



April 23-26, 2017

AOHC DENVER

American Occupational Health Conference

Maintenance of Certification (MOC) Self-Assessment

INSTRUCTIONS

In order to be awarded ABPM MOC credit, attendees should:

- Complete this ABPM MOC self-assessment (for each session you are claiming credit for) and grade your answers using the answer key located in the back of this booklet.
- **Complete the CME/MOC Attendance Verification form provided to you in your AOHC registration packet.**
- **Be sure to list your answers on the back of the CME/MOC Attendance Verification form, otherwise MOC credit cannot be awarded!**
- Return the completed CME/MOC Attendance Verification form only to the kiosks near the AOHC registration desk. (You may also fax or mail the form to the ACOEM office). You do not need to return this booklet.
- Credit will post to your ABPM MOC profile approximately 60 days after the conference. Please contact ABPM for proof of MOC credit.
- MOC credit is applicable **ONLY** for those that are certified in occupational medicine by the American Board of Preventive Medicine (ABPM). Please do not claim credit if you are not an ABPM diplomate.

Sunday, April 23, 2017

Sunday, April 23, 2017 ~ 7:30am-11:30am

SESSION 900-A: MEDIA TRAINING.....CME/MOC: 4.0

TRUE/FALSE: The purpose of an interview is to answer a reporter's question.

TRUE/FALSE: The "news hole" is the amount of time in a newscast actually devoted to news.

TRUE/FALSE: Radio and TV news stories are in pre-determined lengths.

TRUE/FALSE: "No comment" is a smart reply to employ when you don't wish to answer a reporter's question.

TRUE/FALSE: There is no such thing as off-the-record in talking with reporters.

TRUE/FALSE: Off-the-record is a safe way to share information with reporters without attribution.

TRUE/FALSE: News stories are written in pyramid structure.

A network evening news program lasts:

- A. 15 minutes
- B. 30 minutes
- C. 60 minutes

The term for moving from a reporter's question to your message is called:

- A. Dodging
- B. Bridging
- C. Surfing

The best time to reach a radio news director is:

- A. 10 minutes before the hour
- B. On the hour
- C. 10 minutes after the hour

The most common length of a TV news story is:

- A. 30 seconds
- B. 60 seconds
- C. 90 seconds

Wearing half-frame reading glasses for TV interviews makes you look:

- A. Scholarly
- B. Smart
- C. Dorky

Sunday, April 23, 2017 ~ 9:00am-10:30am

SESSION 102: MONITORING LONGITUDINAL LUNG FUNCTION MEASUREMENTS USING SPIROLA.....CME/MOC: 1.5

TRUE/FALSE: SPIROLA analysis of lung function decline will tell the user if the rate of decline in FEV1 for one group of people is statistically significantly different than the rate of decline for another group of people.

TRUE/FALSE: OSHA often “trades off” citations for increased and improved abatement and can issue 5(a)(1) letters where it thinks a formal citation will not prevail.

TRUE/FALSE: Of the three main lung function measurements, FEV1 is the most repeatable and least variable measurement and is reduced by diseases causing obstructive or restrictive lung function impairments.

Which of the following methods is recommended by the American Thoracic Society Approaches to Detect Excessive Decline FEV₁ in individuals undergoing medical surveillance:

- A. 15% decline from baseline FEV₁ (plus expected age-related loss)
- B. Linear regression
- C. Limited of LLD
- D. All of the above

Starting from the age of _____ onward, a person’s lung function naturally declines as part of aging:

- A. 15-20 years
- B. 30-35 years
- C. 25-30 years
- D. 40-45 years

Sunday, April 23, 2017 ~ 9:00am-12:15pm

SESSION 101: INTRODUCTION TO OEM.....CME/MOC: 3.0

TRUE/FALSE: NFPA 1582 applies to all aspects of firefighting.

TRUE/FALSE: An engineer with a seizure 2 months earlier can operate a train.

TRUE/FALSE: There are similar medical standards to FMCSA for locomotive engineers beyond vision, hearing and color vision.

TRUE/FALSE: The FTA has issued medical standards for light rails and bus operator prohibiting the use of insulin.

TRUE/FALSE: The subspecialties of “general preventive medicine” include addiction medicine; medical toxicology; and undersea and hyperbaric medicine.

A person with a seizure disorder might be restricted due to:

- A. Inability to perform the essential job task
- B. Concern of future litigation
- C. Increase medical costs
- D. Risk of sudden incapacitation

ACOEM LEO Guidance:

- A. Is a legal standard
- B. Is wonderful
- C. Is a guide for physicians
- D. A and B
- E. B and C
- F. All of the above

The following must be calibrated for clinic use in surveillance examinations:

- A. Audiometers
- B. Audiometric Booths
- C. Spirometers
- D. All of the above

Agencies that have regulations concerning a ship's crew include:

- A. DOT
- B. Homeland Security
- C. OSHA
- D. All of the above

Sunday, April 23, 2017 ~ 9:00am-12:15pm

SESSION 103: OCCUPATIONAL AND PERSONAL RISK FACTORS IN ILLNESS AND INJURY: THE NIOSH COMPENDIUM PROJECT.....CME/MOC: 3.0

TRUE/FALSE: Occupational and personal risk factors can have interrelationships that are associated with adverse effects.

TRUE/FALSE: The US Drug Enforcement Administration considers both prescription-drug abuse and heroin to be growing equally as drug problems.

TRUE/FALSE: Opioid and benzodiazepine use as a personal risk factor can result in risks of adverse outcomes from using these medications, even when prescribed for medically appropriate use, while in the workplace.

A risk factor can play which of the following roles depending on the occupational context in which that factor is found:

- A. As a personal risk factor
- B. As an occupational risk factor
- C. As an outcome resulting from the effect of various risk factors
- D. All of the above

Evidence in the published literature supports a role for obesity in different occupational settings as:

- A. Personal risk factor only
- B. Occupational risk factor only
- C. Personal risk factor and an adverse health effect
- D. Occupational risk factor and an adverse health effect
- E. Occupational and personal risk factor
- F. Adverse health effect only

Evidence in the published literature supports a role for physical inactivity in different occupational settings as:

- A. Personal risk factor only
- B. Occupational risk factor only
- C. Personal risk factor and an adverse health effect
- D. Occupational risk factor and an adverse health effect
- E. Occupational and personal risk factor
- F. Adverse health effect only

Which of the following is true regarding the search strategy of the NIOSH Compendium Project:

- A. The overall goal of the search strategy is to evaluate the scientific evidence for potential interrelationships among personal and occupational risk factors and adverse health effects or outcomes
- B. The approach, while qualitative, is evidence-based, and focuses on evaluating single risk factors at a time
- C. Both A and B

D. Neither A nor B

In the models presented, prescription drug refers to:

- A. Opioids only
- B. Benzodiazepines only
- C. Antiretroviral medications
- D. Proton pump inhibitors
- E. Opioids and/or benzodiazepines

Which of the following have been shown to be inter-related to health disparities due to ethnicity:

- A. Genetics
- B. Culture
- C. Lifestyle
- D. Diet
- E. All of the above
- F. A, C and D only

Sunday, April 23, 2017 ~ 9:00am-12:15pm

SESSION 104: RESEARCH LABORATORY BIOHAZARD EXPOSURE MANAGEMENT.....CME/MOC: 3.0

TRUE/FALSE: A macaque colony can be considered free of B Virus if no animals test positive in a calendar year.

The medical surveillance strategy most often used for Herpes B virus can be described as follows:

- A. P replacement assessment
- B. Periodic biomonitoring
- C. Annual testing
- D. Post event testing

For lentiviral vector 3rd generation exposures, which drug or drugs are considered by those who offer post exposure prophylaxis first choice options:

- A. Isentress (raltegravir)
- B. Imtricitabine
- C. Tenofovir
- D. Both A and C
- E. A, B, and C

Which component of a research occupational surveillance program is least important:

- A. Current immune deficiency
- B. History of asthma
- C. History of seizure disorder
- D. History of irritable bowel syndrome

Non-vector transmission of Zika virus infection can occur in all of the following except:

- A. Mother-fetus
- B. Sexual
- C. Blood transmission
- D. Stool exposure
- E. Lab exposure

Optimal acute exposure management of macaque secretions requires all of the following except:

- A. Immediate extensive wound cleansing (or extended flushing for mucosal splashes)

- B. Knowledge of the source animal's B Virus test results
- C. Prompt consideration of B Virus post-exposure prophylaxis
- D. Appropriate treatment for bacterial pathogens including "bite bacteria" and tetanus if indicated
- E. Counseling patients on signs and symptoms of B Virus infection

Which of the following medical conditions increase the risk of poxvirus complications and contra-indicate vaccinia vaccination:

- A. Atopic dermatitis
- B. Immunosuppression for organ transplant
- C. Pregnancy
- D. All of the above
- E. None of the above

Factors increasing exposure risk to Herpes B virus include:

- A. Ill or immunocompromised macaque
- B. Exposure is to primate nervous tissue of CSF
- C. Wounds, especially bites, to the head and neck
- D. A and C
- E. All of the above

Risk factors for the development of the chronic form of Q fever include all of the following except:

- A. Pre-existing cardiac valvular disease
- B. Infection during pregnancy
- C. Age <30 years
- D. Immunosuppression

Sunday, April 23, 2017 ~ 10:45am-12:15pm

SESSION 105: OCCUPATIONAL SPIROMETRY HIGHLIGHTS: PITFALLS AND INTERPRETATION.....CME/MOC: 1.5

TRUE/FALSE: Real-time graphs of volume vs. time and flow vs. volume are extremely helpful in obtaining accurate spirometry test results.

TRUE/FALSE: The American Thoracic Society (ATS) requires a maximum of 3 forced expirations for the measurement of Forced Vital Capacity (FVC) and Forced Expiratory Volume in one second (FEV1).

TRUE/FALSE: The predicated value is the average level of lung function that is expected for a subject based on his age, height, sex, and race.

TRUE/FALSE: Since spirometer calibration check results support the accuracy of the spirometry test recorded on the same day as the check, it is prudent to save calibration checks as long as subject tests are saved.

TRUE/FALSE: The reference values generated from the 3rd National Health and Nutrition Examination Survey (NHANES III) have been recommended by the American Thoracic Society and by OSHA for use in the US.

Sunday, April 23, 2017 ~ 12:15pm-4:15pm

SESSION 900-B: MEDIA TRAINING.....CME/MOC: 4.0

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Wearing half-frame reading glasses for TV interviews makes you look:

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Sunday, April 23, 2017 ~ 1:30pm-2:30pm

SESSION 106: OCCUPATIONAL DERMATOSES: WHAT THE PRACTICING OCC DOC NEEDS TO KNOW.....CME/MOC:

1.0

TRUE/FALSE: Irritant contact dermatitis is more common than allergic contact dermatitis.

What is the most commonly involved body part in occupational contact dermatitis:

- A. Feet
- B. Trunk
- C. Scalp
- D. Face
- E. Hands

Common occupational irritants include the following:

- A. Gloves
- B. Soaps and cleaners
- C. Solvents
- D. Water
- E. All of the above

Sunday, April 23, 2017 ~ 1:30pm-2:30pm

SESSION 107: CUTTING-EDGE SUSTAINABILITY MODELS FOR HEALTH CARE EMPLOYERS: DELIVERING WELL-BEING TO PATIENTS, EMPLOYEES, AND THE COMMUNITY.....CME/MOC: 1.0

TRUE/FALSE: Human well-being cannot be measured.

Healthcare workers:

- A. Experience fewer workplace injuries than workers in manufacturing or construction
- B. With higher levels of wellbeing are more productive and less likely to be absent from work
- C. Do not benefit from workplace safety or wellness programs

What are handprints:

- A. Another way of determining negative impacts of human activity, but are less bad than footprints
- B. Reflect positive social, environmental and economic impacts of human activity
- C. Are good for advertising, but cannot be quantified in any meaningful way

Sunday, April 23, 2017 ~ 1:30pm-2:30pm

SESSION 108: PROTECTING HEALTH CARE WORKERS IN HOSPITALS: THE PRO PPE SENTINEL SURVEILLANCE SYSTEM FOR CONTAGIOUS PATHOGENS.....CME/MOC: 1.0

Hospital departments responsible for implementing PPE programs include:

- A. Occupational/employee health
- B. Environmental safety
- C. Infection prevention
- D. Emergency preparedness
- E. Purchasing/supply chain
- F. Administration/finance
- G. All of the above

PRO stands for:

- A. Prevention, responsibility, observation
- B. Protection, respirators, outpatient
- C. Preparedness, responsiveness, outcomes
- D. Prevent, report, obtain

Participating hospitals have reported that PRO helps them:

- A. Benchmark against other hospitals
- B. Predict PPE demands during routine and emergency situations
- C. Better coordinate activities among stakeholders internally
- D. All of the above

Sunday, April 23, 2017 ~ 1:30pm-2:30pm

SESSION 109: CLUSTER BUSTERS: THE APPROACH TO CANCER CLUSTERS AND THE LIMITATIONS OF ENVIRONMENTAL EPIDEMIOLOGY.....CME/MOC: 1.0

TRUE/FALSE: Most cluster investigations will be successful in identifying an environmental cause if the recommended approaches are followed.

TRUE/FALSE: The prevalence of cancer in the US is increasing.

Cancer cluster investigation may be warranted if:

- A. It is a rare cancer
- B. It is a single type of cancer
- C. It involves an unusual age group
- D. All are true

Sunday, April 23, 2017 ~ 2:45pm-3:45pm

SESSION 110: BECOMING AND MAINTAINING BOARD CERTIFICATION IN OEM.....CME/MOC: 1.0

In order to maintain certification by the ABPM, a diplomate must:

- A. Have a valid unrestricted license to practice medicine in each US or Canadian jurisdiction in which he or she holds a license
- B. Complete a life-long learning and self-assessment continuing medical education
- C. Pass a written examination
- D. Complete practice performance assessments and quality improvement activities
- E. All of the above

Maintenance of Certification (MOC):

- A. Is the process for assessment of continuing competencies of physicians and recertification in all specialties recognized by the ABMS
- B. Is the same thing as keeping your state medical license current
- C. Is optional for board certified physicians who do not practice clinical medicine
- D. Does not need to be completed prior to the diplomate's certificate expiration date as long as the diplomate has initiated the process

MOC Part IV:

- A. Consists of two or more cycles of practice assessment, identification/implementation of a quality improvement plan, a targeted practice re-assessment
- B. Must be completed after completion of MOC Parts I, II, and III
- C. Requires an activity every five years in a ten year certification cycle for diplomates
- D. Is optional for board certified physicians who do not practice clinical medicine

Sunday, April 23, 2017 ~ 2:45pm-3:45pm

SESSION 111: APPLICATION OF ADVANCED NEUROSCIENCE THEORIES TO THE TREATMENT OF WORKERS WITH PAINFUL MUSCULOSKELETAL CONDITIONS.....CME/MOC: 1.0

TRUE/FALSE: Carpal tunnel injection only provides short term relief.

In population studies, surgery for carpal tunnel syndrome:

- A. Occurs at a younger average age when it is work-related

- B. Occurs at an older average age when it is work-related
- C. Occurs at the same age whether it is work-related or not

Functional restoration (multidisciplinary rehabilitation) for chronic upper extremity pain:

- A. Improves return-to-work
- B. Cures the pain
- C. Improves return-to-work and cures the pain

Sunday, April 23, 2017 ~ 2:45pm-3:45pm

SESSION 112: USING CUTTING-EDGE INFORMATICS TOOLS TO ENHANCE OCCUPATIONAL HEALTH SERVICES IN ACADEMIC MEDICAL CENTERS.....CME/MOC: 1.0

Fast Healthcare Interoperability Resource (FHIR) new interoperability standard introduced by health level VII (HL7) utilizes which web standard for interoperability and connectivity:

- A. Web links
- B. Webpages
- C. API (application programming interface)
- D. Internet connectivity

Data warehouses store information gleaned from electronic health records and other databases to be used for:

- A. Reporting
- B. Data analysis
- C. Decision support
- D. Deep data mining, analytics
- E. All of the above

A few of the EMR's currently being used in the VA healthcare system are:

- A. VistA/CPRS
- B. CAPRI
- C. OHRS
- D. JLV
- E. All of the above

Sunday, April 23, 2017 ~ 2:45pm-3:45pm

SESSION 113: PREGNANT WORKER: CURRENT CHALLENGES AND CURRENT CONCEPTS.....CME/MOC: 1.0

TRUE/FALSE: Pregnancy Discrimination Act (PDA) of 1978 prohibits discrimination based on pregnancy, childbirth or related medical conditions.

Pregnant fliers are allowed up to how many weeks for single pregnancies in may US and international airlines:

- A. 32 weeks
- B. 40 weeks
- C. 36 weeks

Every October, Working Mother magazine publishes a list of the best 100 companies for working mothers. The following are some benefits offered by most companies on the list except:

- A. Flextime
- B. Nurse home visits
- C. Fully paid maternity leave

Sunday, April 23, 2017 ~ 2:45pm-3:45pm

SESSION 114: JOURNAL CLUB FOR THE PRACTICING OEM PHYSICIAN.....CME/MOC: 1.0

TRUE/FALSE: The standardized mortality ratio is based on incidence data.

TRUE/FALSE: The healthy worker effect lasts 5 years.

Which statement is true about the external validity of an epidemiological research study:

- A. It is the extent to which study population is representative of population it is to represent
- B. It is the extent to which study results and conclusions are applicable or generalizable to general population
- C. Can be affected by methods used to select study subjects from a larger population
- D. All of the above

Sunday, April 23, 2017 ~ 6:00pm-7:30pm

SESSION 100: OPENING SESSION: INDUCTION OF NEW FELLOWS AND C. O. SAPPINGTON LECTURE.....CME/MOC: 1.0

TRUE/FALSE: The C. O. Sappington lecture was established in 1949 after the sudden passing of Dr. Sappington and was created in recognition of his many significant contributions to occupational medicine.

TRUE/FALSE: Ronald R. Loeppke, MD, MPH, FACOEM, with US Preventive Medicine Inc., delivered this year's Sappington lecture on, "Leveraging the Power of Prevention in the Global Quest for Better Health and Safety."

TRUE/FALSE: The status of Fellow is the highest classification of membership in ACOEM.

Monday, April 24, 2017

Monday, April 24, 2017 ~ 7:00am-8:00am

SESSION 200: WHAT CONSTITUTES EXCELLENCE: THE BEST CORPORATE HEALTH AND SAFETY PROGRAMS IN AMERICA.....CME/MOC: 1.0

TRUE/FALSE: In the CHAA process it is important for organizations to have developed metrics for its programs and provide trend data showing a reduction of health risk, health-cost savings, and other impact on the business.

TRUE/FALSE: The revised self-assessment tool can be used by companies to both provide an education opportunity as well as feedback for the direction an organization might take for improvement or to apply for the Corporate Health Achievement Award.

TRUE/FALSE: CHAA award recipients have been demonstrated to have a strong financial performance when compared to non-CHAA recipients.

Monday, April 24, 2017 ~ 7:00am-8:00am

SESSION 201: OPPORTUNITIES FOR INTEGRATING HEALTH AND PROTECTION AND HEALTH PROMOTION.....CME/MOC: 1.0

Which of the following best matches NIOSH's definition of Total Worker Health:

- A. Holistic approaches to wellbeing
- B. Integration of health protection and health promotion
- C. Integrated organizational approaches to occupational health
- D. Addressing physical and psychological wellbeing

Select from the following the reason(s) of concern for obesity and poor sleep in the oil and gas industry:

- A. Safety
- B. Personal health and productivity
- C. Fitness-for-duty
- D. All of the above

Which of the following is not a key component for successfully integrating sleep health and weight management programs:

- A. Communicating ROI as the core of the business case
- B. Leadership engagement and support
- C. Supportive workplace policies and environment
- D. Data-based programming

Monday, April 24, 2017 ~ 7:00am-8:00am

SESSION 202: BECOMING AN ACOEM FELLOW.....CME/MOC: 1.0

Which of the following requirements must be met in order to qualify for fellowship:

- A. Member in good standing in ACOEM for at least three years and have obtained board certification prior to the next AOHC
- B. Has an active, unrestricted license to practice medicine

- C. Has two recommendation letters, one being from a current ACOEM fellow
- D. Completed a fellowship application
- E. Contributed to ACOEM, components, or within the field of occupational and environmental medicine
- F. All of the above

TRUE/FALSE: An ACOEM member is eligible to apply for fellowship when he/she has held membership in the College as a master or active member for a period of no fewer than three years.

TRUE/FALSE: The deadline for submitting a fellowship application is November 1st.

Monday, April 24, 2017 ~ 7:00am-8:00am

SESSION 203: THE INDEPENDENT MEDICAL EXAMINATION.....CME/MOC: 1.0

One of the most basic forms of IMEs, and a recommended exam for beginners to start with is:

- A. The Long Term Disability Policy Assessment
- B. The Comprehensive Examination (CE) within the Social Security Disability System
- C. A workers compensation impairment rating determination
- D. A personal injury causation analysis

An informed consent document is important in the IME context because:

- A. All professional liability insurance carriers require them
- B. It insures that the IME doctor will not be sued
- C. There is no doctor-patient relationship and the roles of the examiner and examinee must be clearly defined and agreed upon
- D. The American Health Care Act will include within its section on workers compensation care that IMEs can only be done by doctors approved by presidential executive order

A “temporary aggravation” is:

- A. A permanent worsening of an underlying condition
- B. A simple recurrence of a previously active medical problem
- C. An injury that causes a pre-existing condition to “light up”
- D. Not correct medical terminology, but appears in some state workers compensation statutes, and has the same meaning as “exacerbation”

Monday, April 24, 2017 ~ 7:00am-8:00am

SESSION 204: ACOEM LEGISLATIVE AND GOVERNMENT AFFAIRS UPDATE: RECENT WINS AND ONGOING CHALLENGES FOR THE PUBLIC AFFAIRS COUNCIL.....CME/MOC: 1.0

TRUE/FALSE: Because purely environmental regulations frequently require non-clinical expertise, ACOEM does not view advocacy about EPA regulations as part of its overall mission.

Which of the following is not a role of ACOEM’s Public Affairs Council:

- A. Track federal legislation and regulations related to Occupational and Environmental Medicine.
- B. Assist Components with state-related advocacy issues, especially where issues of national importance are involved.
- C. Advocate for specific candidates for elective office.

In the past 8 years, all of the following topics have been the subject of ACOEM advocacy, except:

- A. National health care reform as related to the practice of Occupational Medicine
- B. Procedures to evaluate the fitness-for-duty of workers in safety-sensitive positions

- C. Stability of funding for graduate medical education in OEM.
- D. Optimal Utilization Review procedures for clinical care under Workers' Compensation.
- E. Improved OSHA standards, both for federal OSHA and in "state plan" states.

Monday, April 24, 2017 ~ 7:00am-8:00am

SESSION 205: RESTORING FUNCTION AND RETURN-TO-WORK AFTER SPINAL CORD INJURY: PEAK STRATEGIES.....CME/MOC: 1.0

Activity-based therapy is:

- A. Therapy that is completed only at home
- B. Provided by all rehabilitation hospitals
- C. Therapy that focuses on activating the nervous system both above and beyond the level of a nervous system injury
- D. Only provided to individuals who are already walking

The following are common secondary health complications seen after neurologic insult:

- A. Increased risk of death from cardiovascular disease
- B. Hyperinsulinemia
- C. Increased body fat percentage
- D. All of the above

Community wellness centers serving individuals with neurologic insult are focused on the following goals:

- A. Decreasing the risk of cardiovascular death
- B. Decreasing secondary complications associated with immobility (skin breakdown, respiratory complications)
- C. Maintaining strength throughout the aging process to maintain maximum level of independence and quality of life
- D. All of the above

Monday, April 24, 2017 ~ 8:00am-12:00pm

SESSION 901: ADVOCACY TRAINING.....CME/MOC: 4.0

TRUE/FALSE: Numbers always win the day in advocacy, so a thousand postcards is better than 100 letters from constituents.

TRUE/FALSE: Letters and personal visits will have more lasting impact if accompanied by a handout or background paper.

TRUE/FALSE: Members of Congress are busy year-round, so it's better to wait till you have a big issue pending before trying to get any face-to-face time on their schedule.

TRUE/FALSE: Members of Congress are well-briefed on the legislation before them so in a personal visit you can assume they already have a good grasp of your issue.

TRUE/FALSE: Not having the answer to every question during an advocacy visit is an opportunity to follow up with a note and attached information.

TRUE/FALSE: If you can't schedule a face-to-face meeting with your member of Congress, it's best to skip wasting your time with a staff aide.

TRUE/FALSE: If you are unable to see your member of Congress in Washington, a good option is wait till he/she is back in his/her district office and meet there.

TRUE/FALSE: Having a personal/patient story ready to back up your organization's position is a compelling way to sell your issue.

TRUE/FALSE: A good way to develop a relationship is to bring along a donation check on your visit.

TRUE/FALSE: It is illegal for a member of Congress to solicit campaign contributions in his/her office.

In determining which arguments to sue in advocating a position, you should put the most weight on the ones:

- A. With the most financial impact
- B. You personally find most compelling
- C. Most likely to address the listener's reservations

If the member of Congress agrees with your position, you can:

- A. Skip meeting with him/her
- B. Meet to ask how you can help he/she advance legislation
- C. Meet to go over your position to be sure he/she understands it

Monday, April 24, 2017 ~ 8:30am-10:00am

SESSION 206: OEM AND HUMAN FACTORS: COLLABORATIVE EFFORTS AND UPDATE.....CME/MOC: 1.5

TRUE/FALSE: From a macroergonomics perspective, human performance (or injury) is best understood as the result of humans performing an activity in a context.

TRUE/FALSE: Proper equipment and training alone will eliminate workplace injuries.

TRUE/FALSE: It is possible to quantitatively assess risk due to job exposure using biomechanical assessment.

TRUE/FALSE: The extent of low back impairment can be quantified via a kinematic signature.

To become a certified professional ergonomist (CPE) the following is adequate:

- A. A graduate degree from an HFES accredited human factors/ergonomics graduate program
- B. Minimum three years (full time equivalent) human factors/ergonomics work experience
- C. Passing score on the 3-hour professional certification exam
- D. A and C
- E. All of the above

Monday, April 24, 2017 ~ 8:30am-10:00am

SESSION 207: WHAT YOU CAN DO WITH THE COHE MODEL: IMPLICATIONS FOR ACTION.....CME/MOC: 1.5

COHE stands for:

- A. Community-Originated Health Experiment
- B. Community Organization for Health Enhancement
- C. Centers for Occupational Health and Education
- D. Centers for Occupational Health and Excellence

Which one of the following is not an organizational/operational feature of the COHE program:

- A. COHEs must be part of a healthcare delivery organization
- B. Each COHE recruits community physicians who agree to join the COHE, be trained, and support its program

- C. COHEs have access to the payer's claim system so are able to constantly monitor the status of claims
- D. Each COHE has a medical director with occupational medicine expertise, as well as a group of specialists who serve as advisors
- E. COHEs can bill L&I (the claims payer) for the time and travel expenses they incur when recruiting new COHE providers

Which one of the following is not one of the original four best practices that COHE clinicians are expected to perform – and code/bill for:

- A. Submission of doctor's first report of injury within 48 hours of the initial visit for an injury
- B. Telephone calls/care coordination communication with healthcare service coordinators and employers
- C. Completion of an activity prescription (and delivery of key messages to patients) at each clinical visit
- D. Referral for a facilitated solution-finding meeting at the worksite after 30 days of work disability
- E. Formal assessment of risks of delayed recovery after 30 days of work disability

Research has confirmed that COHE program has improved outcomes in which of the following areas:

- A. The percentage of cases with rejected claims, appeals, and litigation
- B. Average number of lost work days per case
- C. The percentage of injured workers still out of work at 12 months
- D. Total cost per case (including medical costs, wage replacement, and pension awards)
- E. All of the above

Which one of the following is not currently being piloted as an enhancement to the COHE program:

- A. Screening of patients for increased risk of prolonged work disability
- B. For patients identified as at risk, referral to a psychologist for CBT
- C. For patients identifies as at risk, referral to the PGAP program
- D. For patients identified as at risk, delivery of standardized brief interventions by the treating physician

Monday, April 24, 2017 ~ 8:30am-10:00am

SESSION 208: MRO CONTROVERSIES.....CME/MOC: 1.5

TRUE/FALSE: In the past decade there has been both an increase in opioid sales and in opioid overdoses and there appears to be an opioid epidemic.

If semisynthetic opioids are tested for in DOT urine drug test panels which of the following is likely to be true:

- A. MROs will be reporting an increased number of tests that are negative with safety concerns
- B. Non regulated testing will increasingly include semisynthetic opioids
- C. Non regulated testing will increasingly include synthetic opioids
- D. A and B are likely to be true
- E. A is likely to be true
- F. All are likely to be true

The number of overall positive drug screens for marijuana has _____ since the passage of the Washington Initiative 502 in 2012:

- A. Increased
- B. Decreased
- C. Stayed the same

The percentage of positive drug screens for marijuana in regulated industries has _____ since the passage of the Washington Initiative 502 in 2012:

- A. Increased
- B. Decreased
- C. Stayed the same

The percentage of positive drug screens for marijuana in non-regulated industries has _____ since the passage of the Washington Initiative 502 in 2012:

- A. Increased
- B. Decreased
- C. Stayed the same

Monday, April 24, 2017 ~ 8:30am-10:00am

SESSION 209: WHAT WE CAN LEARN ABOUT BACK PAIN AND WORK USING POPULATION-BASED DATA FROM THE NHISCME/MOC: 1.5

What was the estimated prevalence of any low back pain in the past 3 months among U.S. workers in 2015:

- A. 1.2%
- B. 8.3%
- C. 16.7%
- D. 26.8%
- E. 42.5%

What was the estimated prevalence of frequent and severe low back pain in the past 3 months among U.S. workers in 2015:

- A. 1.2%
- B. 8.3%
- C. 16.7%
- D. 26.8%
- E. 42.5%

Nationally representative data on the prevalence of which of the following workplace physical/ergonomic risk factors were collected through the 2015 Occupational Health Supplement to the NHIS:

- A. Frequent standing/walking
- B. Frequent repetitive exertion
- C. Whole body vibration
- D. A and B
- E. A, B, and C

Nationally representative data on the prevalence of which of the following psychosocial risk factors were collected through the 2015 Occupational Health Supplement to the NHIS:

- A. Hostile work environment
- B. Job insecurity
- C. Work-life interference
- D. Lack of supervisory support
- E. High job demands (not enough time to get things done)
- F. Low job control (decision latitude)
- G. All of the above

Which of the following occupational risk factors was most strongly associated with low back pain among workers in both logistic regression and tree analysis:

- A. Physical exertion
- B. Sedentary work
- C. Hostile work environment
- D. High job demands
- E. Low job control

Monday, April 24, 2017 ~ 8:30am-12:00pm

SESSION 210: RESIDENT RESEARCH ABSTRACT PRESENTATIONS.....CME/MOC: 3.0

TRUE/FALSE: Female industrial workers are more likely to be prescribed opioid medication than males.

TRUE/FALSE: Research capacity and mentoring remain strong in US occupational medicine residencies.

TRUE/FALSE: Based on the results of the analysis presented, one can conclude that the poultry processing industry poses the highest risk, related to other industries, for occupational finger amputation.

An increase in which of the following pre-exertion variables is associated with increased odds of reaching maximal permissible heart rate (MPHR) during a toxic entry in PCAPP munitions disposal workers:

- A. Age
- B. Resting heart rate
- C. Body temperature
- D. All of the above

The physiological Strain Index is composed of which of the following indicators:

- A. Skin temperature and heart rate
- B. Core (rectal) temperature and skin temperature
- C. Heart rate and core (rectal) temperature
- D. None of the above

In the study that was presented on the "Use of Military Occupational Codes to Estimate Inhalational Exposures in Military Deployers," which of the four major Marine MOS groups had the highest risk for exposure to burn pit smoke and desert dust storms:

- A. Combat
- B. Aviation
- C. Logistics
- D. Administration

The most common perpetrators of violence against healthcare personnel are:

- A. Patients
- B. Domestic partners
- C. Co-workers
- D. Former employees

Which of the following is not a common component of crude oil:

- A. Benzene
- B. Ethylbenzene
- C. Toluene
- D. Isoamyl acetate

Compared to the general US population, prevalence of undiagnosed diabetes mellitus among this commercial motor vehicle driver sample is:

- A. Lower, difference less than 1%
- B. Higher, difference less than 1%
- C. Lower, difference greater than 1%
- D. Higher, difference greater than 1%

Monday, April 24, 2017 ~ 8:30am-12:00pm

SESSION 211: OSHA/NIOSH INVESTIGATIONS: EXPLORING NEWLY EMERGING AND PERSISTENT OCCUPATIONAL SCOURGES.....CME/MOC: 3.0

TRUE/FALSE: There is currently no OEL for THC.

TRUE/FALSE: Benzalkonium chloride, a quaternary ammonium compound found in many cleaning products, soaps, and other products, is a skin irritant but not a sensitizer.

TRUE/FALSE: Current dosimeters accurately measure total noise exposure of impact noise.

Butane is commonly used in cannabis industry to:

- A. Fuel heat lamps
- B. Extract THC
- C. Fuel torches to burn unwanted product
- D. Remove endotoxins

What is the OEL for endotoxin exposure set by the Dutch Expert Committee on Occupational Safety:

- A. 60 EU/m³
- B. 70 EU/m³
- C. 80 EU/m³
- D. 90 EU/m³

The most common causes of allergic contact dermatitis in health care workers include:

- A. Latex
- B. Nickel
- C. Glutaraldehyde
- D. Benzalkonium chloride
- E. All of the above

When classifying the toxicity of a chemical (ie: for a safety data sheet), OSHA's Hazard Communication Standard requires the following:

- A. The chemical must be tested
- B. All available information bearing on classification must be considered
- C. Because animal testing is in a more controlled setting, animal testing has precedence over human data
- D. Hazard classification should involve an estimation of risk

As shown with NIOSH's hammer forge example, workers exposed to impact noise may show hearing loss due to a significant threshold shift due to impact noise:

- A. After about 1 year of work
- B. After about 5 years of work
- C. After about 15 years of work
- D. After about 20 years of work

What type of hearing protection should hammer operators wear:

- A. Ear plugs
- B. Ear muffs
- C. Dual (ear plugs and ear muffs)
- D. None needed

Monday, April 24, 2017 ~ 10:30am-12:00pm

SESSION 212: INTERDISCIPLINARY APPROACHES TO ADDRESSING THE INTERNATIONAL EPIDEMIC OF CHRONIC KIDNEY DISEASE OF UNKNOWN ORIGIN (CKDU) IN AGRICULTURAL WORKERS.....CME/MOC: 1.5

TRUE/FALSE: The prevailing hypothesis is that repeated dehydration and heat stress cause CKDu.

TRUE/FALSE: By providing workers with short rest periods in shaded areas and with hydration, CKDu is eliminated.

Sugar cane workers are at increased risk for developing chronic kidney disease of unknown cause (CKDu). Which of the following statements about this condition is most correct:

- A. The condition is a protein wasting glomerular nephritis
- B. CKDu has recently been shown to be caused by hypertension in stressed workers
- C. The disease can progress to end stage renal failure requiring dialysis or transplantation
- D. Symptoms include rash, fever, and arthritis

Recent research at the University of Colorado in Guatemala examines environmental and personal health risk factors that may contribute to CKDu. Based on studies of workers conducted at the start and end of the sugar cane cutting season, which of the following risk factors are associated with decline in kidney function:

- A. Tobacco use
- B. Non-steroidal anti-inflammatory medication (NSAID) use
- C. Less water consumption during the work day
- D. All of the above
- E. None of the above

Occupational health professionals can address the epidemic of CKDu by:

- A. Assisting corporations in conducting workplace screenings for kidney disease
- B. Help businesses incorporate worker health and safety protections into their sustainability program objectives
- C. Conduct research to identify causes, preventive strategies, and early diagnostic tests
- D. All of the above
- E. A and C

Monday, April 24, 2017 ~ 10:30am-12:00pm

SESSION 213: RESPONSIBILITIES OF THE OCCUPATIONAL AND ENVIRONMENTAL MEDICINE PHYSICIAN IN THE TREATMENT AND PREVENTION OF CLIMATE CHANGE RELATED HEALTH PROBLEMS.....CME/MOC: 1.5

TRUE/FASLE: Climate change is causing more episodes of extreme heat and exacerbating increased concentration of outdoor air pollutants such as ground level ozone.

Which health effect attributed to climate change is most likely to be a management problem in the short term:

- A. Heat stress and outdoor work, such as construction work
- B. Malaria in newly-endemic locations, such as foreign oilfields
- C. Reduced fitness in the workforce due to drought and malnutrition
- D. Unemployment and job loss, especially in agriculture
- E. Acute mortality during air pollution episodes
- F. Climate-related disaster affecting workplaces

Which management option is least likely to be successful for the occupational physician concerned about managing climate-related health threats:

- A. Prepare for emergency management

- B. Identify potential for threats at a particular workplace and prepare for them without identifying preparation as a climate change-related initiative
- C. Make a presentation to senior managers of an employer laying out your concerns in detail and presenting scientific evidence
- D. Advocate for including occupational health in the corporate sustainability policy
- E. Follow the issue closely, be aware of best practices, review NIOSH recommendations, and have responses planned for when the opportunity arises
- F. Prepare a protocol for management of heat stress with a designated cooling room and hydration stations, and if the employer does significant outside work.

Identify the challenge(s) to occupational health professionals presented by climate change issues:

- A. Obvious effects, such as heat stress
- B. Emergency management capability within occupational health service
- C. Skepticism and denial among clients, senior managers, and employers; dealing with refusal to prepare or adapt
- D. Credibility of physician in offering opinion; pushback against initiatives or opinion
- E. Discretion in communications; employers may be aware but unprepared to be first mover in their competitive sector
- F. Incorporating occupational health into corporate sustainability policies
- G. All of the above

Climate change influences the pattern of vectorborne disease in which of the following ways:

- A. Affecting the development, survival and reproduction of disease pathogens and their hosts
- B. Changing the geographic distribution of potential vectors
- C. Altering the pathogen and vector interaction with human beings
- D. All of the above

Monday, April 24, 2017 ~ 10:30am-12:00pm

SESSION 214: SIT VERSUS STAND: OPTIMAL COMBINATIONS FOR MANAGING LOW BACK PAIN.....CME/MOC: 1.5

TRUE/FALSE: A majority of epidemiological studies examining low back symptoms among users of sit-stand computer workstations have adequate statistical power due to sample sizes of greater than N=100 participants.

TRUE/FALSE: An important strength of the epidemiological literature of sit-stand computer workstations is the double-blinding of participants and investigators regarding workstation intervention status.

TRUE/FALSE: A relative strength of laboratory-based studies of sit-stand workstations is the ability to minimize the effects of confounding variables on observed outcomes.

TRUE/FALSE: Standing all day is a viable solution to reduce musculoskeletal disorders caused by sitting.

TRUE/FALSE: Once a worker develops pain, changing to a new posture will alleviate the pain.

Monday, April 24, 2017 ~ 10:30am-3:00pm

SESSION 215: WHAT PHYSICIANS NEED TO KNOW ABOUT HEALTH CARE ERGONOMICS: SAFE PATIENT HANDLING AND BEYOND.....CME/MOC: 3.0

TRUE/FALSE: The Vanderbilt Occupational Health Clinic's ergonomics program uses these steps to troubleshoot and reduce workplace injury risk: risk identification; assemble stakeholders; obtain departmental ownership; performing assessment; recommending changes; prioritizing changes; implementing changes; monitor results.

TRUE/FALSE: State laws mandating safe patient handling policies and procedures are currently in effect in 11 states.

TRUE/FALSE: The payback period for ceiling lifts is typically less than 5 years.

Benefits to the patient from properly used of safe patient handling equipment include:

- A. Reduction in fall risk
- B. Reduction in skin shear
- C. Improved patient experience/dignity
- D. All of the above

Which of the following is not one of the steps of NIOSH's Elements of Ergonomics Program:

- A. Looking for signs of work-related musculoskeletal problems
- B. Reactive ergonomics
- C. Training-building in house expertise
- D. Gathering and examining evidence of WMDs

Custodian's work typically involves:

- A. Repetitive activities
- B. Heavy lifting or force
- C. Awkward postures
- D. All of the above

Essential for safer use of the vacuum backpack is:

- A. Weight distribution of the backpack over the hips
- B. Positioning the backpack to ensure it covers the tailbone
- C. Knotting the electrical cord to prevent tripping hazard
- D. Emptying the canister only after it is full

Lessons learned or confirmed from this project include:

- A. Hands-on performance of new training behaviors/tools was essential
- B. One size fits all is the best ergonomic approach for tools used by the custodians
- C. There are many readily available ergonomic tools for custodians' use
- D. Training is not necessary if you explain why a new tool is safer than the old one

According to the American Nurse Association survey, the most common reason for unanticipated departure from the nursing profession is:

- A. Conflict with supervisors
- B. Excessive fatigue from rotating shifts
- C. Elder care obligations
- D. Back injuries on the job

Monday, April 24, 2017 ~ 1:30pm-3:00pm

SESSION 216: TED2 - THE BEST OF OEM: TOP OEM CONTRIBUTIONS TO THE WORLD.....CME/MOC: 1.5

What is one of the simplest formats for a TED Talk:

- A. What. What. What.
- B. What? So What? Now What?
- C. Why. Why. Why.
- D. Well? What's Up?

Which one of the following is not one of the TED Talk 10 commandments:

- A. Thou shalt tell a story
- B. Thou shalt not read thy speech
- C. Thou shalt reveal thy curiosity and thy passion
- D. Thou shalt not worry about stealing the time of them that follow
- E. Thou shalt not sell from the stage

Which of the following exemplifies best practices in giving a TED talk:

- A. Tapping into mental library created during research
- B. Focusing on, and connecting with, the audience
- C. Giving periodic breaks to allow information absorption
- D. Varying pace, pitch and intensity to match the import of the information
- E. All of above exemplify best practices

Which of the following is a correct statement about fonts and text in a presentation:

- A. Fonts should be from the same font family wherever possible
- B. Font size should be consistent across slides
- C. Text should be legible and not over-crowded
- D. All of the above

What is the most visually interesting and memorable on slides:

- A. Pictures and drawings
- B. Large amounts of concentrated and small font text
- C. Tables with lots of important numbers
- D. Light text on backgrounds of the same or similar colors

Monday, April 24, 2017 ~ 1:30pm-3:00pm

SESSION 217: DRUG FORMULARIES IN WORKERS' COMPENSATION.....CME/MOC: 1.5

TRUE/FALSE: The ODG Formulary is organized by diagnosis, while the entries in the Reed Group formulary are organized by drug class.

TRUE/FALSE: Since about 2000 in many states, opioids have topped the list of medications prescribed under workers' compensation (by both cost and number of prescriptions), and have topped the list of prescribed services disputed under utilization review (UR).

TRUE/FALSE: The Reed Group formulary's entries are drawn from the evidence base in the ACOEM Practice Guidelines.

Which of the following prescribing problems is a Workers' Compensation formulary least likely to address:

- A. Overuse of brand-name drugs vs generics
- B. Delays in UR approval for uncommonly prescribed medications
- C. Direct dispensing of compounded drugs
- D. Inappropriate use of long-acting opioids

The ACOEM Policy Paper on Workers' Compensation Formularies recommends that a Workers' Compensation P&T (Pharmacy and Therapeutics Committee) be responsible for overseeing all of the following aspects of Formulary operations, except:

- A. Classification of new medications in the formulary system
- B. Specifying the duration of a "first fill" interval for various medications
- C. Oversight of UR decisions for specific patients
- D. Establishing a set of decision-making criteria for its own use

Monday, April 24, 2017 ~ 1:30pm-3:00pm

SESSION 218: OEM AND WORKPLACE WELLNESS: PAVING THE WAY FOR VALUE-DRIVEN POPULATION HEALTH.....CME/MOC: 1.5

Value-driven population health (VDPH) is concerned with:

- A. Health outcomes only
- B. Cost outcomes only
- C. Both health and cost outcomes
- D. Neither health or cost outcomes

The workplace wellness successes of leading employers are:

- A. In no way representative VDPH in action
- B. A little representative of VDPH in action
- C. Moderately representative of VDPH in action
- D. Are highly representative of VDPH in action

The value equation crosswalk refers to the outcomes to cost equation:

- A. Whose form is shared by all stakeholder groups but whose parameters differ by group
- B. Whose form and parameters are shared by all stakeholder groups
- C. Whose form is not shared by all stakeholder groups but whose parameters are shared
- D. Whose form and parameters are not shared by any of stakeholder groups

As a field, the measurement of workplace wellness has:

- A. Progressed to the point where neither validity nor reliability can be improved
- B. Made much progress in terms of validity and reliability, but improvement is still possible
- C. Made much progress in terms of validity but no progress in terms of reliability
- D. Made no progress in terms of validity but much progress in terms of reliability

Workplace wellness offers a model for recent VDPH provider breakthroughs in which of the following areas:

- A. Striving for common measures
- B. Discerning cause and effect
- C. Differentiating contributions to health
- D. All of the above

Monday, April 24, 2017 ~ 1:30pm-3:00pm

SESSION 219: THE BERYLLIUM STANDARD: FROM SCIENCE TO POLICY.....CME/MOC: 1.5

TRUE/FALSE: OSHA formally asked for public input on a possible beryllium rule in 2012.

ACOEM provided OSHA testimony regarding the proposed Beryllium Standard. Which of the following was *not* part of ACOEM's position:

- A. ACOEM supported a lower Permissible Exposure Limit at 0.1 mcg/m³, recognizing that the PEL of 0.2 mcg/m³ would not prevent all cases of chronic beryllium disease
- B. ACOEM supported broadening the beryllium standard to include construction and maritime industries
- C. ACOEM took the position that medical examinations and procedures be performed by or under the direction of a licensed physician
- D. ACOEM supported requiring employers to offer baseline Beryllium Lymphocyte Proliferation Tests (Be-LPT) for workers assigned to regulated work areas
- E. ACOEM supported requiring screening that would include helical CT scans for detecting beryllium-related cancer

The clinical work up for a patient or worker who has had potential for exposure to beryllium in the workplace and has respiratory symptoms of cough and shortness of breath, may include all of the following except:

- A. Obtaining a thorough history, including an occupational and environmental history, with detailed information on where they worked, what they did and what the workers in their area or other parts of the company did as well
- B. Ordering lung function tests and a chest radiograph
- C. Referring the patient to a specialist in occupational pulmonary disease who frequently sees patients with beryllium health effects
- D. Starting the patient on prednisone to determine if s/he is improved with treatment
- E. Ensuring that a blood BeLPT is obtained either prior as part of workplace medical surveillance or now as part of the evaluation

Chronic beryllium disease has both genetic and exposure risk factors. Based on the research studies presented, what lifetime weighted average (LTWA) exposure level results in zero risk of CBD:

- A. $2.0 \mu\text{g}/\text{m}^3$ – the current OSHA PEL
- B. $0.2 \mu\text{g}/\text{m}^3$ – the PEL set in the final beryllium rule
- C. $0.1 \mu\text{g}/\text{m}^3$ – The Action level set in the final beryllium rule
- D. There may be no safe level for those who are most susceptible

Key provisions for the OSHA Final Rule to Protect Workers from Beryllium Exposure include the following:

- A. Reduces the permissible exposure limit (PEL) for beryllium to 0.2 micrograms per cubic meter of air, averaged over 8-hours
- B. Establishes a new short term exposure limit for beryllium of 2.0 micrograms per cubic meter of air, over a 15-minute sampling period
- C. Requires employers to: use engineering and work practice controls (such as ventilation or enclosure) to limit worker exposure to beryllium; provide respirators when controls cannot adequately limit exposure; limit worker access to high-exposure areas; develop a written exposure control plan; and train workers on beryllium hazards
- D. Requires employers to make available medical exams to monitor exposed workers and provides medical removal protection benefits to workers identified with a beryllium-related disease
- E. All of the above

Monday, April 24, 2017 ~ 1:30pm-3:00pm

SESSION 220: COMPLIANCE, COMPASSION, AND COMPANY: DIFFERING PERSPECTIVES ON EFFECTIVE RETURN-TO-WORK PRACTICES.....CME/MOC: 1.5

An August 2004 OSHA, held that the HIPAA privacy rule does not require employers to remove names from the OSHA 300 log because:

- A. The PHI act of 1972 allows it
- B. The PII act of 1976 allows it
- C. Exception under HIPAA for records required by law
- D. Only if state law mandates it

An on-site clinic must comply with HIPAA standard applicable to a covered entity if the clinic engages in any HIPAA standardized transactions which include all of the following except:

- A. Eligibility for a health plan
- B. Coordination of benefits
- C. Health care payments
- D. Enrollment in a health plan
- E. All of the above

Exception to confidentiality under HIPAA include:

- A. PHI related to medical surveillance
- B. Requirements by state workers' compensation law
- C. Causation exams for work relatedness
- D. Psychiatric diagnosis
- E. A, B, and C

The Genetic Information Nondiscrimination (GINA) act of 2008:

- A. Limits the disclosure of personal health data and prevents discrimination
- B. Limits the disclosure of personal health data to insurance companies
- C. Limits the disclosure of all personal health information to an employer
- D. Limits disclosure of a person's genetic information in any aspect of employment

All of the following are examples of information protected under GINA except:

- A. Family medical history
- B. Genetic markers
- C. Tumor markers
- D. Medical surveillance data

Monday, April 24, 2017 ~ 3:30pm-5:00pm

SESSION 221: CREATING YOUR OWN OEM ELEVATOR PITCH.....CME/MOC: 1.5

TRUE/FALSE: One of the best ways to develop a great elevator pitch is to crystallize your ideas, write them down, develop a draft pitch, and share them with others to get critique, revise your pitch, and practice it repeatedly before entering the elevator with an important listener.

TRUE/FALSE: Stories are wonderful ways to gain a listener's attention and to grip their interest - and it better to include powerful stories in your elevator pitch.

Which of the following best describes the term "elevator pitch":

- A. The angle of elevation of an elevator in a building situated on a steep slope
- B. Instructions you receive from emergency personnel when an elevator is stuck between floors
- C. A conversation people initiate when riding in elevators with strangers
- D. Conversations about shoes when everyone in an elevator is looking down at their feet
- E. An inspiring 2-minute conversation you can have to promote a great idea or proposal

The art of elevator communication includes which of the following:

- A. Be clear what you want from the listener
- B. Gaining the attention of the listener
- C. Effectively communicating your thoughts and feelings
- D. Inspiring the listener to see a new possibility for him/herself
- E. Gaining commitment to explore more fully
- F. All of the above

A successful elevator pitch focuses on which of the following:

- A. Developing a good personal relationship with someone before discussing ideas
- B. Two or Three powerful, great ideas
- C. One powerful, great idea and no more than two supporting points
- D. A clear expectation of what the listener is expected to do after hearing you

Monday, April 24, 2017 ~ 3:30pm-5:00pm

SESSION 222: MULTI-PRONGED APPROACH FOR ADDRESSING OPIOID AND CHRONIC PAIN MANAGEMENT IN COLORADO.....CME/MOC: 1.5

TRUE/FALSE: Prescription opioids account for 36% of drug poisoning deaths in Colorado.

TRUE/FALSE: More than half of people who abuse prescription opioid report obtaining them for free from a friend or relative.

Education efforts and new legislation in Colorado aim to increase adoption of best practices among providers and prescribers. What are the most important steps for providers to adhere to:

- A. Follow the same guidelines
- B. Use the Colorado Prescription Drug Monitoring Program (PDMP) prior to prescribing or dispensing opioids
- C. Be informed about evidence-based practices for opioid use in healthcare and risk mitigation
- D. Educate patients on appropriate use, storage and disposal of opioids, risks and the potential for diversion
- E. Collaborate within the integrated healthcare team to decrease over-prescribing, misuse and abuse of opioids
- F. All of the above

Clinicians should monitor patient adherence to the treatment plan, especially with regard to potential misuse and abuse of opioid analgesics. Which of the following statements regarding patient monitoring is correct:

- A. Prescribers should recognize, document, and address aberrant drug-seeking behavior
- B. Prescribers only need to check the Prescription Drug Monitoring Program (PDMP) if a patient asks
- C. FDA guidelines require random drug testing of all chronic pain patients at each visit
- D. Substance abuse treatment is not necessary for chronic pain patients, if they are receiving a prescription for opioid analgesics from a licensed provider

When being prescribed an opioid, patients should be counseled on several issues related to the safe use, storage, and disposal of medications. These include which of the following (select all that apply):

- A. Risk factors, signs, and symptoms of overdose and respiratory depression
- B. Common side effects and how to manage them
- C. Proper storage of medications in a safe and secure place away from children, family members, household visitors, and pets
- D. Unused medication should be protected from theft inside the home until they can be properly disposed
- E. To review the medication guide that comes with the product
- F. All of the above are important issues to explain to/discuss with patients

Monday, April 24, 2017 ~ 3:30pm-5:00pm

SESSION 223: PSYCHOLOGICAL FITNESS-FOR-DUTY TOOLKIT FOR OCCUPATIONAL MEDICINE: THREAT PREPAREDNESS, ASSESSMENT, AND RESPONSE.....CME/MOC: 1.5

TRUE/FALSE: When sending an employee for a psychological fitness-for-duty exam, the occupational physician needs written release for the report to be sent to the employer.

TRUE/FALSE: The need for a written release to send a fitness-for-duty exam results to an employer is not required when there is a threat of harm to the persons or property of the employer.

TRUE/FALSE: Mental illness is more tightly associated with violence in the workplace than substance abuse.

Post-Traumatic Stress Disorder (PTSD) can create functional impairments leading to behavioral concerns in the workplace. Which of these are not indicative of a PTSD diagnosis:

- A. Hypervigilance/startle response

- B. Stimulus avoidance
- C. Flashbacks intrusive thoughts
- D. Substance abuse

A fitness-for-duty with a violence screen focuses on _____, whereas a threat of violence consultation focuses on _____:

- A. Assessing the workplace; an individual intervention
- B. Assessing an individual employee who has not made a threat; assessing an individual employee who has made a threat
- C. An individual employee who has made a direct or indirect threat of violence; protecting the workplace from a potential threat
- D. A detailed forensic evaluation for violence risk; a screening for violence

Monday, April 24, 2017 ~ 3:30pm-5:00pm

SESSION 224: PROMISING PRACTICES TO PROMOTE COMMERCIAL DRIVER WELLNESS.....CME/MOC: 1.5

TRUE/FALSE: FMCSA may remove a medical examiner from the National Registry of Certified Medical Examiners if it is determined that a medical examiner issued a medical examiner's certificate to an operator of a commercial motor vehicle who failed to meet the applicable standards at the time of the examination.

TRUE/FALSE: Driver wellness programs must be customized to the driver population in question.

TRUE/FALSE: When designing a driver wellness program, utilizing existing programs at an employer or in the community is a good foundation for these programs.

Which of the following are challenges in implementing driver wellness programs.....

- 1. Long hours; 2. Affordable healthcare; 3. Poor food choices; 4. Vibration:
- A. 1 and 3
- B. 2 and 4
- C. 1, 2 and 3
- D. All of the above

Many commercial drivers have multiple health risk factors which include:

- A. Hypertension
- B. Sleep apnea
- C. Diabetes
- D. All of the above

Monday, April 24, 2017 ~ 3:30pm-5:00pm

SESSION 225: THE NEW OSHA SILICA STANDARD.....CME/MOC: 1.5

TRUE/FALSE: Under OSHA's new silica standard, the physician or other licensed health care professional (PLHCP) must advise the employer of any recommended limitations on an employee's exposure to respirable crystalline silica, even if the employee has not signed a written authorization.

TRUE/FALSE: Low dose computed tomography is recommended for routine use in preventing lung cancer in silica-exposed workers.

TRUE/FALSE: Under the new silica standard, before construction workers can be permitted to cut through masonry materials the employer must have carried out sampling for airborne silica concentrations on a substantially similar set of tasks.

The components of medical surveillance for silica-exposed workers under OSHA's new standard include:

- A. Medical and work history, and physical examination with special emphasis on the respiratory system
- B. Chest x-ray or digital radiograph
- C. Pulmonary function tests which include forced vital capacity (FVC), forced expiratory volume in one second (FEV1) and FEV1/FVC ratio
- D. Test for latent tuberculosis infection only on the initial examination
- E. All of the above

Under OSHA's new silica standard, all of the following statements are true except:

- A. Either conventional chest x-ray or digital radiographs are acceptable
- B. Chest x-rays/digital radiographs must be read by a NIOSH-certified B-reader
- C. Chest x-rays/digital radiographs must be interpreted and classified according to ILO classification for pneumoconiosis
- D. Employees with chest x-rays classified as 1/1 or higher by the B-reader must be offered a referral to a specialist for evaluation
- E. The OSHA standard specifies that the specialist must be a board certified physician in pulmonary disease or occupational medicine

Monday, April 24, 2017 ~ 3:30pm-5:00pm

SESSION 226: GULF WAR ILLNESS: CLINICAL AND RESEARCH RECOMMENDATIONS AND CONTROVERSIES.....CME/MOC: 1.5

Which of the following symptom domains are part of both the Kansas and CDC case definition for GWI:

- A. Gastrointestinal symptoms
- B. Skin symptoms
- C. Pain symptoms
- D. Fatigue symptoms
- E. C and D

Which of the following medical conditions is an exclusionary condition for the Kansas case definition of GWI:

- A. Diabetes
- B. PTSD
- C. Hypertension
- D. Rheumatoid arthritis
- E. Hypotension

What is the best long-term treatment for chronic pain in patients with GWI:

- A. Opiates (e.g., hydrocodone, methadone)
- B. NSAIDs (e.g., ibuprofen, indomethacin, naproxen)
- C. Physical therapy, non-impact exercise (e.g., swimming, yoga, pilates)
- D. Acetaminophen
- E. SSRIs (e.g., fluoxetine, paroxetine, sertraline)

The gastro-intestinal diagnosis most commonly made with GWI, which can be a "service-connected condition," is:

- A. GERD (gastroesophageal reflux disorder)
- B. Peptic Ulcer
- C. Gastroenteritis
- D. Irritable bowel syndrome

E. SIBO (small intestine bacterial overgrowth)

Challenges in GWI research include:

- A. Multiple exposures
- B. Condition is ill-defined
- C. No single therapy
- D. Chronicity of illness over many years
- E. All of the above

Monday, April 24, 2017 ~ 5:15pm-6:15pm

SESSION 227: ACOEM'S MAINTENANCE OF CERTIFICATION, PART IV.....CME/MOC: 1.0

TRUE/FALSE: The ACOEM Part IV program is designed so that a physician self-evaluates their medical practice in either direct patient care or in non-direct patient care areas such as teaching, research, or administration.

The Maintenance of Certification standards are developed by the following:

- A. ACOEM
- B. ABPM
- C. ABMS
- D. State licensing boards

An improvement action plan that would be acceptable to complete for the ACOEM Part IV program could include:

- A. Instituting a new dictation template or form
- B. Specifying a helpful job duty for support staff personnel
- C. Any action that a physician could put into place to improve their practice
- D. All of the above

Monday, April 24, 2017 ~ 5:15pm-6:15pm

SESSION 228: SO, YOU WANT TO BE AN ACOEM LEADER?.....CME/MOC: 1.0

TRUE/FALSE: Both components and special interest sections have a voice in the House of Delegates.

Which of the following is a potentially valuable activity for physician volunteers within a component:

- A. Serving on a component committee
- B. Serving as a delegate or an alternate to the House of Delegates
- C. Waiting patiently for an opportunity to serve on the component board or as a component officer
- D. Continuing to engage within the component even after leaving a position of leadership in the component
- E. All of the above

Which of the following is a correct statement about serving on the Board of Directors:

- A. The proper route to becoming elected to the BOD is delegate, component president, committee member, director
- B. The ACOEM BOD meets every month in Hawaii, all expenses paid by ACOEM
- C. The best way to achieve enough visibility to win election to the BOD is to be involved in several ACOEM sub-organizations
- D. Members of the ACOEM BOD are appointed by the immediate past president

Monday, April 24, 2017 ~ 5:15pm-6:15pm

SESSION 229: FIREARM INJURY: FACTS, MYTHS, AND WHAT SCIENCE TELLS US.....CME/MOC: 1.0

TRUE/FALSE: Risk for firearm homicide is highest among young African-American men; risk of firearm suicide is highest among elderly white men.

TRUE/FALSE: Federal and state generally prohibit physicians from asking patients about access to and use of firearms.

Among handgun purchasers, a prior conviction for DUI or other alcohol-related crime is associated with an adjusted relative risk of future arrest for a violent or firearm-related crime that is approximately:

- A. 1.7%
- B. 4%
- C. 10%

Monday, April 24, 2017 ~ 5:15pm-6:15pm

SESSION 230: A GUIDE FOR THE PRIMARY CARE PHYSICIAN IN EVALUATING DISOCYANATE-EXPOSED WORKERS.....CME/MOC: 1.0

Respiratory sensitization to diisocyanates is most likely to result in:

- A. Work aggravated asthma
- B. Reactive airways dysfunction syndrome
- C. Occupational asthma
- D. Elevated serum specific IgE for diisocyanates

For workers exposed to diisocyanate chemicals, workplace evaluation is recommended for those reporting work-related:

- A. Cough
- B. Shortness of breath
- C. Wheezing with exertion
- D. Chest tightness
- E. All of the above

A diisocyanate exposed worker reports intermittent dyspnea with exertion at work. Serial peak expiratory flow (PEFR) studies over two weeks demonstrate a 23% reduction to PEFR values at work and at home on 2/5 days during work week. A methacholine challenge test performed on the last day of two consecutive work weeks reveals a $PC_{20}=8\text{mg/ml}$. The worker can be advised to:

- A. Return-to-work and return for evaluation in 1 year
- B. Apply for workers' compensation
- C. Begin inhaled corticosteroids and return to his/her current job
- D. Remove from his job and evaluate monthly

Monday, April 24, 2017 ~ 5:15pm-6:15pm

SESSION 231: CONVERSION DISORDER AND FUNCTION NEUROLOGICAL CONDITIONS.....CME/MOC: 1.0

The term FEIGNING refers to all answers except:

- A. Faking
- B. A non-organic diagnosis
- C. Dissociation seizures
- D. Deliberately attempting to deceive an examiner

Functional Neurological Disorder refers to:

- A. All psychiatric conditions that are associated with abnormal neurological examination findings
- B. Pathological cheating
- C. Conditions that refer to neurological dysfunction without evidence for structural brain dysfunction
- D. All of the above

Examples of Pure Functional Neurological Disorders include:

- A. Petit Mal Seizures (Staring spells)
- B. Munchausen's by Proxy
- C. Chronic Fatigue Syndrome
- D. Post-traumatic Hemiplegia with Negative Brain MRI

Monday, April 24, 2017 ~ 5:15pm-6:15pm

SESSION 232: IOMSC: UPDATE AND FUTURE DIRECTIONS.....CME/MOC: 1.0

TRUE/FALSE: A challenge for many of the societies who are members of IOMSC is a lack/decline of occupational medicine specialists.

TRUE/FALSE: The IOMSC now has a constitution and executive committee.

Some of the success of the societies who are members of IOMSC include:

- A. Programs to address mental health issues in the workplace
- B. Publication of a journal or newsletter
- C. National workplace injury reporting system
- D. Occupational medicine practice guidelines
- E. All of the above

Tuesday, April 25 ,2017

Tuesday, April 25, 2017 ~ 7:45am-12:00pm

SESSION 801: DENVER FIRE ACADEMY WORKSITE VISIT.....CME/MOC: 3.0

TRUE/FALSE: In NFPA 1582, the medical requirements are the same for applicants and for incumbents.

TRUE/FALSE: Sudden cardiac death is the number one cause of on-duty firefighter fatalities.

NFPA 1582 is:

- A. Set of guidelines for fire department physicians
- B. Standards issued by the federal government
- C. Voluntary standards for fire departments
- D. Mandatory fire code

NFPA is updated:

- A. Every year
- B. Every 2-3 years
- C. Every 4-5 years
- D. Every 10 years

How long must a firefighter be stable on warfarin before returning to full duty:

- A. One month
- B. One year
- C. Five years
- D. Never (firefighter on Coumadin must remain restricted)

Activities associated with heavy physical exertion has been shown to trigger heart attacks in:

- A. The general population
- B. Firefighters
- C. Both the general population and firefighters

NFPA 1582 restricts firefighters with diabetes mellitus if they:

- A. Take insulin
- B. Take oral hypoglycemic agents
- C. Have a hypoglycemic episode requiring assistance within the past year
- D. None of the above

NFPA 1582 has Category A and Category B conditions for:

- A. Candidates
- B. Members
- C. Candidates and members
- D. Neither candidates nor members

An incumbent firefighter with long-standing monocular vision should have the following restrictions:

- A. No structural firefighting
- B. No emergency driving
- C. No SCBA use
- D. No diving

Tuesday, April 25, 2017 ~ 8:30am-10:00am

SESSION 301: THE LUDLOW MASSACRE AND BEYOND: OCCUPATIONAL MEDICINE AND CORPORATE WELFARE IN EARLY 20TH CENTURY COLORADO.....CME/MOC: 1.5

What direction is Ludlow from Denver:

- A. North
- B. South
- C. East
- D. West

When did the Ludlow Massacre occur:

- A. 1910
- B. 1912
- C. 1914
- D. 1916

Name the famous American family that was the primary stockholders of the Colorado Fuel and Iron Company (CF&I):

- A. Rockefeller
- B. Barrymore
- C. Carnegie
- D. Morgan

How did CF&I contribute to the legacy of occupational medicine in Southern Colorado and in America:

- A. The Employee Representation Plan:
- B. Corporate Hospitals
- C. By Promoting Welfare Capitalism
- D. All of the Above

Which of the following were direct outcomes of the Ludlow Massacre:

- A. The New Deal
- B. The Presence of the United Mine Workers at CF&I
- C. Increased public attention towards working conditions at companies of all kinds
- D. None of the Above

Tuesday, April 25, 2017 ~ 8:30am-10:00am

SESSION 302: DRILLING DOWN: US OIL AND GAS EXTRACTION WORKER SAFETY AND HEALTH TRENDS AND CURRENT ISSUES.....CME/MOC: 1.5

TRUE/FALSE: Half-mask filtering face-piece respirators are appropriate respiratory personal protective equipment (PPE) during manual tank gauging operations.

What is the leading cause of death for oil and gas extraction workers:

- A. Falls
- B. Fires/explosions
- C. Exposure to hydrocarbon gases and vapors
- D. Transportation

What is a potential exposure hazard during manual tank gauging operations at oil and gas well sites:

- A. Explosive/flammable environment

- B. Low oxygen concentrations
- C. Toxic hydrocarbon gases and vapors
- D. All of the above

All of the following chemicals have been found on post-mortem analyses of sudden deaths due to hydrocarbon gas and vapor inhalation except:

- A. Butane
- B. Trichloroethylene
- C. Propane
- D. Hexane

Contributing factors in cases of sudden deaths due to hydrocarbon gas and vapor inhalations may include the following:

- A. Cardiac arrhythmia
- B. Hypoxemia
- C. Central nervous depression
- D. All of the above

Tuesday, April 25, 2017 ~ 8:30am-10:00am

SESSION 303: HAZARDOUS DRUG WORKPLACE SAFETY AND COMPLIANCE.....CME/MOC: 1.5

TRUE/FALSE: USP <800> requires that closed system drug transfer devices be used for drug preparation.

What does NIOSH use as a basis for its hazardous drug list update:

- A. New FDA warning on existing drugs
- B. New FDS drug approvals
- C. Both
- D. Neither

USP <800> policies and procedures include requirements on:

- A. Use of PPE including use of NIOSH-certified respirators
- B. Deactivation, decontamination and cleaning (and disinfection for sterile compounding areas)
- C. Labeling
- D. Disposal of HDs and trace-contaminated materials
- E. Spill management
- F. All of the above

Which of the following are procedures covered in a hospital based hazardous drug safety program policy (select all that apply):

- A. Personal protective equipment
- B. Hazardous drug list
- C. Hazardous drug spill procedures
- D. Opioid treatment protocols
- E. Medical Surveillance

Which of the following materials would be considered hazardous waste that should be discarded in a yellow chemotherapy container (select all that apply):

- A. Supplies used for cleanup of a chemotherapy spill
- B. Chemotherapy IV tubing
- C. Contaminated chemotherapy gloves

Tuesday, April 25, 2017 ~ 8:30am-12:00pm

SESSION 304: COMMERCIAL DRIVER MEDICAL EXAMINATIONS: WHERE THEY ARE, WHERE THEY ARE GOING.....CME/MOC: 3.0

TRUE/FALSE: If a driver does not meet interstate medical standard, the examiner can certify the driver but restrict to intrastate driving.

TRUE/FALSE: After June 22, 2018, medical examiners should continue to issue Medical Examiner Certificates (MEC) to all non-CDL holders.

How has self-reported prevalence of Diabetes Mellitus changed between 2005 and 2012 among a sample of truck drivers:

- A. Decreased slightly
- B. Remained stable
- C. Increased slightly
- D. Doubled
- E. Quadrupled

How is the change in truck driver health over time compared to the health of the general working population over the same time after adjusting for age, gender, and BMI:

- A. Similar trends upward, however truck driver health is not as bad
- B. Similar trends upward, however truck driver health is worse
- C. Truck driver health is getting worse, while general worker health is stable
- D. Truck driver health is improving, while general worker health is worsening

What is the risk increase for drivers causing a preventable crash with injuries if they have 3 or more conditions after adjusting for age, gender, and BMI:

- A. 1.5 times increased risk
- B. 2.0 times increased risk
- C. 3.0 times increased risk
- D. No increased risk

State Driver License Agencies are rejecting medical examiner certificates because.....

- 1. Incomplete form; 2. Incorrect duration; 3. Incorrect form; 4. Examiner not on registry:
- A. 1 and 3
- B. 2 and 4
- C. 1, 2 and 3,
- D. All of the above

The date the medical certificate is noted to be signed after a driver in determination pending status brings additional information should be determined by:

- A. The date of original examination
- B. The date the determination is made

The October 2016 recommendations from the MRB/MCSAC included that drivers with any of the following should be immediately disqualified except:

- A. Excessive fatigue or sleepiness while driving
- B. Been in a sleep-related crash
- C. Non-compliant with treatment
- D. ESS greater than 11

After consideration of recent FDA guidance on opioids, the MRB recommended that Certified Medical Examiners and treating clinicians be familiar with guideline on the risks of misuse, addiction, overdose, and death for serious harm related to opioid therapy at a dosage greater than or equal:

- A. 50 morphine milligram equivalents (MME) per day
- B. 90 morphine milligram equivalents (MME) per day
- C. 100 morphine milligram equivalents (MME) per day
- D. 125 morphine milligram equivalents (MME) per day

Tuesday, April 25, 2017 ~ 8:30am-12:00pm

SESSION 305: LEAD AND BEYOND: THE GLOBAL IMPACT OF REGULATIONS, TRADE, AND COMPANY PRACTICES ON POPULATION LEAD EXPOSURES: A CHANCE FOR OEM COLLABORATION?.....CME/MOC: 3.0

TRUE/FALSE: The production and sale of lead-acid batteries is currently increasing worldwide, and is projected to continue to increase for at least the next few years.

TRUE/FALSE: Where governmental standards for occupational lead exposure exist worldwide, those standards generally require that further lead exposure be stopped when blood levels exceed 20 mcg/dl.

According to ACOEM's most recent position statement on occupational lead exposure, workers should be removed from further lead exposure if their blood levels consistently exceed:

- A. 10 mcg/dl
- B. 20 mcg/dl
- C. 30 mcg/dl
- D. 40 mcg/dl

All of the following statements about lead are true except:

- A. Of people with blood lead levels above 20 mcg/dl, more than 99% live in the developing world
- B. Lead poisoning and its chronic effects account for more than 100,000 deaths annually, worldwide
- C. Worldwide, lead-containing paint accounts for the largest share of end-products that use lead
- D. Lead is used in both oil-based and water-based household paints solid around the world

Compare with blood lead levels below 5 mcg/dl, blood lead levels maintained chronically above 10 mcg/dl are associated with all of the following health effects except:

- A. Hypertension
- B. A near doubling of the risk of death from coronary heart disease
- C. At least a 10% increased risk of chronic renal failure
- D. An increased risk of diabetes

All of the following statements about OSHA regulations of occupational lead exposure are true except:

- A. The Federal OSHA standards for occupational lead exposure have not been changed since their initial promulgation 40 years ago
- B. Under federal law, the 25 states with their own "state-plan" OSHA program are permitted to enact OSHA standards within their state that are more stringent than the corresponding Federal OSHA standard
- C. The OSHA lead standard include in their scope workplaces where lead exposure occurs both from airborne exposure to lead fume and from exposure to lead in surface contamination

Lead in fuels:

- A. Is banned in all countries
- B. Used in the US for aviation fuel
- C. Not generally regulated in most countries
- D. A natural contaminant of most fuels

Efforts to quantify the costs of lead exposure:

- A. Have not shown any substantial cost impacts
- B. Have only been done in the US
- C. Have demonstrated costs of billions of dollars per year
- D. Show that most impacts result from cardiovascular disease

Lead in paint is:

- A. Banned in all countries
- B. Used in the US only for aircraft
- C. Only a problem where children are present
- D. Generally not regulated in most countries

Tuesday, April 25, 2017 ~ 10:30am-12:00pm

SESSION 306: UNLEARNING SELF-DEFEATING THINKING HABITS: A PROACTIVE APPROACH.....CME/MOC: 1.5

TRUE/FALSE: Most mental health problems ultimately involve thinking problems.

TRUE/FALSE: People tend to react to their thoughts about events rather than events themselves.

According to the 2009 WHO World Mental Health Survey, the prevalence of mental health problems in the US is:

- A. 17%
- B. 47.4%
- C. 73%

Which of the following is not a common cognitive distortion category, as defined by David Burns, MD:

- A. Jumping to conclusions
- B. Narcissism
- C. All-or-nothing thinking

One of the most effective evidence-based psychotherapies is:

- A. The mind meld
- B. Client-centered therapy
- C. Cognitive-behavioral therapy

Tuesday, April 25, 2017 ~ 10:30am-12:00pm

SESSION 307: ACOEM COURT: YOU BE THE JUDGE!.....CME/MOC: 1.5

TRUE/FALSE: Workers' compensation is a federal program, therefore specific procedures, awards and regulations are the same in US States and Territories.

TRUE/FALSE: In order to submit a workers' compensation claim, an employee must be represented by counsel.

Workers' compensation benefits awarded to injured employees may include:

- A. Wage replacement up to a set "cap" amount
- B. Payment for claim-related medical expenses
- C. "Lump Sum" awards
- D. All of the above

The outcomes of a hearing for a workers' compensation case depends upon:

- A. The state-specific regulations regarding awards
- B. Medical data presented
- C. The arguments presented by the claimant and defendant's respective attorneys
- D. All of the above

Which of the following are correct matches between WV programs and employees:

- A. Federal employees – Federal Employee Compensation Authority (FECA)
- B. Railroad employees – Federal Employee Liability Act (FELA)
- C. Cruise ship captains and onboard personnel – Longshore and Harbor Workers' Compensation Act
- D. A and B are correct
- E. A, B, and C are correct

Tuesday, April 25, 2017 ~ 10:30am-12:00pm

SESSION 308: HAZARDOUS DRUG EXPOSURE AND MEDICAL SURVEILLANCE.....CME/MOC: 1.5

TRUE/FALSE: Hazardous drug surveillance is practiced in a majority of institutions represented by national leaders in medical center occupational health who participated in the discussed qualitative research project.

Health effects associated with the unprotected handling of hazardous drugs include which of the following:

- A. Chromosomal abnormalities
- B. Skin disorders
- C. Raised cancer risk
- D. Spontaneous abortion
- E. All of the above

Based on NHANES data as summarized by Lazo 2008, a hypothetical asymptomatic population of 1,000 individuals subjected to one-time ALT, AST, GGT, Bilirubin and Alkaline Phosphatase testing would be expected to generate how many abnormal test results:

- A. None
- B. Between 20 and 50
- C. Between 50 and 100
- D. Between 100 and 500
- E. Greater than 500

Approximately what percent of healthy, asymptomatic people have abnormal blood test values, for any given test:

- A. None
- B. 1%
- C. 5%
- D. 25%

What percent of the global population has anemia:

- A. 5%
- B. 15%
- C. 25%
- D. 50%

Tuesday, April 25, 2017 ~ 1:30pm-3:00pm

SESSION 309: CURRENT ISSUES AFFECTING THE HEALTH AND SAFETY OF UNDERSERVED OCCUPATIONAL POPULATIONS IN THE US AND ABROAD.....CME/MOC: 1.5

TRUE/FALSE: Gig work can be defined as “contingent work which is transacted in the digital marketplace”

According to a recent Pew Center survey, what percentage of gig economy workers report wage theft:

- A. 2%
- B. 29%
- C. 92%
- D. 100%

Choose the correct statement:

- A. All gig workers are considered independent contractors
- B. All gig workers are employed under a traditional employment model
- C. Some gig workers are employed under a traditional employment model while others are considered independent

The earliest clue to the unsuspected exposure to cholinesterase inhibitors:

- A. Clinical symptom pattern
- B. Results of urinary metabolite tests
- C. Results of cholinesterase testing
- D. Results of environmental samples

Which of the following is not true regarding international seafarers:

- A. There are 1.5 million seafarers worldwide, providing 90% of global commerce
- B. Common seafarer occupational injuries include injuries to the back and upper/lower extremities
- C. A medical doctor makes the final decision for medical repatriation of seafarers
- D. Seafarers are an isolated working population

Tuesday, April 25, 2017 ~ 1:30pm-3:00pm

SESSION 310: INTERACTION OF HEALTH CARE WORKER HEALTH AND SAFETY ON PATIENT HEALTH AND SAFETY.....CME/MOC: 1.5

TRUE/FALSE: Evidence suggests healthcare workforce health/safety is linked to quality of care and patient safety.

TRUE/FALSE: The first step in establishing a worker health and safety program is identification of key metrics to be tracked.

TRUE/FALSE: Key elements for building sustainable and replicable programs on healthcare worker and patient health and safety include culture of reporting access to health resources, evidence-based benefit design, and internal communication.

The components for an optimally functional healthcare worker are:

- A. Supportive work environment
- B. Physical and psychological safety
- C. Enhanced individual health
- D. All of the above

Which of the following is not a factor affecting safety of workers and patients:

- A. Fatigue
- B. Staffing
- C. Location of facility

- D. Organizational culture
- E. Communication

Tuesday, April 25, 2017 ~ 1:30pm-3:00pm

SESSION 311: EVIDENCE-BASED WORKERS' COMPENSATION (WC) MANAGEMENT.....CME/MOC: 1.5

According to the Bureau of Labor Statistics, which industry has the highest number of injuries and illnesses resulting in days away from work:

- A. Hospitals
- B. Construction
- C. Manufacturing
- D. Private Industry

How could a prediction model help in managing a worker's compensation claim system:

- A. It would help in identifying potential migratory catastrophic workers' compensation claims
- B. It would help in estimating the future cost of claims
- C. Both A and B

Based on the research presented, short-acting (SA) opioids are associated with:

- A. Higher claim costs
- B. Higher claim costs if present within the first 30 days post injury
- C. Lower claim costs if limited to the first 30 days post injury
- D. Lower claim costs if limited to the first 90 days post injury

After the establishment of an onsite clinic (>1 year after clinic opening), which type of workers' compensation claim can be expected to decrease:

- A. Lost time injuries
- B. Medical only injuries
- C. Both lost time and medical only injuries
- D. Neither lost time or medical only injuries

Approximately how long does it take for an onsite clinic to achieve a positive ROI (>1.0):

- A. One week
- B. One year
- C. Three years
- D. Three months

Tuesday, April 25, 2017 ~ 1:30pm-5:00pm

SESSION 312: PUBLIC SAFETY MEDICINE UPDATE 2017: THE CUTTING EDGE.....CME/MOC: 3.0

TRUE/FALSE: ACOEM's LEO Guidelines only covers patrol officers.

TRUE/FALSE: The LEO Guidance has completed all the chapters and will now only need to continually update them.

TRUE/FALSE: Following primary total hip arthroplasty a LEO can never be cleared to return to full duty.

In the next edition of NFPA 1582, what restriction is recommended for a firefighter wearing hearing aids who meets the unaided hearing standard:

- A. No exposure to heat

- B. No exposure to water
- C. No structural fire-fighting
- D. No restriction is recommended
- E. Removal from fire service

Which clinical scenario would put a public safety officer at highest risk (greatest susceptibility) for line of duty, sudden cardiac death:

- A. Well-controlled hypertension
- B. Obesity, LVH and subclinical obstructive coronary artery disease
- C. Moderate obstructive coronary artery disease
- D. LVH alone

What restriction is recommended for a paramedic with monocular vision for more than 6 months:

- A. No patient care
- B. No tracheal intubation
- C. No emergency driving
- D. No night driving

After treatment has stabilized, the LEO with diabetes should provide their glucose log covering the time periods below:

- A. One month for those with type 1 diabetes; others as recommended by their treating physician
- B. One month for those with diabetes treated with insulin or sulfonylurea; others as recommended by their treating physician
- C. One month for those with diabetes treated with insulin; others as recommended by their treating physician
- D. As recommended by their treating physician

Important considerations in reducing back pain among LEO protective services members include:

- A. The weight of a law enforcement officer's duty belt
- B. Appropriately fitted lumbar support in patrol car seats
- C. Thoraco-lumbar fascia (TLF) strengthening and general fitness
- D. Maintaining upright posture in the vehicle, i.e., not leaning over to work on duty computers
- E. Proper fit and sizing of body armor, i.e., ballistic vests
- F. All of the above

Which of the following are legitimate reasons to request psychological fitness-for-duty evaluation on a current employee:

- A. Perceived threats or documented aggression
- B. Objective decline in performance, with observable changes in behavior
- C. Claims of impairment by the employee or their health care provider which may interfere with essential job functions
- D. Documented issues of substance abuse
- E. All of the above

Tuesday, April 25, 2017 ~ 1:30pm-5:00pm

SESSION 313: INHALATIONAL HAZARDS AND RESPIRATORY HEALTH EFFECTS FROM POST 9/11 DEPLOYMENT TO SOUTHWEST ASIA.....CME/MOC: 3.0

TRUE/FALSE: In situ analysis of mineral matter in lung tissue slices and traditional analysis of lung tissue following bleach digestion yielded generally similar results in the relative abundances of particle types.

TRUE/FALSE: All veterans stationed near a burn pit during deployment should have pulmonary function tests.

Which of the following are inhalational hazards that may be encountered during deployment to Iraq, Afghanistan, and other regions in southwest Asia:

- A. Burn pit emissions
- B. Desert dust particulate matter/sandstorms
- C. Diesel particulate matter
- D. All of the above

Which conditions have been described as part of the spectrum of deployment-related respiratory diseases:

- A. Upper airway dysfunction
- B. New-onset asthma or asthma aggravation
- C. Bronchiolitis
- D. All of the above

Select the types of particles found by the in situ analysis of lung tissue samples:

- A. Particles of human origin
- B. Particles of geologic origin, such as are found in desert dusts
- C. Particles that formed in the lungs
- D. Complex mixtures of A, B, and C

What deployment-related exposures did the service members and Veterans self-report (select all that apply):

- A. Blister agents (e.g., sulfur mustard)
- B. Nerve agents (e.g., sarin)
- C. Burn pits
- D. Blood agents (e.g., cyanide)
- E. Pulmonary (or Choking) agents (e.g., chlorine, phosgene)
- F. Depleted uranium

A 30-year-old military veteran of Operation Iraqi Freedom has a documented decline in exercise tolerance based on his two-mile run-times. The initial assessment in the primary care office demonstrates a BMI of 26 kg/m², vital signs within normal limits, O₂ saturation on room air of 98%, and spirometry within normal limits. PA and lateral chest radiograph is interpreted as normal by the radiologist. What is the most appropriate next step in evaluation:

- A. Cardiopulmonary exercise testing
- B. Pulmonary function tests with and without bronchodilator and DLCO
- C. Video assisted thoracic surgery to obtain lung biopsy
- D. No further evaluation is indicated

Public Law 112-260, §201 directed the Department of Veterans affairs to establish and maintain a registry for service members who may have been exposed to toxic airborne chemicals and fumes generated by open burn pits. The law also called for an independent scientific organization to prepare a report addressing issues related to the establishment and conduct of the registry and use of its data. The National Academy committee's findings were published in February 2017 and include all of the following except one:

- A. Number of flaws in the registry's structure and operation were identified by the committee
- B. It would be helpful to evaluate participants (around 40%) who started but did not complete the registry questionnaire to find out how to make the web-based instrument easier to use and to assess differences between those who did and did not complete the questionnaire
- C. Information on hobbies, place of childhood residence and other occupational exposures were helpful in assessing participants' general health concerns
- D. Response fatigue may have led to large nonresponse rates for some questions
- E. Objective measures of exposure were not available to the committee to link to registry responses and to construct reliable exposure estimates

Registry data such as that from the Airborne Hazards and Open Burn Pit Registry (AH&OBPR) can be useful in several ways. Select the best response to indicate which of the following statements about the AH&OBPR is true:

- A. Registry data can be used to determine cause and to estimate prevalence of disease in the total population of military veterans
- B. The registry is a useful way to document veterans' concerns about health problems that may have resulted from exposures and bring those concerns to the attention of their health care providers
- C. Voluntary participation and self-reported information introduce biases that may limit accuracy of the registry data
- D. All of the above
- E. Only B and C
- F. None of the above

Tuesday, April 25, 2017 ~ 3:30pm-5:00pm

SESSION 314: MIGRATION AND WORK: UNDERSTANDING POPULATIONS IN THE AMERICAS AND THE US.....CME/MOC: 1.5

TRUE/FALSE: Immigrant workers in health care and in construction have a higher rate of workplace injury than non-immigrant workers in those occupations/sectors.

Farmworkers, residents and migrants, are often not covered by any health insurance. How many, according to the DOL National Agriculture Workers Survey, do have to pay their hospital or doctor visits out of pocket:

- A. 15%
- B. 25%
- C. 35%
- D. 50%

Which share of the global migrant workforce works in the US:

- A. 10%
- B. 25%
- C. 40%
- D. 60%

Which group(s) is/are most vulnerable to injury in the construction industry in the US:

- A. Hispanic immigrants
- B. Young workers
- C. Working for small businesses
- D. All of the above

Agriculture is the industry with highest overrepresentation of immigrant workers. Which industry has the second highest:

- A. Manufacturing
- B. Transportation
- C. Construction
- D. Leisure/hospitality

Tuesday, April 25, 2017 ~ 3:30pm-5:00pm

SESSION 315: COMMUNICATING EFFECTIVELY WITH NON-OCCUPATIONAL HEALTH COLLEAGUES ON DIFFERING OPINIONS IN MANAGING FITNESS-FOR-DUTY AND RETURN-TO-WORK.....CME/MOC: 1.5

TRUE/FALSE: The effectiveness of communication is strongly anchored on non-verbal communication; with eye contact being a prominent factor in perception by the receiver.

TRUE/FALSE: Effective challenge management involves both mindset and skillset.

TRUE/FALSE: The AHRQ TeamSteps program provides educational modules for patient safety initiatives, effective communication strategies, dealing with conflict and challenging situations.

Barriers to challenge resolution may include:

- A. Uncertainty about process
- B. Concern about relationships
- C. Concern about self
- D. All of the above

When managing challenging situations, conversations should focus on use of supportive language choices which are characterized as:

- A. Evaluative
- B. Demeaning
- C. Authoritative
- D. Collaborative

Tuesday, April 25, 2017 ~ 3:30pm-5:00pm

SESSION 316: PARTNERING WITH WORKERS' COMPENSATION INSURERS TO REACH SMALL ENTERPRISES IN NEED OF HEALTH PROMOTION AND HEALTH PROTECTION.....CME/MOC: 1.5

TRUE/FALSE: Total Worker Health is defined as policies, programs, and practices that integrate protection from work-related safety and health hazards with promotion of injury and illness prevention efforts to advance worker well-being.

TRUE/FALSE: Employees with workers' compensation claim in the past year are more likely to report having socio-emotional health conditions (e.g. depression) compared to workers with no claim.

TRUE/FALSE: Recent research suggests that a worker's personal health, as well as their on-the-job injuries, can impact productivity.

There has been relatively little rigorous research done to understand health promotion programs in small enterprises. Based on the most rigorous studies to date, which of the following is the most significant barrier to adoption of wellness programs in small enterprises:

- A. Employee interest
- B. Direct cost
- C. Management support
- D. Lack of expertise

In light of the impact of a worker's chronic health conditions, work-related injuries, and job task difficulty on productivity, which of the following recommendations should be made to employers who seek to reduce absenteeism and presenteeism:

- A. Develop a return-to-work program that matches the employee's physical capabilities with their job tasks
- B. Integrate data regarding health status, work-related injuries, and job demands
- C. Apply 'prevention through design' principles
- D. All of the above
- E. None of the above

Tuesday, April 25, 2017 ~ 5:15pm-6:15pm

SESSION 317: NEUROLOGICAL FITNESS-FOR-DUTY.....CME/MOC: 1.0

A commercial driver is considered to have a low risk for recurrent seizure if the seizure:

- A. Occurred on day 10 post head trauma
- B. Led to a subdural hematoma that did not need surgery
- C. Had an elevated blood sugar
- D. Had an unprovoked seizure 5 years ago
- E. C and D

A firefighter can perform the duties of his job if:

- A. Had a cauda equine syndrome, has leg atrophy but is the captain of his battalion
- B. Had a seizure after a stroke, 10 years ago on stable medication regimen
- C. Had a recent seizure, EEG was normal
- D. All of the above

The patient who must wait the longest to RTW is:

- A. Commercial driver: seizure after a stroke, on medications
- B. Law enforcement officer: seizure after head trauma who also had a subdural, on medications
- C. Firefighter with a brain tumor removed, on medications, who had a post SZ

Tuesday, April 25, 2017 ~ 5:15pm-6:15pm

SESSION 318: MITIGATING THE HEALTH RISK OF HYDROGEN SULFIDE AND OTHER WORKPLACE HAZARDS IN OIL AND GAS PRODUCTION.....CME/MOC: 1.0

TRUE/FALSE: In addition to hydrogen sulfide being an extremely toxic gas at low concentrations, it is also flammable and presents combustion concerns.

The implementation of control measures to mitigate workplace hazards in the oil and gas industry include:

- A. Engineering controls
- B. Administrative controls
- C. Personal protective equipment (PPE)
- D. All of the above

The hydrogen sulfide concentration in parts million (ppm) that causes nearly instant death is:

- A. 10 ppm
- B. 100 ppm
- C. 500 ppm
- D. +1000 ppm

Tuesday, April 25, 2017 ~ 5:15pm-6:15pm

SESSION 319: PATIENT SATISFACTION MEASUREMENT IN OEM.....CME/MOC: 1.0

All of the following are concerns regarding patient satisfaction surveys except:

- A. They overestimate the amount of time the doctor spends with the patient
- B. They are not truly representative of how well the doctor is following evidence-based practice
- C. They do not recognize that the doctor may be in a loyalty bind
- D. Current generic versions are not appropriate for OEM practice

The trend is to avoid the nomenclature "patient satisfaction" survey, and replace it with:

- A. Patient orientation
- B. Patient experience
- C. Patient journey
- D. Patient encounter

Which of the following is correct regarding recommendations for use of OEM specific patient satisfaction surveys:

- A. OEM clinicians should be compared with all clinicians
- B. OEM patient satisfaction scores for specific OEM encounter types are compared to all OEM encounter types
- C. A minimum 50% response rate indicates an acceptable survey
- D. A minimum of 100 surveys per clinician should exist for adequate statistical significance

Tuesday, April 25, 2017 ~ 5:15pm-6:15pm

SESSION 320: US MILITARY OEM UPDATE.....CME/MOC: 1.0

The Army executes the medical aspects of its occupational health program through:

- A. The Army Public Health Center
- B. Four Regional Health Commands
- C. Installation occupational health clinics
- D. All of the above

Which air logistics complex is the largest in the US Air Force, is famous for its nearly one mile long maintenance building, and is a bomber base:

- A. Ogden ALC (OO-ALC)
- B. Oklahoma City ALC (OC-ALC)
- C. Warner Robbins ALC (WR-ALC)
- D. Wright Patterson ALC (WP-ALC)

The largest medical surveillance program in the Navy by enrollment numbers is:

- A. Healthcare worker
- B. Firefighter
- C. Explosives handler
- D. Noise

Tuesday, April 25, 2017 ~ 5:15pm-6:15pm

SESSION 321: IS THERE A DOCTOR ON BOARD? PREPARING FOR AIRLINE MEDICAL EVENTS AND EMERGENCIES.....CME/MOC: 1.0

Disqualifying conditions for airline travel include allof the following except:

- A. Influenza A
- B. Active tuberculosis
- C. Unstable psychosis
- D. Scuba diving within 24 hours prior to flight
- E. Pregnancy near term

The most commonly reported significant medical event by airline passengers is:

- A. Allergic reaction
- B. Chest pain
- C. Shortness of breath
- D. Syncope (loss of consciousness)

E. Seizure

In accordance with FAA (Federal Aviation Administration) regulation, the cabin pressure in a commercial passenger aircraft must be maintained at no greater than an altituded equivalent of:

- A. 10,000 feet above ground level (AGL)
- B. 8,000 feet AGL
- C. 5,200 feet AGL
- D. 2,000 feet AGL
- E. Sea level

Wednesday, April 26, 2017

Wednesday, April 26, 2017 ~ 7:00am-8:00am

SESSION 401: PREVENTING MUSCULOSKELETAL DISORDERS: SCREENING AND WORKPLACE INTERVENTIONS.....CME/MOC: 1.0

Current post-offer pre-placement screening practices are:

- A. Usually based on good evidence of effectiveness
- B. Rarely evaluated for effectiveness and yield
- C. Are shown to be cost-effective for employers

The effectiveness of post-offer pre-placement screening practices:

- A. Is relatively easy to calculate or estimate
- B. Has been studied for most common screening tests and programs
- C. Is usually assessed prior to implementation of POPP screening programs

The success of the Ohio Safety Interventions Grant (SIG) Program in preventing workplace injuries is driven by:

- A. The amount of monetary incentives and grants
- B. The program design and reporting structure
- C. The employer/business size

Wednesday, April 26, 2017 ~ 7:00am-8:00am

SESSION 402: THE ROLE OF THE OCCUPATIONAL HEALTH PROVIDER IN ACTIVE SHOOTER AND BOMBER SITUATION.....CME/MOC: 1.0

According to the position/analysis paper, "Health and Medical Response to Active Shooter and Bombing Events," produced by the National Academy of Sciences:

- A. The optimization of clinical response will likely be at the expense of the occupational health of response personnel
- B. Encourage health and medical personnel to engage in an unsecured corridor
- C. Encourage a response paradigm consistent with military combat casualty techniques
- D. All of the above

One of the more important aspects of the occupational health provider may be in:

- A. Advising on, overseeing and providing appropriate behavioral health to law enforcement personnel
- B. Being prepared for the responder requirements of recovery and resilience
- C. Anticipating the psychological consequences of the employee and responder
- D. All of the above

While the threat response described in the report addresses the considerations of mass shooting (multiple casualty) and bombing settings:

- A. There are some similar considerations that apply to other post incident considerations for the occupational health provider (radiation, toxic industrial chemicals and more)
- B. The considerations for WMD and hazardous materials generating events constitute radically different considerations
- C. Occupational medicine provision has no place except in the aftermath (recovery period)
- D. All of the above

Wednesday, April 26, 2017 ~ 7:00am-8:00am

SESSION 403: GETTING YOUR START IN RESEARCH.....CME/MOC: 1.0

Per Harber et al's 2012 JOEM article, "Career Paths in Occupational Medicine," how many new OEM physicians held a position in research/public health from 2000-2010:

- A. 0
- B. 5
- C. 10
- D. None of the above

Boyer's Model of Scholarship includes all of the following types of scholarship except:

- A. Discovery
- B. Integration
- C. Teaching
- D. Application
- E. Knowledge

The three basic types of research funding sources are foundations, private industry, and:

- A. Government
- B. Lottery
- C. Inheritance
- D. Loans

Wednesday, April 26, 2017 ~ 7:00am-8:00am

SESSION 404: BETTER WC CARE THROUGH BETTER DOCUMENTATION AND CODING REQUIREMENTS.....CME/MOC: 1.0

TRUE/FALSE: The ACOEM Review of Systems trades a general review of all body systems for a review of symptoms that may increase the risk of work disability.

Which of the following is an accurate description of the exam bullet requirements using the ACOEM Occupational Medicine Specialty Musculoskeletal Exam template:

- A. The exam must document 2 bullets from each of nine different body systems to be considered a comprehensive examination.
- B. Comprehensive exam must include all bullets in all sections except that it would include EITHER a detailed spine exam OR a detailed extremity exam.
- C. A comprehensive exam must include all bullets in all sections except that it would include BOTH a detailed spine exam AND a detailed extremity exam.

Which of the following is an element of morbidity that ACOEM recommends adding to the Risk Table for Medical Decision Making in Evaluation and Management encounters in workers' compensation:

- A. Risk to life
- B. Risk of losing a limb
- C. Risk of mental anguish
- D. Risk of prolonged work disability

Wednesday, April 26, 2017 ~ 7:00am-8:00am

SESSION 405: CARBON MONOXIDE NEUROTOXICITY.....CME/MOC: 1.0

TRUE/FALSE: The primary mechanism of carbon monoxide poisoning is due to its avid binding to hemoglobin (240 times that of oxygen), which induces hypoxemia to tissues, and the carboxy-hemoglobin concentration (CO-Hgb %) is a good way to measure poisoning severity and can guide the need for therapy.

A normal, healthy adult's scores across the measures that comprise a comprehensive neuropsychological test battery typical span:

- A. Less than 1 standard deviation
- B. 1 to 2 standard deviations
- C. 2 to 3 standard deviations
- D. 3 to 4 standard deviations

Carbon Monoxide Associated Parkinsonism:

- A. Most frequently accompanies mutism, incontinence and gait abnormalities as part of a delayed neurological sequella
- B. Is most common in those <50
- C. Never includes tremor
- D. Is more common in a monophasic presentation

Wednesday, April 26, 2017 ~ 8:00am-10:00am

SESSION 400: ANNUAL MEMBERSHIP MEETING AND AWARDS PRESENTATION.....CME/MOC: 1.0

TRUE/FALSE: The Lifetime Achievement in Occupational and Environmental Medicine Award, created in 1938, is the highest honor bestowed in occupational and environmental medicine (OEM).

TRUE/FALSE: Dr. Gregory R. Wagner presented the William B. Patterson Memorial lecture on, "Ethical and Policy Challenges to Government OHS Science: Past, Present, and Future."

TRUE/FALSE: ACOEM has 24 components and 19 special interest sections.

Wednesday, April 26, 2017 ~ 10:15am-11:15am

SESSION 406: EXPOSURE, METABOLOMICS AND BIOMARKERS, AND HEALTH OUTCOMES, PART I.....CME/MOC: 1.0

TRUE/FALSE: Limited information is known about the true extent of environmental chemical exposures that occur in human populations, particularly in occupational settings and during troop deployment. Untargeted profiling methods provide high-throughput, cost-effective measures of a large number of chemicals arising from exposures. These can be used for periodic screening, testing the extent at which these exposures occur and provide measures of biological response.

TRUE/FALSE: Classes of chemicals measured using high-resolution metabolomic platforms are environmental chemicals, commercial products, dietary chemicals, microbiome-related chemicals, metabolic intermediates, amino acids, lipids, fatty acids.

TRUE/FALSE: Critical components of high-resolution metabolomics are mass spectrometry, data extraction, feature identification and biomarker selection.

Wednesday, April 26, 2017 ~ 10:15am-12:30pm

SESSION 407: DIAGNOSTIC AND INTERVENTIONAL TREATMENTS FOR UPPER EXTREMITY INJURIES USING MUSCULOSKELETAL ULTRASOUND FOR OEM PHYSICIANS.....CME/MOC: 2.0

Which of the following is the preferred sonographic window to image the distal insertion of the biceps tendon on the radius:

- A. Posterior window, longitudinal orientation
- B. Anterior window longitudinal orientation
- C. Medial or lateral window longitudinal orientation
- D. Anterior window, transverse orientation

Excess probe pressure during image of the medial elbow may result in which of the following scanning errors:

- A. Falsely positive scan for snapping of the triceps
- B. Falsely positive scan for joint effusion due to decoupling artifact
- C. Falsely negative scan for ulnar nerve subluxation
- D. Falsely positive scan for triceps subluxation

Which one of the following is typically seen when making a diagnosis of median nerve entrapment in carpal tunnel by ultrasound:

- A. Hyperemia of the median nerve just distal to carpal tunnel
- B. Hyperechoic appearance of the median nerve just distal to the carpal tunnel
- C. Hypoechoic swelling of the median nerve just proximal to the carpal tunnel
- D. Reduced size/diameter of the median nerve just proximal to the median nerve

Which one of the following is usually assessed from the dorsal aspect of the wrist during ultrasonographic examination of the wrist:

- A. Guyon's canal
- B. Scapholunate ligament
- C. Carpal Tunnel
- D. Triangular fibrocartilage

Which one of the following tendons crosses over from the ulnar to radial side in distal forearm as it courses over the tendons of second dorsal wrist compartment:

- A. Extensor Digiti Minimi
- B. Extensor Pollicis Longus
- C. Extensor Carpi Radialis Brevis
- D. Extensor Indicis Proprius

Which muscle of the rotator cuff has a multipennate sono echotexture in short axis:

- A. Subscapularis
- B. Supraspinatus
- C. Teres Minor
- D. Infraspinatus

Wednesday, April 26, 2017 ~ 10:15am-12:30pm

SESSION 408: REVIEW AND UPDATE OF 15 YEARS OF THE WORLD TRADE CENTER HEALTH PROGRAM.....CME/MOC: 2.0

Which of the following is TRUE about WTC-related longitudinal FEV1 loss:

- A. The annual FEV1 decline before 9/11 was 23 ml/year
- B. Six years after 9/11, pulmonary function continued to decline at abnormal levels

- C. Rescue workers with mild to moderate α 1-antitrypsin excess had significant decline accelerations in FEV1 above normal aging-related declines
- D. In the first year after 9/11, there was an average 372 ml decline in FEV1
- E. There was no significant difference between FEV1 levels before and after 9/11

In World Trade Center responders which of the following pulmonary conditions have been noted in responders exposed to dust and debris of WTC site:

- A. Interstitial lung disease
- B. Asthma
- C. Chronic Obstructive lung disease
- D. Small airways disease
- E. All of the above

Which one of the following is NOT an evidence based psychological treatment for PTSD:

- A. Prolonged Exposure
- B. Schema Therapy
- C. Cognitive Processing Therapy
- D. Cognitive Therapy
- E. Eye Movement Desensitization and Reprocessing

The Zadroga Act describes World Trade Center-related conditions as:

- A. Pulmonary diseases found among NYC firefighters with greater than 20 years of service
- B. Upper airway conditions found among first responders
- C. Heart diseases found among the WTC survivor population
- D. Illnesses that are substantially likely to be exacerbated or caused by exposure to WTC toxins

Responders benefit from NIOSH certification of their medical conditions as World Trade Center-related in which of the following ways:

- A. The WTC Health Program (WTCHP) will cover the cost of approved and authorized medications to treat the certified conditions
- B. The WTCHP will cover the cost of approved and authorized outpatient procedures to evaluate and treat the certified conditions
- C. The WTCHP will cover the cost of approved and authorized inpatient hospitalization to treat the certified condition
- D. All of the above

During a WTC Monitoring examination a patient presents a pathology report with a diagnosis of melanoma of the left forearm in 2003. The patient, a NYC police officer, had arrived at the disaster site on 9/11, had been caught in the dust cloud, and worked 16 hours days in rescue/recovery activities on "the Pile" from 9/11 until October 1, 2001. Some of this activity involved entry of dusty confined spaces. Based on NIOSH guidance documents, is this condition likely to be certified as WTC-related:

- A. Yes, because of the patient's high level of exposure to WTC toxins
- B. Yes, because melanoma has been recognized as a possible WTC-related condition
- C. No, because the melanoma occurred on a commonly sun-exposed area
- D. No, because of consideration of the latency period of this disease

Wednesday, April 26, 2017 ~ 10:15am-12:30pm

SESSION 409: PROVIDING A WARM HAND-OFF: CONNECTING SAFETY-NET PROVIDERS WITH OCCUPATIONAL HEALTH CONSULTATION.....CME/MOC: 2.0

TRUE/FALSE: In the Finger Lakes region of Western New York, medical care for work-related injuries and illnesses is provided by primary care providers.

TRUE/FALSE: The Centers for Occupational Health and Education (COHE) in WA State can easily connect primary care providers with occupational health specialists to provide high quality care for underserved workers.

TRUE/FALSE: Occupational Medicine Specialists working as part of a Center for Occupational Health and Education (COHE) in WA State can find it highly satisfying to care for their patients because of the additional resources, such as Health Service Coordinators (HSCs), available to them.

TRUE/FALSE: Occupational Medicine Specialists working as part of a Center for Occupational Health and Education (COHE) in WA State are readily available to provide OEM support to Primary Care Providers in the community's Federally Qualified Community Health Clinics.

TRUE/FALSE: The amount of time average PCP has per patient encounter is 15-17 minutes.

Identify the barriers to providing occupational health care in primary care settings:

- A. Patient's fear of job loss
- B. Clinician's time pressures
- C. Clinician's uncertainty about workplace exposures and accommodations
- D. All of the above
- E. None of the above

Wednesday, April 26, 2017 ~ 10:15am-12:30pm

SESSION 411: MEDICAL MARIJUANA.....CME/MOC: 2.0

TRUE/FALSE: In states where medical marijuana is legal, physicians may prescribe medical marijuana.

TRUE/FALSE: Therapeutic use of marijuana is recommended for certain chronic pain conditions under the current Colorado Workers' Compensation Medical Treatment Guidelines (MTG).

TRUE/FALSE: Workers' Compensation insurers in Colorado are required to pay for medical marijuana treatment for work-related injuries if recommended by an authorized treating physician.

TRUE/FALSE: Hospitals in states where medical marijuana is legal are totally exempt from federal law.

TRUE/FALSE: When marijuana is ingested, it can take 2-3 hours to reach a peak effect.

Which of the following is not associated with a dependency syndrome:

- A. Opioids
- B. Delta-9-tetrahydrocannabinol (THC)
- C. Benzodiazepines
- D. Cannabidiol (CBD)
- E. Cocaine

Wednesday, April 26, 2017 ~ 11:30am-12:30pm

SESSION 410: EXPOSURE, METABOLOMICS AND BIOMARKERS, AND HEALTH OUTCOMES, PART II.....CME/MOC: 1.0

TRUE/FALSE: Machine learning algorithms learn from the input data to make prediction and futuristic decisions. In current datasets, diverse molecular profiling data can be used to predict health status of the military personnel.

Polycyclic aromatic hydrocarbon (PAHs) do not effectively accumulate in the body while polychlorinated dibenzo-p-dioxins (PCDDs) and polychlorinated dibenzo-furans (PCDFs) do. The differences in their physical and chemical properties and their biological interactions that give rise to the differences are:

- A. PAHs are readily metabolized, become more polar, and are excreted within a few days
- B. PCDDs and PCDFs are strongly lipophilic and partition into body fat making them harder to metabolize
- C. The polychlorinated species are hard to oxidize and thus are retained over longer time periods
- D. All of the above

The reasons that microRNA (miRNA) levels should be considered as indicators of occupational exposure are:

- A. miRNAs are found in blood (serum), sweat, tears and urine – common biofluids that can be obtained for biomarker analysis
- B. MicroRNAs are endogenous RNAs and are more stable than other RNAs due to their short size and sequestration in protein-RNA-lipid complexes
- C. Equipment to detect miRNA levels (i.e. PCR machine) are readily available and commonplace in many areas of the world
- D. miRNA signatures or clusters represent a set of biomarkers, increasing the power of biomarker detection
- E. All of the above

2017 AOHC Maintenance of Certification (MOC) Self-Assessment

ANSWER KEY

INSTRUCTIONS

In order to be awarded ABPM MOC credit, attendees should:

- Complete this ABPM MOC self-assessment (for each session you are claiming credit for).
- Self-grade your answers using this answer key.
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- **Be sure to list your answers on the back of the CME/MOC Attendance Verification form, otherwise MOC credit cannot be awarded!**
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SESSION 900-A: MEDIA TRAINING.....CME/MOC: 4.0

FALSE: The purpose of an interview is to answer a reporter's question.

TRUE: The "news hole" is the amount of time in a newscast actually devoted to news.

TRUE: Radio and TV news stories are in pre-determined lengths.

FALSE: "No comment" is a smart reply to employ when you don't wish to answer a reporter's question.

TRUE: There is no such thing as off-the-record in talking with reporters.

FALSE: Off-the-record is a safe way to share information with reporters without attribution.

FALSE: News stories are written in pyramid structure.

A network evening news program lasts: B. 30 minutes

The term for moving from a reporter's question to your message is called: B. Bridging

The best time to reach a radio news director is: C. 10 minutes after the hour

The most common length of a TV news story is: C. 90 seconds

Wearing half-frame reading glasses for TV interviews makes you look: C. Dorky

SESSION 102: MONITORING LONGITUDINAL LUNG FUNCTION MEASUREMENTS USING SPIROLA.....CME/MOC: 1.5

FALSE: SPIROLA analysis of lung function decline will tell the user if the rate of decline in FEV1 for one group of people is statistically significantly different than the rate of decline for another group of people.

TRUE: OSHA often "trades off" citations for increased and improved abatement and can issue 5(a)(1) letters where it thinks a formal citation will not prevail.

TRUE: Of the three main lung function measurements, FEV1 is the most repeatable and least variable measurement and is reduced by diseases causing obstructive or restrictive lung function impairments.

Which of the following methods is recommended by the American Thoracic Society Approaches to Detect Excessive Decline FEV₁ in individuals undergoing medical surveillance: D. All of the above

Starting from the age of _____ onward, a person's lung function naturally declines as part of aging: C. 25-30 years

SESSION 101: INTRODUCTION TO OEM.....CME/MOC: 3.0

FALSE: NFPA 1582 applies to all aspects of firefighting.

TRUE: An engineer with a seizure 2 months earlier can operate a train.

FALSE: There are similar medical standards to FMCSA for locomotive engineers beyond vision, hearing and color vision.

FALSE: The FTA has issued medical standards for light rails and bus operator prohibiting the use of insulin.

TRUE: The subspecialties of "general preventive medicine" include addiction medicine; medical toxicology; and undersea and hyperbaric medicine.

A person with a seizure disorder might be restricted due to: D. Risk of sudden incapacitation

ACOEM LEO Guidance: E. B and C

The following must be calibrated for clinic use in surveillance examinations: D. All of the above

Agencies that have regulations concerning a ship's crew include: D. All of the above

SESSION 103: OCCUPATIONAL AND PERSONAL RISK FACTORS IN ILLNESS AND INJURY: THE NIOSH COMPENDIUM PROJECT.....CME/MOC: 3.0

TRUE: Occupational and personal risk factors can have interrelationships that are associated with adverse effects.

FALSE: The US Drug Enforcement Administration considers both prescription-drug abuse and heroin to be growing equally as drug problems.

TRUE: Opioid and benzodiazepine use as a personal risk factor can result in risks of adverse outcomes from using these medications, even when prescribed for medically appropriate use, while in the workplace.

A risk factor can play which of the following roles depending on the occupational context in which that factor is found: D. All of the above

Evidence in the published literature supports a role for obesity in different occupational settings as: C. Personal risk factor and an adverse health effect

Evidence in the published literature supports a role for physical inactivity in different occupational settings as: E. Occupational and personal risk factor

Which of the following is true regarding the search strategy of the NIOSH Compendium Project: A. The overall goal of the search strategy is to evaluate the scientific evidence for potential interrelationships among personal and occ. risk factors and adverse health effects or outcomes

In the models presented, prescription drug refers to: E. Opioids and/or benzodiazepines

Which of the following have been shown to be inter-related to health disparities due to ethnicity: E. All of the above

SESSION 104: RESEARCH LABORATORY BIOHAZARD EXPOSURE MANAGEMENT.....CME/MOC: 3.0

FALSE: A macaque colony can be considered free of B Virus if no animals test positive in a calendar year.

The medical surveillance strategy most often used for Herpes B virus can be described as follows: D. Post event testing

For lentiviral vector 3rd generation exposures, which drug or drugs are considered by those who offer post exposure prophylaxis first choice options: E. A, B, and C

Which component of a research occupational surveillance program is least important: D. History of irritable bowel syndrome

Non-vector transmission of Zika virus infection can occur in all of the following except: D. Stool exposure

Optimal acute exposure management of macaque secretions requires all of the following except: B. Knowledge of the source animal's B Virus test results

Which of the following medical conditions increase the risk of poxvirus complications and contra-indicate vaccinia vaccination: D. All of the above

Factors increasing exposure risk to Herpes B virus include: E. All of the above

Risk factors for the development of the chronic form of Q fever include all of the following except: C. Age <30 years

SESSION 105: OCCUPATIONAL SPIROMETRY HIGHLIGHTS: PITFALLS AND INTERPRETATION.....CME/MOC: 1.5

TRUE: Real-time graphs of volume vs. time and flow vs. volume are extremely helpful in obtaining accurate spirometry test results.

FALSE: The American Thoracic Society (ATS) requires a maximum of 3 forced expirations for the measurement of Forced Vital Capacity (FVC) and Forced Expiratory Volume in one second (FEV1).

TRUE: The predicated value is the average level of lung function that is expected for a subject based on his age, height, sex, and race.

TRUE: Since spirometer calibration check results support the accuracy of the spirometry test recorded on the same day as the check, it is prudent to save calibration checks as long as subject tests are saved.

TRUE: The reference values generated from the 3rd National Health and Nutrition Examination Survey (NHANES III) have been recommended by the American Thoracic Society and by OSHA for use in the US.

SESSION 900-B: MEDIA TRAINING.....CME/MOC: 4.0

FALSE: The purpose of an interview is to answer a reporter's question.

TRUE: The "news hole" is the amount of time in a newscast actually devoted to news.

TRUE: Radio and TV news stories are in pre-determined lengths.

FALSE: "No comment" is a smart reply to employ when you don't wish to answer a reporter's question.

TRUE: There is no such thing as off-the-record in talking with reporters.

FALSE: Off-the-record is a safe way to share information with reporters without attribution.

FALSE: News stories are written in pyramid structure.

A network evening news program lasts: B. 30 minutes

The term for moving from a reporter's question to your message is called: B. Bridging

The best time to reach a radio news director is: C. 10 minutes after the hour

The most common length of a TV news story is: C. 90 seconds

Wearing half-frame reading glasses for TV interviews makes you look: C. Dorky

SESSION 106: OCCUPATIONAL DERMATOSES: WHAT THE PRACTICING OCC DOC NEEDS TO KNOW.....CME/MOC: 1.0

TRUE: Irritant contact dermatitis is more common than allergic contact dermatitis.

What is the most commonly involved body part in occupational contact dermatitis: E. Hands

Common occupational irritants include the following: E. All of the above

SESSION 107: CUTTING-EDGE SUSTAINABILITY MODELS FOR HEALTH CARE EMPLOYERS: DELIVERING WELL-BEING TO PATIENTS, EMPLOYEES, AND THE COMMUNITY.....CME/MOC: 1.0

FALSE: Human well-being cannot be measured.

Healthcare workers: B. With higher levels of wellbeing are more productive and less likely to be absent from work

What are handprints: B. Reflect positive social, environmental and economic impacts of human activity

SESSION 108: PROTECTING HEALTH CARE WORKERS IN HOSPITALS: THE PRO PPE SENTINEL SURVEILLANCE SYSTEM FOR CONTAGIOUS PATHOGENS.....CME/MOC: 1.0

Hospital departments responsible for implementing PPE programs include: G. All of the above

PRO stands for: C. Preparedness, responsiveness, outcomes

Participating hospitals have reported that PRO helps them: D. All of the above

SESSION 109: CLUSTER BUSTERS: THE APPROACH TO CANCER CLUSTERS AND THE LIMITATIONS OF ENVIRONMENTAL EPIDEMIOLOGY.....CME/MOC: 1.0

FALSE: Most cluster investigations will be successful in identifying an environmental cause if the recommended approaches are followed.

TRUE: The prevalence of cancer in the US is increasing.

Cancer cluster investigation may be warranted if: D. All are true

SESSION 110: BECOMING AND MAINTAINING BOARD CERTIFICATION IN OEM.....CME/MOC: 1.0

In order to maintain certification by the ABPM, a diplomate must: E. All of the above

Maintenance of Certification (MOC): A. Is the process for assessment of continuing competencies of physicians and recertification in all specialties recognized by the ABMS

MOC Part IV: C. Requires an activity every five years in a ten year certification cycle for diplomates

SESSION 111: APPLICATION OF ADVANCED NEUROSCIENCE THEORIES TO THE TREATMENT OF WORKERS WITH PAINFUL MUSCULOSKELETAL CONDITIONS.....CME/MOC: 1.0

FALSE: Carpal tunnel injection only provides short term relief.

In population studies, surgery for carpal tunnel syndrome: A. Occurs at a younger average age when it is work-related

Functional restoration (multidisciplinary rehabilitation) for chronic upper extremity pain: A. Improves return-to-work

SESSION 112: USING CUTTING-EDGE INFORMATICS TOOLS TO ENHANCE OCCUPATIONAL HEALTH SERVICES IN ACADEMIC MEDICAL CENTERS.....CME/MOC: 1.0

Fast Healthcare Interoperability Resource (FHIR) new interoperability standard introduced by health level VII (HL7) utilizes which web standard for interoperability and connectivity: C. API (application programming interface)

Data warehouses store information gleaned from electronic health records and other databases to be used for: E. All of the above

A few of the EMR's currently being used in the VA healthcare system are: E. All of the above

SESSION 113: PREGNANT WORKER: CURRENT CHALLENGES AND CURRENT CONCEPTS.....CME/MOC: 1.0

TRUE: Pregnancy Discrimination Act (PDA) of 1978 prohibits discrimination based on pregnancy, childbirth or related medical conditions.

Pregnant fliers are allowed up to how many weeks for single pregnancies in many US and international airlines: C. 36 weeks

Every October, Working Mother magazine publishes a list of the best 100 companies for working mothers. The following are some benefits offered by most companies on the list except: B. Nurse home visits

SESSION 114: JOURNAL CLUB FOR THE PRACTICING OEM PHYSICIAN.....CME/MOC: 1.0

FALSE: The standardized mortality ratio is based on incidence data.

FALSE: The healthy worker effect lasts 5 years.

Which statement is true about the external validity of an epidemiological research study: D. All of the above

SESSION 100: OPENING SESSION: INDUCTION OF NEW FELLOWS AND C. O. SAPPINGTON LECTURE.....CME/MOC: 1.0

TRUE: The C. O. Sappington lecture was established in 1949 after the sudden passing of Dr. Sappington and was created in recognition of his many significant contributions to occupational medicine.

TRUE: Ronald R. Loepke, MD, MPH, FACOEM, with US Preventive Medicine Inc., delivered this year's Sappington lecture on, "Leveraging the Power of Prevention in the Global Quest for Better Health and Safety."

TRUE: The status of Fellow is the highest classification of membership in ACOEM.

SESSION 200: WHAT CONSTITUTES EXCELLENCE: THE BEST CORPORATE HEALTH AND SAFETY PROGRAMS IN AMERICA.....CME/MOC: 1.0

TRUE: In the CHAA process it is important for organizations to have developed metrics for its programs and provide trend data showing a reduction of health risk, health-cost savings, and other impact on the business.

TRUE: The revised self-assessment tool can be used by companies to both provide an education opportunity as well as feedback for the direction an organization might take for improvement or to apply for the Corporate Health Achievement Award.

TRUE: CHAA award recipients have been demonstrated to have a strong financial performance when compared to non-CHAA recipients.

SESSION 201: OPPORTUNITIES FOR INTEGRATING HEALTH AND PROTECTION AND HEALTH PROMOTION.....CME/MOC: 1.0

Which of the following best matches NIOSH's definition of Total Worker Health: B. Integration of health protection and health promotion

Select from the following the reason(s) of concern for obesity and poor sleep in the oil and gas industry: D. All of the above

Which of the following is not a key component for successfully integrating sleep health and weight management programs: A. Communicating ROI as the core of the business case

SESSION 202: BECOMING AN ACOEM FELLOW.....CME/MOC: 1.0

Which of the following requirements must be met in order to qualify for fellowship: F. All of the above

TRUE: An ACOEM member is eligible to apply for fellowship when he/she has held membership in the College as a master or active member for a period of no fewer than three years.

TRUE: The deadline for submitting a fellowship application is November 1st.

SESSION 203: THE INDEPENDENT MEDICAL EXAMINATION.....CME/MOC: 1.0

One of the most basic forms of IMEs, and a recommended exam for beginners to start with is: B. The Comprehensive Examination (CE) within the Social Security Disability System

An informed consent document is important in the IME context because: C. There is no doctor-patient relationship and the roles of the examiner and examinee must be clearly defined and agreed upon

A "temporary aggravation" is: D. Not correct medical terminology, but appears in some state workers compensation statutes, and has the same meaning as "exacerbation"

SESSION 204: ACOEM LEGISLATIVE AND GOVERNMENT AFFAIRS UPDATE: RECENT WINS AND ONGOING CHALLENGES FOR THE PUBLIC AFFAIRS COUNCIL.....CME/MOC: 1.0

FALSE: Because purely environmental regulations frequently require non-clinical expertise, ACOEM does not view advocacy about EPA regulations as part of its overall mission.

Which of the following is not a role of ACOEM's Public Affairs Council: C. Advocate for specific candidates for elective office.

In the past 8 years, all of the following topics have been the subject of ACOEM advocacy, except: D. Optimal Utilization Review procedures for clinical care under Workers' Compensation.

SESSION 205: RESTORING FUNCTION AND RETURN-TO-WORK AFTER SPINAL CORD INJURY: PEAK STRATEGIES.....CME/MOC: 1.0

Activity-based therapy is: C. Therapy that focuses on activating the nervous system both above and beyond the level of a nervous system injury

The following are common secondary health complications seen after neurologic insult: D. All of the above

Community wellness centers serving individuals with neurologic insult are focused on the following goals: D. All of the above

SESSION 901: ADVOCACY TRAINING.....CME/MOC: 4.0

FALSE: Numbers always win the day in advocacy, so a thousand postcards is better than 100 letters from constituents.

TRUE: Letters and personal visits will have more lasting impact if accompanied by a handout or background paper.

FALSE: Members of Congress are busy year-round, so it's better to wait till you have a big issue pending before trying to get any face-to-face time on their schedule.

FALSE: Members of Congress are well-briefed on the legislation before them so in a personal visit you can assume they already have a good grasp of your issue.

TRUE: Not having the answer to every question during an advocacy visit is an opportunity to follow up with a note and attached information.

FALSE: If you can't schedule a face-to-face meeting with your member of Congress, it's best to skip wasting your time with a staff aide.

TRUE: If you are unable to see your member of Congress in Washington, a good option is wait till he/she is back in his/her district office and meet there.

TRUE: Having a personal/patient story ready to back up your organization's position is a compelling way to sell your issue.

FALSE: A good way to develop a relationship is to bring along a donation check on your visit.

TRUE: It is illegal for a member of Congress to solicit campaign contributions in his/her office.

In determining which arguments to sue in advocating a position, you should put the most weight on the ones: C. Most likely to address the listener's reservations

If the member of Congress agrees with your position, you can: B. Meet to ask how you can help he/she advance legislation

SESSION 206: OEM AND HUMAN FACTORS: COLLABORATIVE EFFORTS AND UPDATE.....CME/MOC: 1.5

TRUE: From a macroergonomics perspective, human performance (or injury) is best understood as the result of humans performing an activity in a context.

FALSE: Proper equipment and training alone will eliminate workplace injuries.

TRUE: It is possible to quantitatively assess risk due to job exposure using biomechanical assessment.

TRUE: The extent of low back impairment can be quantified via a kinematic signature.

To become a certified professional ergonomist (CPE) the following is adequate: E. All of the above

SESSION 207: WHAT YOU CAN DO WITH THE COHE MODEL: IMPLICATIONS FOR ACTION.....CME/MOC: 1.5

COHE stands for: C. Centers for Occupational Health and Education

Which one of the following is not an organizational/operational feature of the COHE program: E. COHEs can bill L&I (the claims payer) for the time and travel expenses they incur when recruiting new COHE providers

Which one of the following is not one of the original four best practices that COHE clinicians are expected to perform – and code/bill for: D. Referral for a facilitated solution-finding meeting at the worksite after 30 days of work disability

Research has confirmed that COHE program has improved outcomes in which of the following areas: E. All of the above

Which one of the following is not currently being piloted as an enhancement to the COHE program: B. For patients identified as at risk, referral to a psychologist for CBT

SESSION 208: MRO CONTROVERSIES.....CME/MOC: 1.5

TRUE: In the past decade there has been both an increase in opioid sales and in opioid overdoses and there appears to be an opioid epidemic.

If semisynthetic opioids are tested for in DOT urine drug test panels which of the following is likely to be true: D. A and B are likely to be true

The number of overall positive drug screens for marijuana has _____ since the passage of the Washington Initiative 502 in 2012: A. Increased

The percentage of positive drug screens for marijuana in regulated industries has _____ since the passage of the Washington Initiative 502 in 2012: C. Stayed the same

The percentage of positive drug screens for marijuana in non-regulated industries has _____ since the passage of the Washington Initiative 502 in 2012: A. Increased

SESSION 209: WHAT WE CAN LEARN ABOUT BACK PAIN AND WORK USING POPULATION-BASED DATA FROM THE NHISCME/MOC: 1.5

What was the estimated prevalence of any low back pain in the past 3 months among U.S. workers in 2015: D. 26.8%

What was the estimated prevalence of frequent and severe low back pain in the past 3 months among U.S. workers in 2015: B. 8.3%

Nationally representative data on the prevalence of which of the following workplace physical/ergonomic risk factors were collected through the 2015 Occupational Health Supplement to the NHIS: D. A and B

Nationally representative data on the prevalence of which of the following psychosocial risk factors were collected through the 2015 Occupational Health Supplement to the NHIS: G. All of the above

Which of the following occupational risk factors was most strongly associated with low back pain among workers in both logistic regression and tree analysis: C. Hostile work environment

SESSION 210: RESIDENT RESEARCH ABSTRACT PRESENTATIONS.....CME/MOC: 3.0

TRUE: Female industrial workers are more likely to be prescribed opioid medication than males.

TRUE: Research capacity and mentoring remain strong in US occupational medicine residencies.

FALSE: Based on the results of the analysis presented, one can conclude that the poultry processing industry poses the highest risk, related to other industries, for occupational finger amputation.

An increase in which of the following pre-exertion variables is associated with increased odds of reaching maximal permissible heart rate (MPHR) during a toxic entry in PCAPP munitions disposal workers: D. All of the above

The physiological Strain Index is composed of which of the following indicators: C. Heart rate and core (rectal) temperature

In the study that was presented on the "Use of Military Occupational Codes to Estimate Inhalational Exposures in Military Deployers," which of the four major Marine MOS groups had the highest risk for exposure to burn pit smoke and desert dust storms: A. Combat

The most common perpetrators of violence against healthcare personnel are: A. Patients

Which of the following is not a common component of crude oil: D. Isoamyl acetate

Compared to the general US population, prevalence of undiagnosed diabetes mellitus among this commercial motor vehicle driver sample is: B. Higher, difference less than 1%

SESSION 211: OSHA/NIOSH INVESTIGATIONS: EXPLORING NEWLY EMERGING AND PERSISTENT OCCUPATIONAL SCOURGES.....CME/MOC: 3.0

TRUE: There is currently no OEL for THC.

FALSE: Benzalkonium chloride, a quaternary ammonium compound found in many cleaning products, soaps, and other products, is a skin irritant but not a sensitizer.

FALSE: Current dosimeters accurately measure total noise exposure of impact noise.

Butane is commonly used in cannabis industry to: B. Extract THC

What is the OEL for endotoxin exposure set by the Dutch Expert Committee on Occupational Safety: D. 90 EU/m³

The most common causes of allergic contact dermatitis in health care workers include: E. All of the above

When classifying the toxicity of a chemical (ie: for a safety data sheet), OSHA's Hazard Communication Standard requires the following: B. All available information bearing on classification must be considered

As shown with NIOSH's hammer forge example, workers exposed to impact noise may show hearing loss due to a significant threshold shift due to impact noise: B. After about 5 years of work

What type of hearing protection should hammer operators wear: C. Dual (ear plugs and ear muffs)

SESSION 212: INTERDISCIPLINARY APPROACHES TO ADDRESSING THE INTERNATIONAL EPIDEMIC OF CHRONIC KIDNEY DISEASE OF UNKNOWN ORIGIN (CKDu) IN AGRICULTURAL WORKERS.....CME/MOC: 1.5

TRUE: The prevailing hypothesis is that repeated dehydration and heat stress cause CKDu.

FALSE: By providing workers with short rest periods in shaded areas and with hydration, CKDu is eliminated.

Sugar cane workers are at increased risk for developing chronic kidney disease of unknown cause (CKDu). Which of the following statements about this condition is most correct: C. The disease can progress to end stage renal failure requiring dialysis or transplantation

Recent research at the University of Colorado in Guatemala examines environmental and personal health risk factors.....start and end of the sugar cane cutting season, which of the following risk factors are associated with decline in kidney function: D. All of the above

Occupational health professionals can address the epidemic of CKDu by: D. All of the above

SESSION 213: RESPONSIBILITIES OF THE OCCUPATIONAL AND ENVIRONMENTAL MEDICINE PHYSICIAN IN THE TREATMENT AND PREVENTION OF CLIMATE CHANGE RELATED HEALTH PROBLEMS.....CME/MOC: 1.5

TRUE: Climate change is causing more episodes of extreme heat and exacerbating increased concentration of outdoor air pollutants such as ground level ozone.

Which health effect attributed to climate change is most likely to be a management problem in the short term: A. Heat stress and outdoor work, such as construction work

Which management option is least likely to be successful for the occupational physician concerned about managing climate-related health threats: C. Make a presentation to senior managers of an employer laying out your concerns in detail and presenting scientific evidence

Identify the challenge(s) to occupational health professionals presented by climate change issues: G. All of the above

Climate change influences the pattern of vectorborne disease in which of the following ways: D. All of the above

SESSION 214: SIT VERSUS STAND: OPTIMAL COMBINATIONS FOR MANAGING LOW BACK PAIN.....CME/MOC: 1.5

FALSE: A majority of epidemiological studies examining low back symptoms among users of sit-stand computer workstations have adequate statistical power due to sample sizes of greater than N=100 participants.

FALSE: An important strength of the epidemiological literature of sit-stand computer workstations is the double-blinding of participants and investigators regarding workstation intervention status.

TRUE: A relative strength of laboratory-based studies of sit-stand workstations is the ability to minimize the effects of confounding variables on observed outcomes.

FALSE: Standing all day is a viable solution to reduce musculoskeletal disorders caused by sitting.

FALSE: Once a worker develops pain, changing to a new posture will alleviate the pain.

SESSION 215: WHAT PHYSICIANS NEED TO KNOW ABOUT HEALTH CARE ERGONOMICS: SAFE PATIENT HANDLING AND BEYOND.....CME/MOC: 3.0

TRUE: The Vanderbilt Occupational Health Clinic's ergonomics program uses these steps to troubleshoot.....assemble stakeholders; obtain departmental ownership; performing assessment; recommending changes; prioritizing changes; implementing changes; monitor results.

TRUE: State laws mandating safe patient handling policies and procedures are currently in effect in 11 states.

TRUE: The payback period for ceiling lifts is typically less than 5 years.

Benefits to the patient from properly used of safe patient handling equipment include: D. All of the above

Which of the following is not one of the steps of NIOSH's Elements of Ergonomics Program: B. Reactive ergonomics

Custodian's work typically involves: D. All of the above

Essential for safer use of the vacuum backpack is: A. Weight distribution of the backpack over the hips

Lessons learned or confirmed from this project include: A. Hands-on performance of new training behaviors/tools was essential

According to the American Nurse Association survey, the most common reason for unanticipated departure from the nursing profession is: D. Back injuries on the job

SESSION 216: TED2 - THE BEST OF OEM: TOP OEM CONTRIBUTIONS TO THE WORLD.....CME/MOC: 1.5

What is one of the simplest formats for a TED Talk: B. What? So What? Now What?

Which one of the following is not one of the TED Talk 10 commandments: D. Thou shalt not worry about stealing the time of them that follow

Which of the following exemplifies best practices in giving a TED talk: E. All of above exemplify best practices

Which of the following is a correct statement about fonts and text in a presentation: D. All of the above

What is the most visually interesting and memorable on slides: A. Pictures and drawings

SESSION 217: DRUG FORMULARIES IN WORKERS' COMPENSATION.....CME/MOC: 1.5

FALSE: The ODG Formulary is organized by diagnosis, while the entries in the Reed Group formulary are organized by drug class.

TRUE: Since about 2000 in many states, opioids have topped the list of medications prescribed under workers' compensation (by both cost and number of prescriptions), and have topped the list of prescribed services disputed under utilization review (UR).

TRUE: The Reed Group formulary's entries are drawn from the evidence base in the ACOEM Practice Guidelines.

Which of the following prescribing problems is a Workers' Compensation formulary least likely to address: B. Delays in UR approval for uncommonly prescribed medications

The ACOEM Policy Paper on Workers' Compensation Formularies recommends that a Workers' Compensation P&T (Pharmacy and Therapeutics Committee) be responsible for overseeing.....Formulary operations, except: C. Oversight of UR decisions for specific patients

SESSION 218: OEM AND WORKPLACE WELLNESS: PAVING THE WAY FOR VALUE-DRIVEN POPULATION HEALTH.....CME/MOC: 1.5

Value-driven population health (VDPH) is concerned with: C. Both health and cost outcomes

The workplace wellness successes of leading employers are: D. Are highly representative of VDPH in action

The value equation crosswalk refers to the outcomes to cost equation: A. Whose form is shared by all stakeholder groups but whose parameters differ by group

As a field, the measurement of workplace wellness has: B. Made much progress in terms of validity and reliability, but improvement is still possible

Workplace wellness offers a model for recent VDPH provider breakthroughs in which of the following areas: D. All of the above

SESSION 219: THE BERYLLIUM STANDARD: FROM SCIENCE TO POLICY.....CME/MOC: 1.5

FALSE: OSHA formally asked for public input on a possible beryllium rule in 2012.

ACOEM provided OSHA testimony regarding the proposed Beryllium Standard. Which of the following was *not* part of ACOEM's position: E. ACOEM supported requiring screening that would include helical CT scans for detecting beryllium-related cancer

The clinical work up for a patient or worker who has had potential for exposure to beryllium in the workplace and has respiratory symptoms of cough.....all of the following except: D. Starting the patient on prednisone to determine if s/he is improved with treatment

Chronic beryllium disease has both genetic and exposure risk factors. Based on the research studies presented, what lifetime weighted average (LTWA) exposure level results in zero risk of CBD: D. There may be no safe level for those who are most susceptible

Key provisions for the OSHA Final Rule to Protect Workers from Beryllium Exposure include the following: E. All of the above

SESSION 220: COMPLIANCE, COMPASSION, AND COMPANY: DIFFERING PERSPECTIVES ON EFFECTIVE RETURN-TO-WORK PRACTICES.....CME/MOC: 1.5

An August 2004 OSHA, held that the HIPAA privacy rule does not require employers to remove names from the OSHA 300 log because: C. Exception under HIPAA for records required by law

An on-site clinic must comply with HIPAA standard applicable to a covered entity if the clinic engages in any HIPAA standardized transactions which include all of the following except: E. All of the above

Exception to confidentiality under HIPAA include: E. A, B, and C

The Genetic Information Nondiscrimination (GINA) act of 2008: D. Limits disclosure of a person's genetic information in any aspect of employment

All of the following are examples of information protected under GINA except: D. Medical surveillance data

SESSION 221: CREATING YOUR OWN OEM ELEVATOR PITCH.....CME/MOC: 1.5

TRUE: One of the best ways to develop a great elevator pitch is to crystallize your ideas, write them down, develop a draft pitch, and share them with others to get critique, revise your pitch, and practice it repeatedly before entering the elevator with an important listener.

FALSE: Stories are wonderful ways to gain a listener's attention and to grip their interest - and it better to include powerful stories in your elevator pitch.

Which of the following best describes the term "elevator pitch": E. An inspiring 2-minute conversation you can have to promote a great idea or proposal

The art of elevator communication includes which of the following: E. Gaining commitment to explore more fully

A successful elevator pitch focuses on which of the following: C. One powerful, great idea and no more than two supporting points

SESSION 222: MULTI-PRONGED APPROACH FOR ADDRESSING OPIOID AND CHRONIC PAIN MANAGEMENT IN COLORADO.....CME/MOC: 1.5

TRUE: Prescription opioids account for 36% of drug poisoning deaths in Colorado.

TRUE: More than half of people who abuse prescription opioid report obtaining them for free from a friend or relative.

Education efforts and new legislation in Colorado aim to increase adoption of best practices among providers and prescribers. What are the most important steps for providers to adhere to: F. All of the above

Clinicians should monitor patient adherence to the treatment plan, especially with regard to potential misuse and abuse of opioid analgesics. Which of the following statements..... A. Prescribers should recognize, document, and address aberrant drug-seeking behavior

When being prescribed an opioid, patients should be counseled on several issues related to the safe use, storage, and disposal of medications. These include which of the following: F. All of the above are important issues to explain to/discuss with patients

SESSION 223: PSYCHOLOGICAL FITNESS-FOR-DUTY TOOLKIT FOR OCCUPATIONAL MEDICINE: THREAT PREPAREDNESS, ASSESSMENT, AND RESPONSE.....CME/MOC: 1.5

TRUE: When sending an employee for a psychological fitness-for-duty exam, the occupational physician needs written release for the report to be sent to the employer.

TRUE: The need for a written release to send a fitness-for-duty exam results to an employer is not required when there is a threat of harm to the persons or property of the employer.

FALSE: Mental illness is more tightly associated with violence in the workplace than substance abuse.

Post-Traumatic Stress Disorder (PTSD) can create functional impairments leading to behavioral concerns in the workplace. Which of these are not indicative of a PTSD diagnosis: D. Substance abuse

A fitness-for-duty with a violence screen focuses on _____, whereas a threat of violence consultation focuses on _____: C. An individual employee who has made a direct or indirect threat of violence; protecting the workplace from a potential threat

SESSION 224: PROMISING PRACTICES TO PROMOTE COMMERCIAL DRIVER WELLNESS.....CME/MOC: 1.5

TRUE: FMCSA may remove a medical examiner from the National Registry of Certified Medical Examiners if it is determined that a medical examiner issue.....operator of a commercial motor vehicle who failed to meet the applicable standards at the time of the examination.

TRUE: Driver wellness programs must be customized to the driver population in question.

TRUE: When designing a driver wellness program, utilizing existing programs at an employer or in the community is a good foundation for these programs.

Which of the following are challenges in implementing driver wellness programs.....

1. Long hours; 2. Affordable healthcare; 3. Poor food choices; 4. Vibration: D. All of the above

Many commercial drivers have multiple health risk factors which include: D. All of the above

SESSION 225: THE NEW OSHA SILICA STANDARD.....CME/MOC: 1.5

FALSE: Under OSHA's new silica standard, the physician or other licensed health care professional must advise the employer of any recommended limitations on an employee's exposure....crystalline silica, even if the employee has not signed a written authorization.

FALSE: Low dose computed tomography is recommended for routine use in preventing lung cancer in silica-exposed workers.

FALSE: Under the new silica standard, before construction workers can be permitted to cut through masonry materials the employer must have carried out sampling for airborne silica concentrations on a substantially similar set of tasks.

The components of medical surveillance for silica-exposed workers under OSHA's new standard include: E. All of the above

Under OSHA's new silica standard, all of the following statements are true except: D. Employees with chest x-rays classified as 1/1 or higher by the B-reader must be offered a referral to a specialist for evaluation

SESSION 226: GULF WAR ILLNESS: CLINICAL AND RESEARCH RECOMMENDATIONS AND CONTROVERSIES.....CME/MOC: 1.5

Which of the following symptom domains are part of both the Kansas and CDC case definition for GWI: E. C and D

Which of the following medical conditions is an exclusionary condition for the Kansas case definition of GWI: A. Diabetes

What is the best long-term treatment for chronic pain in patients with GWI: C. Physical therapy, non-impact exercise (e.g., swimming, yoga, pilates)

The gastro-intestinal diagnosis most commonly made with GWI, which can be a "service-connected condition," is: D. Irritable bowel syndrome

Challenges in GWI research include: E. All of the above

SESSION 227: ACOEM'S MAINTENANCE OF CERTIFICATION, PART IV.....CME/MOC: 1.0

TRUE: The ACOEM Part IV program is designed so that a physician self-evaluates their medical practice in either direct patient care or in non-direct patient care areas such as teaching, research, or administration.

The Maintenance of Certification standards are developed by the following: C. ABMS

An improvement action plan that would be acceptable to complete for the ACOEM Part IV program could include: D. All of the above

SESSION 228: SO, YOU WANT TO BE AN ACOEM LEADER?.....CME/MOC: 1.0

TRUE: Both components and special interest sections have a voice in the House of Delegates.

Which of the following is a potentially valuable activity for physician volunteers within a component: E. All of the above

Which of the following is a correct statement about serving on the Board of Directors: C. The best way to achieve enough visibility to win election to the BOD is to be involved in several ACOEM sub-organizations

SESSION 229: FIREARM INJURY: FACTS, MYTHS, AND WHAT SCIENCE TELLS US.....CME/MOC: 1.0

TRUE: Risk for firearm homicide is highest among young African-American men; risk of firearm suicide is highest among elderly white men.

FALSE: Federal and state generally prohibit physicians from asking patients about access to and use of firearms.

Among handgun purchasers, a prior conviction for DUI or other alcohol-related crime is associated with an adjusted relative risk of future arrest for a violent or firearm-related crime that is approximately: B. 4%

SESSION 230: A GUIDE FOR THE PRIMARY CARE PHYSICIAN IN EVALUATING DIISOCYANATE-EXPOSED WORKERS.....CME/MOC: 1.0

Respiratory sensitization to diisocyanates is most likely to result in: C. Occupational asthma

For workers exposed to diisocyanate chemicals, workplace evaluation is recommended for those reporting work-related: E. All of the above

A diisocyanate exposed worker.....dyspnea with exertion at work.....me on 2/5 days during work week. A methacholine challenge test performed on the last day of two consecutive work weeks reveals a $PC_{20}=8$ mg/ml. The worker can be advised to: D. Remove from his job and evaluate monthly

SESSION 231: CONVERSION DISORDER AND FUNCTION NEUROLOGICAL CONDITIONS.....CME/MOC: 1.0

The term FEIGNING refers to all answers except: C. Disassociation seizures

Functional Neurological Disorder refers to: C. Conditions that refer to neurological dysfunction without evidence for structural brain dysfunction

Examples of Pure Functional Neurological Disorders include: D. Post-traumatic Hemiplegia with Negative Brain MRI

SESSION 232: IOMSC: UPDATE AND FUTURE DIRECTIONS.....CME/MOC: 1.0

TRUE: A challenge for many of the societies who are members of IOMSC is a lack/decline of occupational medicine specialists.

TRUE: The IOMSC now has a constitution and executive committee.

Some of the success of the societies who are members of IOMSC include: E. All of the above

Tuesday, April 25 ,2017 ~Answer Key

SESSION 801: DENVER FIRE ACADEMY WORKSITE VISIT.....CME/MOC: 3.0

FALSE: In NFPA 1582, the medical requirements are the same for applicants and for incumbents.

TRUE: Sudden cardiac death is the number one cause of on-duty firefighter fatalities.

NFPA 1582 is: C. Voluntary standards for fire departments

NFPA is updated: C. Every 4-5 years

How long must a firefighter be stable on warfarin before returning to full duty: D. Never (firefighter on Coumadin must remain restricted)

Activities associated with heavy physical exertion has been shown to trigger heart attacks in: C. Both the general population and firefighters

NFPA 1582 restricts firefighters with diabetes mellitus if they: C. Have a hypoglycemic episode requiring assistance within the past year

NFPA 1582 has Category A and Category B conditions for: A. Candidates

An incumbent firefighter with long-standing monocular vision should have the following restrictions: B. No emergency driving

SESSION 301: THE LUDLOW MASSACRE AND BEYOND: OCCUPATIONAL MEDICINE AND CORPORATE WELFARE IN EARLY 20TH CENTURY COLORADO.....CME/MOC: 1.5

What direction is Ludlow from Denver: B. South

When did the Ludlow Massacre occur: C. 1914

Name the famous American family that was the primary stockholders of the Colorado Fuel and Iron Company (CF&I): A. Rockefeller

How did CF&I contribute to the legacy of occupational medicine in Southern Colorado and in America: D. All of the Above

Which of the following were direct outcomes of the Ludlow Massacre: C. Increased public attention towards working conditions at companies of all kinds

SESSION 302: DRILLING DOWN: US OIL AND GAS EXTRACTION WORKER SAFETY AND HEALTH TRENDS AND CURRENT ISSUES.....CME/MOC: 1.5

FALSE: Half-mask filtering face-piece respirators are appropriate respiratory personal protective equipment (PPE) during manual tank gauging operations.

What is the leading cause of death for oil and gas extraction workers: D. Transportation

What is a potential exposure hazard during manual tank gauging operations at oil and gas well sites: D. All of the above

All of the following chemicals have been found on post-mortem analyses of sudden deaths due to hydrocarbon gas and vapor inhalation except: B. Trichloroethylene

Contributing factors in cases of sudden deaths due to hydrocarbon gas and vapor inhalations may include the following: D. All of the above

SESSION 303: HAZARDOUS DRUG WORKPLACE SAFETY AND COMPLIANCE.....CME/MOC: 1.5

FALSE: USP <800> requires that closed system drug transfer devices be used for drug preparation.

What does NIOSH use as a basis for its hazardous drug list update: C. Both

USP <800> policies and procedures include requirements on: F. All of the above

Which of the following are procedures covered in a hospital based hazardous drug safety program policy (select all that apply): A. Personal protective equipment; B. Hazardous drug list; C. Hazardous drug spill procedures; E. Medical Surveillance

Which of the following materials would be considered hazardous waste that should be discarded in a yellow chemotherapy container (select all that apply): B. Chemotherapy IV tubing; C. Contaminated chemotherapy gloves

SESSION 304: COMMERCIAL DRIVER MEDICAL EXAMINATIONS: WHERE THEY ARE, WHERE THEY ARE GOING.....CME/MOC: 3.0

TRUE: If a driver does not meet interstate medical standard, the examiner can certify the driver but restrict to intrastate driving.

TRUE: After June 22, 2018, medical examiners should continue to issue Medical Examiner Certificates (MEC) to all non-CDL holders.

How has self-reported prevalence of Diabetes Mellitus changed between 2005 and 2012 among a sample of truck drivers: D. Doubled

How is the change in truck driver health over time compared to the health of the general working population over the same time after adjusting for age, gender, and BMI: C. Truck driver health is getting worse, while general worker health is stable

What is the risk increase for drivers causing a preventable crash with injuries if they have 3 or more conditions after adjusting for age, gender, and BMI: B. 2.0 times increased risk

State Driver License Agencies are rejecting medical examiner certificates because.....

1. Incomplete form; 2. Incorrect duration; 3. Incorrect form; 4. Examiner not on registry: A. 1 and 3

The date the medical certificate is noted to be signed after a driver in determination pending status brings additional information should be determined by: B. The date the determination is made

The October 2016 recommendations from the MRB/MCSAC included that drivers with any of the following should be immediately disqualified except: D. ESS greater than 11

After consideration of recent FDA guidance on opioids, the MRB recommended that Certified Medical Examiners and treating clinicians be familiar with guideline on the risks of misuse, addiction, overdose, and death.....A. 50 morphine milligram equivalents (MME) per day

SESSION 305: LEAD AND BEYOND: THE GLOBAL IMPACT OF REGULATIONS, TRADE, AND COMPANY PRACTICES ON POPULATION LEAD EXPOSURES: A CHANCE FOR OEM COLLABORATION?.....CME/MOC: 3.0

TRUE: The production and sale of lead-acid batteries is currently increasing worldwide, and is projected to continue to increase for at least the next few years.

FALSE: Where governmental standards for occupational lead exposure exist worldwide, those standards generally require that further lead exposure be stopped when blood levels exceed 20 mcg/dl.

According to ACOEM's most recent position statement on occupational lead exposure, workers should be removed from further lead exposure if their blood levels consistently exceed: D. 40 mcg/dl

All of the following statements about lead are true except: C. Worldwide, lead-containing paint accounts for the largest share of end-products that use lead

Compare with blood lead levels below 5 mcg/dl, blood lead levels maintained chronically above 10 mcg/dl are associated with all of the following health effects except: D. An increased risk of diabetes

All of the following statements about OSHA reg. of occ. lead exposure are true except: C. The OSHA lead standard include in their scope workplaces where lead exposure occurs both from airborne exposure to lead fume and from exposure to lead in surface contamination

Lead in fuels: B. Used in the US for aviation fuel

Efforts to quantify the costs of lead exposure: C. Have demonstrated costs of billions of dollars per year

Lead in paint is: D. Generally not regulated in most countries

SESSION 306: UNLEARNING SELF-DEFEATING THINKING HABITS: A PROACTIVE APPROACH.....CME/MOC: 1.5

TRUE: Most mental health problems ultimately involve thinking problems.

TRUE: People tend to react to their thoughts about events rather than events themselves.

According to the 2009 WHO World Mental Health Survey, the prevalence of mental health problems in the US is: B. 47.4%

Which of the following is not a common cognitive distortion category, as defined by David Burns, MD: B. Narcissism

One of the most effective evidence-based psychotherapies is: C. Cognitive-behavioral therapy

SESSION 307: ACOEM COURT: YOU BE THE JUDGE!.....CME/MOC: 1.5

FALSE: Workers' compensation is a federal program, therefore specific procedures, awards and regulations are the same in US States and Territories.

FALSE: In order to submit a workers' compensation claim, an employee must be represented by counsel.

Workers' compensation benefits awarded to injured employees may include: D. All of the above

The outcomes of a hearing for a workers' compensation case depends upon: D. All of the above

Which of the following are correct matches between WV programs and employees: D. A and B are correct

SESSION 308: HAZARDOUS DRUG EXPOSURE AND MEDICAL SURVEILLANCE.....CME/MOC: 1.5

FALSE: Hazardous drug surveillance is practiced in a majority of institutions represented by national leaders in medical center occupational health who participated in the discussed qualitative research project.

Health effects associated with the unprotected handling of hazardous drugs include which of the following: E. All of the above

Based on NHANES data as summarized by Lazo 2008, a hypothetical asymptomatic pop. of 1,000 individuals subjected to one-time ALT, AST, GGT, Bilirubin and Alkaline Phosphatase testing would be expected to generate how many abnormal test results: E. Greater than 500

Approximately what percent of healthy, asymptomatic people have abnormal blood test values, for any given test: C. 5%

What percent of the global population has anemia: C. 25%

SESSION 309: CURRENT ISSUES AFFECTING THE HEALTH AND SAFETY OF UNDERSERVED OCCUPATIONAL POPULATIONS IN THE US AND ABROAD.....CME/MOC: 1.5

TRUE: Gig work can be defined as "contingent work which is transacted in the digital marketplace"

According to a recent Pew Center survey, what percentage of gig economy workers report wage theft: B. 29%

Choose the correct statement: C. Some gig workers are employed under a traditional employment model while others are considered independent

The earliest clue to the unsuspected exposure to cholinesterase inhibitors: A. Clinical symptom pattern

Which of the following is not true regarding international seafarers: C. A medical doctor makes the final decision for medical repatriation of seafarers

SESSION 310: INTERACTION OF HEALTH CARE WORKER HEALTH AND SAFETY ON PATIENT HEALTH AND SAFETY.....CME/MOC: 1.5

TRUE: Evidence suggests healthcare workforce health/safety is linked to quality of care and patient safety.

TRUE: The first step in establishing a worker health and safety program is identification of key metrics to be tracked.

TRUE: Key elements for building sustainable and replicable programs on healthcare worker and patient health and safety include culture of reporting access to health resources, evidence-based benefit design, and internal communication.

The components for an optimally functional healthcare worker are: D. All of the above

Which of the following is not a factor affecting safety of workers and patients: C. Location of facility

SESSION 311: EVIDENCE-BASED WORKERS' COMPENSATION (WC) MANAGEMENT.....CME/MOC: 1.5

According to the Bureau of Labor Statistics, which industry has the highest number of injuries and illnesses resulting in days away from work: A. Hospitals

How could a prediction model help in managing a worker's compensation claim system: C. Both A and B

Based on the research presented, short-acting (SA) opioids are associated with: C. Lower claim costs if limited to the first 30 days post injury

After the establishment of an onsite clinic (>1 year after clinic opening), which type of workers' compensation claim can be expected to decrease:
C. Both lost time and medical only injuries

Approximately how long does it take for an onsite clinic to achieve a positive ROI (>1.0): D. Three months

SESSION 312: PUBLIC SAFETY MEDICINE UPDATE 2017: THE CUTTING EDGE.....CME/MOC: 3.0

FALSE: ACOEM's LEO Guidelines only covers patrol officers.

FALSE: The LEO Guidance has completed all the chapters and will now only need to continually update them.

FALSE: Following primary total hip arthroplasty a LEO can never be cleared to return to full duty.

In the next edition of NFPA 1582, what restriction is recommended for a firefighter wearing hearing aids who meets the unaided hearing standard:
D. No restriction is recommended

Which clinical scenario would put a public safety officer at highest risk (greatest susceptibility) for line of duty, sudden cardiac death: B. Obesity, LVH and subclinical obstructive coronary artery disease

What restriction is recommended for a paramedic with monocular vision for more than 6 months: C. No emergency driving

After treatment has stabilized, the LEO with diabetes should provide their glucose log covering the time periods below: B. One month for those with diabetes treated with insulin or sulfonylurea; others as recommended by their treating physician

Important considerations in reducing back pain among LEO protective services members include: F. All of the above

Which of the following are legitimate reasons to request psychological fitness-for-duty evaluation on a current employee: E. All of the above

SESSION 313: INHALATIONAL HAZARDS AND RESPIRATORY HEALTH EFFECTS FROM POST 9/11 DEPLOYMENT TO SOUTHWEST ASIA.....CME/MOC: 3.0

TRUE: In situ analysis of mineral matter in lung tissue slices and traditional analysis of lung tissue following bleach digestion yielded generally similar results in the relative abundances of particle types.

FALSE: All veterans stationed near a burn pit during deployment should have pulmonary function tests.

Which of the following are inhalational hazards that may be encountered during deployment to Iraq, Afghanistan, and other regions in southwest Asia: D. All of the above

Which conditions have been described as part of the spectrum of deployment-related respiratory diseases: D. All of the above

Select the types of particles found by the in situ analysis of lung tissue samples: D. Complex mixtures of A, B, and C

What deployment-related exposures did the service members and Veterans self-report (select all that apply): A. Blister agents (e.g., sulfur mustard); B. Nerve agents (e.g., sarin); C. Burn pits; E. Pulmonary (or Choking) agents (e.g., chlorine, phosgene); F. Depleted uranium

A 30-year-old military veteran of Operation Iraqi Freedom..... normal limits. PA and lateral chest radiograph is interpreted as normal by the radiologist. What is the most appropriate next step in evaluation: B. Pulmonary function tests with and without bronchodilator and DLCO

Public Law 112-260.....committee's findings were published in Feb. 2017 and include all of the following except one: C. Information on hobbies, place of childhood residence and other occupational exposures were helpful in assessing participants' general health concerns

Registry data such as that from the Airborne Hazards and Open Burn Pit Registry (AH&OBPR) can be useful in several ways. Select the best response to indicate which of the following statements about the AH&OBPR is true: E. Only B and C

SESSION 314: MIGRATION AND WORK: UNDERSTANDING POPULATIONS IN THE AMERICAS AND THE US.....CME/MOC: 1.5

TRUE/FALSE: Immigrant workers in health care and in construction have a higher rate of workplace injury than non-immigrant workers in those occupations/sectors.

Farmworkers, residents and migrants, are often not covered by any health insurance. How many, according to the DOL National Agriculture Workers Survey, do have to pay their hospital or doctor visits out of pocket: C. 35%

Which share of the global migrant workforce works in the US: B. 25%

Which group(s) is/are most vulnerable to injury in the construction industry in the US: D. All of the above

Agriculture is the industry with most unauthorized immigrant workers. Which industry has the second most: C. Construction

SESSION 315: COMMUNICATING EFFECTIVELY WITH NON-OCCUPATIONAL HEALTH COLLEAGUES ON DIFFERING OPINIONS IN MANAGING FITNESS-FOR-DUTY AND RETURN-TO-WORK.....CME/MOC: 1.5

TRUE: The effectiveness of communication is strongly anchored on non-verbal communication; with eye contact being a prominent factor in perception by the receiver.

TRUE: Effective challenge management involves both mindset and skillset.

TRUE: The AHRQ TeamSteps program provides educational modules for patient safety initiatives, effective communication strategies, dealing with conflict and challenging situations.

Barriers to challenge resolution may include: D. All of the above

When managing challenging situations, conversations should focus on use of supportive language choices which are characterized as: D. Collaborative

SESSION 316: PARTNERING WITH WORKERS' COMPENSATION INSURERS TO REACH SMALL ENTERPRISES IN NEED OF HEALTH PROMOTION AND HEALTH PROTECTION.....CME/MOC: 1.5

TRUE: Total Worker Health is defined as policies, programs, and practices that integrate protection from work-related safety and health hazards with promotion of injury and illness prevention efforts to advance worker well-being.

TRUE: Employees with workers' compensation claim in the past year are more likely to report having socio-emotional health conditions (e.g. depression) compared to workers with no claim.

TRUE: Recent research suggests that a worker's personal health, as well as their on-the-job injuries, can impact productivity.

There has been relatively little rigorous research done to understand health promotion programs in small enterprises. Based on the most rigorous studies to date, which of the following is the most significant barrier to adoption of wellness programs in small enterprises: B. Direct cost

In light of the impact of a worker's chronic health conditions, work-related injuries, and job task difficulty on productivity, which of the following recommendations should be made to employers who seek to reduce absenteeism and presenteeism: D. All of the above

SESSION 317: NEUROLOGICAL FITNESS-FOR-DUTY.....CME/MOC: 1.0

A commercial driver is considered to have a low risk for recurrent seizure if the seizure: E. C and D

A firefighter can perform the duties of his job if: B. Had a seizure after a stroke, 10 years ago on stable medication regimen

The patient who must wait the longest to RTW is: C. Firefighter with a brain tumor removed, on medications, who had a post SZ

SESSION 318: MITIGATING THE HEALTH RISK OF HYDROGEN SULFIDE AND OTHER WORKPLACE HAZARDS IN OIL AND GAS PRODUCTION.....CME/MOC: 1.0

TRUE: In addition to hydrogen sulfide being an extremely toxic gas at low concentrations, it is also flammable and presents combustion concerns.

The implementation of control measures to mitigate workplace hazards in the oil and gas industry include: D. All of the above

The hydrogen sulfide concentration in parts million (ppm) that causes nearly instant death is: D. +1000 ppm

SESSION 319: PATIENT SATISFACTION MEASUREMENT IN OEM.....CME/MOC: 1.0

All of the following are concerns regarding patient satisfaction surveys except: A. They overestimate the amount of time the doctor spends with the patient

The trend is to avoid the nomenclature “patient satisfaction” survey, and replace it with: B. Patient experience

Which of the following is correct regarding recommendations for use of OEM specific patient satisfaction surveys: D. A minimum of 100 surveys per clinician should exist for adequate statistical significance

SESSION 320: US MILITARY OEM UPDATE.....CME/MOC: 1.0

The Army executes the medical aspects of its occupational health program through: D. All of the above

Which air logistics complex is the largest in the US Air Force, is famous for its nearly one mile long maintenance building, and is a bomber base: B. Oklahoma City ALC (OC-ALC)

The largest medical surveillance program in the Navy by enrollment numbers is: D. Noise

SESSION 321: IS THERE A DOCTOR ON BOARD? PREPARING FOR AIRLINE MEDICAL EVENTS AND EMERGENCIES.....CME/MOC: 1.0

Disqualifying conditions for airline travel include all of the following except: A. Influenza A

The most commonly reported significant medical event by airline passengers is: D. Syncope (loss of consciousness)

In accordance with FAA (Federal Aviation Administration) regulation, the cabin pressure in a commercial passenger aircraft must be maintained at no greater than an altituded equivalent of: B. 8,000 feet AGL

Wednesday, April 26, 2017 ~Answer Key

SESSION 401: PREVENTING MUSCULOSKELETAL DISORDERS: SCREENING AND WORKPLACE INTERVENTIONS.....CME/MOC: 1.0

Current post-offer pre-placement screening practices are: B. Rarely evaluated for effectiveness and yield

The effectiveness of post-offer pre-placement screening practices: A. Is relatively easy to calculate or estimate

The success of the Ohio Safety Interventions Grant (SIG) Program in preventing workplace injuries is driven by: B. The program design and reporting structure

SESSION 402: THE ROLE OF THE OCCUPATIONAL HEALTH PROVIDER IN ACTIVE SHOOTER AND BOMBER SITUATION.....CME/MOC: 1.0

According to the position/analysis paper, “Health and Medical Response to Active Shooter and Bombing Events,” produced by the National Academy of Sciences: C. Encourage a response paradigm consistent with military combat casualty techniques

One of the more important aspects of the occupational health provider may be in: D. All of the above

While the threat response....of mass shooting (multiple casualty) and bombing settings: A. There are some similar considerations that apply to other post incident considerations for the occupational health provider (radiation, toxic industrial chemicals and more)

SESSION 403: GETTING YOUR START IN RESEARCH.....CME/MOC: 1.0

Per Harber et al’s 2012 JOEM article, “Career Paths in Occupational Medicine,” how many new OEM physicians held a position in research/public health from 2000-2010: A. 0

Boyer’s Model of Scholarship includes all of the following types of scholarship except: E. Knowledge

The three basic types of research funding sources are foundations, private industry, and: A. Government

SESSION 404: BETTER WC CARE THROUGH BETTER DOCUMENTATION AND CODING REQUIREMENTS.....CME/MOC: 1.0

TRUE: The ACOEM Review of Systems trades a general review of all body systems for a review of symptoms that may increase the risk of work disability.

Which of the following is an accurate....using the ACOEM Occ. Med. Specialty Musculoskeletal Exam template: B. Comprehensive exam must include all bullets in all sections except that it would include EITHER a detailed spine exam OR a detailed extremity exam.

Which of the following is an element of morbidity that ACOEM recommends adding to the Risk Table for Medical Decision Making in Evaluation and Management encounters in workers' compensation: D. Risk of prolonged work disability

SESSION 405: CARBON MONOXIDE NEUROTOXICITY.....CME/MOC: 1.0

FLASE: The primary mechanism of carbon monoxide poisoning is due to its avid binding to hemoglobin (240 times that of oxygen), which induces hypoxemia to tissues...(CO-Hgb %) is a good way to measure poisoning severity and can guide the need for therapy.

A normal, healthy adult's scores across the measures that comprise a comprehensive neuropsychological test battery typical span: D. 3 to 4 standard deviations

Carbon Monoxide Associated Parkinsonism: A. Most frequently accompanies mutism, incontinence and gait abnormalities as part of a delayed neurological sequella

SESSION 400: ANNUAL MEMBERSHIP MEETING AND AWARDS PRESENTATION.....CME/MOC: 1.0

TRUE: The Lifetime Achievement in Occupational and Environmental Medicine Award, created in 1938, is the highest honor bestowed in occupational and environmental medicine (OEM).

TRUE: Dr. Gregory R. Wagner presented the William B. Patterson Memorial lecture on, "Ethical and Policy Challenges to Government OHS Science: Past, Present, and Future."

TRUE: ACOEM has 24 components and 19 special interest sections.

SESSION 406: EXPOSURE, METABOLOMICS AND BIOMARKERS, AND HEALTH OUTCOMES, PART I.....CME/MOC: 1.0

TRUE: Limited information is knowncost-effective measures of a large number of chemicals arising from exposures. These can be used for periodic screening, testing the extent at which these exposures occur and provide measures of biological response.

TRUE: Classes of chemicals measured using high-resolution metabolomic platforms are environmental chemicals, commercial products, dietary chemicals, microbiome-related chemicals, metabolic intermediates, amino acids, lipids, fatty acids.

TRUE: Critical components of high-resolution metabolomics are mass spectrometry, data extraction, feature identification and biomarker selection.

SESSION 407: DIAGNOSTIC AND INTERVENTIONAL TREATMENTS FOR UPPER EXTREMITY INJURIES USING MUSCULOSKELETAL ULTRASOUND FOR OEM PHYSICIANS.....CME/MOC: 2.0

Which of the following is the preferred sonographic window to image the distal insertion of the biceps tendon on the radius: C. Medial or lateral window longitudinal orientation

Excess probe pressure during image of the medial elbow may result in which if the following scanning errors: C. Falsely negative scan for ulnar nerve subluxation

Which one of the following is typically seen when making a diagnosis of median nerve entrapment in carpal tunnel by ultrasound: C. Hypoechoic swelling of the median nerve just proximal to the carpal tunnel

Which one of the following is usually assessed from the dorsal aspect of the wrist during ultrasonographic examination of the wrist: B. Scapholunate ligament

Which one of the following tendons crosses over from the ulnar to radial side in distal forearm as it courses over the tendons of second dorsal wrist compartment: B. Extensor Pollicis Longus

Which muscle of the rotator cuff has a multipennate sono echotexture in short axis: A. Subscapularis

SESSION 408: REVIEW AND UPDATE OF 15 YEARS OF THE WORLD TRADE CENTER HEALTH PROGRAM.....CME/MOC: 2.0

Which of the following is TRUE about WTC-related longitudinal FEV1 loss: D. In the first year after 9/11, there was an average 372 ml decline in FEV1

In World Trade Center responders which of the following pulmonary conditions have been noted in responders exposed to dust and debris of WTC site: E. All of the above

Which one of the following is NOT an evidence based psychological treatment for PTSD: B. Schema Therapy

The Zadroga Act describes World Trade Center-related conditions as: D. Illnesses that are substantially likely to be exacerbated or caused by exposure to WTC toxins

Responders benefit from NIOSH certification of their medical conditions as World Trade Center-related in which of the following ways: D. All of the above

During a WTC Monitoring examination a patient.....involved entry of dusty confined spaces. Based on NIOSH guidance documents, is this condition likely to be certified as WTC-related: D. No, because of consideration of the latency period of this disease

SESSION 409: PROVIDING A WARM HAND-OFF: CONNECTING SAFETY-NET PROVIDERS WITH OCCUPATIONAL HEALTH CONSULTATION.....CME/MOC: 2.0

FALSE: In the Finger Lakes region of Western New York, medical care for work-related injuries and illnesses is provided by primary care providers.

TRUE: The Centers for Occupational Health and Education (COHE) in WA State can easily connect primary care providers with occupational health specialists to provide high quality care for underserved workers.

TRUE: Occ. Medicine Specialists working as part of a Center for Occupational Health and Education (COHE) in WA State can find it highly satisfying to care for their patients because of the additional resources, such as Health Service Coordinators (HSCs), available to them.

TRUE: Occupational Medicine Specialists working as part of a Center for Occupational Health and Education (COHE) in WA State are readily available to provide OEM support to Primary Care Providers in the community's Federally Qualified Community Health Clinics.

TRUE: The amount of time average PCP has per patient encounter is 15-17 minutes.

Identify the barriers to providing occupational health care in primary care settings: D. All of the above

SESSION 411: MEDICAL MARIJUANA.....CME/MOC: 2.0

FALSE: In states where medical marijuana is legal, physicians may prescribe medical marijuana.

FALSE: Therapeutic use of marijuana is recommended for certain chronic pain conditions under the current Colorado Workers' Compensation Medical Treatment Guidelines (MTG).

FALSE: Workers' Compensation insurers in Colorado are required to pay for medical marijuana treatment for work-related injuries if recommended by an authorized treating physician.

FALSE: Hospitals in states where medical marijuana is legal are totally exempt from federal law.

TRUE: When marijuana is ingested, it can take 2-3 hours to reach a peak effect.

Which of the following is not associated with a dependency syndrome: D. Cannabidiol (CBD)

SESSION 410: EXPOSURE, METABOLOMICS AND BIOMARKERS, AND HEALTH OUTCOMES, PART II.....CME/MOC: 1.0

TRUE: Machine learning algorithms learn from the input data to make prediction and futuristic decisions. In current datasets, diverse molecular profiling data can be used to predict health status of the military personnel.

Polvaromatic hydrocarbon (PAHs) do not effectively accumulate in the body while polychlorinated dibenzo-p-dioxins (PCDDs) and polychlorinated dibenzo-furans (PCDFs) do. The differences species...that gives rise to the differences are: D. All of the above

The reasons that microRNA (miRNA) levels should be considered as indicators of occupational exposure are: E. All of the above