

## PROFESSIONALISM PROGRAM PRE-TEST

### PART ONE

For each question, put a check mark for the one option that you think is correct.

**1. A physician may advertise a *non*-ABMS specialty board certification**

- if the certification is by a nationally recognized professional society.
- if the special board or association granting the certification has been approved by the Medical Board of California.
- with the approval of the non-ABMS specialty board.

**2. You and your office manager are developing a print media advertisement in which you plan to use “before” and “after” photographs of patients. Such photos are permissible if, among other things,**

- it makes business sense under the first amendment right to commercial speech.
- any change in expression, for example from serious facial expression to smiling, reflects an honest change in patient attitude.
- they are not distorted by favorable poses, lighting, or other features of presentation.

**3. An advertisement for services by a non-governmental person is misleading if it contains a seal, insignia, trade or brand name that could be interpreted as implying a state or local government approval or endorsement of the services unless:**

- the advertisement explicitly names a governmental entity.
- the advertisement states that royalties are paid to a governmental entity.
- the nongovernmental person or entity actually has an expressed connection with, or the approval or endorsement of, the governmental entity.

**4. Your patient complains of chronic pain. It is permissible to prescribe opioids solely for pain relief if**

\_\_\_ in your judgment it is the easiest way to relieve the pain.

\_\_\_ your patient suffers from “intractable pain”.

\_\_\_ two other physicians agree with your diagnosis.

**5. “Intractable pain” is defined as**

\_\_\_ recurrent pain from which the patient frequently suffers.

\_\_\_ that pain which renders a patient unable to perform normal tasks.

\_\_\_ a state of pain in which the cause of the pain cannot be removed or otherwise treated or cured through the generally accepted course of medical practice.

**6. In California, a mandatory continuing education course in pain management and treatment of terminally ill and dying patients is required of**

\_\_\_ any physician specializing in hospice care.

\_\_\_ physicians dealing with diseases that most often cause death, e.g. oncologists or cardiologists.

\_\_\_ all physicians and surgeons except pathologist, radiologist, and other physician practice status categories exempted by the Medical Board of California if they do not engage in direct patient care, do not provide patient consultations, or do not reside in the State of California.

**7. One exception to the rule requiring a good faith prior examination before prescribing applies when:**

\_\_\_ a patient of a partner in your practice cannot reach your vacationing associate.

\_\_\_ you are the designated substitute for the patient’s absent physician, and you prescribe only as necessary to maintain the patient until the return of his or her physician, but in any case no longer than 72 hours.

\_\_\_ that you are convinced that the patient is in dire need of medication.

**8. If a “good faith” examination has not been performed recently, a physician nonetheless may be able to prescribe medication over the phone if**

- \_\_\_ the prior examination had been made within a year.
- \_\_\_ the patient is a long-time patient.
- \_\_\_ if reputable physicians in the community would prescribe under the same circumstances.

**9. A physician in California can prescribe medications other than controlled substances over the internet if**

- \_\_\_ the patient is a long-time patient.
- \_\_\_ if reputable physicians in the community would prescribe under the same circumstances.
- \_\_\_ only if a “good faith” prior examination is performed, or one of the exceptions to the “good faith” prior examination requirement is met under the law.

**10. Actions that may constitute a violation of regulations against Excessive Treatment include**

- \_\_\_ ordering a diagnostic procedure, such as an X-ray or MRI, on a first visit that is not medically necessary.
- \_\_\_ repeated acts clearly excessive use of diagnostic procedures.
- \_\_\_ ordering diagnostic tests not included in the patient’s plan.

**11. The criteria for unprofessional conduct by physicians as enforced by the Medical Board of California are determined by**

- \_\_\_ the ethical guidelines of the profession such as the AMA Code of Medical Ethics.
- \_\_\_ the state medical association in cooperation with the state Bar Association.
- \_\_\_ laws enacted by the state Legislature.

**12. To constitute “repeated negligent acts” upon which the Medical Board may take action against the license of a physician, the Board must show the physician committed**

\_\_\_\_\_ several repeated acts of one kind or another over a period of time.

\_\_\_\_\_ two or more instances of similar negligent acts or omissions.

\_\_\_\_\_ two or more negligent acts or omissions, whether or not similar in nature, each of which must be separate and distinct departure from the standard of care.

**13. Business and Professions Code Section 2266 states that “failure to maintain complete and accurate records relating to provision of services to their patients constitutes unprofessional conduct.” To comply with this requirement, if a patient asks not include certain information in the chart, I should**

\_\_\_\_\_ never comply with the request.

\_\_\_\_\_ comply with the request except to the degree such compliance would require me to exclude from the chart objective or otherwise medically significant information about the patient.

**14. How long am I required to retain patient medical records under the law?**

\_\_\_\_\_ until my patient has officially transferred to another physician.

\_\_\_\_\_ for a minimum of three years.

\_\_\_\_\_ it depends, because the law specifying records retention are not uniform for all records, and the record retention laws do not cover all categories of patients’ records.

**15. What is the CMA first choice recommendation for retaining medical records?**

\_\_\_\_\_ retain records for at least 10 years.

\_\_\_\_\_ retain records indefinitely.

\_\_\_\_\_ retain records for 25 years from last patient visit.

**16. The law which makes it unprofessional conduct to prescribe, furnish, or administer controlled substances, to addicts or habitués does not apply if the addicted patient:**

- is a long-term patient whose substance use is closely monitored.
- has an incurable disease or the infirmities of old age.
- is suffering from (and being treated for) something other than addiction, such as a disease, injury or infirmities of old age. (Health & Safety Code §11210)

**17. In treating a patient for breast cancer, the law requires that the physician**

- inform the patient of all treatments offered by the hospital or insurance plan.
- inform the patient of experimental medical treatments that are medically viable.
- provide the patient with the required brochure available from the Medical Board of California that gives the patient information regarding medically viable and efficacious alternative methods of treatment for breast cancer.

**18. If it is discovered that a medical record contains an error or mistake**

- the record cannot be changed under any conditions.
- the record should be corrected by replacing the incorrect entry with the proper information
- the record should be corrected by making a line through the incorrect data, adding the proper information or indicating where the correct information may be found, and including the date of correction.

**19. The regulation against employment of unlicensed practitioners to engage in the practice of medicine**

- prohibits a medical assistant from performing any tasks of related to physical therapy under any circumstances unless the assistant is a licensed Physical Therapist.
- nonetheless permits a physician to supervise a medical assistant to provide technical supportive services, including those involving concepts of physical therapy.

**20. Engaging in sexual contact with a patient by a physician or psychotherapist is sexual exploitation and unlawful**

- if the sexual contact is substantially related to the qualifications, functions or duties of the profession.
- if the physician or psychotherapist initiates the sexual conduct.
- under any circumstances, with the exception of a spouse or person in an equivalent domestic relationship.

**21. Sexual contact with a *former* patient is sexual exploitation unless**

- there has been at least a two year period since last professional contact.
- it occurs after the physician or therapist has terminated the therapeutic relationship by referring the patient for treatment to a professional recommended by an independent third-party professional.
- the physician or psychotherapist relation with the patient was less than six months duration.

**22. In placing an ad describing the price of professional services, including the phrase “as low as”**

- is not permitted.
- is permitted if the claim is accurate.
- is permitted if the price has been available in the past 30 days.

**23. Making an advertisement which solicits persons to use the services of a physician who is a qualified medical examiner for workers’ compensation claims**

- is illegal and constitutes unprofessional conduct.
- is legal as long as it includes a statement that making a false or fraudulent claim is a felony, and which lists the penalties.
- illegal unless it lists the statistical likelihood of winning.

**24. Pharmaceutical and medical device and equipment industries often offer support for attending professional conferences. As an ethical manner, it is legitimate to accept a subsidy to attend a conference if**

- the subsidy is paid directly to the conference sponsor who in turn uses the funds to reduce registration fees.
- if the conference is educational in purpose and enhances the knowledge and practice of the physician.
- if the physician would not otherwise be able to attend the conference.

**25. In California, employers are liable for the sexually harassing conduct of managers and supervisors**

- if the employer has knowledge and there is tangible job detriment.
- automatically, regardless whether the employer has knowledge or whether there is tangible job detriment.
- unless the harassed employee did not use an existing anti-harassment policy to report the conduct.

**26. A physician may refer patients to a clinical laboratory owned by an immediate family member**

- if the physician discloses the relative's financial interest.
- under no circumstances.
- if the physician discloses the interest and the patient signs an agreement acknowledging the ownership interest.

**27. You have invested substantial funds as a limited partner in a diagnostic center within half a mile of your office.**

- you may refer a patient to the center.
- you may refer a patient to the center if you inform patients of your ownership interest in the center.
- you may not refer the patient to the center.

**28. You are operating a hospital's utilization review board as an independent contractor to the hospital**

- \_\_\_ you may refer a patient to the hospital if you are not compensated for the referral.
- \_\_\_ you may refer a patient to the hospital if you inform patients of contractual relationship to the hospital.
- \_\_\_ you may not refer the patient to the hospital.

**29. Under the AMA Code of Medical Ethics, a patient-physician relationship exists**

- \_\_\_ when a physician serves a patient's needs generally by mutual consent between physician and patient (or surrogate).
- \_\_\_ when a patient signs insurance forms to be treated.
- \_\_\_ when a physician has taken a history and examined a patient.

**30. Informed consent requires disclosure of**

- \_\_\_ the recommended treatment, risks, and all medically sound alternatives.
- \_\_\_ the recommended treatment, risks, and all alternative treatment, including no treatment.
- \_\_\_ the best advice that the physician can provide, including risks involved in the treatment plan.

**31. The therapeutic privilege exception to obtain informed consent requires**

- \_\_\_ that divulging information would be potentially harmful to a seriously depressed patient.
- \_\_\_ that disclosing informed consent information to the patient would so seriously upset the patient that the patient would not have been able to dispassionately to weigh the risks of refusing to undergo the recommended treatment.
- \_\_\_ that disclosing informed consent information would alienate the patient from trusting the physician.

**32. An individual physician acting his or her own capacity**

\_\_\_\_\_ has a duty to report a possibly incompetent or impaired physician to the Medical Board.

\_\_\_\_\_ has no legal duty to report a possibly incompetent or impaired physician to the Medical Board.

\_\_\_\_\_ requires reporting for serious impairment.

**33. If I report a licensed physician for possible unprofessional conduct or impairment because of substance abuse or mental illness**

\_\_\_\_\_ I have no protection or immunity for reporting to the Medical Board.

\_\_\_\_\_ I have absolute immunity for reporting to the Medical Board.

\_\_\_\_\_ I have absolute immunity as long as I can provide proof of the alleged conduct or impairment.

## PART TWO

### ETHICS

Ethics asks what should I or we do, not what is the law. Write a brief statement in the space provided with your opinion on the questions posed. These questions are to get you thinking about some current medical ethical issues. We will discuss some of these questions in the two-day course. There is no “right” answer in the sense that everyone will agree to it.

1. **I think that embryonic stem cell research (should) (should not) be pursued because**

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2. **If embryonic stem cell research is permitted, it should be limited to**

- \_\_\_ existing stem cell lines.  
\_\_\_ existing stem cell lines and tissues from abortuses.  
\_\_\_ existing stem cell lines and “extra” frozen embryos.  
\_\_\_ existing stem cell lines, “extra” frozen embryos, AND embryos created for the purpose for research.  
\_\_\_ any or all of the above.

**Why?** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. **California (should) (should not) legalize assisted suicide because**

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4. **There (is) (is not) a moral difference between withholding and withdrawing life-sustaining treatment because**

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5. **Physicians (should) (should not) be permitted to prescribe “medical marijuana” because**

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6. **Your patient, an 80 year-old Asian male, has just been hospitalized with a very serious illness and may not live. The eldest son asks you not to disclose the seriousness of the condition. In their culture, the family determines what to tell an ailing parent. You (should) (should not) agree to the son’s request because**

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7. **Your 15 year-old patient has leukemia that has not responded to treatment. He has only a short time to live. While you are alone with him, he asks “What’s going to happen to me?” What should you say?**

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- 8. Parental rights advocates argue that there should be parental notification before a minor can have an abortion. What do you think? Why?**

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- 9. A 55 year-old woman wants to have a child through IVF using donor eggs and her husband's sperm, followed by implantation into her womb. What is your view of this?**

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- 10. A homosexual male couple (should) (should not) be able to employ a surrogate mother to bear a child for the couple to raise. Why?**

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