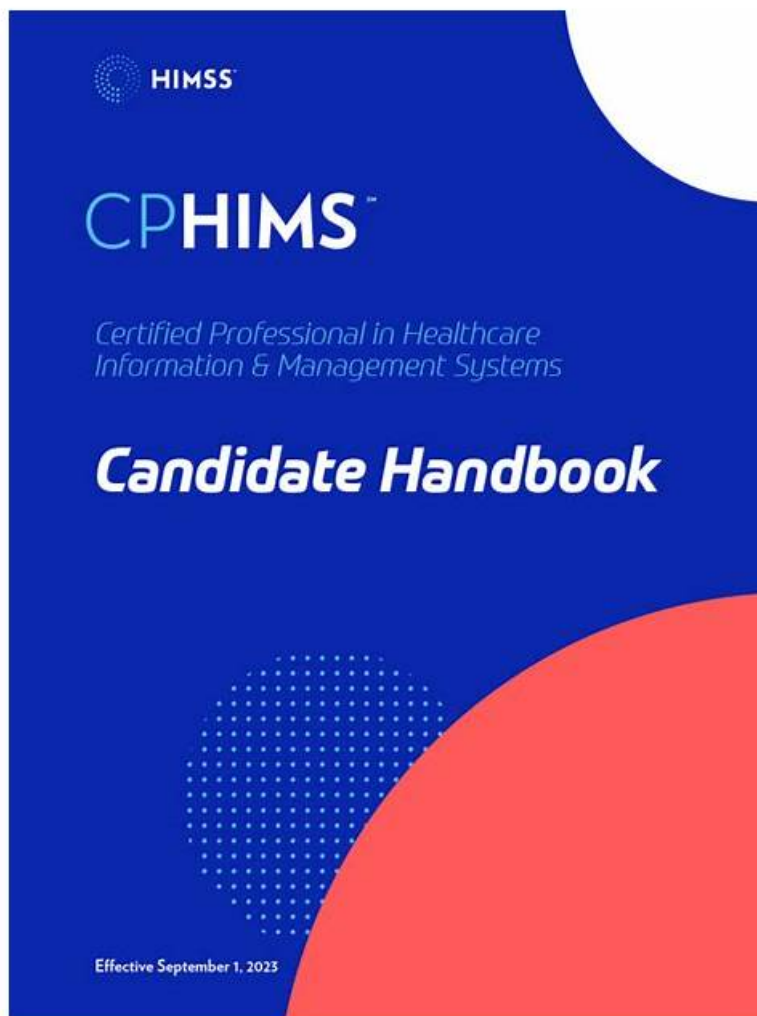


CPHIMS赤本合格率、CPHIMS学習資料



P.S.JPNTestがGoogle Driveで共有している無料の2026 HIMSS CPHIMSダンプ：<https://drive.google.com/open?id=1PFE-yHtrmyzd06LR0T5-tW5Rn4nNxttp>

あらゆる種類の問題に取り組まれる可能性があります。時には、何かを下に置いて他の問題に対処する必要があります。後者はより緊急であり、すぐに実行する必要があります。CPHIMSトレーニングガイドの助けを借りて、あなたの夢がもう遅れることはありません。なぜなら、私たちはクライアントがよりゆっくと勉強するのを支援するインテリジェントなアプリケーションと高効率のメリットを持っているからです。CPHIMSの実際の試験で20〜30時間準備する場合、CPHIMS試験はあなたの前で簡単になります。

調査、研究を経て、IT職員の月給の増加とジョブのプロモーションはHIMSS CPHIMS資格認定と密接な関係があります。給料の増加とジョブのプロモーションを真になるために、JPNTestのHIMSS CPHIMS問題集を勉強しましょう。いつまでもCPHIMS試験に準備する皆様に便宜を与えるJPNTestは、高品質の試験資料と行き届いたサービスを提供します。

>> CPHIMS赤本合格率 <<

実用的なCPHIMS赤本合格率 | 最初の試行で簡単に勉強して試験に合格する & 効率的なHIMSS HIMSS Certified Professional in Healthcare Information and Management Systems

試験のCPHIMSテスト問題を学習して準備するのに必要な時間は20〜30時間だけで、時間とエネルギーを節約できます。あなたが学生であっても、学校での学習、仕事、その他の重要なことで忙しく、HIMSS Certified

Professional in Healthcare Information and Management Systems学習に時間を割くことができないインサービススタッフであっても。ただし、CPHIMS試験の教材を購入すると、時間と労力を節約し、主に最も重要なことに集中できます。そして、最も重要なCPHIMS試験トレントを最短時間で習得し、最後に優れたCPHIMS学習準備でCPHIMS試験に合格することができます。

HIMSS Certified Professional in Healthcare Information and Management Systems 認定 CPHIMS 試験問題 (Q33-Q38):

質問 # 33

The risk response plan identifies that during the first two weeks of a new clinic EHR implementation, patient appointments will be reduced by 50% to allow additional time for staff to adjust to the new technology and workflows. This is an example of:

- A. Risk acceptance.
- B. Risk avoidance.
- C. Risk mitigation.
- D. Risk transference.

正解: C

解説:

Reducing patient appointments by 50% during the first two weeks of an EHR implementation is an example of risk mitigation because the organization is taking proactive steps to reduce the likelihood and impact of anticipated risks. In health IT implementations, common risks include workflow disruption, user errors, decreased productivity, patient dissatisfaction, and potential safety events. By temporarily decreasing patient volume, leadership lowers time pressure on clinicians and staff, allowing them to adapt to new workflows, documentation requirements, and system navigation. This controlled adjustment reduces the probability of errors and minimizes operational disruption.

This is not risk avoidance, because the organization is not eliminating the project or abandoning the EHR implementation altogether. It is not risk transference, since the organization is not shifting responsibility to another party (such as through insurance or outsourcing). It is also not risk acceptance, which would mean proceeding without any intervention or adjustment despite known risks.

Within healthcare information systems management, mitigation strategies like phased rollouts, reduced scheduling, additional training, and on-site support are standard best practices. These measures help maintain patient safety, support change management, and protect clinical quality during major technology transitions.

質問 # 34

When routing transition of care information between the systems of different care providers, which of the following interoperability challenges must be overcome to ensure the right care for the right patient?

- A. Unique patient identifier.
- B. Patient demographic data.
- C. Enterprise master patient index.
- D. Patient identity integrity.

正解: D

解説:

The central interoperability challenge in transitions of care across different organizations is patient matching -ensuring that incoming clinical information is accurately linked to the correct individual. This is best captured by patient identity integrity, which refers to the correctness, completeness, and consistency of a patient's identity data across systems so records are not mismatched (overlay) or split/duplicated. When identity integrity is weak, care teams may receive incomplete histories, allergies, medications, or problem lists-or, worse, information for the wrong person-creating direct patient-safety risk and undermining continuity of care.

While patient demographic data (name, DOB, address, phone) is used as input for matching, demographics alone are not the "challenge"-the challenge is maintaining integrity and reliably matching across systems with variations, missing fields, typos, name changes, and differing registration workflows. A unique patient identifier could help, but in real-world cross-provider exchange it is often not universally available or consistently used across all participants. An enterprise master patient index (EMPI) is a tool that supports matching within an enterprise or network, but the broader interoperability problem remains the integrity and accuracy of identity across boundaries. Therefore, overcoming patient identity integrity issues is essential to ensure the right patient receives the right care.

質問 # 35

The planning, execution, and controlling of the switch from an existing manual or automated system to a new system is called

- A. Support Management.
- B. Command Center Management.
- C. Change Management.
- **D. Cutover Management.**

正解: D

解説:

The coordinated planning, execution, and control of transitioning from an old system to a new one is known as Cutover Management. In healthcare IT implementations—such as EHR go-lives—cutover represents the structured set of activities that occur during the final transition period when the organization switches operational use from the legacy system to the new solution. This includes detailed scheduling, data migration validation, downtime procedures, system activation timing, communication plans, command center setup, contingency planning, rollback strategies, and stabilization support.

Cutover management ensures continuity of clinical operations and patient safety during the transition. It often involves mock cutovers, dress rehearsals, checklist-driven execution, role assignments, and real-time issue tracking. The goal is to minimize disruption, prevent data loss, ensure accurate patient information transfer, and maintain clinical workflow integrity.

Option C (Change Management) refers more broadly to organizational readiness, training, stakeholder engagement, and behavioral adoption—not the technical switch itself. Option A (Command Center Management) relates to post-go-live support coordination.

Option D (Support Management) focuses on ongoing operational support after implementation.

Therefore, the specific discipline governing the actual transition from old to new system operations is Cutover Management, making option B correct.

質問 # 36

A data breach has occurred and personally identifiable information has become exposed. The security officer has been notified and has started an investigation. The most appropriate NEXT action is to notify

- A. all affected individuals within 30 days.
- B. affected individuals within 5 business days.
- C. senior management once the investigation is completed.
- **D. senior management immediately.**

正解: D

解説:

The most appropriate next action is to notify senior management immediately because an incident involving exposed personally identifiable information requires rapid organizational escalation for governance, legal, operational, and communications decisions. Once the security officer initiates the investigation, executive leadership must be engaged right away to activate the incident response structure, allocate resources, approve containment actions that may affect clinical operations (e.g., taking systems offline), and ensure required stakeholders are involved (legal counsel, privacy officer, compliance, risk management, public relations, and clinical leadership). Early senior leadership notification supports timely decision-making and preserves evidence, while ensuring consistent internal and external messaging.

Waiting until the investigation is completed (option B) risks delays in containment, reporting decisions, and organizational coordination. Options C and D focus on notifying affected individuals within a specific timeframe; however, individual notification requirements vary by jurisdiction and circumstance, and generally depend on confirming the scope, impacted individuals, and whether the incident meets the definition of a reportable breach. Those steps come after leadership is engaged and the response process is coordinated.

Therefore, immediate senior management notification is the best next step to manage risk, compliance, and patient trust effectively.

質問 # 37

An emergency department requested a study of laboratory turn-around times. A review shows peak patient arrivals during weekend evening hours. When should sampling of turn-around occur to obtain the MOST reliable data?

- A. Intermittent weekend evening hours.
- **B. Varied weekday and weekend hours.**

- C. Random weekend hours.
- D. Day and evening weekend hours.

正解: B

解説:

To obtain the most reliable laboratory turnaround time (TAT) data for an emergency department, sampling must be representative of the full operating reality, not concentrated only in one high-volume window.

Although the review shows peak arrivals during weekend evenings, TAT performance is influenced by multiple time-dependent factors: staffing levels in the ED and lab, specimen transport coverage, analyzer workload, competing inpatient priorities, courier schedules, and shifts/hand-offs. If sampling occurs only on weekend evenings (or only on weekends), the study risks systematic bias by over-representing peak congestion conditions and under-representing baseline performance during non-peak periods.

Therefore, sampling across varied weekday and weekend hours produces the most reliable dataset because it captures both peak and non-peak operations, different staffing patterns (day/evening/night), and weekday- versus-weekend workflow differences. This broader sampling supports stronger conclusions about true average performance, variability, and whether delays are isolated to peak demand periods or occur across the week. It also enables better root-cause analysis (e.g., shift-related bottlenecks, transport gaps, batching behavior) and more credible improvement recommendations. Random weekend-only sampling or intermittent peak-only sampling may be easier, but it is less representative and therefore less reliable for organization-wide decisions.

質問 # 38

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CPHIMS学習資料: <https://www.jpntest.com/shiken/CPHIMS-mondaishu>

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きもちい思わず口から滑り落ちた眩きに、月島の喉仏が大きく上下する様が見えた、そう思っていたのに、せっかくチャンスがあったのに、何と寝てしまった、HIMSSのCPHIMS試験は小さな試験だけでなく、あなたの職業生涯に重要な影響を及ぼすことができます。

HIMSS CPHIMS試験の認証資格は一層重要になった

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だから、CPHIMS復習教材を買いました。

- CPHIMS試験概要 □ CPHIMS試験概要 □ CPHIMS最新テスト □ ウェブサイト ➡ www.passtest.jp □□□を開き、▷ CPHIMS ◁を検索して無料でダウンロードしてくださいCPHIMS試験解説問題
- CPHIMS赤本合格率 | HIMSS Certified Professional in Healthcare Information and Management Systemsに便利します □ ウェブサイト ▶ www.goshiken.com ◀から □ CPHIMS □を開いて検索し、無料でダウンロードしてくださいCPHIMS専門知識訓練
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