

Chapter 1 - Health Care Delivery Systems

1. Prehistoric medicine and ancient medicine were characterized by an interest in the arts and sciences.
 - a. True
 - b. False

ANSWER: False

2. The focus of health care consumers is on primary and preventative care.
 - a. True
 - b. False

ANSWER: True

3. Preadmission testing on an outpatient basis is more frequently performed than is admitting patients a day or two early to perform such tests.
 - a. True
 - b. False

ANSWER: True

4. Antyllos, a Roman physician appointed to treat gladiators, gained anatomical insight by tending to their fractures and wounds.
 - a. True
 - b. False

ANSWER: False

5. Avicenna, a Persian physician, summarized the knowledge of medieval medicine in the *Canon of Medicine*.
 - a. True
 - b. False

ANSWER: True

6. The Health Care Quality Improvement Act of 1986 requires that consumers to be provided with informed consent guidance, and with information about state laws that impact health care decisions.
 - a. True
 - b. False

ANSWER: False

7. The Health Care Financing Administration was created to replace the Centers for Medicare and Medicaid Services.
 - a. True
 - b. False

ANSWER: False

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8. Hospital administrators are responsible for appointing medical staff members.
- a. True
 - b. False

ANSWER: False

9. Associate medical staff members include former members who are honored with emeritus status.
- a. True
 - b. False

ANSWER: False

10. Hospital-originated infections are also known as nosocomial infections.
- a. True
 - b. False

ANSWER: True

11. Hippocrates was the first physician to consider medicine a science.
- a. True
 - b. False

ANSWER: True

12. During ancient times, Antyllos performed and described new procedures, and he became an authority on aneurysms.
- a. True
 - b. False

ANSWER: True

13. Rhazes produced the *Canon of Medicine*, which summarized medical knowledge and accurately described many diseases.
- a. True
 - b. False

ANSWER: False

14. Osteopathic physicians founded the American Medical Association (AMA) in Philadelphia to elevate the standard of medical education in the United States.
- a. True
 - b. False

ANSWER: False

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15. The American College of Surgeons (ACS) improved the quality of care for surgical patients by establishing standards for surgical.

- a. True
- b. False

ANSWER: True

16. In 1918, just 89 of 692 hospitals surveyed as part of the Hospital Standardization Program met requirements of the Minimum Standard for Hospitals.

- a. True
- b. False

ANSWER: True

17. The primary purpose of the Joint Commission is the mandatory accreditation of health care facilities.

- a. True
- b. False

ANSWER: False

18. The utilization review process was strengthened through formation of professional standards review organizations (PSROs) to monitor the appropriateness, quality, and outcome of services provided to beneficiaries of Medicare, Medicaid, and Maternal and Child Health programs.

- a. True
- b. False

ANSWER: True

19. Sally Slip fell and broke her arm. Her fracture would most likely be treated by an orthopedic specialist.

- a. True
- b. False

ANSWER: True

20. Individual state laws require health care facilities to obtain licenses to operate from state departments of health.

- a. True
- b. False

ANSWER: True

21. The preparation of a final meeting agenda is the joint responsibility of the committee chairperson and secretary.

- a. True
- b. False

ANSWER: True

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22. When taking minutes, the committee secretary should record only the final decisions made by the committee.
- a. True
 - b. False

ANSWER: False

23. The drug utilization review committee is responsible for maintaining the hospital formulary.
- a. True
 - b. False

ANSWER: True

24. Abstracted patient information is used to generate diagnosis and procedure indexes.
- a. True
 - b. False

ANSWER: True

25. The purpose of contracting out health information services is to improve quality and contain costs.
- a. True
 - b. False

ANSWER: True

26. Which Persian physician produced the *Canon of Medicine*?
- a. Papyrus
 - b. Avicenna
 - c. Rhazes
 - d. Hippocrates

ANSWER: b

27. Which surgeon and surgical writer educated by the army after being rejected by medical schools saved thousands of lives by the use of ligatures in amputations?
- a. Paré
 - b. Fracastoro
 - c. Vesalius
 - d. Papyrus

ANSWER: a

28. To advance the health of individuals and communities, hospitals and health care networks are represented by the
- a. American Medical Association
 - b. American College of Surgeons.
 - c. National Medical Association.
 - d. American Hospital Association.

ANSWER: d

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29. Which medical staff committee is responsible for the review of preoperative and pathologic diagnosis to determine the necessity of surgery?
- a. joint conference
 - b. credentials
 - c. tissue review
 - d. infection control

ANSWER: c

30. Which medical staff membership category includes physicians who deliver most of a hospital's inpatient medical services?
- a. active
 - b. associate
 - c. honorary
 - d. consulting

ANSWER: a

31. The first physician to document accurate descriptions of measles and smallpox was
- a. Hippocrates
 - b. Rhazes
 - c. Avicenna
 - d. Papyrus

ANSWER: b

32. The anatomist who revolutionized anatomy by writing *De Humani Corporis Fabrica* was
- a. Edwin Smith Papyrus
 - b. Girolamo Fracastoro
 - c. Andreas Vesalius
 - d. Galen

ANSWER: c

33. A patient's entry to the health care system in most nonemergency situations – which include health maintenance and coordination of referrals – is called _____ care.
- a. secondary
 - b. primary
 - c. preventative
 - d. tertiary

ANSWER: b

34. Which organization was founded to improve the quality of care for surgical patients by establishing standards for surgical education and practice?
- a. American Medical Association
 - b. American Hospital Association
 - c. American College of Surgeons
 - d. National Medical Association

ANSWER: c

35. The National Practitioner Data Bank (NPDB) was established by the
- a. Hospital Standardization Program
 - b. Health Insurance Portability and Accountability Act
 - c. Health Care Quality Improvement Act
 - d. Consolidated Omnibus Budget Reconciliation Act

ANSWER: c

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36. Funding for health care for the homeless was provided by the ____ Act.
- a. McKinney
 - b. Migrant Health
 - c. Patient Self-Determination
 - d. Social Security

ANSWER: a

37. Medical staff members are granted clinical privileges by the
- a. chief executive officer
 - b. medical staff
 - c. governing board
 - d. chief of medical services

ANSWER: c

38. Which acts on reports and recommendations from medical staff committees?
- a. executive committee
 - b. credentials committee
 - c. quality management committee
 - d. ethics committee

ANSWER: a

39. Which hospital department directs the facilitywide program that monitors standards of conduct, implements sanctions for noncompliance, and maintains a confidential integrity hot line?
- a. compliance
 - b. human resources
 - c. quality management
 - d. ethics

ANSWER: a

40. Which coding system is used in the United States to collect information about diseases and injuries and to classify diagnoses and procedures?
- a. ICD-9-CM/ICD-10-CM
 - b. HCPCS
 - c. CPT
 - d. CDT

ANSWER: a

41. Which identifier measures an individual's unique physical characteristics or behavior and compares it to a stored digital template to authenticate the identity of the individual?
- a. biometrics
 - b. electronic signature
 - c. smartcard
 - d. digital signature

ANSWER: a

42. Since 1951, the organization that has developed professionally based standards to evaluate the compliance of health care organizations is the:
- a. CARF
 - b. The Joint Commission
 - c. AAAHC
 - d. NCQA

ANSWER: b

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43. Which committee ensures patient safety by analyzing trends of incidents and establishing priorities for dealing with high-risk areas?
- a. safety
 - b. utilization review
 - c. risk management
 - d. disaster control

ANSWER: c

44. The implementation of standards for sanitation, hygiene, ventilation, and nutrition occurred during the ____ centuries.
- a. 16th and 17th
 - b. 18th and 19th
 - c. 17th and 18th
 - d. 15th and 16th

ANSWER: c

45. The use of the microscope allowed ____ to discover certain microbes that later became known as bacteria.
- a. Pasteur
 - b. Leeuwenhoek
 - c. Koch
 - d. Jenner

ANSWER: b

46. Which organization currently provides voluntary accreditation of health care organizations?
- a. ACS
 - b. AMA
 - c. World Health Organization
 - d. The Joint Commission

ANSWER: d

47. Which joint state and federal program(s) assist(s) with medical costs for those with low incomes and limited resources?
- a. Medicaid
 - b. Medicare
 - c. Medicaid and Medicare
 - d. Title 18 of the Social Security Amendment of 1965

ANSWER: a

48. Dr. Jones examines Sally Sick in the office and completes a history and physical exam for the treatment of an upper respiratory infection. Dr. Jones writes a prescription for antibiotics and instructs her to return to his office in 10 to 14 days. This is classified as a(n) ____ care service.
- a. tertiary
 - b. acute
 - c. primary
 - d. secondary

ANSWER: c

49. Most hospitals in the United States are ____ and are operated by religious or other charitable groups.
- a. proprietary
 - b. teaching
 - c. voluntary
 - d. government

ANSWER: c

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50. Ms. Organized has developed a draft strategic plan for Sunny Valley Hospital and will present the plan at the hospital board of trustees meeting next month. Ms. Organized's role at Sunny Valley is most likely
- a. chairperson of the board
 - b. chief executive officer
 - c. chief information officer
 - d. chief operating officer

ANSWER: b

51. Dr. Jones has examined Tom Smith's eye and determined that Tom has a suspicious area on the cornea. Dr. Jones refers Tom to an eye specialist in the field of:
- a. urology
 - b. dermatology
 - c. gynecology
 - d. ophthalmology

ANSWER: d

52. The quality assurance committee has completed a study that reviewed preoperative and pathologic diagnosis. Upon review of the statistical findings, it appears that three surgeons may be performing surgeries that cannot be justified. These findings should also be reviewed by the _____ committee.
- a. credentials
 - b. executive
 - c. ethics
 - d. tissue review

ANSWER: d

53. Pam Paper reviews inpatient admissions to assess patients who may require posthospital services on discharge. She works for the:
- a. case management department
 - b. compliance department
 - c. admissions office
 - d. business office

ANSWER: a

54. Mark Smith, a victim of a motor vehicle accident, has instructed his physician that, if he stops breathing or his heartbeat stops, he does not want to be revived. The physician should complete which of the following for the patient?
- a. do not resuscitate order
 - b. health care proxy form
 - c. standing order
 - d. living will

ANSWER: a

55. The assembly and analysis of discharged patient records is called
- a. incomplete record processing
 - b. universal chart ordering
 - c. coding
 - d. abstracting

ANSWER: a

56. The Medicaid Integrity Program, a fraud and abuse detection program, was established by the:
- a. Hill-Burton Act
 - b. Genetic Information Nondiscrimination Act
 - c. American Recovery and Reinvestment Act
 - d. Deficit Reduction Act

ANSWER: d

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57. Which of the following encourages the reporting of health care mistakes to patient safety organizations by making the reports confidential and providing a shield from their use in civil and criminal proceedings?
- a. Patient Safety and Quality Improvement
 - b. Deficit Reduction Act
 - c. Tax Relief and Health Care Act of 2006
 - d. Genetic Information Nondiscrimination Act

ANSWER: a

58. Which of the following authorized the implementation of a PQRI that established a financial incentive for eligible professionals who participate in a voluntary quality reporting program?
- a. Deficit Reduction Act of 2005
 - b. Patient Safety and Quality Improvement Act
 - c. HITECH Act
 - d. Tax Relief and Health Care Act of 2006

ANSWER: d

59. Which of the following is not a primary care service?
- a. family planning
 - b. vision and hearing screening
 - c. hysterectomy
 - d. annual physical examination

ANSWER: c

60. The Joint Commission and _____ work together to standardize common measures called the National Hospital Quality Measures.
- a. AHIMA
 - b. AMA
 - c. CMS
 - d. WHO

ANSWER: a

61. Measurements of a health care organization's level of performance in specific areas that are created by accrediting agencies are called _____.

ANSWER: standards

62. An interpretation of a law as written by an administrative agency is called a(n) _____.

ANSWER: regulation

63. Voluntary compliance with standards is known as _____.

ANSWER: accreditation

64. From 500 AD through 1347 AD, a series of epidemics known as the _____ killed 42 million people in Europe.

ANSWER: Black Death

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65. In the *De Contagione*, the modern theory of the spread of infection by invisible germs and modes of disease transmission was written by _____.

ANSWER: Girolamo Fracastoro

66. Laws against dissection were relaxed and the first scientific studies of the human body occurred during the _____ period.

ANSWER: Renaissance

67. Louis Pasteur and Robert Koch established the microbial, or _____, theory of disease.

ANSWER: germ

68. Long and Morton discovered that ether gas could be used during surgery as a(n) _____ to put patients to sleep.

ANSWER: anesthetic

69. Lister believed that germs caused many surgical deaths, and he began using carbolic acid to _____ surgical wounds.

ANSWER: sterilize

70. Paul Ehrlich destroyed microbes responsible for particular diseases by using _____.

ANSWER: chemotherapy

71. Benjamin Franklin established the first United States hospital, known as the _____ Hospital.

ANSWER: Pennsylvania

72. The Health Care Financing Administration, now known as _____, was created to manage the Medicare and Medicaid programs.

ANSWER: the Centers for Medicare and Medicaid Services

73. The Peer Review Improvement Act of 1982 replaced professional standard review organizations with _____, which review statewide utilization of services and quality of care provided to Medicare and Medicaid patients.

ANSWER: Peer review organizations

74. The National Practitioner Data Base (NPDB) was established by the _____ to gather information about a practitioner's credentials, previous malpractice, and adverse action histories.

ANSWER: Health Care Quality Improvement Act of 1986

75. Regulations that govern privacy, security, and electronic transactions for health care information were mandated by the _____ Act.

ANSWER: Health Insurance Portability and Accountability

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76. A plastic card that contains a small central processing unit and memory, and can interact with a reader is known as a _____.

ANSWER: smart card

77. A universal chart is created when inpatient and _____ patient records are organized in the same order.

ANSWER: discharged

78. A digital signature uses _____ to attach an alphanumeric code to a document to represent the person signing the document.

ANSWER: public key cryptography

79. GINA is the abbreviation for _____.

ANSWER: Genetic Information Nondiscrimination Act

80. The abbreviation HITECH Act means _____ Act.

ANSWER: Health Information Technology for Economic and Clinical Health

81. Quaternary care is provided most commonly at _____ centers.

ANSWER: tertiary care

82. The _____ department is the recipient of all incident reports.

ANSWER: risk management

83. A _____ ensures an appropriate response to internal and external disasters.

ANSWER: disaster recovery plan

84. ICD-10-PCS is the abbreviation for International Classification of Diseases, Tenth Revision, _____.

ANSWER: Procedural Coding System

85. The American Osteopathic Association transferred administrative responsibility for the AOA's Healthcare Facilities Accreditation Program to the _____ in 1999.

ANSWER: American Osteopathic Information Association
(AOIA)
AOIA

86. The Joint Commission's approach to accreditation is _____ and data driven.

ANSWER: patient centered

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87. The Joint Commission's _____ initiative integrates outcomes and other performance measurement data in the accreditation process for quality improvement purposes.

ANSWER: ORYX

88. Discuss the responsibilities of a hospital governing board.

ANSWER: The responsibilities of the governing board include hospital organization, management, control and operation, and appointing the medical staff. The governing board will conduct regular meetings (usually monthly), with minutes of meetings documented. The board hires a competent administrator and delegates to that person the authority and responsibility for carrying out hospital policies. The governing board also ensures that competent, well-qualified personnel are employed in adequate numbers to carry out the functions of the hospital. It provides a mechanism for assisting employees in addressing physical and mental health problems. The board also must maintain standards of professional work in the hospital and assure that medical staff function competently.

89. Describe the evolution of the health care system from the early prehistoric period to the present.

ANSWER: Health care was nearly nonexistent in prehistoric and ancient times and was characterized by the belief that illness resulted from supernatural causes. During the Middle Ages, medieval medicine was characterized by a lack of education and was often managed by religious organizations. Modern medicine developed during the Renaissance, as medicine began to be based on education instead of spiritual beliefs. During the 17th and 18th centuries, medicine was characterized by the implementation of standards for sanitation, ventilation, hygiene, and nutrition. During the 18th, 19th, and 20th centuries, scientific knowledge increased rapidly with greater education in the medical field.

90. Explain the relationship among the Flexner report, the American College of Surgeons (ACS), The Joint Commission, and the American Hospital Association (AHA).

ANSWER: The Flexner Report (1910) was the first evaluation of health education in the United States. Data was collected, and health education was brought to the forefront, resulting in the conclusion that only one of the 155 medical schools evaluated provided an acceptable medical education. The American College of Surgeons was founded in 1913 to improve the quality of care for surgical patients by establishing standards for surgical education and practice. The ACS developed the Minimum Standard for Hospitals. The American Hospital Association (AHA), founded in 1898, provides education for health care professionals and information on health care issues. The Joint Commission (formerly known as The Joint Commission on Accreditation of Healthcare Organizations [JCAHO]), founded in 1951, functions to further the quality of care delivered to patients.

91. The health information department is responsible for the health information of a facility. List eight health information services discussed in the textbook.

ANSWER: Information services include department administration, cancer registry, coding and abstracting, image processing, incomplete record processing, medical transcription, record circulation, and release of information processing

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92. Discuss the role of the health information department in health care facilities, and list health information services that are performed.

ANSWER: The health information department is responsible for allowing appropriate access to patient information in support of clinical practice, health services, and medical research, while at the same time maintaining confidentiality of patient and provider data.

Health information services include department administration, cancer registry, coding and abstracting, image processing, incomplete record processing, medical transcription, record circulation, and release of information processing.

93. Record circulation includes the retrieval of patient records. Describe the reasons records are retrieved.

ANSWER: Records are retrieved for inpatient readmission (for nursing units), scheduled and unscheduled outpatient clinic visits (for clinics such as dermatology, orthopedics, and so on), authorized quality management studies, and education and research.

94. Explain the term quaternary care.

ANSWER: Quaternary care is considered an extension of tertiary care and includes advanced levels of medicine that are highly specialized, not widely used, and very costly. It can include types of experimental medicine.

95. Define the abbreviation HIPDB.

ANSWER: HIPDB is the abbreviation for Healthcare Integrity and Protection Data Bank.

96. List the individuals that are commonly on the “information management team” of a health care facility.

ANSWER: The members include the chief executive officer (CEO), chief financial officer (CFO), director of patient care services, director of information management, quality/risk manager, and medical director.

97. Explain the purpose of the Privacy Act of 1974.

ANSWER: The Privacy Act of 1974 was implemented to protect the privacy of individuals identified in information systems maintained by federal government hospitals, and to provide access to records concerning these persons.