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39	A	B	C	D	E

PRACTICE QUESTIONS

SCFHS Remote

COMED

Preventive Medicine

Uploaded by Community B

EDITION

Original Demo

QUESTIONS

8

ISSUED

October 14, 2026

Before you begin

What this is

8 practice questions for SCFHS Remote **COMED**, 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, **COMED**
- the question number
- the email address on your order

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

Licence

Free Mometrix practice demo. The complete question bank is available through a paid account.

QUESTION 1

SINGLE CHOICE

Which of the following Wilson and Jungner criteria is considered a prerequisite when deciding whether a disease is suitable for population screening?

- ☐ A The disease must be rare and untreatable
- ☐ B The screening test must be inexpensive but not necessarily acceptable
- ☒ C The condition should be an important health problem with an accepted treatment
- ☐ D Screening should be performed only once at birth

ANSWER C

WHY Wilson and Jungner's classic criteria state that screening is justified when the condition is an important health problem, there is an accepted treatment for those identified, and facilities for diagnosis and treatment are available. The other options contradict the criteria: a disease suitable for screening must be important and treatable, the test must be acceptable (not only cheap), and screening programs typically involve repeated testing of defined age/risk groups.

QUESTION 2

SINGLE CHOICE

A 45-year-old man is screened for type 2 diabetes mellitus during an annual health check. His fasting blood glucose is 110 mg/dL (impaired fasting glucose). He has no symptoms. According to the natural history of disease model, at which stage of prevention does this intervention fall?

- ☐ A Primordial prevention
- ☐ B Primary prevention
- ☒ C Secondary prevention
- ☐ D Tertiary prevention

ANSWER C

WHY Secondary prevention aims at early detection of disease in asymptomatic individuals through screening, allowing timely intervention to halt or slow progression. This patient has impaired fasting glucose (a pre-diagnostic state) detected through screening, which fits secondary prevention. Primordial prevention targets underlying social/environmental determinants before risk factors develop; primary prevention reduces risk factor development (e.g., lifestyle counseling in healthy individuals); tertiary prevention reduces complications and disability in established disease.

QUESTION 3

MULTIPLE CHOICE

According to the WHO Expanded Programme on Immunization (EPI) and standard childhood immunization schedules, which of the following vaccines are routinely recommended for all infants as part of the basic immunization schedule in most countries? (Choose two.)

- ☒ **A** Bacillus Calmette-Guérin (BCG) vaccine at birth
- ☐ **B** Yellow fever vaccine for all newborns in non-endemic regions
- ☒ **C** Measles-containing vaccine as part of the infant schedule
- ☐ **D** Cholera vaccine as a routine infant immunization in all settings

ANSWER A • C

WHY The WHO EPI basic schedule includes BCG and a birth dose of oral polio vaccine, followed by DTP, polio, Hib, hepatitis B, pneumococcal, rotavirus, and a measles-containing vaccine (typically at 9-12 months). Yellow fever vaccine is only recommended in endemic countries, and cholera vaccine is not part of routine infant immunization globally (it is used in outbreak or endemic-area campaigns).

QUESTION 4

MULTIPLE CHOICE

Which of the following are core principles of primary health care as defined by the Declaration of Alma-Ata? (Choose two.)

- ☒ **A** Universal accessibility to health services based on need
- ☐ **B** Exclusive reliance on specialist tertiary care hospitals
- ☒ **C** Community and individual self-reliance and participation
- ☐ **D** Vertical, disease-specific programs run independently of general health services

ANSWER A • C

WHY The Alma-Ata declaration emphasized equitable, universal access to essential health care based on need, as well as community participation and self-reliance. Specialist-only models (B) and purely vertical disease-specific programs (D) are contrary to the comprehensive, integrated primary health care approach promoted by the declaration.

QUESTION 5

SINGLE CHOICE

A researcher enrolls patients with hypertension and a comparable group without hypertension and looks backward in time to assess prior statin use. Which study design is this?

- ☐ A Prospective cohort study
- ☒ B Case-control study
- ☐ C Cross-sectional study
- ☐ D Randomized controlled trial

ANSWER B

WHY Selecting subjects based on disease status (cases with hypertension vs. controls without) and then assessing past exposure is the defining feature of a case-control study. A prospective cohort starts with exposure status and follows forward in time.

QUESTION 6

SINGLE CHOICE

A national committee is evaluating whether to introduce population screening for abdominal aortic aneurysm (AAA) in men aged 65 years and older. According to the Wilson and Jungner criteria, which of the following is the most important prerequisite for a successful screening program?

- ☐ A The condition should have a high prevalence in the screened group
- ☒ B The condition should be an important health problem with a recognized latent/early stage
- ☐ C The screening test should be inexpensive
- ☐ D The screening test should have high specificity

ANSWER B

WHY The Wilson and Jungner criteria emphasize that the condition should be an important health problem and that there should be an accepted treatment for patients with recognized disease, along with facilities available for diagnosis and treatment. While test characteristics and cost matter, the foundational criterion is that the disease represents a significant health burden with a detectable early stage where intervention improves outcome. AAA meets this - it is an important cause of mortality in older men, has a detectable preclinical phase by ultrasound, and elective repair of large AAAs reduces rupture mortality.

QUESTION 7

SINGLE CHOICE

A district health office investigates an outbreak of 50 cases of acute hepatitis A over a 4-week period in a rural community supplied by a single unchlorinated well. The attack rate among those who drank well water is 20% and among those who did not is 2%. What is the attributable risk percent (etiologic fraction) among the exposed?

- ☐ A 10%
- ☐ B 18%
- ☒ C 90%
- ☐ D 95%
- ☐ E 10-fold

ANSWER C

WHY Attributable risk percent among the exposed = $(AR_{\text{exposed}} - AR_{\text{unexposed}}) / AR_{\text{exposed}} \times 100 = (20\% - 2\%) / 20\% \times 100 = 18/20 \times 100 = 90\%$. This means 90% of hepatitis A cases among those who drank well water can be attributed to that exposure, supporting the well as the source.

QUESTION 8

SINGLE CHOICE

A 32-year-old woman who is 18 weeks pregnant has no documented history of tetanus vaccination. Which of the following is the most appropriate tetanus-containing vaccine schedule for her during this pregnancy?

- ☐ A Single dose of Td at 18 weeks and no further doses
- ☒ B Tdap at 18 weeks and then two doses of Td at one-month intervals
- ☐ C Tdap at 18 weeks and one dose of Td at least one month later
- ☐ D Defer all tetanus-containing vaccines until after delivery

ANSWER B

WHY A pregnant woman with no prior tetanus immunization should receive three doses of tetanus-toxoid-containing vaccine using the standard schedule: Tdap (which also provides pertussis protection for the newborn) followed by two doses of Td each at least four weeks apart, completed at least two weeks before delivery to prevent neonatal tetanus.