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MULTIPLE CHOICE

1. The quality assurance coordinator evaluates the efficiencies of which of the following?
   1. Clinical staff
   2. Amount billed to patients for care
   3. Value associated with the practice of respiratory care
   4. Quality of care
   a. 2 and 4 only
   b. 1 and 3 only
   c. 1, 3, and 4 only
   d. 2, 3, and 4 only

   ANS: C
   The Quality Assurance Coordinator helps not only to evaluate the efficiencies of the clinical staff but also the value associated with the practice of respiratory. In addition, as professionals it is proper to determine the quality of care provided by evaluating the care we provide as well as the associated outcomes.

   DIF: Recall OBJ: 5

2. Who is professionally responsible along with the Department Director for the quality of clinical care that is delivered?
   a. Shift supervisor
   b. Hospital Chief Operating Officer
   c. Medical director
   d. Clinical educator

   ANS: C
   The Medical Director of respiratory care is professionally responsible along with the Department Director for the quality of clinical care that is delivered (see Box 2.1). The Medical Director is also responsible for assisting and advising the Department Director on the management of the Respiratory Therapy Department.

   DIF: Recall OBJ: 5

3. High-quality care is always
   1. safe.
   2. efficient.
   3. inexpensive.
   4. physician administered.
   a. 1 and 2 only
   b. 3 only
   c. 2 and 3 only
   d. 1, 2, and 3

   ANS: A
   High-quality care is always safe and efficient.

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DIF: Recall OBJ: 2

4. The medical director of respiratory care is responsible for which of the following?
   1. Quality of clinical care that is delivered
   2. Assisting and advising the Department Director
   3. Participation in the selection and promotion of technical staff
   4. Approval of department clinical policies and procedures
   a. 1 only
   b. 2 and 3 only
   c. 1, 2, and 4 only
   d. 2, 3, and 4 only

   ANS: C
   The Medical Director of respiratory care is professionally responsible along with the Department Director for the quality of clinical care that is delivered (see Box 2.5). The Medical Director is also responsible for assisting and advising the Department Director on the management of the Respiratory Therapy Department.

   DIF: Recall OBJ: 5

5. Respiratory care education programs are reviewed by which committee to ensure quality?
   a. Committee on Accreditation for Respiratory Care
   b. American Association for Respiratory Care Education
   c. Joint Review Committee Respiratory Care Education
   d. Respiratory Care Education Committee

   ANS: A
   Respiratory care education programs are reviewed by the Committee on Accreditation for Respiratory Care (CoARC).

   DIF: Recall OBJ: 1

6. The word “credentialing” in general refers to what?
   a. Maintaining minimal competency
   b. Licensure by a state or national organization
   c. Successful completion of entry-level board examination
   d. Voluntary certification by state agency

   ANS: A
   A profession is often described by its advancing science, technology, and practice; continuous improvement in quality by active participation of its members; maintenance of minimal competency (in our case credentialing); leadership, research, and innovation.

   DIF: Recall OBJ: 6

7. What term is used to describe the process in which a government agency gives an individual permission to practice an occupation?
   a. Certification
   b. Licensure
   c. Registry
   d. Credentialing

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ANS: B
Licensing of RTs is a mechanism of protecting the public's health, safety, and welfare by mandating a minimal level of competency in respiratory care. For the majority of states, this is the CRT credential; however, there has been a movement to move the entry to licensure to the RRT for all those seeking licensure for the first time. The rationale, as with education, is fairly simple: state licensing boards charged with protecting the safety of the public are asking for a higher level of minimum competency. This is especially important because all RTs trained currently are registry eligible.

DIF: Recall OBJ: 6

8. What agency is responsible for ensuring quality in respiratory care through voluntary certification and registration?
   a. ACCP
   b. CoARC
   c. NBRC
   d. AAMI

   ANS: C
   The primary method of ensuring quality in respiratory care is voluntary certification or registration conducted by the National Board for Respiratory Care (NBRC).

   DIF: Recall OBJ: 1

9. What organization's mission is the development, management, and use of safe and effective health technology?
   a. AAMI
   b. ATS
   c. NBRC
   d. ACCP

   ANS: A
   The Association for the Advancement of Medical Instrumentation (AAMI) is a nonprofit organization founded in 1967 by a diverse community of approximately 7000 professionals. AAMI's mission has been the development, management, and use of safe and effective health technology.

   DIF: Recall OBJ: 2

10. What voluntary accrediting agency is the United States's predominant standards setting and accrediting body in healthcare?
    a. JRCRTE
    b. AARC
    c. FDA
    d. The Joint Commission

    ANS: D
    The Joint Commission (TJC) is the United States's predominant standards setting and accrediting body in healthcare. TJC is an independent, not-for-profit organization that accredits and certifies nearly 21,000 healthcare organizations and programs in the United States.

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DIF: Recall OBJ: 2

11. Current Joint Commission standards for accreditation emphasize which of the following?
    a. Continual quality improvement
    b. Therapist-driven protocols
    c. License and registration of health care providers
    d. Health, welfare, and safety of patients using respiratory care equipment

    ANS: A
    The TJC mission is to continuously improve healthcare for the public, in collaboration with other stakeholders, by evaluating healthcare organizations and inspiring them to excel in providing safe and effective care of the highest quality and value.

    DIF: Recall OBJ: 2

12. What federal agency oversees the Medicare program?
    a. CMS
    b. AARC
    c. FDA
    d. HHS

    ANS: A
    The Centers for Medicare and Medicaid Services (CMS) is part of the Department of Health and Human Services (HHS). CMS is a federal agency established in 1965 to oversee the Medicare program and works in partnership with state governments to administer Medicaid, Children's Health Insurance Program, and health insurance portability standards.

    DIF: Recall OBJ: 5

13. Which of the following are included in the RTs scope of practice?
    1. Application of technology
    2. Cost determination based on daily FTEs and patient income
    3. Administration of IV medications
    4. Use of protocols across care sites
    a. 1 and 4 only
    b. 2 and 3 only
    c. 1, 2, and 4 only
    d. 2, 3, and 4 only

    ANS: A
    According to the American Association for Respiratory Care (AARC) "Respiratory Therapists are healthcare professionals whose responsibilities include patient assessment, disease management, diagnostic evaluation, management, education, rehabilitation and care of patients with deficiencies and abnormalities of the cardiopulmonary system. The scope of practice includes the application of technology and the use of protocols across all care sites including, but not limited to, the hospital, clinic, physician's office, rehabilitation facility, skilled nursing facility and the patient's home."

    DIF: Recall OBJ: 3

14. Which of the following are expected changes in Respiratory Therapy?

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1. Patient care teams will be the standard
2. CRT will become more prevalent
3. Reimbursement changes to recognize health promotion and disease state management
4. Decreasing use of protocols across care sites

a. 1 and 3 only
b. 2 and 4 only
c. 1, 2, and 4 only
d. 2, 3, and 4 only

ANS: A
See Box 2.9

DIF: Recall OBJ: 7

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