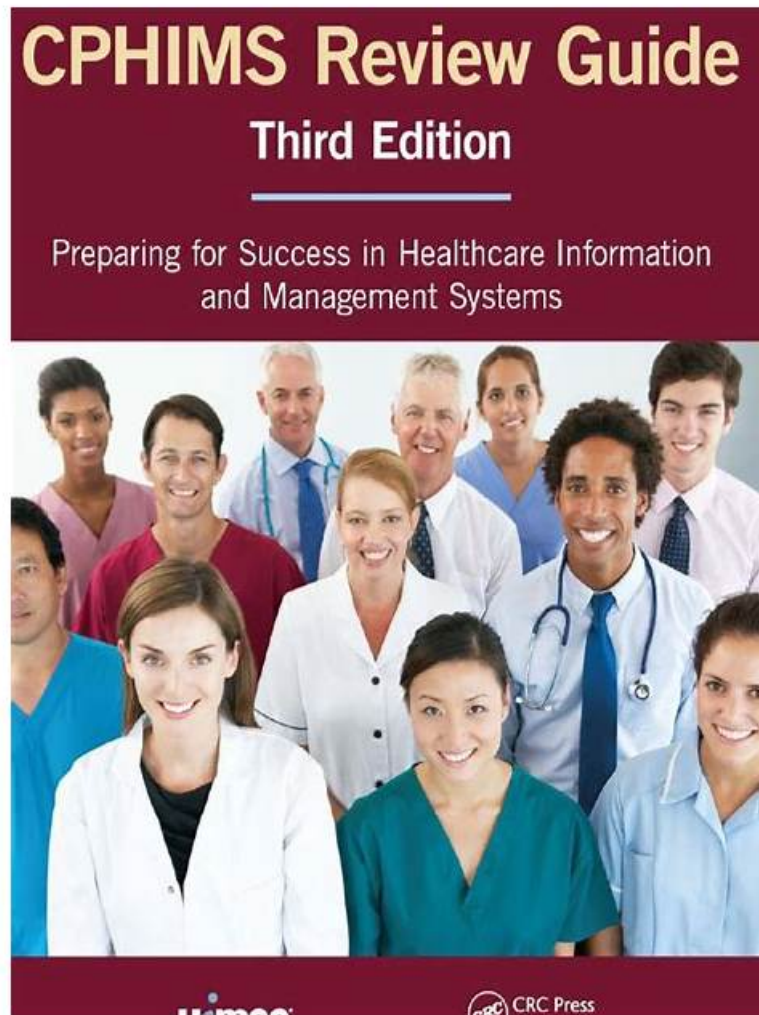


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HIMSS Certified Professional in Healthcare Information and Management Systems Sample Questions (Q10-Q15):

NEW QUESTION # 10

What coding system is used to identify a patient's diagnosis in an electronic health record?

- A. LOINC.
- B. DRG.
- C. ICD.
- D. CPT.

Answer: C

Explanation:

The International Classification of Diseases (ICD) is the standardized coding system used to identify and classify patient diagnoses in an electronic health record (EHR). ICD codes are applied to document diseases, conditions, signs, symptoms, abnormal findings, and external causes of injury or illness. Within healthcare information systems, ICD coding ensures uniform clinical documentation, supports data analytics, enables population health reporting, and drives reimbursement processes.

By contrast, LOINC (Logical Observation Identifiers Names and Codes) is used to standardize laboratory tests and clinical observations, not diagnoses. CPT (Current Procedural Terminology) codes describe medical, surgical, and diagnostic procedures performed by providers. DRGs (Diagnosis-Related Groups) are reimbursement categories used primarily for inpatient hospital payment classification, grouping cases based on diagnoses and procedures rather than serving as the primary diagnosis coding system itself.

In healthcare information and systems management, accurate ICD coding is critical for regulatory reporting, quality measurement, epidemiological tracking, and claims submission. It also supports interoperability by allowing consistent diagnostic data exchange between organizations. Therefore, ICD is the correct system specifically designed to identify and classify patient diagnoses within the electronic health record environment.

NEW QUESTION # 11

An electronic health record's ability to discern user types and the user's respective ability to perform certain functions is best described as

- A. identity proofing.
- B. authentication.
- C. authorization.
- D. provisioning.

Answer: C

Explanation:

The described capability is authorization -the process of determining what an authenticated user is allowed to access or do within the EHR based on their role, job function, and assigned permissions. Authorization is commonly implemented through role-based access control (RBAC) , where user types (e.g., physician, nurse, pharmacist, registrar, billing specialist) are mapped to permission sets that control specific functions such as ordering medications, signing notes, viewing sensitive charts, editing allergy lists, releasing results, or accessing administrative reports. This is exactly what "discern user types" and "ability to perform certain functions" refers to: differentiating users and enforcing permitted actions accordingly.

By contrast, authentication verifies the user's identity (e.g., username/password, MFA, badge tap) but does not define what they can do after login. Identity proofing is the process of validating a person's identity before issuing credentials (often during onboarding or account creation). Provisioning is the administrative workflow of creating accounts and assigning roles/permissions (often via IAM tools), which supports authorization but is not the access decision itself. In healthcare environments, strong authorization is essential for privacy, minimum-necessary access, workflow safety, and compliance, ensuring users can only perform tasks appropriate to their responsibilities.

NEW QUESTION # 12

How is system performance testing defined?

- A. System performance during heavy system load and network traffic.
- **B. System performance in accordance with defined system load performance standards.**
- C. System performance in a production environment.
- D. System performance in accordance with end user requirements.

Answer: B

Explanation:

System performance testing is the structured evaluation of how well an application or infrastructure performs against predefined, measurable performance criteria under specified workload conditions. In healthcare technology environments, these criteria typically include response time, throughput (transactions per second), concurrent user capacity, CPU/memory utilization, database performance, and interface/message processing times-benchmarked against agreed standards such as "95% of chart lookups complete within X seconds with Y concurrent users." That is why the best definition is performance "in accordance with defined system load performance standards." Option A describes stress testing more specifically, which focuses on behavior under extreme or peak loads (often beyond expected capacity) to identify breaking points and failure modes. Option C aligns with user acceptance testing (UAT), which validates the solution meets workflow and functional expectations from end users, not necessarily technical performance benchmarks. Option D suggests testing in production, which may occur as monitoring or controlled validation, but performance testing is typically executed in a dedicated test environment that mirrors production so results are repeatable and risk is minimized. For EHRs and clinical systems, proper performance testing is essential to prevent delays that can disrupt care delivery and patient safety.

NEW QUESTION # 13

What public health benefit can be derived from data collected from social media and internet search engines?

- **A. The revelation of associations and patterns.**
- B. Improved statistical analysis.
- C. Increased data visualization.
- D. The discovery of semi-structured and structured data types.

Answer: A

Explanation:

Data from social media and internet search engines can provide a public health benefit through the revelation of associations and patterns (Option A). These data sources are often high-volume, rapidly generated, and reflective of real-time behaviors-such as symptom searching, discussions of illness, medication side effects, or concerns about local outbreaks. When analyzed appropriately, they can help identify emerging trends, detect unusual clusters of symptoms, and signal potential outbreaks earlier than traditional reporting pathways that depend on clinical visits, laboratory confirmation, and formal case reporting. Pattern and association discovery is a core capability of analytics and informatics: mining large datasets to find relationships (e.g., increases in searches for "fever and cough" correlated with rising influenza-like illness) and temporal/geographic trends that support situational awareness and targeted interventions.

The other options are less directly tied to a public health "benefit." Data visualization (C) and statistical analysis (B) are methods that can be applied to many datasets but do not describe the specific actionable value derived from these unconventional sources. Discovering data types (D) is a technical characterization and not a direct public health outcome. In contrast, identifying patterns and associations can inform earlier surveillance, resource planning, risk communication, and focused prevention strategies-making A the best answer.

NEW QUESTION # 14

Digital health apps and fitness tracking devices can add patients' health data to their Electronic Health Records (EHR) by using a(n):

- A. Controlled Unclassified Information (CUI).
- B. Virtual Desktop Machine (VDM).
- **C. Application Programming Interface (API).**
- D. Electronic Data Interchange (EDI).

Answer: C

Explanation:

An Application Programming Interface (API) is the standard technology mechanism that allows digital health apps and consumer fitness devices to exchange data with an EHR in a controlled, automated way.

APIs define the rules for how one software system can request data from, or send data to, another system- typically using secure authentication, authorization, and standardized data formats. In modern healthcare interoperability, APIs enable patient-generated health data (PGHD) such as heart rate, activity, sleep, glucose readings, and blood pressure measurements to flow into clinical systems where it can be reviewed, trended, and incorporated into care plans. This approach supports patient engagement and more continuous monitoring beyond traditional clinical visits.

The other options do not fit this function. CUI is a U.S. government information classification concept and is not a data exchange method for EHR integration. EDI is primarily used for structured business transactions (such as eligibility checks and claims submissions) rather than streaming wellness-device metrics into clinical records. VDM (virtual desktop) is a way to deliver a desktop computing environment remotely; it does not provide a standardized pathway for device/app data ingestion into an EHR. Therefore, the best answer is API .

NEW QUESTION # 15

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