

**California Orthopaedic Association
2013 QME Course
Test Questions**

Disclaimer: The answers to these questions are found in the audio recording and in the course handouts represent the opinion of the speaker and do not necessarily represent COA's opinion or policy on the issue.

- _____ 1. As of January 1, 2013, the number of offices that a QME can have listed with the Division of Workers' Compensation is limited to no more than 20 locations.
 - a. True
 - b. False

- _____ 2. Medical treatment disputes on or after a date of injury of January 1, 2013 must be resolved through the Independent Medical Review process rather than through a QME/AME evaluation.
 - a. True
 - b. False

- _____ 3. For injuries on or after January 1, 2013, QMEs/AMEs may no longer add-on impairments for sleep disorders, psychiatric issues or sexual dysfunction for physical injuries.
 - a. True
 - b. False

- _____ 4. After January 1, 2013, can the parties still make a request for a Spinal Surgery Second Opinion to resolve disputes over when spine surgery is medically indicated?
 - a. True
 - b. False

- _____ 5. Is it critical to distinguish in your report causation of injury which affects medical treatment vs. causation of disability which affects the injured worker's permanent disability?
 - a. True
 - b. False

- _____ 6. If only 1% of a physical injury is attributed to their work, injured workers are only entitled to 75% coverage of the required medical treatment?
 - a. True
 - b. False

- _____ 7. If an injured worker only needs future non-prescription medications for their injury, it is not necessary to list this in your report.
 - a. True
 - b. False

- _____ 8. Significant scar tissue could increase an injured workers' whole person impairment even if the injured worker is being evaluated for an orthopaedic injury.
 - a. True
 - b. False

- _____ 9. Can an injured worker request a medical evaluation and/or consultation outside of the Workers' Compensation MPN, if they pay the costs?
 - a. True
 - b. False

- _____ 10. Can an independent medical evaluation obtained by the injured worker be used as the sole basis for an award?
 - a. True
 - b. False

- _____ 11. Strains and sprains are the two most common Workers' Compensation injuries.
- True
 - False
- _____ 12. Men account for a higher percentage of sprain injury claims than do women.
- True
 - False
- _____ 13. The overall costs of a strain or sprain claim has stayed constant over the last five years.
- True
 - False
- _____ 14. The highest number of work-related strains or sprains in California is seen in San Diego County.
- True
 - False
- _____ 15. CWCI's study shows that Vicodin is the most common medication prescribed for injured workers who have suffered a strain.
- True
 - False
- _____ 16. The employer can help control the amount of disability by offering modified work to injured workers.
- True
 - False
- _____ 17. It can be helpful for the treating physician to let an injured worker know the typical lengths of disability for their specific injury. This sets more realistic disability expectations.
- True
 - False
- _____ 18. Clinical reality of the use of Platelet Rich Plasma (RPR) is exceeding the basic science research expectations.
- True
 - False
- _____ 19. The primary goal of the use of biologics is to enhance the natural healing process of a biological compromised tissue.
- True
 - False
- _____ 20. Does decreasing the final suspension volume of plasma effectively increase the platelet concentration?
- True
 - False
- _____ 21. Platelet-rich fibrin matrices constructs are being used in rotator cuff tears and knee ligament reconstructions.
- True
 - False
- _____ 22. Kappa values, a statistical measure of inter-rater reliability, can be reliably compared from different studies.
- True
 - False
- _____ 23. Evidence based guidelines take medical studies and condense them down into a manual for physicians to consult on cases.
- True
 - False

- _____ 24. Judge Casey indicated that there are five steps to understanding apportionment under Labor Code Section 4663
1. Doctor must distinguish between causation of injury and causation of disability
 2. Doctor must make an apportionment determination
 3. Doctor must base his/her conclusion on "reasonable" medical probability
 4. Doctor must explain basis for how and why
 - a. True
 - b. False
- _____ 25. Any conclusion that a QME or AME makes must be based on "reasonable medical probability."
- a. True
 - b. False
- _____ 26. While it's important to base your decision on "reasonable medical probability," it is not necessary to use those words in your report.
- a. True
 - b. False
- _____ 27. It is also not important to include in your report how and why you reached your apportionment decisions.
- a. True
 - b. False
- _____ 28. While apportioning to age factors is not permitted under California law, you can apportion to a disease process such as osteoporosis.
- a. True
 - b. False
- _____ 29. QMEs and AMEs are allowed to apportion to an injured workers' risk factors.
- a. True
 - b. False
- _____ 30. QMEs and AMEs are allowed to apportion to pathology, but they must include an explanation as to how and why they reached their conclusion.
- a. True
 - b. False
- _____ 31. "Fair" is a term that QMEs/AMEs can use interchangeably with "reasonable medical probability" in their reports.
- a. True
 - b. False
- _____ 32. Under the Benson decision, the QME/QME must make an apportionment determination on each injury.
- a. True
 - b. False
- _____ 33. A QME/QME cannot seek input from another health care professional if they need help in sorting our apportionment issues.
- a. True
 - b. False

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