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EMC DEP-3CR1

PowerProtect Cyber Recovery Exam

3

질문 #26

An enterprise customer needs a Cyber Recovery solution to be implemented. As an outcome from a previous workshop, the following backup environment needs to be protected to the CR Vault.

Location 1: 4 PowerProtect DDs

Location 2: 4 PowerProtect DDs

Location 3: 2 PowerProtect DDs

Location 4: 2 PowerProtect DDs

The customer wants to implement a CR Vault in a 5th location.

How many Cyber Recovery systems must be installed at a minimum level?

- A. 0
- B. 1
- C. 2
- D. 3

정답 B

질문 #27

What vault status is displayed if none of the PowerProtect DD systems in the CR Vault are able to communicate with the Cyber Recovery software?

- A. Unknown
- B. Unlocked
- C. Locked
- D. Degraded

정답 B

질문 #28

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CBIC인증 CIC시험패스는 IT업계종사자들이 승진 혹은 연봉협상 혹은 이직 등 모든 면에서 날개를 가해준 것과 같습니다. IT업계는 CBIC인증 CIC시험을 패스한 전문가를 필요로 하고 있습니다. Fast2test의 CBIC인증 CIC덤프로 시험을 패스하고 자격증을 취득하여 더욱더 큰 무대로 진출해보세요.

>> CIC높은 통과율 시험덤프문제 <<

최신 CIC높은 통과율 시험덤프문제 인증덤프 샘플문제 체험하기

현재 많은 IT인사들이 같은 생각하고 있습니다. 그것은 바로 CBIC 인증 시험 자격증 취득으로 하여 IT업계의 아주 중요한 한걸음이라고 말합니다. 그만큼 CBIC 인증 시험의 인기는 말 그대로 하늘을 찌르고 있습니다.

최신 Infection Control CIC 무료 샘플문제 (Q87-Q92):

질문 #87

How can infection prevention and control programs BEST implement recommendations across different departments?

- A. Use a generic policy for all areas without customization.
- B. Rely on senior leadership to enforce policies without input from staff.
- **C. Provide targeted, understandable education to staff.**
- D. Avoid department-specific training to reduce redundancy.

정답: C

설명:

The CBIC Certified Infection Control Exam Study Guide (6th edition) emphasizes that successful implementation of infection prevention recommendations depends on effective communication, engagement, and education tailored to the audience. Healthcare departments differ significantly in workflow, patient population, risk profile, and daily practices. Therefore, providing targeted, understandable education to staff is the most effective strategy to ensure recommendations are adopted and sustained.

Option A reflects best practice by aligning infection prevention guidance with the specific roles and responsibilities of staff in each department. Education that uses relevant examples, scenarios, and language improves comprehension, promotes buy-in, and supports behavior change. The Study Guide highlights that adult learners benefit most from education that is practical, interactive, and clearly applicable to their work environment.

Options B and C are ineffective because generic or non-customized approaches often fail to address department-specific challenges and may lead to confusion or poor compliance. Avoiding department-specific training ignores variations in risk and undermines accountability. Option D relies solely on enforcement rather than collaboration, which can result in resistance and decreased adherence.

For the CIC exam, this question reinforces that infection prevention programs function best when they act as educators and partners, not just policy enforcers. Tailored education empowers staff, enhances compliance, and ultimately improves patient safety outcomes across diverse healthcare settings.

질문 # 88

Which of the following is the primary advantage of conducting prospective surveillance?

- A. It utilizes resources in a cost-effective manner.
- B. It provides access to complete laboratory data.
- **C. It identifies clusters of infection in a timely manner.**
- D. It is an efficient use of surveillance time.

정답: C

설명:

The CBIC Certified Infection Control Exam Study Guide (6th edition) describes prospective surveillance as an active, real-time approach to infection surveillance in which patients are monitored as care is being delivered. The primary advantage of this method is its ability to identify infections, trends, and clusters promptly, allowing for early intervention and rapid implementation of control measures.

Because prospective surveillance occurs concurrently with patient care, infection preventionists can detect emerging patterns-such as an increase in device-associated infections or unusual organisms-before they become widespread outbreaks. This timely recognition supports immediate corrective actions, such as reinforcing isolation precautions, modifying clinical practices, or initiating focused investigations, thereby reducing transmission and patient harm.

The other options describe characteristics that are more consistent with retrospective surveillance. Option A and C are incorrect because prospective surveillance is typically more resource- and labor-intensive, not necessarily efficient or cost-effective. Option B is also incorrect because complete laboratory data may not yet be available in real time, whereas retrospective surveillance benefits from finalized records.

For the CIC exam, it is important to understand that although prospective surveillance requires more resources, its key strength lies in early detection and timely response. The ability to quickly identify clusters of infection and intervene promptly is the defining advantage of prospective surveillance and the reason it is preferred for high-risk settings and priority infections.

질문 # 89

An infection preventionist is assisting the Product Evaluation Committee in selecting a disinfectant for use in a healthcare facility. Which of the following criteria is MOST important?

- A. Safety Data Sheet (SDS)
- B. Active chemical ingredients
- **C. The purpose for which it will be used**
- D. If it will be used on living tissue

정답: C

설명:

The CBIC Certified Infection Control Exam Study Guide (6th edition) emphasizes that the most important criterion when selecting a disinfectant is the intended purpose for which it will be used. Disinfectants must be chosen based on the type of surface or item, the level of microbial kill required, and the risk of infection associated with the use of that item. This approach aligns with Spaulding's classification system, which categorizes items as critical, semi-critical, or noncritical and guides the required level of disinfection or sterilization.

Understanding the purpose of the disinfectant ensures that the selected product is effective against the appropriate microorganisms and suitable for the clinical application, whether it involves environmental surfaces, noncritical patient care equipment, or semi-critical devices. For example, a low-level disinfectant may be sufficient for noncritical items, whereas high-level disinfection is required for semi-critical devices.

Selecting a disinfectant without first defining its purpose can result in ineffective infection prevention or unnecessary exposure to harsh chemicals.

Option A is incorrect because disinfectants are not intended for use on living tissue; antiseptics serve that role.

Option C is secondary-while active ingredients matter, they are evaluated after determining intended use.

Option D is important for safety and regulatory compliance but does not drive appropriateness of clinical application.

For the CIC exam, recognizing that intended use is the foundational decision point in disinfectant selection is essential for evidence-based infection prevention practice.

질문 #90

An infection preventionist plans to evaluate 12 months of prospectively collected intensive care unit (ICU) surveillance data on ventilator-associated events. The MOST effective visual representation of these data is a:

- A. Pareto chart
- B. Pie chart
- **C. Control chart**
- D. Scatter gram

정답: C

설명:

The CBIC Certified Infection Control Exam Study Guide (6th edition) emphasizes that surveillance data collected over time are best evaluated using statistical process control methods. A control chart is the most effective visual tool for analyzing 12 months of prospectively collected ICU surveillance data on ventilator-associated events (VAEs) because it displays data sequentially over time and distinguishes between normal process variation and significant changes that may require intervention.

Control charts allow infection preventionists to identify trends, shifts, or special cause variation by plotting event rates against calculated control limits. This enables timely recognition of sustained increases or decreases in VAEs and supports data-driven decision-making. Control charts are especially valuable for ongoing surveillance and performance improvement because they demonstrate whether prevention efforts are having a measurable impact.

The other options are less appropriate for this purpose. A Pareto chart is used to prioritize causes contributing to a problem, not to track rates over time. A pie chart shows proportional distribution at a single point in time and does not reflect trends. A scatter gram is used to assess relationships between two variables rather than monitor process stability.

For CIC exam preparation, it is critical to recognize that when evaluating infection surveillance data longitudinally-particularly for healthcare-associated events-control charts are the preferred and most effective visualization method, aligning with epidemiologic principles and quality improvement methodology outlined in the Study Guide.

질문 #91

The infection preventionist understands that the heating, ventilation and air conditioning (HVAC) systems in the facility can be a risk factor for healthcare-acquired infections. What is the MOST likely risk from the HVAC system for patients in a Pediatric Oncology unit?

- A. Clostridioides difficile
- B. Norovirus
- C. Methicillin-resistant Staphylococcus aureus (MRSA)
- **D. Aspergillus spp.**

정답: D

설명:

Patients in pediatric oncology units are highly immunocompromised, making them particularly susceptible to opportunistic fungal infections such as *Aspergillus* spp. HVAC systems, especially if improperly maintained or contaminated, can disseminate fungal spores into patient care areas.

* According to the APIC Text (Chapter 116 - HVAC Systems), fungal spores such as *Aspergillus* can be transmitted via HVAC systems. These infections have been linked to contaminated air ducts, faulty air filters, and construction-related air disturbances. Outbreaks of aspergillosis are frequently associated with construction near patient care areas and are particularly dangerous for immunocompromised patients, including pediatric oncology patients.

* Additional data from APIC Text (Chapter 45 - Infection Prevention in Oncology Patients) reinforces that *Aspergillus* spp. infections in oncology and immunocompromised patients are primarily airborne and are most often disseminated via HVAC systems.

* Incorrect answer rationale:

* A. MRSA- Typically spread via direct contact, not HVAC.

* B. Norovirus- Spread via fecal-oral route and contaminated surfaces, not airborne HVAC.

* D. *Clostridioides difficile*- Spread via contact with spores on surfaces, not through the air.

References:

APIC Text, 4th Edition, Chapter 116 - Heating, Ventilation, and Air Conditioning APIC Text, 4th Edition, Chapter 45 - Infection Prevention in Oncology and Immunocompromised Patients

질문 # 92

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CIC인증시험 공부자료 : <https://kr.fast2test.com/CIC-premium-file.html>

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