# Safety and Infection Prevention and Control

**Regulatory Exam, Practical Nurse (REx-PN)**

10 to 16% of the exam · 13 activity statements · 2027 REx-PN Test Plan

Safety and Infection Prevention and Control covers how the practical nurse keeps clients, visitors and staff from harm: identifying clients, allergies, checking orders, catching errors, safe handling and equipment, restraints, security, emergencies, routine practices and additional precautions, and hazardous materials. On the REx-PN, items ask what the nurse does first to prevent harm, which precaution fits an organism, and when to stop, clarify or report. Answers follow Canadian guidance (routine practices and additional precautions, WHMIS) and the facility's policy, which the nurse follows in both British Columbia and Ontario.

**You should be able to:** You can identify clients and allergies safely, clarify incomplete or unsafe orders, respond to errors and near misses, move clients and use equipment safely, apply least restraint, follow security and emergency plans, choose the right precautions and PPE sequence, and handle sharps, cytotoxic and hazardous materials.

## Every activity statement: the key point and the trap

### 1. Confirm the client's identity correctly before giving care

Confirm identity with at least two client-specific identifiers (full name, date of birth, health number, medical record number or a current photo) before every medication, treatment, specimen or procedure.

**Trap:** Accepting a yes to "Are you Mr. Singh?" or the room number as proof of identity.

### 2. Assess for allergies or sensitivities and act on what you find

Ask every client at every admission about drug, food, latex and environmental allergies, and what happened during each reaction.

**Trap:** Giving an antihistamine or rechecking vital signs later when the client has signs of anaphylaxis.

### 3. Check that a prescriber's order is correct and suitable

A complete prescription names the client, drug, dose, route, frequency, and for PRN orders the reason; anything missing is clarified before acting.

**Trap:** Fixing an unclear order on one's own, or giving it first and documenting a concern afterward.

### 4. Spot errors and near misses in practice and act on them

After an error, assess the client first, then notify the prescriber and the RN or charge nurse and follow any new orders.

**Trap:** Completing paperwork before assessing the client who received the wrong drug.

### 5. Teach clients and staff how to prevent and control infection

Reinforce the four moments for hand hygiene with clients, families and UCPs: before initial client or environment contact, before an aseptic procedure, after body fluid exposure risk, after client or environment contact.

**Trap:** Teaching that gloves or alcohol rub alone are enough for every organism.

### 6. Apply good body mechanics and safe handling while giving care

Assess the client's weight bearing, strength, cooperation and size before any transfer, and use the method and equipment the care plan names.

**Trap:** Manually lifting a dependent client because the lift is down the hall.

### 7. Make sure equipment and its technology are used correctly and safely

Inspect equipment before use: cords, plugs, alarms and a current safety inspection label; take damaged items out of service, tag and report them.

**Trap:** Using a device that failed a check and adding a note that the result may be wrong.

### 8. Meet the rules that govern restraint use

Least restraint is the standard: assess the cause of the behaviour and try alternatives (toileting, pain relief, company, low bed, alarms, removing the irritant) first.

**Trap:** Choosing a restraint, a sedative or four raised rails before trying alternatives.

### 9. Follow the facility's security procedures, for example for newborns or locked areas

Newborn security: matching identification bands for infant and parent, infant security tags, controlled unit access and staff photo identification.

**Trap:** Assuming a security alarm is false and resetting it.

### 10. Teach the client how to stay safe and avoid injury, such as from falls

Screen for fall risk with the facility's tool and put the matching prevention plan in place (low bed, non-slip footwear, call bell in reach, toileting rounds).

**Trap:** Advising high shelves to free counter space, or forward-facing car seats at a set birthday.

### 11. Take part in planning for and responding to emergencies

Know your role in the facility's emergency codes and report to the charge nurse or designated area when a plan is activated.

**Trap:** Leaving the unit to help elsewhere without an assignment, or fighting a fire before moving the client away.

**12. Use infection prevention and control principles, such as hand hygiene, aseptic technique and routine practices**

Routine practices apply to every client: a point-of-care risk assessment before each interaction chooses gloves, gown, mask or eye protection for the expected exposure.

**Trap:** Waiting for a precaution order before choosing PPE, or wearing a surgical mask for tuberculosis.

**13. Handle hazardous and biohazardous materials by the set procedures**

Discard sharps uncapped at the point of use into a puncture-resistant container; never recap with two hands, bend or break needles; replace containers about three-quarters full.

**Trap:** Assuming an oral cytotoxic drug needs no protection, or delaying the report of a needlestick to the end of the shift.

## Key terms

**Routine practices:** Canada's baseline infection prevention practices for every client, chosen through a point-of-care risk assessment.

**Point-of-care risk assessment:** The nurse's check before each interaction of the risk of exposure, which decides the PPE and other measures to use.

**Additional precautions:** Contact, droplet and airborne precautions added to routine practices for specific organisms.

**Near miss:** An event that could have harmed a client but was caught before it reached them; reported like an error.

**Least restraint:** The standard of trying every alternative and using a restraint only as a last resort, for the shortest time.

**Chemical restraint:** A drug given to control a client's movement or behaviour rather than to treat a condition.

**WHMIS:** Workplace Hazardous Materials Information System: Canada's system of hazard labels, safety data sheets and worker training.

**RACE and PASS:** Fire response (rescue, alarm, contain, extinguish or evacuate) and extinguisher use (pull, aim, squeeze, sweep).

ExamDragon, examdragon.com/rex-pn. Independent exam preparation, not affiliated with or endorsed by NCSBN, BCCNM or CNO; written in our own words from the 2027 REx-PN Test Plan.