Test Bank for Foundations of Health Information Management 6th Davis

Test Bank - Chapter 01

Q: Which physician focuses on patient care in acute settings?

A. Hospitalist (Correct)
B. Histologist
C. Radiologist
D. Obstetrician

Q: What set of standards allow a physician to care for patients at a hospital?

A. Standards of professional practice
B. Privileges (Correct)
C. Orders to admit
D. Deemed status

Q: A synonym for “licensed vocational nurse” is

A. registered nurse.
B. licensed practical nurse. (Correct)
C. nurse practitioner.
D. advanced practice nurse.

Q: Which type of nurse can prescribe medicine?

A. Licensed vocational nurse (LVN)
B. Registered nurse (RN)
C. Licensed practical nurse (LPN)
D. Advanced practice registered nurse (APRN) (Correct)

Q: Which is an example of a diagnosis?

A. Tonsillitis (Correct)
B. Appendectomy
C. Chest x-ray
D. Physical therapy

Q: Which is an example of a procedure?

A. Bed sore
B. Pneumonia
C. Amputation (Correct)
D. Appendicitis

Q: Which health care professionals are responsible for orders that create the treatment plan?

A. Nurses
B. Physicians (Correct)
C. Physical therapists
D. Medical assistants

Q: A primary care provider (PCP) is responsible for

A. providing specialty medical care.
B. surgical procedures.
C. patient care in an acute care facility.
D. routine care and referrals. (Correct)

Q: A nurse is responsible for

A. delivering and managing patient care. (Correct)
B. ordering prescriptions.
C. ordering the patient to be admitted or discharged.
D. developing a patient care plan.

Q: Which individual is not an allied health professional?

A. Respiratory therapist
B. Phlebotomist
C. Radiologist (Correct)
D. Dietician

Q: Which health care professional is responsible for educating patients about medication regimens from the patient care plan?

A. Health information technologist
B. Physician
C. Psychologist
D. Nurse (Correct)

Q: Which health care professional works to restore the patient's functioning in activities of daily living?

A. Clinical document improvement professional
B. Gastroenterologist
C. Neonatologist
D. Occupational therapist (Correct)

Q: Which task would be performed by a primary care provider?

A. Remove breast tumor.
B. Bathe a hospitalized patient.
C. Analyze routine blood test results. (Correct)
D. Perform a colonoscopy.

Q: The additional training required to maintain a credential is called

A. continuing education (CE). (Correct)
B. accreditation.
C. behavioral health.
D. Conditions of Participation (CoP).

Q: HIM professionals do all of the following, EXCEPT:

A. Secure health information
B. Report health information

C. Develop and implement EHRs
D. Document patient care in health records (Correct)

Q: Which type of HIM professional specializes in privacy and security aspects of HIM practice?

A. Medical coder
B. Data analyst
C. Patient registrar
D. Release of information specialist (Correct)

Q: Which credential requires an associate degree?

A. Registered Health Information Technician (RHIT) (Correct)
B. Certified Coding Specialist (CCS)
C. Certified Health Unit Coordinator (CHUC)
D. Certified in Healthcare Privacy and Security (CHPS)

Q: The American Health Information Management Association (AHIMA) and the American Medical Association (AMA) are examples of

A. accrediting bodies.
B. allied health professionals.
C. professional associations. (Correct)
D. payers.

Q: How is the support from the American Health Information Management Association (AHIMA) different from the American Academy of Professional Coders (AAPC)?

A. The AAPC only supports coders.
B. AHIMA supports health information management professionals whereas AAPC supports coding professionals. (Correct)
C. AAPC supports health information management professionals whereas AHIMA supports billing professionals.
D. AHIMA offers credentials while the AAPC does not.

Q: Evidence of competence (by passing an examination) entitles an individual to professional

A. credentials. (Correct)
B. accreditation.
C. associations.
D. privileges.

Q: All the information about the illness or health problem, the treatments provided, and the directions for self-care are documented in the patient's

A. health record. (Correct)
B. continuum of care.
C. bill.
D. program.

Q: Community Care Center has 200 beds. It has an average length of stay of 21⁄2 years. Most of the patients are elderly, but there are some younger patients with serious chronic illnesses. Community Care Center is most likely a(n) _____ facility.

A. acute care
B. behavioral health
C. long-term care (LTC) (Correct)
D. rehabilitation

Q: A(n) _____ offers exclusively palliative care services in an inpatient residential setting or in the home.

A. ambulatory care facility
B. hospice (Correct)
C. skilled nursing facility
D. managed care facility

Q: Chapone Health Care is an organization that owns a number of different health care facilities: three acute care hospitals, two long-term care facilities, and a number of physician offices. Chapone also owns a rehabilitation hospital and an assisted living facility, which delivers home care. The organization delivers care to patients at every point along the continuum of care. Chapone Health Care can be described as a(n)

A. hospital.
B. Medical Home.
C. accountable care organization (ACO).
D. integrated delivery system (IDS). (Correct)

Q: A patient will most likely receive physical therapy in which type of health care facility?

A. Acute care
B. Long-term care
C. Rehabilitation (Correct)
D. Hospice

Q: The patient was admitted to the hospital on Tuesday morning and died Tuesday evening. This patient is classified as a(n)

A. inpatient. (Correct)
B. outpatient.
C. observation status.
D. visit.

Q: The number of beds that the state has approved for the facility is the

A. licensed beds. (Correct)
B. bed count.
C. registered beds.
D. certified count.

Q: Care from multiple medical specialties over the course of a patient's lifetime is called the

A. patient care plan.
B. integrated delivery system (IDS).
C. continuum of care. (Correct)
D. entitlement program.

Q: Which patient is considered an inpatient for an acute care facility?

A. A patient who died prior to arriving at the acute care facility
B. A patient who spent 10 hours in the emergency room
C. A patient who had her hand operated on in outpatient surgery, and then returned home
D. A patient who was admitted for pneumonia (Correct)

Q: Which patient is not counted as a discharge?

A. A patient who was treated in the emergency department and sent home (Correct)
B. An inpatient patient who died in the operating room
C. An inpatient who was transferred to another health care facility
D. An inpatient who left an acute care facility against medical advice (AMA)

Q: Daisy Community Center is an acute care facility with 350 beds. On May 1, there were 305 inpatients. What is the percent occupancy?

A. 32%
B. 87% (Correct)
C. 100%
D. 85%

Q: Rehabilitation facilities are LEAST likely to have

A. inpatients.
B. outpatients.
C. laboratories.
D. operating rooms. (Correct)

Q: Counting the 12 discharges on the maternity ward this week, you see women have stayed 2 days, 2 days, 2 days, 3 days, 3 days, 3 days, 3 days, 3 days, 3 days, 4 days, 4 days, and 7 days. What is the average length of stay (ALOS) on the maternity ward this week?

A. 39 days
B. 12 days
C. 0.308 days
D. 3.25 days (Correct)

Q: Which is true of an acute care facility?

A. Patients receive care for severe conditions and are expected to recover. (Correct)
B. Treatment episodes are referred to as visits or encounters.
C. Patients are not allowed to stay longer than 30 days.
D. It offers primary care.

Q: Most community hospitals are

A. not-for-profit. (Correct)
B. for-profit.
C. children’s hospitals.
D. accountable care organizations (ACOs).

Q: Which is characteristic of not-for-profit health care facilities?

A. They do not make a profit.
B. The employees are volunteers.
C. They do not charge patients as much as other facilities.
D. They receive tax breaks. (Correct)

Q: Which is true of an accountable care organization (ACO)?

A. Providers bill separately from the hospital.
B. Patients receive low-cost or free care.
C. Payment for inpatient services flows through the hospital and out to other providers. (Correct)
D. The primary care provider acts as the gatekeeper to specialists and services.

Q: What is the fixed amount a health insurance policyholder pays each month?

A. Deductible
B. Capitation
C. Copay
D. Premium (Correct)

Q: Why is health insurance referred to as a “third-party payer”?

A. Because a payer (third party), pays a provider (second party) for the patient (first party). (Correct)
B. Because it was originally required only when a husband and wife have a child, the third party.
C. Because it only pays for one-third of the expenses.
D. Because it is the third option for payment, following the patient and the government.

Q: Medicare was enacted through which legislation?

A. Title IX of the Health and Human Services Act
B. Patient Protection and Affordable Care Act
C. Family and Medical Leave Act
D. Title XVIII of the Social Security Act (Correct)

Q: What U.S. federal agency is responsible for the oversight of Medicare and Medicaid?

A. The Department of Health and Human Services (DHHS) (Correct)
B. National Institutes of Health (NIH)
C. Centers for Disease Control and Prevention (CDC)
D. Department of Homeland Security (DHS)

Q: How is patient satisfaction with the health care provider and its services measured?

A. Surveys (Correct)
B. Blogs
C. Social media posts
D. Healthy People 2020 indicators

Q: In which program do policymakers monitor health indicators and create objectives to promote wellbeing?

A. Managed care
B. The Agency for Healthcare Research and Quality (AHRQ)
C. The Patient Centered Outcomes Research Institute (PCORI)
D. Healthy People 2030 (Correct)

Q: What do pharmaceutical manufacturers cite as the main reason for high drug costs?

A. Outsourcing
B. Research and development (Correct)
C. Health insurance premiums
D. Marketing expenses

Q: Unlike Medicare, eligibility for Medicaid is primarily based on

A. age.
B. disability status.
C. economic circumstances. (Correct)
D. prior military service.

Q: What is a benefit of health care facility obtaining accreditation through The Joint Commission in lieu of a Conditions of Participation review?

A. Accreditation
B. Unconditional status
C. Certification
D. Deemed status (Correct)

Q: Medicare is administered by

A. Food and Drug Administration (FDA).
B. Centers for Medicare and Medicaid (CMS). (Correct)
C. individual states.
D. National Committee for Quality Assurance (NCQA).

Q: A facility is reviewing its policies and procedures to ensure that it complies with The Joint Commission (TJC) standards. This facility is concerned about its

A. accreditation. (Correct)
B. certification.
C. licensure.
D. registration.

Q: A state agency develops and administers regulations that must be followed in order for a facility to maintain its

A. licensure. (Correct)
B. accreditation.
C. registration.
D. certification.

Q: Which federal agency protects patients from discrimination?

A. Health Resources and Services Administration (HRSA)

B. The Agency for Healthcare Research and Quality (AHRQ)
C. Office for Civil Rights (OCR) (Correct)
D. Occupational Health and Safety Administration (OSHA)

Q: How often does the Joint Commission (TJC) conduct on-site accrediting surveys?

A. At least once a year
B. At least once every 2 years
C. At least once every 3 years (Correct)
D. At least once every 5 years

Q: Medical professions have a code of _____ that governs the conduct of their members.

A. conduct
B. professionalism
C. honor
D. ethics (Correct)

Q: Which independent organization, formerly the Institute of Medicine, published the report, *To Err is Human: Building a Safer Healthcare System*?

A. The National Academy of Medicine (NAM) (Correct)
B. The Leapfrog Group
C. Institute for Healthcare Improvement (IHI)
D. The Patient Centered Outcomes Research Institute (PCORI)

Q: A nurse __ focuses on the care of women during the period surrounding childbirth: pregnancy, labor, delivery, and after delivery.
(Fill in the blank)

Answer: midwife

Q: A profession is characterized by specific training in a body of knowledge that is supported by an explicit code of __ and continuing education.
(Fill in the blank)

Answer: ethics

Q: When one physician asks another physician for an opinion regarding the care of a patient, the first physician is asking for a(n) __.
(Fill in the blank)

Answer: consultation

Q: A long-term care (LTC) facility has an average length of stay (ALOS) greater than __ days.
(Fill in the blank)

Answer: 30

Q: The actual number of beds that a hospital has available for inpatients is called the __.
(Fill in the blank)

Answer: bed count

Q: A health care organization that has permanent facilities, 24-hour nursing care for inpatients, and an organized medical staff is a type of __.
(Fill in the blank)

Answer: hospital

Q: The payment to a health care provider is called __.
(Fill in the blank)

Answer: reimbursement

Q: A facility that routinely performs eye surgeries, colonoscopies, excisions, and many types of orthopedic surgeries on an outpatient basis, wherein the patient returns home after the procedure is performed is called a(n) __ surgery center.
(Fill in the blank)

Answer: ambulatory

Q: __ health care focuses on treating patients where they reside.
(Fill in the blank)

Answer: Home

Q: Palliative care for the terminally ill is the focus of __ care.
(Fill in the blank)

Answer: hospice

Q: A seamless continuity of care with services from many different providers across a patient's lifespan is called __ care, which has yet to be fully realized in practice.
(Fill in the blank)

Answer: integrated

Q: The Centers for Medicare and Medicaid Services (CMS) waives routine Conditions of Participation compliance audits for appropriately accredited facilities by granting them __.
(Fill in the blank)

Answer: deemed status

Q: Voluntary compliance with a set of standards developed by an independent agency is part of the __ process.
(Fill in the blank)

Answer: accreditation

Q: A(n) __ administers substances that cause loss of sensation.
(Fill in the blank)

Answer: anesthesiologist

Q: A(n) __specializes in treating patients with cancer.
(Fill in the blank)

Answer: oncologist

Q: The type of specialist who diagnoses disorders of, and provides well care related to the female reproductive system is a(n) __.
(Fill in the blank)

Answer: gynecologist

Q: A(n) __ for women before, during, and after delivery.
(Fill in the blank)

Answer: obstetrician

Q: A(n) __ delivers primary care to children.
(Fill in the blank)

Answer: pediatrician

Q: A(n) __ treats diseases of the digestive system.
(Fill in the blank)

Answer: gastroenterologist

Q: A(n) __ is a medical doctor who treats disorders of the mind.
(Fill in the blank)

Answer: psychiatrist

Q: A(n) __ specializes in diseases of the heart and blood vessels.
(Fill in the blank)

Answer: cardiologist

Q: The physician specializing in skin diseases is the __.
(Fill in the blank)

Answer: dermatologist

Q: A(n) __ treats diseases of the eyes.
(Fill in the blank)

Answer: ophthalmologist

Q: A(n) __ studies changes in human tissues, cells, and organs.
(Fill in the blank)

Answer: pathologist