

# **EPCCE TEST**

**Everyday Problems  
for Cognitively Challenged Elderly Test**

**EXAMPLE A**

**DATE OF PRESCRIPTION: 08-01-88**




**DR: SMITH, R. S. RX: 402800**

**MARTHA HOOVER REFILLS: 2**

**TAKE 1 TABLET EVERY DAY**

**LASIX - 40 mg (HOECHST) 30 TABLETS**

# 1. Emergency Telephone Numbers

<u>Localities</u>	<u>Emergency Numbers</u>		
	 <u>Fire</u>	 <u>Police</u>	 <u>Ambulance</u>
Pine Glen	355-1512	342-3370	355-1512
Pleasant Gap	355-1512	355-5441	355-1512
Port Matilda	234-0234	234-0234	234-0234
Potter Township	234-0234	863-4646	234-0234
Rebersburg	364-1451	863-4646	364-1451
Snow Shoe Boro.	355-1512	355-1512	355-1512
Snow Shoe Township	355-1512	342-3370	355-1512
Spring Mills	364-1451	863-4646	364-1541
Spring Township	355-1512	355-5441	355-1512
State College	911	911	911
University Park	863-1111	863-1111	863-1111

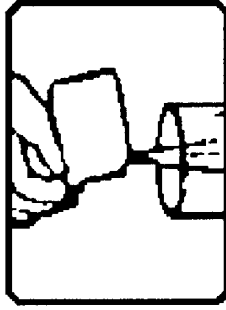
## **2. Toaster Cleaning and Safety Instructions**

### **CLEANING INSTRUCTIONS**

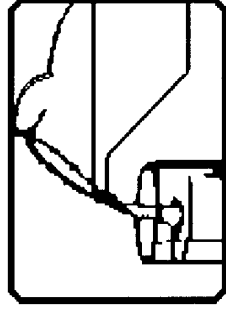
- 1. Disconnect toaster.**
- 2. Wipe outside with soft, damp cloth when toaster is cold. Polish with soft, dry cloth.**
- 3. Open crumb tray in bottom of toaster and brush out crumbs.**
- 4. Any service requiring disassembly other than the above cleaning should be performed by an authorized service station.**

**ELECTRIC POWER:** If electric circuit is overloaded with other appliances, your toaster may not operate properly. When possible, toaster should be operated on a separate electric circuit than other operating appliances.

### 3. Use of a Liquid Laxative



1. Pour entire contents of packet into a standard 8 oz. glass.



2. Fill glass slowly with cool water, any fruit juice, milk or your favorite beverage.



3. Drink promptly. If mixture thickens, add more liquid and stir. Drinking another glass of liquid is helpful.

**USUAL ADULT DOSAGE:** One packet 1 to 3 times daily at the first sign of irregularity. Use 2 or 3 days for full benefit.

**Keep this and all medication out of reach of children.**

**May cause allergic reaction in people sensitive to inhaled or ingested psyllium.**

# 4. Health Enrollment Form



## NEW CARDHOLDER ENROLLMENT APPLICATION

<b>A</b>		LAST NAME		INITIAL	SOCIAL SECURITY #	
HOME ADDRESS		APARTMENT #	DATE OF BIRTH (MO.) / (DAY) / (YEAR)		AGE	
CITY	STATE	ZIP	COUNTY	HOME PHONE ( )		
<b>B</b>		SPOUSE'S NAME		SPOUSE'S PAC CARD #		SPOUSE'S SOCIAL SECURITY #
<b>C</b>		ETHNIC ORIGIN (OPTIONAL)		TYPE OF RESIDENCE		
<input type="checkbox"/> WHITE <input type="checkbox"/> BLACK <input type="checkbox"/> NATIVE AMERICAN <input type="checkbox"/> HISPANIC <input type="checkbox"/> ASIAN <input type="checkbox"/> OTHER		<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		<input type="checkbox"/> PRIVATE HOME <input type="checkbox"/> APARTMENT <input type="checkbox"/> NURSING HOME <input type="checkbox"/> BOARDING HOME <input type="checkbox"/> OTHER		
<b>D</b>		MARITAL STATUS (CHECK 1)		DO YOU HAVE ANY MEDICAL INSURANCE WHICH PROVIDES PRESCRIPTION DRUG COVERAGE? <input type="checkbox"/> YES <input type="checkbox"/> NO		
<input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> DIVORCE YEAR _____ <input type="checkbox"/> WIDOWED YEAR _____ <input type="checkbox"/> MARRIED, LIVING SEPARATELY YEAR _____		INSURANCE COMPANY: _____		POLICY # _____ GROUP # _____		
FOR OFFICE USE ONLY						

## 5. Choosing Furniture Polishing Products

### FURNITURE POLISHING PRODUCTS

<u>Product</u>	<u>Application</u>	<u>Results</u>
Liquid polish	Apply with a soft cloth; buff lightly with a clean soft cloth while wet	High luster; little protection
Paste wax	Apply sparingly with a soft cloth; buff vigorously with a clean, soft cloth when dry	High luster; moderate protection; slight yellowing
Spray wax	Spray on; buff with a clean, soft cloth while wet	Moderate luster; little protection
Dusting spray	Spray on; wipe off with a clean, soft cloth	Prevents dust from scattering; no protection
Scratch-cover liquid polish	Apply with a soft cloth; wipe off with a clean, soft cloth	Conceals blemishes; no protection
Oil finish	Apply with a soft cloth; dry with a clean, soft cloth	High luster; no protection

## **6. How to Use an Elastic Bandage**

- 1. Unwind 12 to 18 inches at a time. Let bandage relax before wrapping. Start with unstretched bandage to avoid wrapping too tightly.**
- 2. Wrap injured area, overlapping the previous layer by one-half to one-third at its width.**
- 3. Smooth after each turn.**
- 4. Use metal clips to fasten.**
- 5. Check for comfort after wrapping. If it feels tight or uncomfortable, it should be removed and rewrapped.**



## 7. How to Apply for Food Stamps

### **1** FILE AN APPLICATION FORM

- The food stamp office will give you an application form on the same day you ask for one. You can ask for it in person, over the phone or by mail, or someone else may get one for you.

### **2** HAVE AN INTERVIEW WITH A FOOD STAMP WORKER

- After you have turned in your application, a worker will hold a confidential interview with you or another member of your household.
- If you are 65 or older or disabled and you cannot go to the food stamp office and no one can go for you, let the office know. A worker will arrange to interview you at home or by telephone. Other people who cannot get to the office and who have no one to go for them may qualify for a home or telephone interview, too.

### **3** MEET ELIGIBILITY RULES AND PROVIDE PROOF THAT YOU ARE ELIGIBLE

- Resources: All household may have up to \$1,750 worth of resources. Households of two or more persons may have up to \$3,000 if at least one member is age 60 or older.

## 8. Itemized Long Distance Telephone Bill

October 4, 1989

This portion of your bill is provided as a service to PIC. You may choose another company for your long distance telephone calls while still receiving your local telephone service from Bell of Concord.

No.	Date	Time	Call Type	Place	Number	Minutes	Cost
1	Aug 29	7:28 PM	Evening	To CLEVELAND	216-555-1111	46	7.08
2	Aug 29	8:46 PM	Evening	To COLUMBUS	614-777-5555	1	.15
3	Aug 29	8:51 PM	Evening	To CLEVELAND	216-456-7890	1	.15
4	Aug 29	9:18 PM	Evening	To CLEVELAND	216-555-1111	1	.15
5	Sep 10	7:11 PM	Evening	To CLEVELAND	216-888-2222	44	6.78
6	Sep 17	9:14 PM	Evening	To CLEVELAND	216-999-9999	33	5.08
7	Sep 22	7:10 PM	Evening	To CLEVELAND	216-555-1111	1	.15
8	Sep 22	8:35 PM	Evening	To READING	215-777-5555	23	4.42
9	Oct 1	8:33 PM	Evening	To CLEVELAND	216-999-9999	24	3.69

9. N R P Membership Application

**I want to win with NRP!**

I'd like to enroll as a member for:

- one year/\$5     three years/\$12.50     ten years/\$35

Name \_\_\_\_\_ (please print)

Address \_\_\_\_\_ Apt. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_ Date of birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_

- Check or money order enclosed, payable to NRP.  
(Please don't send cash.)

- If you're an active or retired educator, 50 or over, check here to join.

Membership also includes spouse.  
\$2.40 of dues is Maturity, 85¢ for NRP Bulletin.

## 10. Recipe Book Order Form

Please send me the full-color cookbooks I have ordered below. I have enclosed my check or money order and specially marked Proof of Purchase Symbols from Butter.

Book	Qty.	Cost	Total Cost
<b>You're Invited.....</b> 8 party themes with 36 recipes, plus ideas for easy entertaining.	_____ @	\$1.50 Each =	\$ _____
<b>Irresistible Desserts</b> 50 recipes, from tempting tortes to perfect pies.	_____ @	\$1.50 Each =	\$ _____
<b>Country Heritage</b> From America's heartland comes a collection of 100 recipes, from appetizers to desserts.	_____ @	\$1.75 Each =	\$ _____
<b>Vegetable</b> A garden-fresh variety of 50 recipes for every season.	_____ @	\$1.25 Each =	\$ _____
<b>Chicken &amp; Seafood</b> 50 scrumptious main dishes from Country Chicken Bake to Sole Diane.	_____ @	\$1.25 Each =	\$ _____

## **11. Drivers' Right-of-Way Laws**

### **Right-of-Way**

**When no signs, symbols, or police tell you what to do, you must follow special laws. Here are 3 of these laws:**

- 1. Drivers must yield to pedestrians in these conditions:**
  - **When pedestrians are crossing the roadway at an intersection without a traffic light (the crosswalk does not have to be marked).**
  - **When pedestrians are crossing the roadway in specially marked crosswalks.**
  - **When the driver is turning a corner and the pedestrians are crossing with the light.**
  - **When a blind pedestrian carrying a white cane or being led by a guide dog is crossing the street.**
  - **When pedestrians are crossing the sidewalk at a driveway or alley**
- 2. Drivers turning left must yield to oncoming cars going straight ahead.**
- 3. When two vehicles approach or enter an intersection from different roadways at about the same time, drivers coming from the left must yield to vehicles coming from the right.**

## **12. Procedure if Involved in an Accident**

- 1. Stop your car at or near the accident scene. If you can, move your car off the road so you do not block traffic.**
- 2. Call the police if anyone is hurt or dies. Also call the police if any vehicle is so badly damaged that it must be towed. If the drivers of the cars are hurt and cannot notify the police, then others in the accident must call for help.**
- 3. Get the following information from the other driver or drivers involved in the accident:**
  - a) Names and addresses**
  - b) Telephone numbers**
  - c) Driver license numbers**
  - d) Registration numbers**
  - e) Their insurance company names and policy numbers, or**
  - f) Information about financial responsibility**
- 4. Get the names and addresses of:**
  - a) People involved in the accident**
  - b) Witnesses of the accident**
  - c) Injured people**

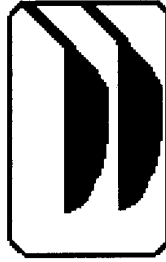
### 13. Comparison of Cereal Brands

<b>Product</b>	<b>Cost Per Oz.</b>	<b>Calories</b>	<b>Sodium</b>	<b>Sensory Comment</b>
<b><u>Ready to Eat Cereals:</u></b>				
<b>Fiber One</b>	15	57	140	Thin "noodles" with bran
<b>Puffed Wheat</b>	25	95	2	Tough, very soggy
<b>Uncle Sam</b>	12	77	65	Rolled grain with tiny seeds
<b>Nutri-Grain Nuggets</b>	13	96	110	Hard, crunchy wheat nuggets
<b>Shredded Wheat &amp; Bran</b>	18	97	5	Small wheat biscuits, soggy
<b>Shredded Wheat</b>	16	97	6	Large wheat biscuits, soggy
<b>Shredded Wheat Spoon Size</b>	16	99	4	Small wheat biscuits, soggy
<b>Cheerios</b>	22	106	290	Oat O's, a bit salty, soggy

## 14. Use of Cough Medicine

**Indications:** Temporarily Relieves Cough Due to Minor Throat and Bronchial Irritation as May Occur with A Cold.

**Directions:** Follow dosage below:  
DO NOT EXCEED 4 Doses in a 24-Hour Period.



**ADULT DOSE (and children 12 years and over):**  
2 teaspoonfuls every 6 to 8 hrs.



**CHILD DOSE**  
6 yrs. to under 12 yrs.  
1 teaspoonful every 6 to 8 hrs.



2 yrs. to under 6 yrs.  
1/2 teaspoonful every 6 to 8 hrs.

**Under 2 -- Consult Your Doctor.**

**Warnings** -- A persistent cough may be a sign of a serious condition. If cough persists for more than 1 week, tends to recur, or is accompanied by fever, rash, or persistent headache, consult a doctor. Do not take this product for persistent or chronic cough such as occurs with smoking, asthma, emphysema, or if cough is accompanied by excessive phlegm (mucus) unless directed by a doctor.



# 15. Telephone Service Application

## Service Application

INSTRUCTIONS - Print all required information below

1. Name \_\_\_\_\_ T N: (814) \_\_\_\_\_

1st Free Listing: \_\_\_\_\_  
 Last: \_\_\_\_\_ First: \_\_\_\_\_ Mid. Init.: \_\_\_\_\_

2. Service Address: \_\_\_\_\_ Street: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

3. Location: Apt. #: \_\_\_\_\_ Or Room #: \_\_\_\_\_

4. 2nd Free Listing: \_\_\_\_\_  
 Last: \_\_\_\_\_ First: \_\_\_\_\_ Mid. Init.: \_\_\_\_\_

5. Billing Address \_\_\_\_\_  
 If different from listed address \_\_\_\_\_

6. Local Usage Package (Check One):  Unlimited  Standard  Budget

7. Long Distance Company (Check One):  MCI  ATT  ITT  US Sprint

8. Touch Tone Line (Check One):  Yes  No

9. Requested Connection Date: \_\_\_\_\_

10. Can be Reached Number: ( \_\_\_\_\_ ) \_\_\_\_\_

Home Telephone No. ( _____ )	Home Street Address	
City	State	Zip Code

## 16. Energy Expenditure of a Healthy Adult

### Approximate Energy Expenditure by a Healthy Adult Weighing About 150 Pounds

<u>Activity</u>	<u>Calories Per Hour</u>
Lying quietly	80 - 100
Sitting quietly	85 - 105
Standing quietly	100 - 120
Walking slowly, 2 1/2 mph	210 - 230
Walking quickly, 4 mph	315 - 345
Light work, such as: ballroom dancing, cleaning house, office work, shopping,	125 - 310
Moderate work, such as: cycling, 9 mph, tennis, scrubbing floors, weeding garden	315 - 480
Hard work, such as: chopping wood, shoveling snow, spading garden, swimming "crawl"	480 - 625