

CERTIFIED PROFESSIONAL IN HEALTHCARE INFORMATION AND MANAGEMENT SYSTEMS (CPHIMS) PRACTICE EXAM (SAMPLE) STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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THE FULL VERSION STUDY GUIDE**

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Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

Remember: successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

How to Use This Guide

This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:

1. Start with a Diagnostic Review

Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.

2. Study in Short, Focused Sessions

Break your study time into manageable blocks (e.g. 30 – 45 minutes). Review a handful of questions, reflect on the explanations.

3. Learn from the Explanations

After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.

4. Track Your Progress

Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.

5. Simulate the Real Exam

Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.

6. Repeat and Review

Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.

There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!

Questions

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- 1. Who should be contracted first when requesting a system enhancement for the operating room?**
 - A. Lead software developer
 - B. Chief financial officer
 - C. Current system vendor
 - D. IT steering committee

- 2. Which of the following is NOT among the critical aspects of managing a system implementation?**
 - A. Plan for user resistance
 - B. Commit sufficient resources
 - C. Provide adequate ongoing training
 - D. Set strict timelines for every phase

- 3. What type of data is typically stored within an EHR?**
 - A. Only demographic information
 - B. Only billing information
 - C. Comprehensive patient health information
 - D. Only clinical research data

- 4. Which task is typically a responsibility of a support analyst in a healthcare organization?**
 - A. Setup server maintenance for an application
 - B. Resolve application tickets
 - C. Re-image user PCs to add new applications
 - D. Train end users on new applications

- 5. What is the primary role of an IT program management office in healthcare organizations?**
 - A. Assemble a complete inventory of all IT projects
 - B. Provide a risk-managed enterprise project portfolio
 - C. Directly manage all IT projects
 - D. Assist the IT organization in project management techniques

- 6. Which three factors will BEST determine IT project priorities in a financially struggling organization?**
- A. Existing environment, regulatory requirements, return on investment
 - B. Regulatory requirements, mission of the organization, existing environment
 - C. Mission of the organization, return on investment, existing environment
 - D. Existing environment, return on investment, organizational strategy
- 7. What does the term 'EHR' refer to in healthcare?**
- A. Emergency Health Record
 - B. Electronic Health Record
 - C. Embedded Health Record
 - D. Electronic Healthcare Reference
- 8. How does patient feedback contribute to healthcare quality improvement efforts?**
- A. It solely focuses on financial outcomes
 - B. It provides insights into patient experiences and helps identify areas for enhancement
 - C. It is used to penalize healthcare workers
 - D. It complicates the analysis of health outcomes
- 9. What defines a Clinical Decision Support System (CDSS)?**
- A. A tool for patient scheduling
 - B. A system that analyzes data to assist in medical decision-making
 - C. A method for billing and coding
 - D. A platform for telecommunication between doctors
- 10. What process is essential for documenting incidents of system downtime in healthcare?**
- A. Encouraging frequent user feedback
 - B. Creating an incident reporting system
 - C. Scheduling regular maintenance windows
 - D. Assigning a dedicated technical support team

Answers

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

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Explanations

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1. Who should be contracted first when requesting a system enhancement for the operating room?

- A. Lead software developer
- B. Chief financial officer
- C. Current system vendor
- D. IT steering committee**

When considering a system enhancement for the operating room, it is essential to engage the IT steering committee first. This committee typically comprises representatives from various domains within the organization, including IT, clinical leadership, and finance, to ensure that any decisions made are in alignment with the overall strategy and priorities of the organization. The steering committee is responsible for evaluating proposed enhancements, prioritizing projects based on available resources and organizational needs, and ensuring that enhancements fit within the broader framework of the IT strategy. By engaging this group first, the organization can ascertain whether the requested enhancement aligns with existing technology, budget constraints, and overall clinical goals. Involving the chief financial officer at this stage would typically occur once the steering committee has evaluated the project's alignment with financial resources and strategic priorities. Contracting with the current system vendor occurs later in the process, as they would implement the approved enhancements rather than being the first point of contact. Similarly, while the lead software developer has critical insights into the technical feasibility of enhancements, their expertise would be beneficial once the strategic decision has been made by the steering committee.

2. Which of the following is NOT among the critical aspects of managing a system implementation?

- A. Plan for user resistance
- B. Commit sufficient resources
- C. Provide adequate ongoing training
- D. Set strict timelines for every phase**

Setting strict timelines for every phase is not considered a critical aspect of managing a system implementation, primarily because it can lead to unrealistic expectations and pressure that may adversely impact the quality of the implementation process. A successful system implementation typically requires flexibility to adapt to unforeseen challenges, changes in requirements, and the complexity of technology integration within healthcare settings. On the other hand, planning for user resistance, committing sufficient resources, and providing adequate ongoing training are all essential components for ensuring a smooth transition. Organizations often face resistance from users when new systems are introduced, so addressing this proactively is vital for user acceptance and satisfaction. Additionally, ensuring that adequate financial, technological, and personnel resources are in place is crucial to support the implementation. Finally, ongoing training is necessary to equip users with the skills and knowledge required to utilize the new system effectively, which can significantly enhance productivity and minimize errors post-implementation. These elements are integral to achieving a successful and sustainable system implementation, whereas strict timelines do not accommodate the dynamic nature of such projects.

3. What type of data is typically stored within an EHR?

- A. Only demographic information
- B. Only billing information
- C. Comprehensive patient health information**
- D. Only clinical research data

The correct answer is comprehensive patient health information because electronic health records (EHRs) are designed to provide a complete and accurate representation of a patient's health history and ongoing healthcare needs. This includes a wide array of data such as medical history, medications, allergies, laboratory and test results, immunization status, and treatment plans. EHRs aim to consolidate information from various sources to support better patient care, allowing healthcare providers to access critical health data to make informed decisions. They often include patient demographics, clinical information, and billing details, but the key characteristic is their comprehensive nature, which supports improved coordination of care, enhanced patient safety, and more effective management of health information. In contrast, limiting the data to only demographic information, billing information, or clinical research data does not reflect the true purpose of an EHR. Demographics and billing data are important components of the health record, yet they do not encompass the full spectrum of patient health information that an EHR is designed to manage. Similarly, clinical research data, while valuable, is typically housed in different systems or databases rather than within the routine clinical documentation of an individual patient's EHR. This holistic approach of capturing a wide range of health information is what distinguishes EHRs in the healthcare

4. Which task is typically a responsibility of a support analyst in a healthcare organization?

- A. Setup server maintenance for an application
- B. Resolve application tickets**
- C. Re-image user PCs to add new applications
- D. Train end users on new applications

A support analyst plays a crucial role in ensuring that healthcare applications run smoothly and efficiently. One of their primary responsibilities is the resolution of application tickets, which involves diagnosing issues reported by users and providing the necessary support to resolve those issues. This task not only requires technical knowledge of the applications but also a solid understanding of troubleshooting techniques and the ability to communicate effectively with users who may not be technically inclined. Resolving application tickets is essential in maintaining operational continuity within a healthcare organization, as any downtime or malfunction can adversely affect patient care and organizational efficiency. By addressing these issues promptly, the support analyst helps minimize disruptions, ensuring that staff can access the functionalities they need to perform their tasks effectively. In contrast, tasks such as setting up server maintenance for an application or re-imaging user PCs typically fall under the purview of system administrators or IT infrastructure teams rather than support analysts. Additionally, training end users on new applications is generally handled by specialized trainers or application champions within the organization, although support analysts may assist users post-training with immediate application-related concerns.

5. What is the primary role of an IT program management office in healthcare organizations?

- A. Assemble a complete inventory of all IT projects
- B. Provide a risk-managed enterprise project portfolio**
- C. Directly manage all IT projects
- D. Assist the IT organization in project management techniques

The primary role of an IT program management office (PMO) within healthcare organizations is to provide a risk-managed enterprise project portfolio. This function is crucial as it involves overseeing and coordinating the numerous IT projects happening within the organization, ensuring they align with the overall strategic goals. A risk-managed portfolio means that potential risks are assessed, monitored, and mitigated throughout the project lifecycle, which is particularly important in the dynamic and regulated environment of healthcare. The PMO establishes standardized processes and practices for managing projects, which contribute to better decision-making and resource allocation. By having a centralized view of all projects, the PMO helps prioritize initiatives based on their potential to improve patient care, streamline operations, or enhance compliance with regulations, thus maximizing the benefits of technology investments for the organization. In contrast, while assembling a complete inventory of all IT projects is important, it is a fundamental activity of the PMO but does not encapsulate its broader role in strategic risk management. Directly managing all IT projects would imply micromanagement, which contradicts the PMO's function of supporting and enabling project managers. Additionally, assisting the IT organization in project management techniques may be a part of the PMO's activities, but its core mission transcends this to focus on creating

6. Which three factors will BEST determine IT project priorities in a financially struggling organization?

- A. Existing environment, regulatory requirements, return on investment
- B. Regulatory requirements, mission of the organization, existing environment**
- C. Mission of the organization, return on investment, existing environment
- D. Existing environment, return on investment, organizational strategy

The choice highlighting regulatory requirements, the mission of the organization, and the existing environment as the top three factors for determining IT project priorities in a financially struggling organization is particularly well-founded. Regulatory requirements are critical, especially in healthcare, as they ensure compliance with laws and regulations that protect patient privacy and safety. Non-compliance can result in significant penalties and undermine the trust essential for organizational credibility. Thus, any IT projects that facilitate compliance with regulatory mandates must be prioritized to avoid legal issues and potential financial losses. Considering the mission of the organization is equally important, particularly in a challenging financial context where aligning IT initiatives with the core objectives can help ensure that resources are effectively allocated. Projects that directly support the mission can enhance the organization's ability to deliver quality care or services, thereby potentially improving financial performance and stakeholder satisfaction. Lastly, understanding the existing environment helps in assessing the current state of technology, infrastructure, and processes. By evaluating what is already in place, organizations can better identify gaps or areas needing improvement that are critical to achieving their strategic goals and addressing immediate needs. In contrast, while return on investment is an important consideration, it may not be the foremost factor driving priorities when immediate compliance and alignment with the organization's mission are at stake, especially when financial

7. What does the term 'EHR' refer to in healthcare?

- A. Emergency Health Record
- B. Electronic Health Record**
- C. Embedded Health Record
- D. Electronic Healthcare Reference

In healthcare, the term 'EHR' stands for Electronic Health Record. This is a digital version of a patient's paper chart and contains comprehensive health information, including medical history, diagnoses, medications, treatment plans, immunization dates, allergies, radiology images, and laboratory test results. EHRs are designed to be shared among various healthcare providers, facilitating coordinated and efficient patient care. The correct identification of EHR as Electronic Health Record emphasizes the importance of digital record-keeping in modern healthcare. EHRs enhance the quality of care by providing healthcare professionals with access to up-to-date patient information, which can lead to better decision-making and improved outcomes. The digitization of health records also supports compliance with legal and regulatory requirements, such as HIPAA, and contributes to various public health initiatives through data reporting and research capabilities. In contrast, the other options provided do not accurately describe EHRs or are not widely recognized terms within the healthcare community. Emergency Health Record, Embedded Health Record, and Electronic Healthcare Reference do not capture the comprehensive nature and purpose of an EHR as understood in the context of healthcare management and information systems.

8. How does patient feedback contribute to healthcare quality improvement efforts?

- A. It solely focuses on financial outcomes
- B. It provides insights into patient experiences and helps identify areas for enhancement**
- C. It is used to penalize healthcare workers
- D. It complicates the analysis of health outcomes

Patient feedback plays a crucial role in enhancing healthcare quality by providing valuable insights into the patient experience. This feedback encompasses the perceptions, opinions, and suggestions of patients regarding the care they receive, allowing healthcare organizations to pinpoint specific areas that need improvement. By listening to patients, providers can identify trends, recurring issues, and areas where care may be lacking. Understanding patient experiences enables healthcare professionals to address concerns directly related to quality of care, which can include everything from communication and accessibility to the physical environment and emotional support. By prioritizing and acting on this feedback, healthcare organizations can implement targeted improvements, ultimately leading to better patient outcomes and satisfaction. The other options fail to capture the full scope of how patient feedback can be beneficial. For example, focusing solely on financial outcomes ignores the broader implications of care quality, which is fundamental to patient satisfaction and safety. Similarly, using feedback as a means to penalize healthcare workers does not foster an environment conducive to improvement; instead, it instills fear and may discourage honest reporting. Lastly, complicating the analysis of health outcomes would likely hinder the ability of organizations to learn from patient feedback rather than facilitating constructive changes based on that input.

9. What defines a Clinical Decision Support System (CDSS)?

- A. A tool for patient scheduling
- B. A system that analyzes data to assist in medical decision-making**
- C. A method for billing and coding
- D. A platform for telecommunication between doctors

A Clinical Decision Support System (CDSS) is primarily defined as a system that analyzes data to assist healthcare providers in medical decision-making. Its core function is to enhance health care delivery by providing pertinent, evidence-based information that can help clinicians make informed decisions regarding patient care. CDSS utilizes patient data, clinical guidelines, and other sources of medical knowledge to generate recommendations, alerts, or reminders that aim to improve the quality of care, reduce errors, and ensure more effective treatment plans. While scheduling tools, billing methods, and telecommunication platforms are important components of healthcare operations, they do not fundamentally serve the purpose of aiding clinical decisions. Scheduling tools organize patient appointments, billing methods focus on financial transactions, and telecommunication platforms facilitate communication among healthcare professionals. None of these directly analyze clinical data to influence medical decisions in real-time, which is the distinguishing characteristic of a CDSS. Thus, option B accurately defines the role and purpose of a Clinical Decision Support System in the healthcare context.

10. What process is essential for documenting incidents of system downtime in healthcare?

- A. Encouraging frequent user feedback
- B. Creating an incident reporting system**
- C. Scheduling regular maintenance windows
- D. Assigning a dedicated technical support team

Creating an incident reporting system is essential for documenting incidents of system downtime in healthcare because it provides a structured approach to capturing and managing information related to system failures or interruptions. Such a system ensures that all incidents are recorded consistently, allowing healthcare organizations to track the frequency, duration, and causes of downtime. An effective incident reporting system also facilitates the identification of patterns or recurring issues, which can inform preventive measures. By having a centralized repository for downtime incidents, organizations can analyze data over time to improve system reliability and enhance overall operational efficiency. Additionally, it supports compliance with regulatory requirements, as proper documentation is often necessary for audits and quality assurance. While other approaches, like encouraging user feedback, scheduling maintenance, and having a dedicated support team, may contribute to minimizing downtime or improving response times, they do not specifically address the need for formal documentation of each incident. Thus, the incident reporting system is foundational for ensuring that incidents are not only acknowledged but also thoroughly documented for future reference and strategic planning.

Next Steps

Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.

As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.

If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at hello@examzify.com.

Or visit your dedicated course page for more study tools and resources:

<https://cphims.examzify.com>

We wish you the very best on your exam journey. You've got this!

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