flexcare
MEDICAL STAFFING

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Relias/Prophecy Testing Helpful Hints

(Worth the read to help you pass and not deal with having to take the tests again)

1. Make sure to read any/all documents provided by Prophecy prior to starting the exam
2. If you log out of the computer while taking the test, when you log back in, the test will pick up where you left off
3. **Specialty Tests**
    a. These are "textbook" tests like the NCLEX or other licensure/certification tests so the questions are based more on textbook situations not on real world situations
    b. Don't answer based on your individual experience at any particular facility
4. **CORE tests**
    a. All the CORE tests have a manual with all the information tested for each of these tests
        i. Important to read these manuals
        ii. Print the manuals out if you can
5. **Math Ability Tests**
    a. *PRINT OUT the calculation formulas provided by Prophecy and use these formulas to answer the questions*
        i. Have scratch paper, a pencil and a calculator ready – write out the formula using the appropriate numbers in the problem and then do your calculations
        ii. Don't round the answer you get when converting lbs to kg – us the full result that is on your calculator in your calculations
    b. Know how to do metric conversions!!!
        i. 1 mg = 1000 mcg
        ii. 1 kg = 1000 G
        iii. 1 G = 1000 mg
        iv. 1 kg = 2.2lbs
    c. Make sure to answer with the appropriate number of decimals as specified in the problem, rounding correctly.
    d. Make sure the answer makes sense!! If unsure, plug your answer back into the calculation to make sure it's the correct answer.
    e. Use critical thinking to reason through how to determine the answer if you are struggling with a question
        i. Keep in mind that sometimes there is more information in the problem than you need to answer the question
        ii. If you are struggling with figuring out an answer, try a different way mathematically do approach the problem
    f. Want to practice before taking the test? Check out these sites (there are lots of practice to be found on the internet)
        i. https://www.youtube.com/watch?v=hnzZKY8SGbE
        ii. https://www.registerednursern.com/dosage-calculations-nursing-comprehensive-quiz/
        iii. https://www.leveluprn.com/blogs/dosage-calculation
6. **Dysrhythmia Tests**

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a. *Review BOTH the Basic and Advanced Refreshers provided by your recruiter* (even if you are taking the Basic Dysrhythmia exam). These are absolutely wonderful EKG refreshers for the Prophecy Dysrhythmia exams
b. PRACTICE! PRACTICE! PRACTICE!
    i. Here are some links to use:
        1. https://ekg.academy/
        2. https://www.skillstat.com/tools/ecg-simulator/
        3. https://www.teachingmedicine.com/Case.aspx?mode=demo
    ii. Use any other resources you can find to practice reading different strips of the different rhythms, especially for the rhythms you have the most difficulty with
c. Know how to measure!
    i. Hover the cursor over the strip and that part of the strip will magnify to make it easier to count the number of "little" boxes
    ii. Check the Basic Refresher document provided your recruiter to review how to measure PR and QRS intervals
d. Know both ways to determine rates
    i. Count number of R's then multiply by 10 OR
    ii. Use the rate chart after counting the number of little boxes between R's (see Basic Refresher document for rate chart – have this handy when you take the exam)
e. NEVER just "look" at a rhythm or think "it looks like" a particular rhythm to determine the rhythm unless it is clear and unmistakable like asystole (example: SR may actually be SR with first degree AV block but you wouldn't know that if you didn't measure the PR interval)
    i. IMPORTANT – *it is always best to use a routine process for reviewing each strip – the answers to each step will help rule out certain rhythms and will help steer you to the correct rhythm:*
        1. What is the RATE?
        2. Is the rate REGULAR or IRREGULAR?
        3. Is there a P WAVE?
        4. What is the PR INTERVAL?
        5. What does the QRS look like?
f. Know what the hallmarks are for certain rhythms to help reduce confusion when trying to determine the correct rhythm
    i. Blocks
        1. First Degree – PR is prolonged >.20
        2. Second Degree Type I - PR gets progressively longer then a QRS is dropped
        3. Second Degree Type II – PR interval is constant with randomly dropped QRS, underlying rhythm is regular
        4. Third Degree – no correlation between P's and QRS's , P wave usually march out consistently, even if buried in another wave
    ii. Junctional rhythms
        1. P wave is absent or inverted
        2. If P wave is present, the PR interval will be short (< 0.12)
        3. Know rates to determine the correct Junctional rhythm
            a. Junctional rhythm – rate is 40-60 bpm

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b. Accelerated Junctional – rate is 61 – 100 bpm
c. Junctional Tachycardia – rate is > 101 bpm

iii. Idioventricular rhythms
1. NO P waves AND widening of QRS
2. Know the rates to determine the correct Idioventricular rhythm
a. Idioventricular rhythm – rate is < 40 bpm
b. Accelerated Idioventricular – rate is 40 – 100 bpm
c. VTach – rate is >100 bpm

iv. Don't confuse:
1. Afib and aflutter
a. AFib
i. Rate is always irregular (irregularly irregular)
ii. No distinguishable P waves
iii. Atrial activity won't always be the same before each QRS
b. Aflutter
i. Sawtooth "like" pattern –may be more rounded than pointed
ii. Atrial rhythm is regular and ventricular rhythm may be irregular
2. PACs and PVCs
a. PACs
i. A normal beat but it occurs early
1. Will have P wave with normal looking QRS
ii. Irregular rhythm is result of the PAC, would be regular otherwise
b. PVCs
i. QRS is always wide and bizarre compared to a "normal" beat
ii. P wave will be absent before the PVC

3. ST with SVT
a. ST – rate is 101-160 bpm
b. SVT – rate is 150 – 250 BPM, P waves and PR intervals not usually discernable

g. Know ventricular bigeminy, trigeminy and couplets
h. Pacer spikes
i. Every pacer spike (if capturing) should have either a P wave or a QRS complex following it depending on if the pacer is atrial, ventricular or both
i. **Final note about EKG rhythm interpretation**: - If you rely on monitor/EKG techs to identify EKG rhythms, now is your time to refresh your EKG knowledge and stop relying on monitor/EKG techs to interpret EKG strips. YOU are responsible, as the licensed primary RN, to ensure the rhythm is correctly identified. If you are struggling with identifying rhythms or with this test, even if you pass it, it is strongly recommended that you take a full EKG refresher course.