Canadian Health Information Management Association (CHIMA) NCE Practice Exam (Sample)

Study Guide

BY EXAMZIFY

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Questions

1. What term describes fetal death occurring in pregnancies less than 20 weeks of gestation and weighing 50 grams or less?

   A. Late fetal death

   B. Intermediate fetal death

   C. Early fetal death

   D. Fetal demise

2. What term describes the pressure in the ventricles generated at the end of diastole?

   A. Afterload

   B. Preload

   C. Cardiac Output

   D. Stroke Volume

3. Which document outlines the processes and responsibilities for data protection in a healthcare organization?

   A. Data breach policy.

   B. Privacy impact assessment.

   C. Information security policy.

   D. Health record retention policy.

4. What does the join operation accomplish when applied to two tables?

   A. It combines them into a single flat file

   B. It merges columns from two tables into one table

   C. It associates records based on a shared field

   D. It filters out duplicate records from both tables

5. What does neutrophilia indicate in a patient?

   A. Decreased white blood cells

   B. Increased numbers of neutrophils

   C. Deficiency of granulocytes

   D. Increased lymphocytes

6. **Which activity does NOT fall under the responsibility of a Database Administrator (DBA)?**

   A. Setting up database structures

   B. Conducting user training

   C. Evaluating database performance

   D. Developing recovery procedures

7. **What aspect of the standards lifecycle ensures health information standards remain relevant and sustainable?**

   A. Conformance

   B. Education and training

   C. Implementation

   D. Maintenance

8. **Which of the following is a facility business use of the health record generally not requiring patient authorization?**

   A. Investigation of a patient complaint by the department manager

   B. Review of documentation by the facility's professional liability insurer

   C. Review of the record by the patient's attorney

   D. A and B

9. **What does the cancer mortality rate reflect?**

   A. # cancer deaths during a period multiplied by 100,000

   B. # cancer deaths during a period divided by total population at risk

   C. # cancer deaths during a period divided by total number of live births

   D. # cancer deaths divided by the number of deaths from all causes

10. **In which situation would it be beneficial to have an audit trail?**

    A. Defending against an audit.

    B. Holding a patient accountable.

    C. Reconstructing electronic events.

    D. Stopping intranet attacks.

<u>Answers</u>

1. C
2. B
3. C
4. C
5. B
6. B
7. A
8. D
9. A
10. C

Explanations

1. What term describes fetal death occurring in pregnancies less than 20 weeks of gestation and weighing 50 grams or less?

A. Late fetal death

B. Intermediate fetal death

C. Early fetal death

D. Fetal demise

The term that accurately describes fetal death occurring in pregnancies less than 20 weeks of gestation and weighing 50 grams or less is "early fetal death." This designation is used to classify fetal losses that happen at an early stage of pregnancy, specifically before the 20-week mark. At this period, the losses are often referred to as "early" to differentiate them from later fetal deaths, which occur after 20 weeks of gestation. The classification is important in clinical and research settings because it helps in understanding and addressing the various risks, causes, and management strategies for different stages of pregnancy loss. Early fetal death captures the specific circumstances surrounding very early term losses, which may differ in their etiologies and implications from those that occur later in pregnancy. Understanding this classification is vital for health professionals when discussing pregnancy outcomes and assessing perinatal health.

2. What term describes the pressure in the ventricles generated at the end of diastole?

A. Afterload

B. Preload

C. Cardiac Output

D. Stroke Volume

The term that describes the pressure in the ventricles generated at the end of diastole is preload. Preload refers to the degree of stretch of the cardiac muscle fibers at the end of diastole, just before contraction. It is determined by the volume of blood that fills the ventricles during this phase, which in turn affects the ventricles' ability to contract effectively and pump blood during systole.   The concept of preload is crucial in understanding the heart's mechanics and overall cardiovascular function, as it directly influences stroke volume and cardiac output. In clinical practice, measuring preload can help assess the patient's fluid status and cardiovascular health. Understanding how preload affects cardiac performance is essential for health professionals managing conditions such as heart failure, where preload may be altered.

3. **Which document outlines the processes and responsibilities for data protection in a healthcare organization?**

    A. Data breach policy.

    B. Privacy impact assessment.

    C. Information security policy.

    D. Health record retention policy.

The information security policy is crucial in establishing the framework for data protection within a healthcare organization. This document lays out the general principles, procedures, and responsibilities related to safeguarding sensitive data against unauthorized access, breaches, and other threats. It covers aspects such as access control, data encryption, incident response, and awareness training for staff, ensuring that everyone in the organization understands their role in protecting data.   Moreover, this policy typically aligns with legal and regulatory requirements, ensuring that the organization meets its obligations under pertinent privacy and data protection laws. By having a comprehensive information security policy, healthcare organizations can better manage risks and maintain the integrity and confidentiality of patient information, which is critical in maintaining trust and compliance in the delivery of healthcare services. The other documents mentioned serve specific roles and do not encompass the broader scope of data protection processes and responsibilities as effectively as the information security policy does.

4. **What does the join operation accomplish when applied to two tables?**

    A. It combines them into a single flat file

    B. It merges columns from two tables into one table

    C. It associates records based on a shared field

    D. It filters out duplicate records from both tables

The join operation is fundamentally designed to connect rows from two or more tables based on a related column, often referred to as a shared field or key. This mechanism enables the establishment of relationships between different datasets, allowing for comprehensive data analysis and retrieval. When the join operation is utilized, it correlates records from one table to another, ensuring that only the rows that satisfy the join condition are included in the resulting dataset. For instance, consider two tables: one containing patient information and another containing treatment records. By joining these tables on the patient ID, one can assemble a singular view that reveals which treatments each patient has received. This ability to associate records not only enhances data integrity but also supports complex queries and reporting, making it a crucial operation in relational database management.   The other options present various aspects of data manipulation but do not accurately describe the core purpose of the join operation, which is specifically about the association of records based on a common attribute.

5. What does neutrophilia indicate in a patient?

A. Decreased white blood cells

B. Increased numbers of neutrophils

C. Deficiency of granulocytes

D. Increased lymphocytes

Neutrophilia indicates an increased number of neutrophils in the bloodstream. Neutrophils are a type of white blood cell that play a critical role in the immune response, primarily in fighting off infections and responding to injury. When neutrophilia is observed, it typically suggests the presence of an underlying condition, such as an infection, inflammation, stress response, or may occur as a reaction to certain medications. The increase in neutrophil count often reflects the body's response to a triggering factor, such as bacterial infections or tissue injury, where the body requires more neutrophils to combat perceived threats. Monitoring neutrophil levels can be significant in diagnosing and managing various medical conditions.

6. Which activity does NOT fall under the responsibility of a Database Administrator (DBA)?

A. Setting up database structures

B. Conducting user training

C. Evaluating database performance

D. Developing recovery procedures

A Database Administrator (DBA) primarily focuses on the technical aspects of database management, ensuring that databases run efficiently and securely. The responsibilities of a DBA typically include setting up database structures, which involves designing and implementing the architecture of databases to meet various organizational needs. Evaluating database performance is also a core responsibility, as it involves monitoring and optimizing the performance of databases to ensure they operate within expected parameters. Additionally, developing recovery procedures is crucial for data integrity and security. This involves planning for data backup and restoration in the event of a failure, which is also a critical function that ensures the continuity of data services. In contrast, conducting user training is generally not seen as a primary responsibility of a DBA. While a DBA may provide some level of support or guidance about database systems, formal user training is typically handled by other roles or departments within an organization, such as IT support teams or dedicated training personnel. The focus of a DBA is more on the technical management of the database rather than on training users.

7. **What aspect of the standards lifecycle ensures health information standards remain relevant and sustainable?**

   A. Conformance

   B. Education and training

   C. Implementation

   D. Maintenance

The aspect of the standards lifecycle that ensures health information standards remain relevant and sustainable is maintenance. Maintenance involves the ongoing review, updates, and revisions of standards to reflect changes in technology, healthcare practices, and regulatory requirements. This process is crucial for adapting to the evolving landscape of health information management and ensuring that the standards continue to meet the needs of healthcare providers, patients, and other stakeholders. While conformance, education and training, and implementation play important roles in the lifecycle of standards—guiding how they are applied, understood, and integrated—maintenance specifically focuses on the continuous relevance and adaptability of those standards over time. Through maintenance, stakeholders can ensure that the standards not only remain useful but also incorporate feedback from users and innovations in the field, thereby supporting the overall goal of improving health information management practices.

8. **Which of the following is a facility business use of the health record generally not requiring patient authorization?**

   A. Investigation of a patient complaint by the department manager

   B. Review of documentation by the facility's professional liability insurer

   C. Review of the record by the patient's attorney

   D. A and B

In the context of health records, there are certain business uses that are considered part of the operational needs of a healthcare facility and typically do not require patient authorization. The investigation of a patient complaint by the department manager is an example of a facility's internal process aimed at ensuring quality of care and addressing patient concerns effectively. This type of investigation is essential for a facility's improvement and accountability and thus does not necessitate patient authorization since it is part of the operational responsibilities of the facility. Similarly, the review of documentation by the facility's professional liability insurer is another instance where authorization is not required. Insurers need access to the records to assess the facility's liability in the event of a claim. This is also viewed as part of the facility's business operations and is crucial for the financial and operational integrity of the institution. By considering both scenarios, it is evident that these uses align with standard practices in healthcare operations and compliance, allowing them to bypass the need for patient consent. Consequently, combining both uses—investigation of a complaint and review by the professional liability insurer—results in the correct choice.

9. What does the cancer mortality rate reflect?

A. # cancer deaths during a period multiplied by 100,000

B. # cancer deaths during a period divided by total population at risk

C. # cancer deaths during a period divided by total number of live births

D. # cancer deaths divided by the number of deaths from all causes

The cancer mortality rate is an important statistic that reflects the impact of cancer on a specific population over a certain period. The correct answer indicates that the cancer mortality rate is calculated by taking the number of cancer deaths that occur within a defined timeframe and multiplying it by 100,000. This method expresses the rate per 100,000 individuals, allowing for a standardized measure that facilitates comparison across different populations and regions. This calculation provides a clearer understanding of how prevalent cancer mortality is in a given population. By standardizing the figure per 100,000 individuals, it becomes easier to interpret and compare the data without being influenced by variations in population size. In contrast, other options do not accurately represent the standard approach for calculating mortality rates. For example, dividing the number of cancer deaths by the total population at risk provides a raw percentage but does not use the standard multiplier for clear comparison. Furthermore, relating cancer deaths to live births or all-cause deaths would not specifically reflect the mortality associated with cancer alone and therefore would not accurately represent the cancer mortality rate.

10. In which situation would it be beneficial to have an audit trail?

A. Defending against an audit.

B. Holding a patient accountable.

C. Reconstructing electronic events.

D. Stopping intranet attacks.

Having an audit trail is particularly beneficial for reconstructing electronic events. An audit trail provides a chronological record of all actions taken within a system, such as who accessed data, what changes were made, and when these actions occurred. This information is crucial for understanding the context and details of specific transactions or events. In various scenarios, such as when there are discrepancies in patient data, an audit trail allows healthcare professionals and administrators to trace back through system activity to determine what occurred. This can help identify errors, unauthorized access, or system failures and is essential for ensuring data integrity and compliance with regulations governing patient information. The other choices, while they might involve data management and system security, do not directly leverage the primary utility of an audit trail in the same way. While having an audit trail can assist in defending against an audit and enhancing security (which may indirectly relate to stopping intranet attacks), its most foundational role is in the reconstruction of electronic events to maintain transparency and accountability.