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Question: 1

"Underuse is evidence by the fact that many scientifically sound practices are not used as often they should be, For example, biannual mammography screening in woman ages 40 to 69 has been proven beneficial and yet is performed less than 75 percent of the time." This is the categorization of:

A. Defects
B. La of professionalism in Medical field
C. La of care
D. Healthcare practice

Answer: A

Question: 2

_____ is a term applied when the proper clinical car 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

Answer: C

Question: 3

Crossing the Quality Chasm provided a blueprint for the future that classified and unified the components of quality through six aims for improvement, chain of effects, and simple rules for redesign of healthcare. The six aims for improvement, viewed also six dimensions of quality. Which of the following is NOT out of those dimensions?

A. Safe
B. Care centered
C. Efficient
D. Effective

Answer: B

Question: 4

_____ can be measured by how well evidence-based practices are followed, such as the percentage of time diabetic patients receive all recommended care at each doctor visit, the percentage of hospital-acquired infections, or the percentage of patients who develop pressure ulcers (bed sores) while in the nursing home.

A. Safe care
B. Equitable care
C. Effective care

D. Timely care

Answer: C

Question: 5

Today's patients' perception of the quality of our healthcare system is not favourable. In healthcare, qualityis household word that evokes great emotion, including:

A. Frustration and despair, exhibited by patients who experience healthcare services firsthand or family members who observe the care of their loved ones
B. Anxiety over the ever-increasing costs and complexities of care
C. Patient centered measures
D. Timely care that may be experienced in terms of performance of services

Answer: A, B

Question: 6

There is a story of an intensive care unit (ICU) at Dominican Hospital in Santa Cruz Country, California. Dominican, a 379-bed community hospital, is part of the 41-hospital Catholic Healthcare West system. "We used to replace ventilator circuit for incubated patients daily because we thought this helped to prevent pneumonia," explained Lee Vanderpool, vice president. ""But the evidence shows that the more you interfere with that device, the more often you risk introducing infection. It turns out it is often better to leave it alone until it begins to become cloudy, or 'gunky,' as the no clinicians say." The hospital staff learned an important lesson from this experience that:

A. Evidence is more powerful than intuition
B. Intuition is more powerful than evidence
C. Efforts improve mortality rate
D. Introduction f a new protocol, or any new idea, involves education

Answer: A

Question: 7

A number of attributes can characterize the quality of healthcare services. As, there are different groups involved in healthcare, such as physicians, patients and health insurers, tend to attach different levels of importance to particular attributes and as a result define quality care differently. Which of the following is/are NOT out of those attributes?

A. Technical performance
B. Responsiveness to patient preferences
C. Excess staff
D. Amenities

Answer: C

Question: 8

Quality and technical performance refers to how well current scientific medical knowledge and technology are applied in a given situation. It is usually assessed in terms of:

A. Timeliness and accuracy of the diagnosis
B. Appropriateness of therapy and other medical interventions are performed
C. The quality of interpersonal relationships
D. Both A & B

Answer: D

Question: 9

The quality of amenities of care refers to the characteristics of the setting in which the encounter between patient and clinician takes place, such as:

A. Comfort
B. Comfort, care and access
C. Comfort, convenience and privacy
D. Responsive to patient preferences

Answer: C

Question: 10

Amenities may cover areas as mentioned below EXCEPT:

A. Ample and convenient parking
B. Good directional signs
C. Comfortable waiting rooms
D. Vast and facilitated food providing area

Answer: D

Question: 11

_____ refers to the “degree to which individuals and groups are able to obtain needed services.”

A. Responsiveness to patient preferences
B. Amenities
C. Equity
D. Access

Answer: D

Question: 12

In earlier formulations, responsiveness to patients' preferences was just one of the factors seen as determining the quality of patient clinician interpersonal relationship. But, now it is translated into many factors. Which of the following is out of such factors?

A. Respect for patients' values
B. Respect for patients' preferences
C. Respect for patients' expressed needs
D. Respect for Respect for patient's convenience

Answer: A, B, C

Question: 13

Efficiency refers how well resources are used in achieving a given result. Efficiency whenever the resources used to produce a given output are _____.

A. Reduces, reduced
B. Increases, increased
C. Improves, reduced
D. It is truly situation dependent

Answer: C

Question: 14

In general, as the amounts spent on providing services for a particular condition grow, diminishing returns set in meaning that each unit of expenditure yield ever-smaller benefits until a point where _____.

A. No additional benefits accrue from adding more care
B. Additional benefits are too small to justify the added costs
C. There is displacement of more useful care
D. perfection is within the reach of all individuals

Answer: A

Question: 15

"Quality is the degree to which health services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge." This is the definition of Quality care often quoted by:

A. IOM
B. IHI
C. HQCB
D. OCHP

Answer: A

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