

EBD Journal Club
CEU Verification Form & Quiz



To earn AIA Continuing Education Units, purchase a CEU Management fee, complete the verification form and quiz questions and Catherine Ancheta at cancheta@healthdesign.org

Participant Name: _____

AIA Member #: _____

Provider Name: **The Center for Health Design** Provider Number: **Z009**

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Attended	AIA	Webinar Title	LU Hours	HSW
Yes <input type="checkbox"/> No <input type="checkbox"/>	EBDCLUB39	EBD Journal Club: The Variable Impact of Clinical Risk-Adjustment Models to Evaluate Hospital Design	1.0	Yes

1. Comparing the amount of pain medications used by groups of patients can be done by converting each medication into a _____.
2. Strategies to choose what goes into a logistic regression “risk-adjustment model” include:
 - a. More the better!
 - b. Empirically – based on what is measurably difference between groups.
 - c. Conceptually – what makes sense through a solid knowledge and framework of the topic.
 - d. B and C
 - e. You don’t need anything in your model.
3. Name one other example of risk-adjustment besides a logistic regression model include:

4. _____ Experiments are observational studies that allow for the comparison of groups based on different exposures that appear random or near random.

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5. Based on existing data, patients' rooms with a view may influence:
 - a. ICU transfer rates
 - b. Pain medication use
 - c. Reoperation rates
 - d. None of the above

6. Strategies to measures clinical outcomes for patients based on their room assignment in the hospital includes:
 - a. Patient vitals
 - b. Patient length of stay in the hospital.
 - c. Laboratory values
 - d. Medications received.
 - e. All of the above

7. Depending on the risk-adjustment model used, the comparison between two groups:
 - a. Won't change, all the models are same
 - b. Can change depending on the model used, which underscores thoughtfulness about choosing the correct model.
 - c. Becomes useless because the model can change things so much.
 - d. None of the above

8. Current research using clinical data and outcomes to evaluate hospital design:
 - a. Always uses appropriate risk-adjustment models.
 - b. Sometimes uses the right risk-adjustment model.
 - c. Does not need any risk-adjustment because the outcomes are focused on design.
 - d. None of the above

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9. One limitation of the study presented by Mead et al includes:

10. Strategies to evaluate to patient's pain after surgery include:

- a. Consumption of pain medication standardized to morphine milliequivalents.
- b. Consumption of pain medication as determined by number of pills.
- c. Asking patients their pain scores using the Brief Pain Inventory Score
- d. A and C

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