

6.5  $\text{sem} = \frac{0.5}{\sqrt{40}} = 0.079$  for normal men and  $\frac{0.4}{\sqrt{32}} = 0.071$  for men with chronic airflow limitation.

6.6 It means that the distribution of mean triceps skin-fold thickness from repeated samples of size 40 drawn from the population of normal men can be considered to be normal with mean  $\mu$  and variance  $\frac{\sigma^2}{n} \cong \frac{s^2}{n} = \frac{0.5^2}{40} = 0.0063$ . A similar statement holds for men with chronic airflow limitation.

6.7 2.583

6.8 -1.313

6.9 2.365

6.10 We refer to Table 6. The lower 2.5th percentile is 0.0506 and is denoted by  $\chi_{2,025}^2$ . The upper 2.5th percentile is 7.38 and is denoted by  $\chi_{2,975}^2$ .

6.11 We have that  $\bar{x} = \frac{215}{25} = 8.6$  days. Therefore, a 95% confidence interval for  $\mu$  is given by

$$\begin{aligned}\bar{x} \pm \frac{t_{24, .975}s}{\sqrt{n}} &= 8.6 \pm \frac{2.064(5.72)}{\sqrt{25}} \\ &= 8.6 \pm 2.36 = (6.24, 10.96)\end{aligned}$$

6.12 The 95% confidence interval is computed from  $\bar{x} \pm t_{n-1, .975} \frac{s}{\sqrt{n}}$ . We have that  $\bar{x} = 7.84$ ,  $s = 3.21$ . There-fore, we have the following 95% confidence interval

$$\begin{aligned}7.84 \pm t_{24, .975} \times \frac{3.21}{\sqrt{25}} &= 7.84 \pm 2.064 \times \frac{3.21}{5} \\ &= 7.84 \pm 1.33 = (6.51, 9.17)\end{aligned}$$

6.13 A 90% confidence interval is given by

$$\begin{aligned}\bar{x} \pm t_{n-1, .95} \frac{s}{\sqrt{n}} &= 7.84 \pm t_{24, .95} \times \frac{3.21}{\sqrt{25}} \\ &= 7.84 \pm 1.711 \times \frac{3.21}{5} \\ &= 7.84 \pm 1.10 = (6.74, 8.94)\end{aligned}$$

6.14 The 90% confidence interval should be shorter than the 95% confidence interval, since we are requiring less confidence. This is indeed the case.

6.15 Our best estimate is given by  $\hat{p} = \frac{11}{25} = .44$ .

**6.16** The standard error  $= \sqrt{\frac{\hat{p}\hat{q}}{n}} = \sqrt{\frac{.44 \times .56}{25}} = .099$ .

**6.17** Since  $n\hat{p}\hat{q} = 25 \times .44 \times .56 = 6.16 \geq 5$ , we can use the normal theory method. Therefore, a 95% confidence interval for the percentage of males discharged from Pennsylvania hospitals is given by

$$\begin{aligned}\hat{p} \pm 1.96 \sqrt{\frac{\hat{p}\hat{q}}{n}} &= .44 \pm 1.96(.099) \\ &= .44 \pm .195 \\ &= (.25, .63)\end{aligned}$$

**6.40** The best point estimate of  $p$  is  $\hat{p} = \frac{20}{100} = .2$ .

**6.41** We can compute the 95% confidence interval for  $p$  based on the normal approximation to the binomial ( $n\hat{p}\hat{q} = 16 \geq 5$ ) and note if .10 falls in this interval. We have

$$\begin{aligned}c_2 &= .20 + 1.96 \sqrt{\frac{.2(.8)}{100}} \\ &= .20 + 1.96 \frac{(.4)}{10} = .278 \\ c_1 &= .20 - 1.96 \sqrt{\frac{.2(.8)}{100}} \\ &= .20 - 1.96 \frac{(.4)}{10} = .122\end{aligned}$$

Since .10 is not in the interval (.122, .278), we can be more confident that we are not observing the placebo effect.

**6.42** The assumption made is that the normal approximation to the binomial distribution is reasonable here. In particular, we assume that  $\hat{p} \sim N\left(p, \frac{pq}{n}\right)$ . This assumption is appropriate since  $n\hat{p}\hat{q} = 100(.2)(.8) = 16 \geq 5$ .

**6.43** The standard error  $= \frac{s}{\sqrt{n}} = \frac{12}{10} = 1.2$ .

**6.44** We can form a 95% confidence interval of the form  $(c_1, c_2)$  based on the  $t$  distribution where

$$c_1 = \bar{d} + t_{n-1,0.025} \frac{s}{\sqrt{n}}$$

$$c_2 = \bar{d} + t_{n-1,0.975} \frac{s}{\sqrt{n}}$$

Since 99  $df$  is not in our  $t$  tables, we approximate  $t_{99,0.975}$  using MINITAB as follows:

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MTB > InvCDF .975;  
SUBC> T 99.  
0.9750 1.9842
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Thus,

$$c_1 = 5.3 - 1.9842(1.2) = 2.9$$

$$c_2 = 5.3 + 1.9842(1.2) = 7.7$$

and we have the confidence interval  $(2.9, 7.7)$  .

**6.45** Since the 95% confidence interval does not include 0, we can again conclude that the drug is effective using this measure of effectiveness.

**6.46** The 95% confidence interval means that if a large number of samples of 100 hypertensive patients were selected and the preceding type of interval constructed, then approximately 95% of such intervals would contain the underlying mean difference in blood pressure upon using the drug.