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HIMSS Certified Professional in Healthcare Information and Management Systems Sample Questions (Q85-Q90):

NEW QUESTION # 85
Which of the following best defines Healthcare Informatics?

- A. The management of billing, data analytics, and computer science.
- B. The development of clinical software, data processes, and interfaces.
- C. The application of information science and computer programming within public health practice.
- D. The intersection of healthcare, information science, and technology.

Answer: D

Explanation:
Healthcare Informatics is best defined as the intersection of healthcare, information science, and technology .
This definition reflects the multidisciplinary nature of the field, which integrates clinical practice, information management, data science, human factors, and computing technologies to improve patient care, safety, quality, and operational effectiveness.

Healthcare informatics is not limited to software development or analytics; it includes the design, implementation, evaluation, and optimization of systems such as EHRs, clinical decision support, interoperability frameworks, data governance structures, and workflow redesign efforts.
Option B is too narrow and focuses mainly on business and analytics functions. Option C describes public health informatics, which is a subset of healthcare informatics but not the full scope. Option D focuses primarily on system development and technical components, overlooking the clinical, organizational, and socio-technical dimensions central to informatics practice.
Healthcare informatics emphasizes how information is structured, shared, interpreted, and applied in clinical and operational settings to support evidence-based care, regulatory compliance, and performance improvement. Therefore, the most accurate and comprehensive definition is the intersection of healthcare, information science, and technology.

NEW QUESTION # 86
To improve accountability, the directors of materials and information management have decided to consolidate asset management. Which of the following should be done FIRST?

- A. Validate current inventory.
- B. Evaluate inventory turns.
- C. Merge both inventory systems.
- D. Assess inventory par levels.

Answer: A

Explanation:
When consolidating asset (or inventory) management to improve accountability, the first priority is establishing a trustworthy baseline of what assets and stock actually exist, where they are located, and how they are recorded. That is why validating current inventory should be done first. If item masters, quantities on hand, serial/lot information, locations, and ownership/custody data are inaccurate, any later step-such as setting par levels or calculating inventory turns-will be built on incorrect inputs and can worsen shortages, expirations, and uncontrolled spend. Validation typically includes physical counts or cycle counts, reconciliation against system records, resolving duplicates in item catalogs, confirming units of measure, and aligning location and department assignments.
Only after the current state is validated does it make sense to assess par levels (which depend on accurate usage and replenishment data) and evaluate inventory turns (which require reliable on-hand values and consumption history). Similarly, merging inventory systems before cleansing and validation risks carrying forward bad data into the consolidated environment, making accountability harder rather than easier. In healthcare settings-where supplies and equipment affect patient care, charge capture, and compliance-inventory validation is the foundation step that enables effective consolidation and measurable accountability.

NEW QUESTION # 87
A software program that converts audio analog to a digital signal for dictation is:

- A. Virtual reality software.
- B. Voice recognition software.
- C. Text to speech software.
- D. Voice response system software.

Answer: B

Explanation:
Voice recognition software (also called speech recognition) is used in clinical documentation workflows to capture spoken dictation and convert it into a digital form that the system can process-typically producing text and/or a digital dictation file that can be stored, edited, and routed within the EHR or transcription workflow. In healthcare settings, clinicians often dictate notes, operative reports, and discharge summaries.
Voice recognition technology digitizes the spoken input and applies recognition algorithms to transform speech into structured text, supporting faster documentation turnaround and improved availability of clinical notes.
By contrast, text-to-speech converts written text into spoken audio output (the reverse direction). A voice response system (interactive voice response/IVR) is primarily used for telephone-based automated menus and information capture (e.g., appointment reminders or patient self-service), not clinician dictation. Virtual reality software supports immersive simulation or training environments and is unrelated to converting dictation audio for documentation.
From a clinical informatics perspective, voice recognition is important because it can reduce reliance on manual transcription, speed documentation completion, and support more timely information availability for care teams-provided it is implemented with quality controls to manage recognition errors and maintain documentation accuracy.

NEW QUESTION # 88
During the requirements phase of an implementation project, the consulting team discovers a gap that is critical to the success of the project; however, it involves additional cost and resources. What step would be performed by the project manager to address this?

- A. Create a change request and ensure review and approval from the key stakeholders and sponsors.
- B. Conduct stakeholder interviews to understand the challenges due to the gap identified.
- C. Include activities in the change management plan to ensure the gap is communicated and understood by staff and resources on the program.
- D. Update the cost and timeline of activities and notify the downstream impact to the stakeholders.

Answer: A

Explanation:
Within healthcare information system implementations, formal governance and structured change control are essential components of effective project management. When a critical gap is identified during the requirements phase-particularly one that affects scope, cost, or resource allocation-the appropriate action is to initiate a formal change request process . This ensures that the proposed modification is documented, evaluated, and reviewed through established governance channels before execution.
Creating a change request allows the project manager to formally define the scope impact, cost implications, resource adjustments, timeline changes, risks, and expected benefits. The request is then submitted to key stakeholders, sponsors, or a steering committee for structured review and approval. This aligns with healthcare IT governance best practices, which emphasize transparency, accountability, and executive oversight-especially when budget or strategic objectives are affected.
Option A relates to organizational change management but does not address scope or funding authorization.
Option B assumes approval and prematurely adjusts baseline plans without formal authorization. Option D may be useful earlier during gap analysis but does not resolve funding or approval requirements.
Healthcare Information and Management Systems governance principles stress that scope, cost, and resource changes must follow formal change control procedures , making option C the correct and most compliant response.

NEW QUESTION # 89
After a new pharmacy dispensing system is implemented, issues are reported regarding pharmacies not being able to process prescriptions that were received before the cutover to the new system. Which testing phase could have identified this issue?

- A. Regression testing.
- B. System integration testing.
- C. Unit testing.
- D. Acceptance testing.

Answer: D

Explanation:
Acceptance testing (User Acceptance Testing/UAT) is the testing phase most likely to identify an inability to process prescriptions that existed before cutover , because UAT validates that the solution supports real operational workflows and business requirements under conditions that mirror production use. A key go-live risk in pharmacy system replacement is data conversion and continuity of care : prescriptions entered in the legacy system prior to cutover must be accessible and actionable in the new environment (e.g., visible in work queues, eligible for verification, dispensing, labeling, adjudication, and documentation). In well-designed acceptance testing, users execute scripted scenarios that include "pre-cutover" items-converted orders, historical prescriptions, and in-flight work-specifically to confirm that the new system can safely continue processing without interruption.
By comparison, unit testing focuses on individual components and would not validate end-to-end prescription processing across converted legacy data. System integration testing emphasizes interfaces between systems (e.
g., EHR-to-pharmacy, claims, automation) but may not adequately validate business readiness with converted pre-cutover prescriptions unless explicitly included. Regression testing checks that changes did not break previously working functions, but it is not the primary phase for validating cutover continuity. Therefore, acceptance testing is the best answer.

NEW QUESTION # 90
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