

01	A	B	C	D	E
02	A	B	C	D	E
03	A	B	C	D	E
04	A	B	C	D	E
05	A	B	C	D	E
06	A	B	C	D	E
07	A	B	C	D	E
08	A	B	C	D	E
09	A	B	C	D	E
10	A	B	C	D	E
11	A	B	C	D	E
12	A	B	C	D	E
13	A	B	C	D	E

14	A	B	C	D	E
15	A	B	C	D	E
16	A	B	C	D	E
17	A	B	C	D	E
18	A	B	C	D	E
19	A	B	C	D	E
20	A	B	C	D	E
21	A	B	C	D	E
22	A	B	C	D	E
23	A	B	C	D	E
24	A	B	C	D	E
25	A	B	C	D	E
26	A	B	C	D	E

27	A	B	C	D	E
28	A	B	C	D	E
29	A	B	C	D	E
30	A	B	C	D	E
31	A	B	C	D	E
32	A	B	C	D	E
33	A	B	C	D	E
34	A	B	C	D	E
35	A	B	C	D	E
36	A	B	C	D	E
37	A	B	C	D	E
38	A	B	C	D	E
39	A	B	C	D	E

PRACTICE QUESTIONS

Certification Commission for Healthcare Interpreters (CCHI)

CORE

Core Certification Healthcare Interpreter

EDITION

Demo

QUESTIONS

9

FORMAT

Limited Edition PDF

Before you begin

What this is

9 practice questions for Certification Commission for Healthcare Interpreters (CCHI) **CORE**, each with its answer key and an explanation. Answer a question before you read its key — the explanation is worth more once you have committed.

If something looks wrong

Send us three things and we will check it:

- the exam code, **CORE**
- the question number
- the email address on your order

Write to **support@mometrix.net**. We reply within one business day.

QUESTION 1

SINGLE CHOICE

During a medical encounter, a patient from a culture where direct disclosure of a terminal prognosis is considered harmful insists that the family be told first and decides what the patient may hear. Which is the most ethically appropriate action for the healthcare interpreter?

- ☐ **A** Refuse to interpret any discussion of the diagnosis until the provider agrees to withhold it from the patient
- ☐ **B** Interpret everything the provider says accurately, including the prognosis, regardless of family wishes
- ☒ **C** Inform the provider of the patient's request and interpret all messages faithfully while respecting the provider's clinical and ethical responsibilities
- ☐ **D** Take the family aside and explain the prognosis to them in the target language before interpreting for the patient

ANSWER C

WHY Interpreters are bound by accuracy and impartiality. They must convey the patient's cultural framework to the provider and interpret faithfully, without taking on the clinician's role of deciding what is disclosed. Option C reflects the interpreter's standard of practice; the other options either usurp the provider's role, violate accuracy, or add the interpreter's own filtering of information.

QUESTION 2

SINGLE CHOICE

A provider tells the interpreter, in English, 'The patient has been diagnosed with type 2 diabetes mellitus and we will check an HbA1c today.' Which is the most accurate consecutive interpretation into the patient's language?

- ☐ A The patient has sugar problems and the doctor wants to do a blood test today
- ☒ B The patient has been diagnosed with adult-onset diabetes; a blood sugar test called hemoglobin A-one-C will be done today
- ☐ C The patient is diabetic and we are doing a sugar test
- ☐ D Tell the patient they have diabetes and need labs

ANSWER B

WHY Healthcare interpreters must render medical terminology accurately and completely, preserving the clinical specificity (e.g., 'type 2 diabetes mellitus' rather than the vague 'sugar problems') and naming the lab test (HbA1c). Paraphrasing into lay terms or omitting the test name sacrifices accuracy and patient comprehension of the clinical plan.

QUESTION 3

SINGLE CHOICE

After an encounter, a patient offers the interpreter a personal phone number and asks to meet for coffee to continue explaining the diagnosis in more depth. Which is the correct response?

- ☐ A Accept the contact information and meet the patient to clarify the diagnosis in their preferred language
- ☒ B Politely decline, explaining that the interpreter's role is limited to interpreting during scheduled encounters and that the provider is the appropriate source for further explanation
- ☐ C Accept only if the patient signs a release of liability
- ☐ D Refer the patient to a family member for follow-up explanations

ANSWER B

WHY Healthcare interpreters must maintain professional boundaries. Socializing with patients, providing explanations beyond the interpreted encounter, and substituting for the provider are all role boundary violations. Option B upholds the interpreter's scope of practice as defined by CCHI's Standards of Practice.

QUESTION 4

SINGLE CHOICE

An interpreter discovers that a colleague has been sharing patient diagnoses with relatives in the same community in order to solicit prayer support. Under CCHI's Code of Ethics, this conduct is best classified as:

- ☐ A An acceptable form of community advocacy by the interpreter
- ☒ B A breach of confidentiality that may require reporting and can jeopardize certification
- ☐ C Acceptable if the relatives are also patients of the same provider
- ☐ D Acceptable if no name is disclosed, only the diagnosis

ANSWER B

WHY Confidentiality of patient health information is a core ethical duty. Disclosing any element of a patient's protected health information without authorization, even to community members, is unethical and a violation of CCHI's Code of Ethics, and is independently prohibited by HIPAA in the United States. Such conduct is grounds for disciplinary action, including revocation of certification.

QUESTION 5

SINGLE CHOICE

A provider hands the interpreter a one-page discharge instruction written in English and asks the interpreter to render it for the patient who speaks a different language. The interpreter does not have time for a full oral interpretation. Which mode is the provider requesting?

- ☐ A Consecutive interpretation
- ☐ B Simultaneous interpretation
- ☒ C Sight translation
- ☐ D Summarization

ANSWER C

WHY Sight translation is the oral rendering of a written text into the target language. It is a documented interpreter mode within the CCHI exam content outline and is commonly used for short written materials such as discharge instructions, consent forms, and medication labels when a written translation is not available.

QUESTION 6

SINGLE CHOICE

A surgeon asks the patient to sign an English-language consent form for a procedure. The patient states in the patient's language that they do not fully understand what they are signing. What is the interpreter's most appropriate action?

- ☐ A Sign the form on the patient's behalf
- ☒ B Sight translate the form into the patient's language, then interpret the patient's questions and the provider's responses accurately so the patient can give informed consent
- ☐ C Tell the patient to sign because the doctor has already explained everything
- ☐ D Provide the patient with an independent medical opinion before the patient signs

ANSWER B

WHY The interpreter supports informed consent by ensuring the patient comprehends the document through sight translation and by facilitating dialogue between patient and provider. The interpreter must never sign on the patient's behalf, give clinical opinions, or pressure the patient to sign. Option B preserves accuracy, impartiality, and the provider's responsibility for obtaining consent.

QUESTION 7

SINGLE CHOICE

Which healthcare professional is ultimately responsible for explaining a diagnosis, obtaining informed consent, and answering a patient's clinical questions, even when an interpreter is present?

- ☐ A The healthcare interpreter
- ☐ B The registered nurse
- ☒ C The provider (physician, advanced practice clinician, or other licensed practitioner)
- ☐ D The hospital's patient advocate

ANSWER C

WHY The provider holds clinical, ethical, and legal responsibility for diagnosis disclosure, informed consent, and clinical communication. The interpreter's role is to facilitate accurate, complete communication between patient and provider; the interpreter does not diagnose, recommend treatment, or obtain consent independently. Misallocating these duties is a common role boundary error.

QUESTION 8

SINGLE CHOICE

An interpreter working at a hospital notices a screen in an open nurses' station displaying a patient list with names, dates of birth, and current medications visible to passing visitors. Which action best reflects the interpreter's professional and legal obligations?

- ☐ A Ignore it because it is the facility's responsibility, not the interpreter's
- ☐ B Read the screen to identify any relatives who might be patients
- ☒ C Report the potential privacy concern to the appropriate supervisor or compliance contact and avoid viewing protected health information not needed for the assignment
- ☐ D Photograph the screen with a personal phone for later review

ANSWER C

WHY HIPAA requires safeguarding PHI, and interpreters must not access or disclose PHI beyond what is necessary. Recognizing an obvious privacy exposure and reporting it to the facility's compliance channel, while not inappropriately accessing the screen, fulfills both the interpreter's ethical duty of confidentiality and supports the facility's privacy program.

QUESTION 9

SINGLE CHOICE

An interpreter is scheduled for a pre-operative visit during which the surgeon will explain the risks, benefits, and alternatives of a surgical procedure and obtain informed consent from a patient who speaks a language different from the provider. Which of the following statements best describes the interpreter's role during this encounter?

- ☐ **A** The interpreter should explain the surgical procedure to the patient before the surgeon enters the room so the patient can ask questions immediately.
- ☒ **B** The interpreter should render all communication between the provider and patient faithfully and accurately, including the surgeon's explanation of risks, benefits, and alternatives, and the patient's questions and responses.
- ☐ **C** The interpreter should add clarifying cultural context about the patient's community to help the surgeon persuade the patient to consent.
- ☐ **D** The interpreter should only interpret for the parts of the visit where the patient is speaking, since the surgeon speaks the language of the medical encounter.

ANSWER B

WHY The interpreter's role is to render all communication between the provider and patient accurately and completely, in both directions, without adding, omitting, or editorializing. The surgeon—not the interpreter—is responsible for explaining the procedure and obtaining informed consent. Adding persuasive cultural commentary or interpreting only one direction would violate the accuracy and impartiality standards required of certified healthcare interpreters.