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## CIC TEST

What is the primary mission of CIC? - answer Gather, Process, Display, Evaluate, Disseminate  
(Good People Die Every Day)

What is gathering? - answer The collection of information from various sources.

What sources are used for gathering? - answer RADARS

Voice Radio  
Radio Messages  
EW Equipment  
IFF  
Sonar  
Tactical data systems  
Visual sources  
Intelligence reports  
Pubs (NWP, ATP, ACP)  
Satellites  
Charts and Navigational data  
OPPLANS, OPORDERS

What is processing? - answer When information is received it is processed so nonessential info is eliminated. Info is sorted, inspected, appraised and correlating all information so it may be displayed and disseminated as necessary.

Describe display - answer Displays information using various devices

What is used to display information? - answer Summary plots

status boards  
surface plots  
strategic plots  
geographic plots NTDS consoles  
Maps and charts  
Television  
Logs and records  
AEGIS Display system  
Large screen displays

Describe evaluation - answer The process of considering and weighing all available factors and pieces of information to arrive at a sound operational decision, which may

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## CBIC Certified Infection Control Exam Sample Questions (Q210-Q215):

### NEW QUESTION # 210

The infection preventionist (IP) is assisting pharmacists in investigating medication contamination at the hospital's compounding pharmacy. As part of the medication recall process, the IP should:

- **A. Identify the potential source of contamination.**
- B. Inspect for safe injection practices.
- C. Inform all discharged patients of potential medication contamination.
- D. Have laboratory culture all medication.

**Answer: A**

Explanation:

The scenario involves an infection preventionist (IP) assisting pharmacists in addressing medication contamination at the hospital's compounding pharmacy, with a focus on the medication recall process. The IP's role is to apply infection control expertise to mitigate risks, guided by the Certification Board of Infection Control and Epidemiology (CBIC) principles and best practices. The recall process requires a systematic approach to identify, contain, and resolve the issue, and the "first" or most critical step must be determined.

Let's evaluate each option:

\* A. Have laboratory culture all medication: Culturing all medication to confirm contamination is a valuable step to identify affected batches and guide the recall. However, this is a resource-intensive process that depends on first understanding the scope and source of the problem. Without identifying the potential source of contamination, culturing all medication could be inefficient and delay the recall.

This step is important but secondary to initial investigation.

\* B. Inspect for safe injection practices: Inspecting for safe injection practices (e.g., single-use vials, proper hand hygiene, sterile technique) is a critical infection control measure, especially in compounding pharmacies where contamination often arises from procedural errors (e.g., reuse of syringes, improper cleaning). While this is a proactive step to prevent future contamination, it addresses ongoing practices rather than the immediate recall process for the current contamination event. It is a complementary action but not the first priority.

\* C. Identify the potential source of contamination: Identifying the potential source of contamination is the foundational step in the recall process. This involves investigating the compounding environment (e.g., water quality, equipment, personnel practices), raw materials, and production processes to pinpoint where the contamination occurred (e.g., bacterial ingress, cross-contamination). The CBIC emphasizes root cause analysis as a key infection prevention strategy, enabling targeted recalls, corrective actions, and prevention of recurrence. This step is essential before culturing, inspecting, or notifying patients, making it the IP's primary responsibility in this context.

\* D. Inform all discharged patients of potential medication contamination: Notifying patients is a critical step to ensure public safety and allow for medical follow-up if they received contaminated medication.

However, this action requires prior identification of the contaminated batches and their distribution, which depends on determining the source and confirming the extent of the issue. Premature notification without evidence could cause unnecessary alarm and is not the first step in the recall process.

The best answer is C, as identifying the potential source of contamination is the initial and most critical step in the medication recall process. This allows the IP to collaborate with pharmacists to trace the contamination, define the affected products, and guide subsequent actions (e.g., culturing, inspections, notifications). This aligns with CBIC's focus on systematic investigation and risk mitigation in healthcare-associated infection events.

References:

\* CBIC Infection Prevention and Control (IPC) Core Competency Model (updated 2023), Domain III:

Prevention and Control of Infectious Diseases, which includes identifying sources of contamination in healthcare settings.

\* CBIC Examination Content Outline, Domain V: Management and Communication, which emphasizes root cause analysis during outbreak investigations.

\* CDC Guidelines for Safe Medication Compounding (2022), which recommend identifying contamination sources as the first step in a recall process.

### NEW QUESTION # 211

After reviewing quarterly surveillance data, the infection preventionist (IP) identifies an upward trend in needlestick injuries occurring during bedside blood draws. What is the MOST appropriate collaborative action for the IP to take with the Occupational Health Department?

- A. Discuss trends at the quarterly quality assurance and performance improvement meeting with the multidisciplinary safety team.
- **B. Convene a multidisciplinary safety team to evaluate workflows, review device usage, and recommend practice changes.**
- C. Wait for the next regulatory survey to address the issue more formally with hospital leadership.
- D. Complete a device review and determine if faulty equipment has been the cause or if the manufacturer has issued a recall.

**Answer: B**

Explanation:

The CBIC Certified Infection Control Exam Study Guide (6th edition) emphasizes that when surveillance identifies an increasing trend in occupational exposures, such as needlestick injuries, the infection preventionist must take prompt, proactive, and collaborative action. The most appropriate response is to convene a multidisciplinary safety team in partnership with Occupational Health to perform a focused evaluation of the problem.

A multidisciplinary approach allows for comprehensive assessment of workflows, staffing practices, device selection, training, and compliance with standard precautions. Team members may include nursing leadership, frontline staff, occupational health, infection prevention, materials management, and safety officers. This collaboration supports root cause analysis to identify contributing factors—such as improper technique, workflow inefficiencies, inadequate training, or suboptimal safety-engineered devices—and to implement targeted interventions.

Option A is inappropriate because delaying action increases risk to healthcare personnel. Option B may be part of the evaluation but is too narrow and should not occur in isolation. Option D is insufficient because discussing trends alone does not result in immediate corrective action.

The Study Guide highlights that timely, interdisciplinary performance improvement efforts are essential to reduce occupational exposures and comply with regulatory and safety standards. Convening a multidisciplinary safety team enables rapid intervention, staff engagement, and sustainable injury reduction—making option C the best answer and a high-yield CIC exam concept.

### NEW QUESTION # 212

Which of the following options describes a correct use of personal protective equipment?

- A. Gloves should be worn when handling or touching a cardiac monitor that has been disinfected.
- B. Personal eyeglasses should be worn during suctioning.
- **C. Surgical masks should be worn during lumbar puncture procedures.**
- D. Eye protection should be worn when providing patient care if at risk of spreading respiratory disease after unprotected exposure.

**Answer: C**

Explanation:

According to CDC and APIC guidelines, a surgical mask is required when performing lumbar punctures to prevent bacterial contamination (e.g., meningitis caused by droplet transmission of oral flora).

Why the Other Options Are Incorrect?

\* A. Personal eyeglasses should be worn during suctioning - Incorrect because eyeglasses do not provide adequate eye protection.

Goggles or face shields should be used.

\* C. Gloves should be worn when handling or touching a cardiac monitor that has been disinfected

- Not necessary unless recontamination is suspected.

\* D. Eye protection should be worn when providing patient care after unprotected exposure - Eye protection should be used before exposure, not just after.

CBIC Infection Control Reference

APIC states that surgical masks must be worn for procedures such as lumbar puncture to reduce infection risk.

### NEW QUESTION # 213

Working with public health agencies to collect and analyze indicators that might signal an increase in community illness is an example of which type of surveillance?

- **A. Syndromic**

- B. Targeted
- C. Passive
- D. Active

**Answer: A**

Explanation:

Surveillance is a critical tool in infection prevention and control, used to monitor disease trends and guide public health responses. The Certification Board of Infection Control and Epidemiology (CBIC) emphasizes the "Surveillance and Epidemiologic Investigation" domain, which aligns with the Centers for Disease Control and Prevention (CDC) "Principles of Epidemiology in Public Health Practice" (3rd Edition, 2012).

The question describes a process of collecting and analyzing indicators to signal an increase in community illness, requiring identification of the appropriate surveillance type among the options provided.

Option C, "Syndromic," is the correct answer. Syndromic surveillance involves monitoring non-specific health indicators or symptoms (e.g., fever, respiratory complaints, or gastrointestinal issues) that may precede a formal diagnosis, aiming to detect potential outbreaks or increases in community illness early. The CDC defines syndromic surveillance as the real-time or near-real-time collection, analysis, and interpretation of health-related data to provide actionable information, often in collaboration with public health agencies. This approach uses data from sources like emergency department visits, over-the-counter medication sales, or absenteeism reports to identify trends before laboratory confirmation, making it well-suited to the described scenario of signaling community illness increases.

Option A, "Passive," involves healthcare providers or laboratories reporting cases to public health authorities on a voluntary or mandatory basis without active prompting (e.g., routine notifiable disease reporting). While passive surveillance contributes to baseline data, it is less proactive and not specifically designed to signal early increases in illness, making it less fitting. Option B, "Active," entails public health officials actively seeking data from healthcare facilities or providers (e.g., calling to confirm cases during an outbreak). This is more resource-intensive and typically used for specific investigations rather than ongoing community trend monitoring, which aligns better with syndromic methods. Option D, "Targeted," refers to surveillance focused on a specific population, disease, or event (e.g., monitoring TB in a high-risk group). The scenario's broad focus on community illness indicators does not suggest a targeted approach.

The CBIC Practice Analysis (2022) and CDC guidelines highlight syndromic surveillance as a key strategy for early detection of community-wide health threats, often involving collaboration with public health agencies. Option C best matches the described activity of analyzing indicators to signal illness increases, making it the correct choice.

References:

- \* CBIC Practice Analysis, 2022.
- \* CDC Principles of Epidemiology in Public Health Practice, 3rd Edition, 2012.
- \* CDC Syndromic Surveillance Systems, 2020.

#### **NEW QUESTION # 214**

Based on the Spaulding classification, which of the following pairings is an example of a semi-critical item and its minimal level of disinfection?

- A. Bedpan; intermediate-level disinfection
- B. Surgical instrument; sterilization
- **C. Endocavity probe; high-level disinfection**
- D. Bedside table; high-level disinfection

**Answer: C**

Explanation:

The CBIC Certified Infection Control Exam Study Guide (6th edition) emphasizes the importance of applying Spaulding's classification to determine the appropriate minimum level of processing for medical devices.

Under this system, devices are categorized as critical, semi-critical, or noncritical based on the degree of infection risk associated with their use.

Semi-critical items are those that come into contact with mucous membranes or non-intact skin but do not ordinarily penetrate sterile tissue. Examples include endocavity probes, such as transvaginal or transrectal ultrasound probes. Because mucous membranes are more susceptible to infection than intact skin, semi-critical items require at least high-level disinfection after thorough cleaning to eliminate all microorganisms except large numbers of bacterial spores.

Option C correctly pairs an endocavity probe with high-level disinfection, which is the minimum acceptable level of processing for this classification. Option A is incorrect because a bedside table is a noncritical item and requires only low-level disinfection. Option B describes a critical item, which correctly requires sterilization but does not meet the question's focus on semi-critical devices.

Option D is incorrect because bedpans are noncritical items, and intermediate-level disinfection exceeds the minimum requirement.

Understanding Spaulding's classification and matching devices to the correct level of disinfection is a high- yield topic on the CIC exam and essential for safe infection prevention practice.

## NEW QUESTION # 215

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