## **QUESTIONS**

- 1. What is the laboratory inspection designed to do?
- a. Make sure the laboratory is staffed accordingly.
- b. Make sure the laboratory is running profitably for the hospital.
- c. Make sure the laboratory has the appropriate instrumentation.
- d. Measure compliance with the expectations set forth by local, state and federal organizations.
- 2. Compliance is measured against expectations set forth by the FDA, CMS/CLIA, OSHA, as well as state and professional organizations.
- a. True
- b. False
- 3. Of the 8 key steps the laboratory can follow to minimize the anxiety and anticipation of an inspection, what is the first step?
- a. Incorporate quality assessment activities into the daily routine of the laboratory.
- b. Determine the laboratory requirements that apply to your laboratory, based on your selected test menu.
- c. Train and perform competency assessments on all laboratory personnel. This is an ongoing, documented process.
- d. Document and perform QC and achieve acceptable results for all tests performed.
- 4. What does incorporating quality assessment activities into the daily routine of the laboratory entail?
- a. assessing the quality throughout the testing process and taking corrective actions when needed
- b. following up on the effectiveness of corrective actions
- c. Both A and B
- d. Neither A nor B
- 5. Once an exit conference or interview has occurred with the inspector or surveyor, what's next?
- a. Nothing; the inspection is over.

## **OBJECTIVES**

Upon completion of this series. the reader will be able to:

- 1. Discuss who performs laboratory inspections and why.
- 2. Name the seven CMSapproved accreditation organizations.
- 3. Identify timeframes of inspections and explain why unannounced inspections occur.
- 4. Determine methods to prepare for a laboratory inspection.

- b. The laboratory director should share all findings with the laboratory personnel so deficiencies can be corrected and preparation can begin for follow up inspections.
- c. The laboratory director should take corrective action against the technologists if the laboratory failed inspection.
- d. The laboratory team can take a break until it's time for the next annual inspection.
- 6. Process improvement maximizes efficiency by:
- a. Reducing redundancy and rework, thus reducing operating costs.
- b. Increasing turnaround time and rework, thus increasing general healthcare costs.
- Reducing staff interdependence and ergonomics, thus reducing employee morale.
- d. Increasing waste and clean-up. thus increasing operating costs.
- 7. Which of the following is not a process that can have a dramatic impact on cost reduction?
- a. LEAN
- b. Six Sigma
- c. CQM
- d. TAT
- 8. Which of the following is not a good approach in preparing for an inspection?
- "Identifying and prioritizing constraints"
- b. "Determining sources of potential error"
- "All-hands-on-deck"
- d. "Workload leveling"
- 9. The best defense against medical malpractice claims is:
- a. Increased laboratory automation
- b. Quantitated evidence of good policies and procedures
- Standardized performance indicators
- d. Defined weighting factors
- 10. For QA automation to be effective, it must:
- a. Increase efforts across the board to establish perfection.
- b. Alter the "as-is" standards to incorporate more complicated methods.
- c. Reduce the current effort and support proactive management.
- d. Reinforce the tried methods and maintain consistency.
- 11. There are significant differences between P&Ps versus SOPs. Which of the following provides an example of these differences?
- a. P&Ps give an overview of a company's activities, while SOPs are performed strictly by the book.

- b. P&Ps give specific directions, while SOPs are more of recommended guideline.
- c. P&Ps give an overview of a laboratory professional's activities, while SOPs are performed strictly by the entire staff.
- d. P&Ps are performed strictly by the book, while SOPs give an overview of a company's activities.
- 12. Which of the following is not a benefit derived from accurate and complete SOPs?
- a. Uniformity

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- b. Reduction in errors
- c. Employee improvisation
- d. Safety controls
- 13. SOPs reduces error rates by:
- a. Allowing laboratory staff to assess and address a situation individually.
- b. Offering a guideline to be

5. (A) (B) (C) (D)

- considered across each specialty.
- c. Enforcing practice and repetition.
- d. Providing clear and specific steps in work processes.

## 14. SOPs should list out:

- a. Every conceivable outcome.
- b. All the safety precautions that the worker must take to perform his job without injuring himself.
- c. Unnecessary precautions and improper uses of safety equipment.
- d. General safety concerns in the laboratory.
- 15. Which of the following is not an example of a topic covered by SOPs?
- a. Documents control
- b. Platform control
- c. Quality control
- d. Safety

## **ANSWERS**

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15. (A) (B) (C) (D)

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