

Canadian Health Information Management Association Practice Exam (Sample)

Study Guide



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Questions

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- 1. What is the most likely explanation for being unable to retrieve a list of patients from the EDMS?**
 - A. Improper indexing of documents**
 - B. Improper scanning of documents**
 - C. Inappropriate authorization**
 - D. Stored data on optical discs are not available**
- 2. Which type of study follows the same subjects over time to observe long-term effects?**
 - A. Cross-sectional study.**
 - B. Longitudinal study.**
 - C. Experimental study.**
 - D. Case-control study.**
- 3. A man pronounced dead at the scene of an accident would fall under which category?**
 - A. ER death rate**
 - B. Gross death rate**
 - C. Net death rate**
 - D. No calculated death rates**
- 4. The CPO should address complaints regarding misdirected mail by:**
 - A. conducting an ROI audit**
 - B. creating a team to map current processes**
 - C. meeting with all physicians to determine corrective actions**
 - D. meeting with the person responsible for ROI**
- 5. Confidentiality is the:**
 - A. duty of the organization**
 - B. responsibility of the person**
 - C. right of the person**
 - D. duty of the person**

- 6. What is the correct code for hypertension due to stenosis of the renal artery?**
- A. Essential hypertension benign.**
 - B. Essential hypertension malignant.**
 - C. Hypertensive renal disease.**
 - D. Secondary hypertension.**
- 7. Which type of power generates the most enduring results and commitment from a leader?**
- A. Coercive.**
 - B. Expert.**
 - C. Legitimate.**
 - D. Reward.**
- 8. Common organizational targets for change do not include:**
- A. budget.**
 - B. culture.**
 - C. tasks.**
 - D. technology.**
- 9. All health treatment and expenditures related to one acute care inpatient or day surgery visit is a/an:**
- A. Encounter.**
 - B. Episode of care.**
 - C. LOS.**
 - D. Primary care visit.**
- 10. If the salary of an HIM professional is inversely proportional to their age, this indicates what type of relationship?**
- A. a linear.**
 - B. b negative.**
 - C. c no correlation.**
 - D. d positive.**

Answers

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

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Explanations

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1. What is the most likely explanation for being unable to retrieve a list of patients from the EDMS?

- A. Improper indexing of documents**
- B. Improper scanning of documents**
- C. Inappropriate authorization**
- D. Stored data on optical discs are not available**

The most likely explanation for being unable to retrieve a list of patients from the Electronic Document Management System (EDMS) is improper indexing of documents. Indexing is crucial in any information management system, as it organizes documents in a way that allows for easy retrieval. If documents are not indexed correctly, the system may struggle to locate and display the necessary information, such as a list of patients. Proper indexing involves categorizing documents with relevant keywords, metadata, or tags that help identify the content and context of each document. Without this organization, when a user searches for patients, the system may return no results or irrelevant results, leading to the appearance that patient data is unavailable. In this scenario, improper scanning could lead to poor image quality or data corruption but wouldn't necessarily prevent the system from retrieving patient lists if the documents were otherwise indexed correctly. Inappropriately authorized access could also complicate retrieval but typically pertains to user permissions rather than the actual indexing of patient documents. Data stored on optical discs being unavailable is more about physical access to the medium rather than digital indexing issues within the system itself. Therefore, the indexing error emerges as the most logical reason for the inability to retrieve the patient list effectively.

2. Which type of study follows the same subjects over time to observe long-term effects?

- A. Cross-sectional study.**
- B. Longitudinal study.**
- C. Experimental study.**
- D. Case-control study.**

A longitudinal study is characterized by its methodology of following the same subjects over an extended period to observe changes and effects over time. This type of study is particularly valuable for assessing the long-term impact of specific variables or interventions on the same individuals, which allows for detailed insights into trends and development within a population. In the context of health information management and research, longitudinal studies are essential for understanding chronic diseases, the long-term effects of treatments, and the natural history of various health conditions. This type of study design helps researchers identify patterns, establish cause-and-effect relationships, and evaluate the effectiveness of health interventions as they unfold over time. In contrast, other types of studies, such as cross-sectional studies, gather data at a single point in time and do not track subjects over a duration. Experimental studies often involve manipulating variables to see short-term effects rather than following subjects over a long period. Case-control studies compare individuals with a specific condition to those without it, analyzing retrospective data rather than observing the same subjects longitudinally. Thus, the ability of a longitudinal study to provide a comprehensive understanding of changes over time makes it the correct choice in this scenario.

3. A man pronounced dead at the scene of an accident would fall under which category?

- A. ER death rate**
- B. Gross death rate**
- C. Net death rate**
- D. No calculated death rates**

A man pronounced dead at the scene of an accident would indeed fall under the category of no calculated death rates. This classification arises because such cases are typically not included in death rate statistics. The reasons are that statistics often account for deaths that occur within a specific healthcare setting, such as hospitals, where more detailed tracking and reporting mechanisms are in place. When someone is pronounced dead at the scene, it often means they never entered a healthcare facility for treatment; therefore, their death may not be documented in the same way as those who die in a hospital environment. This exclusion contributes to the lack of calculated death rates for such circumstances, as data sources may not capture every death outside of clinical or institutional settings. This distinction is important as it affects how public health statistics and mortality rates are interpreted and reported, highlighting the complexities involved in fatality data collection and analysis in the healthcare sector.

4. The CPO should address complaints regarding misdirected mail by:

- A. conducting an ROI audit**
- B. creating a team to map current processes**
- C. meeting with all physicians to determine corrective actions**
- D. meeting with the person responsible for ROI**

Creating a team to map current processes is the appropriate response to address complaints regarding misdirected mail. This approach allows for a systematic review of the current mailing processes and procedures. By assembling a team, stakeholders can analyze existing workflows, identify points of failure, and ensure that communications are being properly directed. This proactive measure not only highlights areas that need improvement but also fosters collaboration among different roles within the organization, ultimately contributing to more robust solutions that can prevent misdirection of mail in the future. Mapping current processes can lead to the introduction of checks and balances, specialized training for staff involved in mail handling, or the adoption of new technologies that streamline addressing and sorting. Understanding the complete picture is crucial for making informed modifications that will rectify the root cause of the complaints. This methodology is essential for effective problem-solving in health information management, ensuring that patient information and communications are handled securely and efficiently.

5. Confidentiality is the:

- A. duty of the organization**
- B. responsibility of the person**
- C. right of the person**
- D. duty of the person**

Confidentiality refers to the obligation of an organization to protect private information against unauthorized access and disclosure. This encompasses the responsibility of the organization to ensure that all relevant policies, procedures, and measures are in place to safeguard sensitive data, especially in a healthcare context where patient information is involved. Organizations must train their staff, implement technical security measures, and ensure compliance with laws and regulations surrounding privacy, such as the Personal Information Protection and Electronic Documents Act (PIPEDA) in Canada. While there are individual responsibilities regarding confidentiality — for instance, employees must adhere to the organization's privacy policies — the overarching duty lies with the organization itself. It is tasked with creating a culture of confidentiality, ensuring that all personnel understand the importance of safeguarding information and are equipped with the tools and knowledge to do so effectively. This collective duty ultimately protects individuals' rights to confidentiality within the healthcare system. In contrast, while confidentiality relates to the responsibility of the individual as well, it is primarily an organizational duty to manage and enforce policies that maintain the confidentiality of information.

6. What is the correct code for hypertension due to stenosis of the renal artery?

- A. Essential hypertension benign.**
- B. Essential hypertension malignant.**
- C. Hypertensive renal disease.**
- D. Secondary hypertension.**

The classification of hypertension is crucial in understanding its underlying causes, which can influence treatment and management. In this case, hypertension due to renal artery stenosis falls under the category of secondary hypertension. Secondary hypertension is high blood pressure that is a consequence of another condition, often related to specific organ or system dysfunction. Renal artery stenosis causes reduced blood flow to the kidneys, which can lead to increased renin release, thus prompting the body to retain sodium and water, ultimately resulting in elevated blood pressure. Identifying hypertension as secondary is vital for clinicians as it requires a different approach compared to essential hypertension, which does not have a known secondary cause. Correctly coding this condition as secondary hypertension ensures that healthcare providers can track and address the root cause appropriately, leading to more targeted treatments and better patient outcomes.

7. Which type of power generates the most enduring results and commitment from a leader?

- A. Coercive.**
- B. Expert.**
- C. Legitimate.**
- D. Reward.**

The type of power that generates the most enduring results and commitment from a leader is expert power. Expert power stems from an individual's skills, knowledge, and expertise within a specific domain. When a leader possesses expert power, team members are more likely to trust their decisions and advice, leading to increased commitment to the leader's vision and goals. This type of power fosters a collaborative environment, as followers respect the leader for their capabilities and are inclined to engage and contribute more actively. Rather than relying on fear or authority, expert power builds loyalty because it is based on recognition of one's competence and ability to provide value. In situations where lasting influence and dedication are crucial, leaders who demonstrate expertise often cultivate stronger relationships and a more motivated team. Other forms of power, like coercive or reward power, may yield immediate compliance but often lack the ability to inspire genuine commitment or long-term results. Coercive power may lead to fear-driven compliance, while reward power relies on the provision of incentives, which can create dependency rather than intrinsic motivation. Legitimate power, derived from a formal position, can establish authority but does not inherently foster respect or engagement.

8. Common organizational targets for change do not include:

- A. budget.**
- B. culture.**
- C. tasks.**
- D. technology.**

In the context of organizational change, budget typically encompasses the financial resources and constraints that guide how effectively change initiatives can be implemented but is not generally seen as a target for change itself. Targets for change more often focus on aspects that need to be improved or altered to enhance organizational performance and outcomes. Culture is a crucial target as it shapes how employees interact and engage with change; addressing culture can lead to more successful change initiatives. Tasks refer to processes or workflows within the organization that might require modification to boost efficiency or effectiveness. Technology is also a significant target for change, particularly as organizations navigate advancements and integrations that improve operations. Thus, while the budget influences and supports change efforts, it does not represent a target that organizations typically aim to alter or adapt in the context of changing systems, processes, or employee behavior.

9. All health treatment and expenditures related to one acute care inpatient or day surgery visit is a/an:

A. Encounter.

B. Episode of care.

C. LOS.

D. Primary care visit.

The term that accurately describes all health treatment and expenditures related to one acute care inpatient or day surgery visit is "episode of care." This concept encompasses the entire continuum of services provided to a patient during this singular event, including pre-admission assessments, the actual surgical or inpatient care, and post-discharge follow-up. It captures the comprehensive nature of care delivered within that timeframe, making it distinct from other options. In contrast, "encounter" refers to a specific interaction between a patient and healthcare provider, often documenting a single visit rather than an entire treatment episode. "LOS," which stands for Length of Stay, specifically quantifies the duration of hospitalization but does not encapsulate all treatment and expenditure aspects. Lastly, "primary care visit" denotes an outpatient consultation typically with a general practitioner, which differs from the clearly defined context of an acute care inpatient or day surgery setting.

10. If the salary of an HIM professional is inversely proportional to their age, this indicates what type of relationship?

A. a linear.

B. b negative.

C. c no correlation.

D. d positive.

The correct answer is indicative of a negative relationship because when one variable increases, the other decreases. In this context, if the salary of a Health Information Management (HIM) professional is inversely proportional to their age, it means that as the age of the professional goes up, their salary goes down, and conversely, as their age decreases, their salary increases. This is a classic example of a negative relationship, where the two variables move in opposite directions. In contrast, a linear relationship would suggest that the variables either both increase or both decrease together, which would not hold true with the inverse proportionality described. A situation characterized by no correlation would suggest that changes in age would have no effect on salary, which contradicts the premise of the question. Lastly, a positive relationship would indicate that as one variable increases, so does the other, which is again contrary to the idea of an inverse relationship. Thus, the nature of the relationship described in the question is best captured by the concept of a negative correlation.