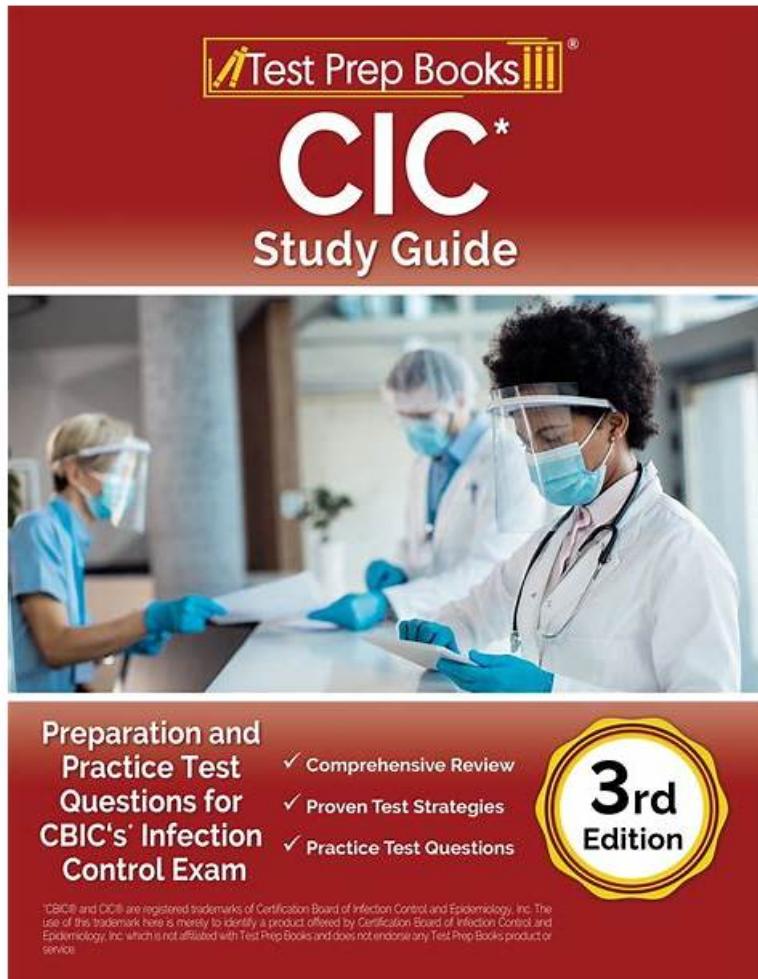


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## CBIC Certified Infection Control Exam Sample Questions (Q20-Q25):

### NEW QUESTION # 20

The infection preventionist (IP) is working with Environmental Services to evaluate a new disinfectant for purchase by the facility. With which of the following should the IP be MOST concerned?

- A. Vendor knowledge of product
- B. Safety of the product
- C. Vendor proximity to the facility
- D. Staff preference

**Answer: B**

Explanation:

When evaluating a new disinfectant, the infection preventionist's primary concern must be the safety and effectiveness of the product. This includes ensuring the product is EPA-registered, effective against targeted pathogens, safe for both the environment and users, and compliant with regulatory guidelines.

\* From the APIC/JCR Workbook, key considerations include:

"Organizations should evaluate each product to ensure that it can be used safely and include a review of dilutions, storage, shelf life, PPE needed, and disposal and ventilation requirements to ensure that OSHA, EPA, or local requirements are met".

\* The CBIC Study Guide reinforces that:

"Safety and efficacy are critical factors in evaluating new products, with particular emphasis on infection prevention and user safety".

\* The other options, while relevant, are not the most critical factors in determining product adoption from an infection control standpoint.

References:

APIC/JCR Workbook, 4th Edition, Chapter 8 - Disinfection and Sterilization CBIC Study Guide, 6th Edition, Product Evaluation Section

### NEW QUESTION # 21

Which of the following management activities should be performed FIRST?

- A. Evaluate project results
- B. Assign responsibility for projects
- C. Plan and organize activities
- D. Establish goals

**Answer: D**

Explanation:

To determine which management activity should be performed first, we need to consider the logical sequence of steps in effective project or program management, particularly in the context of infection control as guided by CBIC principles. Management activities typically follow a structured process, and the order of these steps is critical to ensuring successful outcomes.

\* A. Evaluate project results: Evaluating project results involves assessing the outcomes and effectiveness of a project after its implementation. This step relies on having completed the project or at least reached a stage where outcomes can be measured. Performing this activity first would be premature, as there would be no results to evaluate without prior planning, goal-setting, and execution. Therefore, this cannot be the first step.

\* B. Establish goals: Establishing goals is the foundational step in any management process. Goals provide direction, define the purpose, and set the criteria for success. In the context of infection control, as emphasized by CBIC, setting clear objectives (e.g., reducing healthcare-associated infections by a specific percentage) is essential before any other activities can be planned or executed. This step aligns with the initial phase of strategic planning, making it the logical first activity. Without established goals, subsequent steps lack focus and purpose.

\* C. Plan and organize activities: Planning and organizing activities involve developing a roadmap to achieve the goals, including timelines, resources, and tasks. This step depends on having clear goals to guide the planning process. In infection control, this might include designing interventions to meet infection reduction targets. While critical, it cannot be the first step because planning requires

a predefined objective to be effective.

\* D. Assign responsibility for projects: Assigning responsibility involves delegating tasks and roles to individuals or teams. This step follows the establishment of goals and planning, as responsibilities need to be aligned with the specific objectives and organized activities. In an infection control program, this might mean assigning staff to monitor compliance with hand hygiene protocols. Doing this first would be inefficient without a clear understanding of the goals and plan.

The correct sequence in management, especially in a structured field like infection control, begins with establishing goals to provide a clear target. This is followed by planning and organizing activities, assigning responsibilities, and finally evaluating results. The CBIC framework supports this approach by emphasizing the importance of setting measurable goals as part of the infection prevention and control planning process, which is a prerequisite for all subsequent actions.

References:

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

Management and Communication, which highlights the importance of setting goals as the initial step in managing infection control programs.

\* CBIC Examination Content Outline, Domain V: Leadership and Program Management, which underscores the need for goal-setting prior to planning and implementation of infection control initiatives.

## NEW QUESTION # 22

During an outbreak of ventilator-associated pneumonia (VAP), the infection preventionist should FIRST:

- A. Review adherence to ventilator bundle elements.
- B. Isolate all ventilated patients in negative pressure rooms.
- C. Perform bacterial cultures from ventilator circuits.
- D. Implement preemptive antibiotic therapy in all ventilated patients.

**Answer: A**

Explanation:

\* Reviewing compliance with VAP prevention bundles (e.g., head-of-bed elevation, oral care, sedation breaks) is the first step in outbreak control.

\* Preemptive antibiotics (B) are not recommended due to antibiotic resistance risks.

\* Negative pressure rooms (C) are not required for VAP.

\* Ventilator circuit cultures (D) do not guide patient management.

CBIC Infection Control References:

\* APIC Text, "VAP Prevention Measures," Chapter 11.

## NEW QUESTION # 23

What is the MOST effective way an infection preventionist can assess readiness of emergency preparedness plans for an influx of patients with an emerging viral hemorrhagic fever?

- A. Conduct regular rounding in the Emergency Department providing education and reviewing policies and procedures with frontline staff
- B. Meet frequently with emergency management professionals in the hospital and local public health authority.
- C. Coordinate with hospital-based emergency management professionals and other incident command stakeholders to conduct a tabletop exercise or full-scale drill.
- D. Collaborate with hospital stakeholders to assess the current availability of backup supplies of both staff and personal protective equipment

**Answer: C**

Explanation:

The most effective way to assess emergency preparedness for an influx of patients with viral hemorrhagic fever (VHF) is through tabletop exercises or full-scale drills. These exercises simulate real-life scenarios, allowing hospitals to test protocols, identify weaknesses, and improve response efforts.

Why the Other Options Are Incorrect?

\* A. Meet frequently with emergency management professionals - While important, meetings alone do not provide hands-on testing of preparedness.

\* B. Conduct regular rounding in the Emergency Department - Rounding helps with policy compliance, but does not test the entire emergency response plan.

\* D. Collaborate to assess the availability of supplies and PPE - This is one component of preparedness but does not evaluate the

facility's response in real-time.

CBIC Infection Control Reference

APIC recommends full-scale emergency drills as the gold standard for assessing preparedness for emerging infectious diseases.

#### NEW QUESTION # 24

An infection preventionist is calculating measures of central tendency regarding duration of a surgical procedure using this data set: 2, 2, 3, 4, and 9. Which of the following statements is correct?

- A. The median is 2.
- B. The mean is 4.
- C. The standard deviation is 7.
- D. The mode is 3.

**Answer: B**

Explanation:

Measures of central tendency (mean, median, mode) and dispersion (standard deviation) are statistical tools used to summarize data, such as the duration of surgical procedures, which can help infection preventionists identify trends or risks for surgical site infections. The Certification Board of Infection Control and Epidemiology (CBIC) supports the use of data analysis in the "Surveillance and Epidemiologic Investigation" domain, aligning with epidemiological principles outlined by the Centers for Disease Control and Prevention (CDC). The question provides a data set of 2, 2, 3, 4, and 9, and requires determining the correct statement by calculating these measures.

\* Mean: The mean is the average of the data set, calculated by summing all values and dividing by the number of observations. For the data set 2, 2, 3, 4, and 9:  $(2 + 2 + 3 + 4 + 9) \div 5 = 20 \div 5 = 4$ . Thus, the mean is 4, making Option C correct.

\* Median: The median is the middle value when the data set is ordered. With five values (2, 2, 3, 4, 9), the middle value is the third number, which is 3. Option A states the median is 2, which is incorrect.

\* Mode: The mode is the most frequently occurring value. In this data set, 2 appears twice, while 3, 4, and 9 appear once each, making 2 the mode. Option B states the mode is 3, which is incorrect.

\* Standard Deviation: The standard deviation measures the spread of data around the mean. For a small data set like this, the calculation involves finding the variance (average of squared differences from the mean) and taking the square root. The mean is 4, so the deviations are:  $(2-4)^2 = 4$ ,  $(2-4)^2 = 4$ ,  $(3-4)^2 = 1$ ,  $(4-4)^2 = 0$ ,  $(9-4)^2 = 25$ . The sum of squared deviations is  $4 + 4 + 1 + 0 + 25 = 34$ . The variance is  $34 \div 5$

= 6.8, and the standard deviation is  $\sqrt{6.8} \approx 2.61$  (not 7). Option D states the standard deviation is 7, which is incorrect without further context (e.g., a population standard deviation with n-1 denominator would be  $\sqrt{34} \approx 5.83$ , still not 7).

The CBIC Practice Analysis (2022) and CDC guidelines encourage accurate statistical analysis to inform infection control decisions, such as assessing surgical duration as a risk factor for infections. Based on the calculations, the mean of 4 is the only correct statement among the options, confirming Option C as the answer. Note that the standard deviation of 7 might reflect a miscalculation or misinterpretation (e.g., using a different formula or data set), but with the given data, it does not hold.

References:

\* CBIC Practice Analysis, 2022.

\* CDC Principles of Epidemiology in Public Health Practice, 3rd Edition, 2012.

#### NEW QUESTION # 25

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