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Medical Professional Certified Healthcare Facility Manager (CHFMR) certification exam Sample Questions (Q66-Q71):

NEW QUESTION # 66

The Resource Conservation and Recovery Act (RCRA) was enacted to protect public health from

- A. improper medical waste management.
- B. improper disposal of used needles.
- **C. improper management of hazardous wastes.**
- D. hospital incinerator emissions.

Answer: C

Explanation:

The RCRA (1976) governs the proper management of hazardous waste from generation to disposal ("cradle to grave"). While healthcare organizations often think of sharps or medical waste, RCRA is broader, addressing hazardous chemicals, solvents, and pharmaceuticals. Medical waste is regulated under other federal and state rules.

References: U.S. Environmental Protection Agency, RCRA Overview; CHFMR Handbook - Compliance domain.

NEW QUESTION # 67

Costs to overhaul an AHU to the extent that the life of the equipment is extended for five years are considered what type of cost?

- A. contingency
- **B. capital**
- C. non-depreciable
- D. operating

Answer: B

Explanation:

According to standard accounting practices, when an overhaul or replacement extends the useful life of an asset, it is considered a capital expenditure. Operating costs are day-to-day expenses; contingency is reserved budget for unforeseen costs; non-depreciable refers to land, not equipment.

References: AHA/ASHE CHFM Handbook - Financial Management (capital vs. operating cost criteria).

NEW QUESTION # 68

If a boiler combustion efficiency test indicates 22% excess oxygen at mid-firing rate, which of the following adjustments should be made?

- A. Increase the nozzle air pressure.
- B. Shift to steam atomization.
- **C. Increase the fuel pressure.**
- D. No adjustment is necessary.

Answer: C

Explanation:

22% excess oxygen is far higher than normal (typical excess O₂ is 3-6%). This means there is too much air compared to fuel, causing inefficiency.

The corrective action is to increase fuel pressure, which reduces excess oxygen by balancing the air-fuel ratio.

D). Increase the fuel pressure (Correct): Restores optimal combustion balance.

A). Steam atomization: Not relevant unless using certain oil burners.

B). Increase nozzle air pressure: Would worsen the excess O₂ condition.

C). No adjustment necessary: Incorrect because efficiency is compromised.

References:

ASME Boiler and Pressure Vessel Code.

ASHE/CHFM Study Guide - Boiler efficiency and combustion control.

NFPA 85: Boiler and Combustion Systems Hazards Code.

NEW QUESTION # 69

The cost to replace an aging chiller should be part of an organization's

- **A. capital budget.**
- B. project fund.
- C. depreciation fund.
- D. operating budget.

Answer: A

Explanation:

Replacement of major building systems (e.g., chillers, boilers, roofs) falls under capital expenditures because these items are large, non-recurring, and add to or extend the life of facility assets. The capital budget accounts for these costs, which are not part of the day-to-day operations budget.

Correct: Capital budget (A) - Covers replacement of major equipment and infrastructure.

Incorrect:

B). Project fund - May finance special projects but not part of standard budgeting categories.

C). Depreciation fund - An accounting mechanism, not typically a direct budget line for replacement.

D). Operating budget - Covers recurring expenses like utilities, maintenance, and repairs, not full replacements.

References:

AHA/ASHE: Health Care Facility Budgeting Guidance.

CHFM Candidate Handbook - Financial Management domain: capital vs. operating budgeting.

NEW QUESTION # 70

The process of establishing a standard of reference and comparing a business function, activity, product, or enterprise as a whole against that standard is which of the following types of analyses?

- A. benchmarking
- B. performance data
- C. continuous quality improvement
- D. performance improvement

Answer: A

Explanation:

Benchmarking is the structured process of setting a reference standard (internal or external) and comparing an organization's processes, outputs, or outcomes against that standard to identify performance gaps and opportunities for improvement. In CHFM practice, benchmarking supports administrative decision-making for staffing, service levels, utility performance, and cost metrics by aligning results to recognized peer or industry standards.

References:

American Hospital Association (AHA), CHFM Candidate Handbook - Administration domain (performance measurement and benchmarking concepts).

ASHE/AHA study resources - Benchmarking methods for healthcare facilities operations.

NEW QUESTION # 71

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