

Information Retention and Access Practice Test (Sample)

Study Guide



Everything you need from our exam experts!

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Table of Contents

Copyright	1
Table of Contents	2
Introduction	3
How to Use This Guide	4
Questions	5
Answers	8
Explanations	10
Next Steps	15

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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. A surgeon requests the name of a patient admitted on January 11, 2013. Which system would be used to retrieve this information?**
 - A. Electronic Health Record (EHR) system**
 - B. R-ADT system**
 - C. Laboratory Information System**
 - D. Picture Archiving and Communication System**

- 2. Which statement describes the purpose of an outguide in records management?**
 - A. Indicates a file has been moved to storage**
 - B. Indicates a file has been checked out and is temporarily moved**
 - C. Indicates a file is ready for disposal**
 - D. Indicates a file has not been filed yet**

- 3. With a 30% readmission rate, how many readmissions are expected among 6,200 total admissions next year?**
 - A. 1,360**
 - B. 1,580**
 - C. 1,860**
 - D. 2,100**

- 4. Which data cannot be retrieved from MEDPAR?**
 - A. Non-Medicare patient data**
 - B. Medicare patient data**
 - C. Payment data**
 - D. Clinical notes**

- 5. Which of the following is NOT a technical security control employed by electronic health record systems?**
 - A. User authentication via strong passwords**
 - B. Audit trails**
 - C. Role-based access control**
 - D. Automatic logon**

- 6. Which information system model is typically used by large organizations seeking scalable IT services from outside vendors?**
- A. Application Service Provider (ASP) model**
 - B. Local hosting**
 - C. Standalone departmental systems**
 - D. In-house mainframe**
- 7. If 2,500 records were filed in a month and 90 were not found during the accuracy check, what is the filing accuracy rate?**
- A. 96.0%**
 - B. 96.4%**
 - C. 97.0%**
 - D. 95.0%**
- 8. How many years does the FDA require research records pertaining to cancer patients to be maintained?**
- A. 20 years**
 - B. 30 years**
 - C. 15 years**
 - D. 5 years**
- 9. A health care facility participating in a statewide study on cleft lip and cleft palate would most easily collect the initial data from which source?**
- A. Birth defects registry**
 - B. Hospital discharge data**
 - C. Claims data**
 - D. Pharmacy records**
- 10. Which of the following is NOT an advantage of a centralized filing system?**
- A. Improved consistency in record placement**
 - B. Standardized indexing across departments**
 - C. There is less transportation time and effort when a facility operates from several sites.**
 - D. Easier sharing of records among facilities**

Answers

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

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Explanations

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1. A surgeon requests the name of a patient admitted on January 11, 2013. Which system would be used to retrieve this information?

- A. Electronic Health Record (EHR) system
- B. R-ADT system**
- C. Laboratory Information System
- D. Picture Archiving and Communication System

This item tests how patient admissions data is organized and accessed. An R-ADT system, which handles Registration, Admission, Discharge, and Transfer events, tracks each patient's admit status and basic demographic information. It enables staff to look up a patient by name using a specific admission date, which is exactly what a surgeon needs to retrieve the patient's identity quickly. The electronic health record stores the clinical data for patients across encounters, but locating who was admitted on a particular date is more directly a function of the ADT side of the system. The Laboratory Information System and the Picture Archiving and Communication System manage specialized data like labs and images, not admission records, so they aren't the primary tools for this task.

2. Which statement describes the purpose of an outguide in records management?

- A. Indicates a file has been moved to storage**
- B. Indicates a file has been checked out and is temporarily moved
- C. Indicates a file is ready for disposal
- D. Indicates a file has not been filed yet

In records management, an outguide acts as a placeholder and locator when a file is moved from its original location to storage. It stays in the file's former spot and tells staff where that file now resides, so retrieval isn't guesswork. This keeps the filing system organized and speeds up finding records, especially when lots of files are stored offsite or in a different cabinet. This isn't about checking out a file for temporary use or about marking for disposal, and it isn't indicating that a file hasn't been filed yet. An outguide specifically signals that the file has left its original place and points to its new storage location.

3. With a 30% readmission rate, how many readmissions are expected among 6,200 total admissions next year?

- A. 1,360
- B. 1,580
- C. 1,860**
- D. 2,100

When you have a percentage, apply it to the total to find the expected count. A 30% readmission rate means 30 out of every 100 admissions. Convert 30% to a decimal (0.30) and multiply by the total number of admissions: $6,200 \times 0.30 = 1,860$. So about 1,860 readmissions are expected next year. This approach is how percentages translate into actual numbers for planning and forecasting.

4. Which data cannot be retrieved from MEDPAR?

- A. Non-Medicare patient data**
- B. Medicare patient data**
- C. Payment data**
- D. Clinical notes**

MedPAR is a Medicare claims dataset for inpatient hospital stays, limited to individuals who are enrolled in Medicare. Because its scope is Medicare beneficiaries only, you won't find records about patients who are not on Medicare. That's why data describing non-Medicare patients cannot be retrieved from MEDPAR. The file does include information for Medicare patients and the payments Medicare makes for those claims. Clinical notes, on the other hand, are not part of MEDPAR's structured claims data, which is why they aren't typically retrieved from this source.

5. Which of the following is NOT a technical security control employed by electronic health record systems?

- A. User authentication via strong passwords**
- B. Audit trails**
- C. Role-based access control**
- D. Automatic logon**

Security controls in electronic health record systems are meant to verify who is using the system, restrict what they can access, and keep a trace of those actions. Requiring strong password authentication is a fundamental technical control that confirms identity. Audit trails are essential for accountability and forensic checks, showing who did what and when. Role-based access control enforces privileges based on a user's job, ensuring people only access data necessary for their role. Automatic logon, however, bypasses authentication and undermines both identity verification and the ability to track activities, so it isn't considered a technical security control in this context.

6. Which information system model is typically used by large organizations seeking scalable IT services from outside vendors?

- A. Application Service Provider (ASP) model**
- B. Local hosting**
- C. Standalone departmental systems**
- D. In-house mainframe**

Using external providers to deliver software-as-a-service enables scalable IT capabilities without the overhead of on-prem hardware. The Application Service Provider model fits this need because the vendor hosts the software and rents access to it over a network, allowing the organization to scale up or down by adding users or features without buying and maintaining infrastructure. That external, service-based approach is what large organizations look for to grow or adjust capacity efficiently. Local hosting keeps everything on the organization's premises, so it doesn't leverage external scalability. Standalone departmental systems are isolated to specific areas and don't provide enterprise-wide, vendor-hosted scalability. An in-house mainframe is a centralized internal solution that still requires significant internal management and limits external scalability.

7. If 2,500 records were filed in a month and 90 were not found during the accuracy check, what is the filing accuracy rate?
- A. 96.0%
 - B. 96.4%**
 - C. 97.0%
 - D. 95.0%

The main idea is to measure how many records were found relative to how many were filed. Not found means those records were missing, so you subtract the misses from the total to get the number found. Here, 2,500 filed minus 90 not found gives 2,410 found. The accuracy rate is 2,410 divided by 2,500, times 100, which equals $0.964 \times 100 = 96.4\%$. In other words, 3.6% were not found, so 96.4% were accurate.

8. How many years does the FDA require research records pertaining to cancer patients to be maintained?
- A. 20 years
 - B. 30 years**
 - C. 15 years
 - D. 5 years

Long-term record retention in cancer research is essential because cancer therapies can have effects that emerge many years after treatment. The FDA requires keeping research records for a period that allows these late outcomes to be tracked, reanalyzed, and audited. For cancer patient studies, this period is thirty years, providing a safety net to examine long-term survival, late toxicities, secondary malignancies, and the overall trajectory of participants. Shorter retention could mean losing critical information as decades pass, which could hinder safety monitoring and scientific understanding. Therefore, the mandated retention time for cancer patient research records is thirty years.

9. A health care facility participating in a statewide study on cleft lip and cleft palate would most easily collect the initial data from which source?

- A. Birth defects registry**
- B. Hospital discharge data**
- C. Claims data**
- D. Pharmacy records**

The key idea is using a population-based system that is built to capture congenital anomalies across a defined group. A birth defects registry is designed to identify and track birth defects like cleft lip and cleft palate within a statewide population, collecting standardized data on cases as they occur. Because it aims to enumerate all occurrences in a defined population, it provides a broad, representative, and ready-made source of initial cases and baseline information for the study. Hospital discharge data depend on what is coded during hospital stays, so they can miss cases treated outside hospitals or be incomplete if coding isn't consistent. Claims data are based on billing records and may lag, be incomplete, or lack detailed clinical information. Pharmacy records show medications and may not directly reflect a birth defect diagnosis at all. For starting a statewide study on cleft lip and cleft palate, the birth defects registry offers the most direct, comprehensive starting point.

10. Which of the following is NOT an advantage of a centralized filing system?

- A. Improved consistency in record placement**
- B. Standardized indexing across departments**
- C. There is less transportation time and effort when a facility operates from several sites.**
- D. Easier sharing of records among facilities**

Centralized filing stores records in one main location, so you can keep record placement consistent and use a single, standardized indexing system across all departments. It also makes sharing records among facilities easier because everyone draws from the same repository. The part that isn't an advantage in this setup is the idea that there is less transportation time when a facility operates from several sites. With centralized storage, records often have to be moved to or accessed through the central location, which can increase or at least not reduce the transportation time and effort required.

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://inforetentionandaccess.examzify.com>

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

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