prevent such outcomes. While sleep apnea, diabetes, and hypotension can influence heart health, they are not directly linked to LVH in the same manner as hypertension. Sleep apnea can contribute to conditions that may lead to hypertension, but it is not a primary cause of LVH. Diabetes can impact heart health and increase cardiovascular risk but does not directly result in left ventricular hypertrophy independent of hypertension. Hypotension often involves low blood pressure, which would not place the same demand on the heart as hypertension, making it less relevant in causing LVH. Hence, hypertension stands out as the condition most commonly associated with left ventricular hypertrophy.

8. Prior to returning a patient's blood using a hand crank during a power failure, what is an important action?

- A. Verify the pump speed
- B. Remove the venous line from the line clamp
- C. Check the blood pressure of the patient
- D. Monitor the dialysate flow rate

Before returning a patient's blood using a hand crank during a power failure, one of the critical actions is to remove the venous line from the line clamp. This step is essential because clamping the venous line can lead to complications such as increased pressure in the patient's vascular access or difficulty returning blood effectively. By removing the line clamp, the healthcare provider ensures that the blood can flow freely back to the patient without undue restriction. This is crucial during a power failure, when alternative methods are used to manage the return of blood. The other actions, while important in different contexts, do not directly relate to the immediate action required for safely returning the patient's blood in the event of a power failure. For instance, verifying the pump speed, checking the blood pressure, and monitoring the dialysate flow rate may be relevant in a standard dialysis setup, but when using a hand-cranked method, the removal of the line clamp takes priority to facilitate a safe and effective return of the blood.

- 9. What could be the immediate result if a surveyor sees a patient with covered vascular access?
 - A. Increased patient satisfaction
 - B. A warning to the facility
 - C. Immediate jeopardy
 - D. A commendation for cleanliness

The immediate result of a surveyor observing a patient with covered vascular access is that it could signify a lack of compliance with safety protocols and best practices for dialysis patients. Covered vascular access can lead to potential complications, such as infection or clotting, which jeopardize patient safety. When a surveyor identifies such a situation, it raises red flags regarding the facility's adherence to the necessary health protocols. Therefore, classifying it as "immediate jeopardy" accurately reflects the seriousness of the risk posed to the patient's well-being and the facility's operational standards. Addressing vascular access properly is critical in dialysis care, and failure to do so can have significant implications for patient safety, prompting urgent corrective actions.

- 10. What is the risk of performing a procedure "your way" instead of following DaVita's Policies and Procedures?
 - A. It enhances the quality of patient care
 - B. It can lead to civil liability if there is an adverse patient outcome
 - C. It is always acceptable as long as the results are satisfactory
 - D. It is not a concern as long as you have good intentions

Choosing to perform a procedure "your way" instead of adhering to DaVita's established Policies and Procedures can significantly increase the risk of civil liability in the event of an adverse patient outcome. Healthcare organizations develop these policies and procedures to ensure the safety and well-being of patients, as well as to comply with applicable laws and regulations. When clinicians deviate from standardized protocols, it creates a potential gap in the quality of care provided. If a patient experiences an adverse outcome due to this deviation, the individual may be held legally responsible under civil liability. This legal framework serves to protect patients and ensures that healthcare providers are accountable for the care they deliver. In practice, following established procedures helps to maintain consistency in patient care, mitigate risks, and ensure that all staff is performing tasks that have been rigorously tested and validated. This is essential not only for safeguarding patient health but also for protecting healthcare professionals from potential legal repercussions. The other choices fail to recognize the importance of established protocols in providing safe, high-quality patient care.