

# Why Do You Need to Trust HIMSS CPHIMS Exam Questions?

## HIMSS CPHIMS Certification - What It Can Do For You

HIMSS prides itself on supporting the efforts of our members and helping to support the positioning of our member's career paths through various support mechanisms, the fundamentals of which is a solid educational platform. This platform is the cornerstone of career growth and expansion. Recall the professional certification I previously wrote about – CPHIMS. Just to refresh your thoughts, the CPHIMS is a professional certification program for healthcare information and management systems professionals. Individuals who meet eligibility criteria and successfully complete the CPHIMS exam are designated a Certified Professional in Healthcare Information and Management Systems (CPHIMS). This HIMSS credential provides both internal and external rewards because it validates a person's skill, knowledge and abilities.

From a career perspective, it can distinguish you from your peers as certified in healthcare information and management systems; expand your career opportunities; validate your healthcare information and management systems knowledge, competency and credibility; provide you with skills and tools to help you make a difference in your career, your organization, and your community; demonstrate your commitment to continuing professional development; enjoy the pride of recognition of knowing that you are among the elite in a critical field of healthcare; and hold a premier credential based on a sound assessment to distinguish yourself in an increasingly competitive marketplace. The link for further information on CPHIMS is: [http://www.himss.org/ASP/certification\\_cphims.asp](http://www.himss.org/ASP/certification_cphims.asp)

And in support of our member's effort for career advancement, we will be offering a review course at the [HIMSS GHIT meeting in June](#) as well as the CPHIMS exam itself. The CPHIMS Review Course is being held Sunday, June 10, 2012, 12:00-5:00 PM. It is a 1/2-day course designed for healthcare IT professionals preparing to take the CPHIMS Exam. It is also designed to be a great review of healthcare IT practice for those who are transitioning from another area, returning to the specialty, or who are new to the specialty. Additionally, HIMSS is offering the CPHIMS Exam via laptop at GHIT12. This will be held on Monday, June 11, 2012, 10:00 AM - 12:00 PM with candidate check-in beginning at 9:00 AM.

Pre-register through the GHIT12 registration page by Monday, May 28, 2012; non-refundable and non-transferable to another person or another administration. This administration of the exam is limited to 10 candidates. Only 10 seats are available for testing, so don't delay. The Exam session will be filled on a first-in/first-confirmed basis.

CPHIMS acknowledges and honors the proven expertise and commitment of those who have earned this credential. CPHIMS are distinguished innovators and dedicated contributors to the delivery of quality healthcare. CPHIMS knowledge, dedication and professional achievement drives the exploration and advancement of technology as an instrument of continuous improvement in the healthcare field.

Would you like further information of "why" you should strongly consider this certification or about the GHIT CPHIMS exam offering? Reach to Julianna Kazragys, Manager, Professional Development, Certification: [jkazragys@himss.org](mailto:jkazragys@himss.org). She can answer any question not answered on the website links.

And remember...Be passionate about your career path and strive to make a difference and learn, learn...learn. Technology is only the enabler; individuals will be the "transformers" of health IT in the

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There is a group of experts in our company which is especially in charge of compiling our CPHIMS exam engine. There is no doubt that we will never miss any key points in our CPHIMS training materials. As it has been proven by our customers that with the help of our CPHIMS Test Prep you can pass the exam as well as getting the related CPHIMS certification only after 20 to 30 hours' preparation, which means you can only spend the minimum of time and efforts to get the maximum rewards.

Constantly updated multiple mock exams with a great number of questions that will help you in better self-assessment. Memorize all your previous HIMSS Certified Professional in Healthcare Information and Management Systems (CPHIMS) exam questions attempts and display all the changes in your results at the end of each HIMSS CPHIMS Practice Exam attempt. Users will be able to customize the HIMSS Certified Professional in Healthcare Information and Management Systems (CPHIMS) practice test software by time or question types. Supported on all Windows-based PCs.

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As we all know, HR form many companies hold the view that candidates who own a CPHIMS professional certification are preferred, because they are more likely to solve potential problems during work. And the CPHIMS certification vividly demonstrates the fact that they are better learners. Concentrated all our energies on the study CPHIMS learning guide we never change the goal of helping candidates pass the exam. Our CPHIMS test questions' quality is guaranteed by our experts' hard work.

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## HIMSS Certified Professional in Healthcare Information and Management Systems Sample Questions (Q17-Q22):

### NEW QUESTION # 17

Which of the following is the INITIAL step to achieve successful implementation of a new system?

- A. Identify common goals and expectations.
- B. Evaluate the technical environment.
- C. Conduct site visits at successful implementations.
- D. Allocate budget and staff for the new system.

**Answer: A**

Explanation:

The initial step in a successful system implementation is to identify common goals and expectations because this establishes the shared purpose, scope, and outcomes that will guide every later decision. Before an organization evaluates infrastructure, visits peer sites, or commits resources, leadership and key stakeholders must agree on what problem the new system is solving, what success looks like (clinical, operational, financial, compliance), who the primary users are, and what constraints exist (time, risk tolerance, regulatory requirements, workflow priorities). This early alignment reduces downstream conflict, prevents scope creep, and ensures that technical and budgeting choices are tied to business and clinical objectives rather than vendor features.

Only after goals and expectations are clarified does it make sense to evaluate the technical environment (to confirm readiness and integration needs), conduct site visits (to validate workflows and lessons learned against the organization's own objectives), and allocate budget and staff (to resource a plan that is clearly defined). In health IT management, starting with shared goals is a foundational governance practice because it supports stakeholder buy-in, defines measurable outcomes for adoption and value, and creates a clear basis for change management, training, and post-go-live optimization.

### NEW QUESTION # 18

A healthcare facility needs to connect with an external agency to send financial billing information from the electronic health record (EHR) system. Which of the following protocols would BEST facilitate this?

- A. VPN and RDP.
- B. HTTPS and DICOM.
- C. VPN and HL7.
- D. HTTPS and SSL.

**Answer: C**

Explanation:

The best choice is VPN and HL7 because it combines a secure transport method with a healthcare messaging standard suited to exchanging administrative and financial transactions. A VPN (Virtual Private Network) creates an encrypted tunnel between organizations, supporting secure connectivity over public networks and helping protect sensitive data (including billing-related patient information) during transmission. HL7 - commonly HL7 v2 in many environments-provides standardized message structures used by hospitals to exchange patient demographics (ADT), charges, billing events, and related administrative data with external systems such as clearinghouses, payers, or revenue-cycle partners. Using HL7 reduces interface ambiguity by defining consistent fields and event triggers, which is critical for accurate billing and reconciliation.

Option A (VPN and RDP) is not ideal because RDP is for remote screen access, not structured data interchange; it also introduces operational and security risks when used as a substitute for interfaces. Option B (HTTPS and SSL) focuses on transport security, but does not specify a healthcare data format for billing;

"SSL" is also a legacy term often replaced by TLS, and HTTPS alone doesn't ensure standardized billing content. Option D (HTTPS and DICOM) is incorrect because DICOM is primarily for medical imaging, not financial billing transactions.

### NEW QUESTION # 19

Strategic plans include

- A. policies and procedures.
- B. financial projections.

- C. budget requests.
- **D. operational plans.**

**Answer: D**

### NEW QUESTION # 20

Which of the following would be considered part of an EHR quantitative data set?

- A. Radiology reports.
- B. Medication records.
- **C. Lab values.**
- D. Progress notes.

**Answer: C**

Explanation:

Quantitative data in an Electronic Health Record (EHR) refers to structured, numeric, and measurable data elements that can be directly analyzed using statistical and computational methods. Lab values clearly fit this definition because they consist of discrete numerical results (e.g., hemoglobin level, potassium concentration, blood glucose measurement) that are recorded in standardized units and can be trended over time. These values support clinical decision support systems (CDSS), quality reporting, population health management, and predictive analytics.

Radiology reports and progress notes are primarily qualitative, narrative text documents. While they may contain some numeric elements, their core content is unstructured free text, making them less directly usable for quantitative analysis without natural language processing. Medication records may include structured components (e.g., dosage, frequency), but they are generally considered part of medication management documentation rather than purely quantitative datasets in the strict sense of numeric measurement values.

Within clinical informatics frameworks, structured quantitative data such as lab results enable automated alerts, clinical pathways, benchmarking, and outcomes measurement. Because they are discrete, codified, and standardized, lab values are foundational to data analytics, interoperability, and evidence-based care-making. Lab values are the correct answer.

### NEW QUESTION # 21

What key management practice BEST ensures the ongoing value of an IT project?

- A. Identification of investment risks.
- **B. Organizational change management.**
- C. Attention to costs and project completion timeframes.
- D. Alignment of project purpose with the organization's strategy.

**Answer: B**

Explanation:

Organizational change management (OCM) best ensures the ongoing value of an IT project because value in healthcare IT is realized only when the solution is adopted, used correctly, and sustained in daily operations. Even if a project is strategically aligned, delivered on time, and within budget, it can fail to produce lasting benefits if clinicians and staff do not change workflows, follow standardized processes, and consistently use the system as intended. OCM addresses the human and operational side of transformation:

stakeholder engagement, communication, role-based training, readiness assessment, super-user networks, leadership sponsorship, workflow redesign, and reinforcement after go-live. These elements reduce resistance, improve competency, and support stabilization and optimization—where many long-term benefits (quality, safety, efficiency, data integrity) are actually achieved.

Option B (strategic alignment) is essential for selecting the right project, but it does not guarantee continued performance once implemented. Option C focuses on project management constraints (time/cost) and is necessary for delivery, not sustained value.

Option D strengthens governance by anticipating risks, but risk identification alone does not drive adoption or behavior change.

OCM is therefore the most direct practice for ensuring that an IT investment delivers and maintains measurable benefits over time.

### NEW QUESTION # 22

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