

CPHIMS PDF問題サンプル、CPHIMS試験勉強過去問

CPHIMS Exam Questions with correct Answers

Which of the following functions are typically performed by a health information management professional?

1. diagnosis and procedure coding
2. system implementation
3. content retention
4. record administration - ✓✓1, 3, and 4 only

Item #3, system implementation, typically involves hardware, software, network and training. This would not be performed by a health information management professional.

A CIO is hearing from staff members that the team needs additional resources to be successful with maintaining all of the organization's current systems. The MOST appropriate first step for the CIO would be to:

- A. poll each member to understand their thoughts on what skill sets and abilities are needed from the new hires.
- B. review performance indicators and service metrics along with organizational perception of the team's effectiveness. ✓✓
- C. adjust the departmental budget to allow for the hiring of additional staff members.
- D. review process improvement opportunities and develop a plan to implement the changes. - ✓✓B. review performance indicators and service metrics along with organizational perception of the team's effectiveness.

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>> CPHIMS PDF問題サンプル <<

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HIMSS Certified Professional in Healthcare Information and Management Systems 認定 CPHIMS 試験問題 (Q85-Q90):

質問 # 85

A statement which describes the desired future state is called a

- A. position statement.
- **B. vision statement.**
- C. values statement.
- D. mission statement.

正解: B

解説:

A vision statement describes the desired future state of an organization-what the organization ultimately aims to become or achieve. Within healthcare information and management systems governance, the vision statement provides long-term strategic direction and establishes an aspirational picture of success. It answers the question, "Where do we want to be in the future?" and serves as a guiding framework for digital transformation, technology adoption, and enterprise strategy.

In contrast, a mission statement defines the organization's current purpose-what it does, whom it serves, and how it delivers value today. A values statement outlines the core principles and ethical standards that guide behavior and decision-making. A position statement typically communicates an organization's stance on a specific issue or policy matter and is not a forward-looking strategic description.

From a healthcare IT leadership perspective, a clearly articulated vision is essential for aligning clinical informatics initiatives, infrastructure investments, interoperability goals, and innovation strategies. It ensures that major programs-such as EHR optimization, analytics implementation, cybersecurity strengthening, and patient engagement platforms-are aligned toward a unified, future-oriented objective. Therefore, the correct answer is vision statement , as it specifically defines the organization's intended future state.

質問 # 86

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

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

正解: C

解説:

Data from social media and internet search engines can provide a public health benefit through the revelation of associations and patterns (Option D). 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 (A) 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 (C) 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 D the best answer.

質問 # 87

A systematic method to verify that the system supports what users are required to do is called a

- A. Task analysis.
- B. Comparison test.
- **C. User acceptance test.**
- D. Clinical review.

正解: C

解説:

A User Acceptance Test (UAT) is a structured and systematic process conducted to verify that an information system supports real-world user requirements and workflows prior to full deployment. In healthcare information systems management, UAT occurs after system configuration and technical testing are complete, but before go-live. End users-such as clinicians, registration staff, pharmacists, and billing personnel- execute predefined scenarios based on actual job tasks to confirm that the system functions as intended in practice. The purpose is to validate that the system supports required workflows, regulatory requirements, documentation standards, reporting needs, and patient safety processes.

A task analysis is conducted earlier in the lifecycle to understand and document what users do in their roles; it informs system design but does not verify functionality. A clinical review typically evaluates clinical content or quality of care but is not a formal system validation method. A comparison test may evaluate differences between systems or versions but does not ensure user workflow requirements are met.

From a governance and implementation standpoint, UAT reduces risk by identifying workflow gaps, configuration errors, and usability issues before activation. Therefore, the correct answer is User Acceptance Test.

質問 # 88

An MPI system assigns each patient a

- A. unique prescription number.
- B. master population index.
- **C. unique person identifier.**
- D. medical provider identifier.

正解: C

解説:

A Master Patient Index (MPI) is a core health information management function that supports accurate patient identity matching across an organization's clinical and administrative systems. Its central purpose is to ensure that each patient's records-encounters, lab results, imaging, medications, allergies, and billing information- are correctly linked to the right individual, even when the patient receives care at multiple locations or has multiple registrations. To accomplish this, an MPI assigns (and maintains) a unique person identifier for each patient. This identifier serves as the consistent "key" used to connect records from different systems and prevent duplicate charts or overlay errors (where one patient's information is mistakenly filed under another's record).

The other choices do not align with what an MPI does. A prescription number relates to a medication order /dispense transaction, not a person. "Master population index" is not something that is "assigned" to the patient; it is the system/process itself (sometimes called an enterprise master patient index). A medical provider identifier applies to clinicians, not patients. In practice, MPI integrity is supported by demographic attributes (name, DOB, address, phone), matching algorithms, and governance processes for duplicate resolution-built around the patient's unique person identifier .

質問 # 89

To enhance patient safety, which of the following abbreviations should be eliminated when introducing or upgrading an Electronic Health Record (EHR)?

- **A. qd.**
- B. prn.
- C. npo.
- D. hs.

正解: A

解説:

The abbreviation "qd" (intended to mean "every day") should be eliminated because it is well known to be error-prone and has been

repeatedly associated with misinterpretation and serious medication dosing errors. In handwritten or poorly rendered text, "qd" can be mistaken for "q.i.d." (four times daily), which can lead to a fourfold dosing frequency error -a high-risk patient safety event. Because EHR implementations often standardize order sets, medication dictionaries, and clinical documentation templates, this is a key opportunity to remove unsafe abbreviations and replace them with fully spelled-out, unambiguous instructions (e.g., "daily").

In contrast, NPO ("nothing by mouth"), PRN ("as needed"), and HS ("at bedtime") are common clinical abbreviations that are generally understood and are not typically singled out in major "do-not-use" abbreviation lists in the same way "qd" is. Safety-focused informatics practice emphasizes embedding these standards directly into computerized provider order entry (CPOE) and order sentences so clinicians select clear, standardized terms instead of typing free-text abbreviations. Eliminating "qd" supports safer prescribing, reduces ambiguity across care teams, and strengthens medication safety during EHR go-lives and upgrades.

質問 #90

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