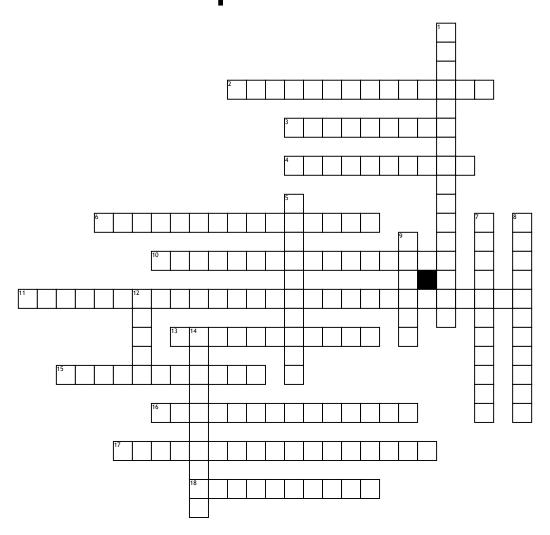
Name: \_\_\_\_\_ Date: \_\_\_\_\_

## Chapters 1-3



## **Across**

- **2.** legal assumption that treatment was desired
- 3. Legal responsibility to provide care
- **4.** Characterized by sadness and despair. The patient is usually silent and retreats into his own world.
- 6. care that an EMT is able to provide
- **10.** Specific authorization to provide care expressed by the patient.
- 11. Delayed stress reaction
- 13. \_\_\_\_\_ is leaving a patient, for whom you have a duty to act, without the consent of the patient or arranging for transfer of the patient care to another medical provider that can provide equal of higher care.

- **15.** Shortly after death, the muscle cells contract and stay contracted, causing a rigidity known as:
- 16. Accepted level of care
- **17.** After a person dies and the circulation stops, the blood begins to pool in the dependent areas.
- **18.** Failure to provide the standard of care **Down**
- 1. Procedures to reduce transmission of infection among patients and health care providers
- **5.** Does not mean that the patient will be happy about dying. The family will usually require more support during this stage than the patient.

- 7. Unilateral termination of care
- 8. lividity is also called
- **9.** Defense mechanism creating a buffer between shock of dying and dealing with illness/injury. ("Not Me")
- **12.** EMTs may be the target of aggression **14.** "OK, but first let me..") Agreement that, in the patients mind, will postpone death for a short time.

## Word Bank

Negligence

Depression

scope of practice abandonment Anger Duty to act Post-traumatic Stress Disorder standard of care Denial Bargaining abandonment Implied consent

infection control Livor mortis Acceptance Rigor Mortis Expressed consent dependent lividity