1-Defect occurred during medical care pathway for the patient this means:

1- variance
2- defect
3- medical error
4- sentinel event

MOHAMED ELDIB

33-Failure occurred in a certain department and the HCQP manage the problem to prevent recurrence , this example of:

A. RCA
B. FMEA
C. flow chart
D. PDCA

3-The following is important in development of practice guidelines except:

A. Evidence based researches
B. Experience of peers
C. Patient expectation
D. Clinical knowledge of peer physician

4-Deviation from clinical pathway, What to call these complications:

A. Variance
B. Modification
C. Change
D. Trend

MOHAMED ELDIB

5-Failure to schedule a surgical date for the patient is considered:

A. Overuse
B. Underuse
C. Misuse
D. Appropriate use

6-The organization decided to inter new clinical guideline for ttt of heart faliure. what should be done to get cooperation from physicians. what should Cphq do ?

1_Hire cardiologist
2-inolve physicians.
3- discuss with department head to get action

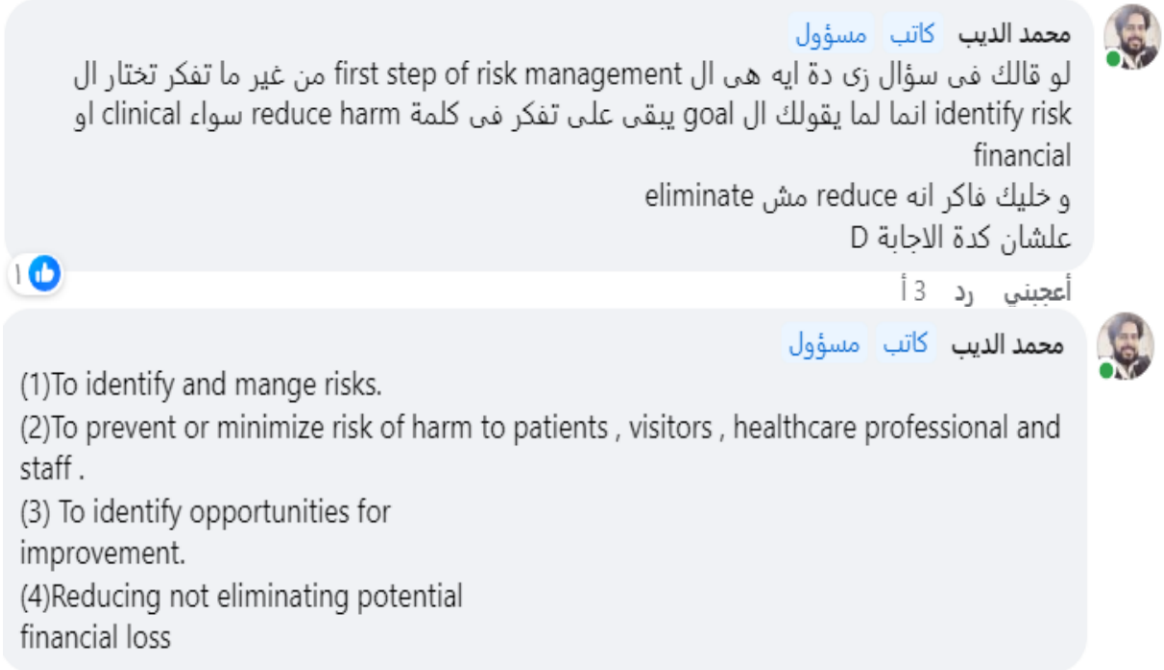
MOHAMED ELDIB

7-The fact that many scientifically sound practices are not used as often they should be is an example of:

A. Abuse .
B. Misuse .
C. Underuse .
D. Overuse

8-Which of the following is the primary goal of risk management?

A. Identify the high risk areas of the organization.
B. Maintain an effective incident reporting system.
C. Perform failure mode and effects analyses.
D. Reduce financial loss associated with legal actions



MOHAMED ELDIB

9-Which of the following is the primary goal of risk management?

A. Identify and manage risks to promote patient safety
B. Maintain an effective incident reporting system.
C. Perform failure mode and effects analyses.
D. Eliminate financial loss associated with legal action

محمد الديب كاتب مسؤول
خد بالك ليه هنا اختار identify risk والسؤال التانى لأ علشان هنا هو بعد ما عمل risk
identification خد أكشن عليها و بالتالى هى الأصوب
علشان كدة الاجابة هنا A
أعجبني رد 3 أ

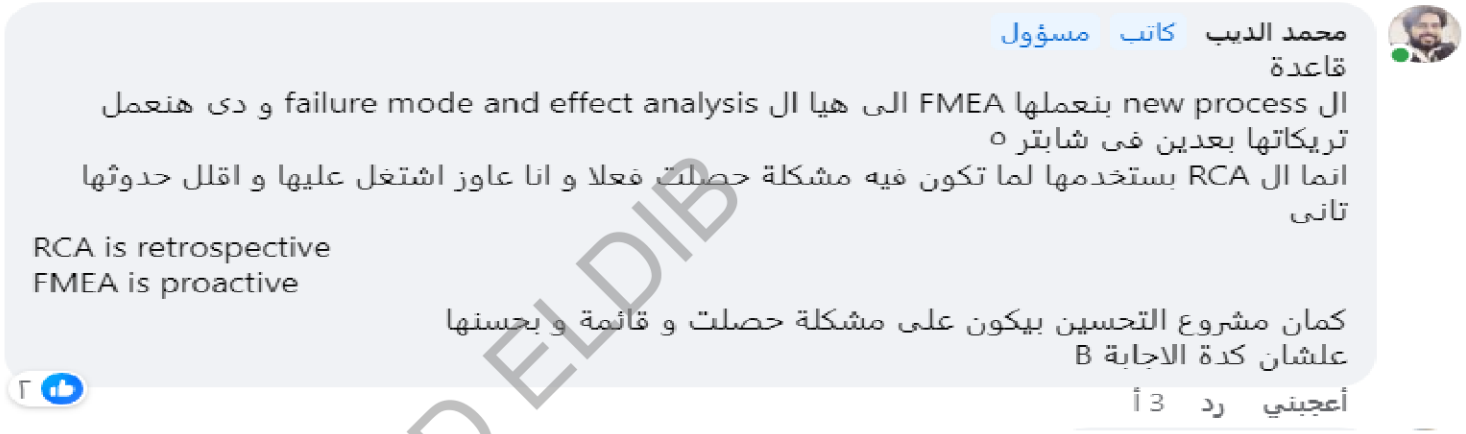
MOHAMED ELDIB

10-What is a term applied when the proper clinical care process is not executed appropriately, such as giving the wrong drug to a patient or incorrectly administering the correct drug?

A. Medication overuse .
B. Medication underuse.
C. Medication error .
D. Illegal use.

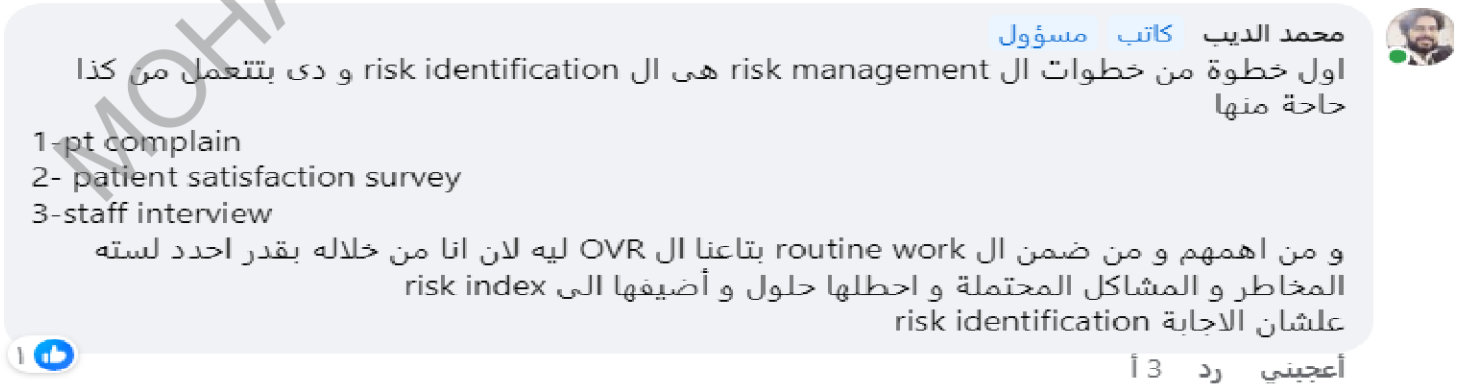
11-As CPHQ assign to assess new process for potential failures he should:

a. RCA
b. FMEA
c. Flow chart
d. PDCA



12-Occurrence reporting" is a type of:

a. risk reduction
b. risk evaluation
c. risk identification
d. risk prevention



MOHAMED ELDIB

13-Evaluating medication administration to reduce medical errors is an example of:

A. quality management.
B. resource management
C. risk management.

14-Effectiveness of performance improvement program best assessed by:

A) patient satisfaction
B) staff competencies
C) guideline compliances
D) organizational culture

MOHAMED ELDIB

15-..... is a term applied when the proper clinical care process is not executed appropriately, such as giving the wrong drug to a patient or incorrectly administering the correct drug.

A. Underuse
B. Overuse
C. Misuse
D. Illegal use

16-In a culture of patient safety, the most appropriate surveillance to assess the infection rate within the hospital is:

A. Total house surveillance
B. Targeted surveillance
C. Community surveillance
D. Prioritized surveillance

MOHAMED ELDIB

17-Which of the following is not one of the types of quality problems identified by the IOM's national round table on Healthcare quality?

A. Misuse
B. Abuse
C. Overuse
D. Underuse

18-The bed utilization is determined mainly by:

A. Financial and resources loss
B. Misuse, errors, abuse
C. Overuse, abuse and misuse
D. Overuse, underuse and misuse

MOHAMED ELDIB

محمد الديب كاتب مسؤول
الراجل سأل سؤال بدائى جدا مش محتاج تفكير عميق بيقول استغلال الأسرة فى المستشفى بيتحدد او يتقيم ازاى ببساطة يا اما استغلال قليل او زيادة عن الالازم او كويس
يعنى لو نفتكر فى المحاضرة و احنا بنقول قيه هى ال utilization problem و قلنا 3 انواع الى هما فى الاجابة D

أعجبني رد 3 أ

19-Medication administration to reduce medical errors is an example of:

A. quality management .
B. resource management .
C. risk management .
D. financial management

20-The primary goal of a program to assist with appropriate antibiotic selection and dosing is to:

A. minimize adverse events .
B. reduce cost .
C. prevent the misuse and overuse of antibiotics .
D. reduce the average length of stay.

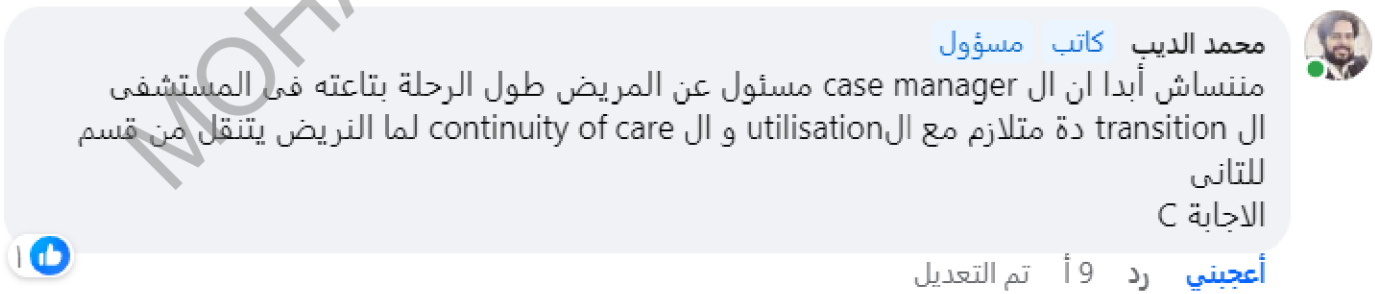
MOHAMED ELDIB

21-Standards of care based on the knowledge and research of recognized experts are known as:

A. benchmarking.
B. generic screening.
C. pre-established criteria.
D. evidence-based guidelines.

22-patient discharged without any counselling of his care, this problem, concerned with:

A-medical coverage
B- transition care
C-case management
D-reconciliation



MOHAMED ELDIB

23-A complete episode of care that starts at a patient admission and followed up till the time of discharge may be described as a/an:

a) case management. (coordination of care)
b) disease management.
c) inpatient care.
d) clinical pathway

محمد الديب كاتب مسؤول
السؤال بيسأل عن الفترة نفسها من بداية دخول المريض للمستشفى الى خروجه منها يعنى عاوز يسأل دة inpatient و لا outpatient
انما ال case management دة job description
كمان ال disease management دة طبعا جزء من ال population health و clinical pathway دة
طبعا roadmap الى هعالج بيه المريض
علشان كدة الاجابة C
أعجبني رد 3 أ

MOHAMED ELDIB

24-Which of the following describes the incorrect administration of a drug to a patient ?

A. Overuse
B. Underuse
C. Misuse
D. Illegal use

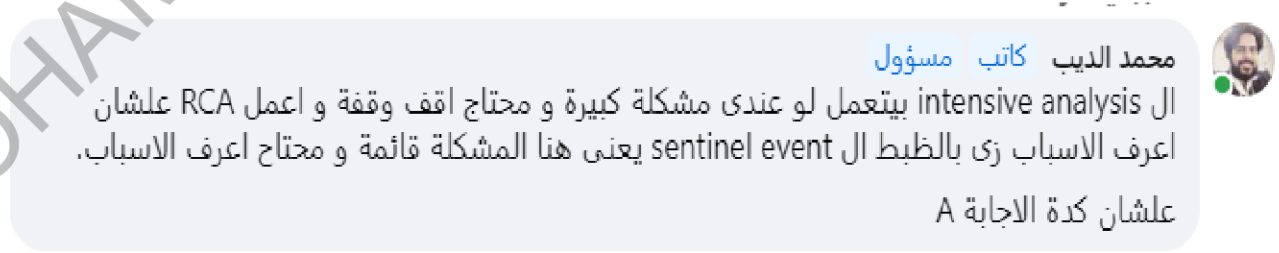
25-The use of clinical pathways and guidelines in hospitals should:

A. minimize variation in patient care .
B. reduce length of stay.
C. improve patient satisfaction .
D. identify errors in patient care

26-After significant unexpected event, an intensive analysis is performed to:

A. Understand the cause
B. Correct risk management data
C. Prevent the facility from law suit
D. Identify who made the error

MOHAMED ELDIB



27-the patient didn't receive sufficient counselling in his case this is:

1. Case management
2. Care transition

28-The primary purpose of risk management trend analysis is to:

A. meet regulatory requirements.
B. provide required reports to liability carriers.
C. identify opportunities for improvements.
D. eliminate financial loss for organizations

MOHAMED ELDIB

29-The optimal sequencing and timing of intervention best describes:

A. Audit
B. Clinical pathway
C. diagnosis related groups
D. Utilization review

30- Role of CPHQ in clinical pathway :

A- build up pathway
B- collect data and research
C- compare outcome to benchmark
D- compliance pathway

MOHAMED ELDIB

31-which is the best tool used in "generic screening?"

a. medical record
b. claims data
c. incident report
d. performance indicators

محمد الديب كاتب مسؤول

Generic screening (using medical record)
•Concurrently screen every patient hospitalization , ambulatory service or home care.
•It is an example of 100% review process.
•It is both risk management and quality improvement tool used to collect data for occurrence reporting.

incidents reporting :
Are notification for adverse patient occurrence (APOs) &potentially compensable event (PCE).

Patient safety data screening :
•Screening hospital computerized data using key patient safety indicators through the use of free software commission by AHRQ.

32-Which best to include in clinical risk management:

A. control adverse events
B. depend on patient acuity
C. promotes patient safety
D. requires risk manager

MOHAMED ELDIB

محمد الديب كاتب مسؤول

الراجل بكل بساطة قال clinical risk management يعنى مربوط بالمرضى
فى A ال adverse event يحتمل يكون clinical or non clinical
فى B انه يعتمد على حالة المرضى و دة سطحى جدا لان مش لازم المريض يكون تعبان جظا
علشان ادور على ال safety بتاعته
فى C دعم سلامة المرضى بكل تفاصيلها
فى D يحتاج لمدير ادارة مخاطر

علشان كدة الأفضل و الأقرب و الأشمل هى C

أعجبني رد 9 أ

33-difference between practice guidelines and clinical pathways is:

A. Guidelines are recommendations and pathways are evidence based .
B. guidelines deal with one disease process and pathways deal with multiple.
C. pathways deal with multiple steps and processes and practices deal with one practice.
D. Practices deal with quality and pathways deal with safety

MOHAMED ELDIB

محمد الديب كاتب مسؤول

هنا السؤال الهدف منه الفهم بيسأل عن الفرق بين ال guidline و pathway
كلنا متفقين ان ال guidelines عبارة عن evidence based practice و مبني على أساس علمي انما ال pathway عبارة عن عدة خطوات يوصى بها تمثل ال road map الى هشتغل بيها علشان نقلل ال variation فى ال practice بين الستاف نشوف الاجابات
فى A بيقول ان ال guideline. عبارة عن recommendation و دة غلط
فى B بيقول ان ال guideline بيتعامل مع مرض واحد انما ال pathway بيتعامل مع اكتر من مرض و دة مش صحيح لان ال pathway بيتعامل مع multiple steps علشان يكون بمثابة ال management plan لمرض واحد
فى D بيقول ان ال CPG بيتعامل مع ال quality و ال pathway مع ال safety و دة كلام عايم مش موضح فرق بينهم
انما فى C بيقول ان pathway بيتعامل مع multiple steps و ال guideline مع practice واحد او التعامل مع مرض معين و دة الأصوب
علشان كددة الاجابة C

1

أعجبني رد 3 أ

34-Healthcare professional is informed that an error resulting in patient harm, what he will do:

A-Pareto
B-RCA
C-FMEA

35-The use of clinical pathways and guidelines in hospitals should do which of the following?

a. Minimize variation in patient care
b. Reduce length of stay
c. Improve patient satisfaction
d. Identify errors in patient care

MOHAMED ELDIB

36-Defect occurred during medical care pathway for the patient this means:

1- variance
2- defect
3- medical error
4- sentinel event

37-pathway is:

1-accountable care
2-limited to one patient setting
3-using value stream map
4-used to reduce variation

MOHAMED ELDIB

1. A
2. A
3. C
4. A
5. C
6. B
7. C
8. D
9. A
10. C
11. B
12. C
13. C
14. A
15. C
16. B
17. B
18. D
19. C
20. C
21. D
22. C
23. C
24. C
25. A
26. A
27. A
28. C
29. B
30. B
31. A
32. C
33. C
34. B
35. A
36. A
37. D

MOHAMED ELDIB

MOHAMED ELDIB