(Candidates admitted form 2010-2011 onwards)

SECOND YEAR

PAPER IV- HEALTH INFORMATION MANAGEMENT-I & NOMENCLATURE

Q.P. Code: 801714

Time: Three Hours Maximum: 100 marks

Answer ALL questions

I. Elaborate on: $(3 \times 10 = 30)$

- 1. Define hospital. Explain the types of hospitals in different ways.
- 2. Describe the evolution of the computer-based patient record and its supporting technologies.
- 3. Explain the policies and procedures for corporate compliance.

II. Write notes on: $(8 \times 5 = 40)$

- 1. Define informatics. What is the goal of health care informatics?
- 2. Explain current procedural terminology.
- 3. What is the difference between patient identifiable data and aggregate data? Why are secondary data sources developed?
- 4. Give the comparison between medicare and Medicaid programs.
- 5. Write down the steps in the coding process.
- 6. Describe the role of a registered health information administrator.
- 7. Write about organization and operation of modern hospitals.
- 8. Explain clinical work stations.

III. Short Answers on:

 $(10 \times 3 = 30)$

- 1. Write about voice recognition technology.
- 2. Define master patient index.
- 3. What is a clinical Trial.
- 4. What is TRICARE.
- 5. Short note on ICD-9-CM.
- 6. Define Telemedicine.
- 7. How is a case definition different from case finding?
- 8. Why is the ULMS of interest to HIM professionals?
- 9. Define DRG.
- 10. Give an example of data that are found in a patient Medical record. How could these become information?

(Candidates admitted form 2010-2011 onwards)

SECOND YEAR

PAPER IV-HEALTH INFORMATION MANAGEMENT-I & NOMENCLATURE

Q.P. Code: 801714

Time: Three Hours Maximum: 100 marks

Answer ALL questions

I. Elaborate on: $(3 \times 10 = 30)$

- 1. Define Informatics. Explain its tasks.
- 2. What are the basic principles of Information Management?
- 3. Explain the factors on which the quality of coded clinical data depends and the elements according to which the clinical data can be evaluated.

II. Write notes on: $(8 \times 5 = 40)$

- 1. Explain the disease and operation indexes.
- 2. What factors must be considered when determining the quality of data?
- 3. What are the four essential characteristics of ICD-10 PCS? Describe them.
- 4. List the functions of Health Information technology.
- 5. What is unified medical language system? Write about the three knowledge sources found in the ULMS.
- 6. Write short notes on (a) HMO. (b) PPO.
- 7. Explain about Computer based Patient Record system.
- 8. Write down the function of the data administrator.

III. Short Answers on: $(10 \times 3 = 30)$

- 1. What is the role of a Health Information manager in an integrated delivery system?
- 2. Write about Clinical work station.
- 3. Define Telemedicine.
- 4. What is an encoder?
- 5. What is the difference between an index and registry?
- 6. What is the difference between security and confidentiality?
- 7. Write short note on certified coding specialist.
- 8. Write short note on AHIM.
- 9. What is the difference between Blue cross and Blue shield?
- 10. Short note on International Classification of Diseases for oncology.

(Candidates admitted form 2010-2011 onwards)

SECOND YEAR

PAPER IV- HEALTH INFORMATION MANAGEMENT-I & NOMENCLATURE

Q.P. Code: 801714

Time: Three Hours Maximum: 100 marks

Answer ALL questions

I. Elaborate on: $(3 \times 10 = 30)$

- 1. Types of Hospitals and types of hospital services.
- 2. E Health.
- 3. Scope of Health Information.

II. Write notes on: $(8 \times 5 = 40)$

- 1. Development of Data Dictionaries.
- 2. Registered Health Information Technician.
- 3. Characteristics (Dimensions) of data quality.
- 4. Master Patient Index.
- 5. Tasks of informatics.
- 6. Topics of Health information management Body of knowledge.
- 7. Functions of Health Information technology.
- 8. Organization and operations of modern hospitals.

III. Short Answers on: $(10 \times 3 = 30)$

- 1. Home care services.
- 2. Managed care.
- 3. Dimensions of data quality.
- 4. Current Procedural Terminology.
- 5. International Classification of Diseases 10th Revision.
- 6. Medicaid.
- 7. Eligibility criteria of Health resources and Service Administration.
- 8. Biometric technology.
- 9. Data Security.
- 10. Electronic [computer-based] Medical Record.

(Candidates admitted form 2010-2011 onwards)

SECOND YEAR

PAPER IV- HEALTH INFORMATION MANAGEMENT-I & NOMENCLATURE

Q.P. Code: 801714

Time: Three Hours Maximum: 100 marks

Answer ALL questions

I. Elaborate on: $(3 \times 10 = 30)$

- 1. Joint Commission on Accreditation of Health Care Organizations [JCAHO].
- 2. Computerized Patient Records [CPR] system attributes.
- 3. Data security and elements of Coding Quality.

II. Write notes on: $(8 \times 5 = 40)$

- 1. Management of documentation and coding quality.
- 2. Managed care.
- 3. Comparison of Medicare and Medicaid programmes.
- 4. Health care reimbursement systems.
- 5. Elements of Corporate Compliance.
- 6. Current Procedural Terminology.
- 7. Key responsibilities of Health Information Administrator.
- 8. Health Information Forms Designing.

III. Short Answers on: $(10 \times 3 = 30)$

- 1. Integrated Delivery Systems [IDSs].
- 2. Characteristics of Organization and Operations of Modern Hospitals.
- 3. Mission, Vision and Values of a Hospital.
- 4. Peer Review.
- 5. Health Care Informatics.
- 6. Computer based Patient Record System.
- 7. Facility Specific Indexes.
- 8. International Classification of Diseases -10^{th} Revision [ICD -10].
- 9. Health Care Reimbursement System.
- 10. Medicaid.

PAPER IV – HEALTH INFORMATION MANAGEMENT - I AND NOMENCLATURE

Q.P. Code: 801714

Time: Three Hours Maximum: 100 Marks

Answer all questions

I. Elaborate on: $(3 \times 10 = 30)$

1. List out the standards of Ethical coding developed by AHIMA's Coding Policy Strategic Committee.

- 2. Write down some of the major occupations usually considered to be Allied Health Professional and explain any four of them.
- 3. Name the different types the hospitals can be classified into. Explain any three types.

II. Write notes on: $(8 \times 5 = 40)$

- 1. Explain Voice Recognition Technology.
- 2. List out any 5 items to be included in Coding Policies and procedures.
- 3. What are the purposes of Secondary Data Sources?
- 4. Write down any five of AHIMA's code of Ethics.
- 5. Explain Clinical Trials.
- 6. What is Accreditation?
- 7. Write notes on ICD-10.
- 8. What is Certification, what are its advantages?

III. Short answers on:

 $(10 \times 3 = 30)$

- 1. Write short notes on Peer Review.
- 2. Explain Managed Care.
- 3. Write short notes on Physician Index.
- 4. Write short notes on UML Unified Medical Language System.
- 5. Write short notes on ICD-9 CM.
- 6. Write short notes on Trauma Registers.
- 7. Write short notes on Psychiatric Hospitals.
- 8. Write short notes on Case finding.
- 9. Write short notes on Master Patient / Population Index.
- 10. Write about Computer Viruses.

PAPER IV – HEALTH INFORMATION MANAGEMENT - I AND NOMENCLATURE

Q.P. Code: 801714

Time: Three Hours Maximum: 100 Marks

Answer all questions

I. Elaborate on: $(3 \times 10 = 30)$

1. What are the Current and Evolving Professional roles of Health Information Manager? Explain any four of them.

- 2. What are the different types of Data that the Health Information include? Explain any four of them.
- 3. What are the different functions of Health Information Technology?

II. Write notes on: $(8 \times 5 = 40)$

- 1. Write notes on Cancer Registries.
- 2. Write any five of AHIMA's code of ethics.
- 3. What is Certification? List out the advantages of Certification.
- 4. Write short notes on Registered Health Information Administrator.
- 5. What are the responsibilities of Board of Directors?
- 6. Write notes on Voice Recognition Technology.
- 7. Write notes on RHIA.
- 8. What is JCAHO?

III. Short answers on:

 $(10 \times 3 = 30)$

Sub. Code: 1714

- 1. The term Hospital can be applied to any Health Care Facility that has four characteristics. What are they?
- 2. Explain Home Health care services.
- 3. Define Health Care Informatics.
- 4. Write short notes on Master Patient / Population Index.
- 5. Write short notes on Integrated Delivery System.
- 6. Explain Computer Viruses.
- 7. Explain SNOMED Systematized Nomenclature of Medicine.
- 8. What is Encryption?
- 9. Explain Vital Statistics.
- 10. Write short notes on AHIMA.

PAPER IV – HEALTH INFORMATION MANAGEMENT - I AND NOMENCLATURE

Q.P. Code: 801714

Time: Three Hours Maximum: 100 Marks

Answer all questions

I. Elaborate on: $(3 \times 10 = 30)$

1. What are the different types the hospitals can be classified into? Explain any three types.

- 2. Write an essay on the various functions of Health Information Technology.
- 3. What are the Current and Evolving Professional roles of Health Information Manager? Explain any four of them.

II. Write notes on: $(8 \times 5 = 40)$

- 1. List out any five items to be included in Coding policies and procedures.
- 2. Write short notes on ICD-10.
- 3. Define Informatics and Health Care Informatics.
- 4. Write short notes on Registered Health Information Administrator.
- 5. Write short notes on Disease and Operation Indexes.
- 6. What is Certification? Give the advantages of Certification.
- 7. What are the different types of data that the Health Information include? Explain any two.
- 8. What are the purposes of secondary Data sources?

III. Short answers on: $(10 \times 3 = 30)$

- 1. Write any three specific responsibilities that the Board of Directors possess.
- 2. Write short notes on Certified Coding Specialist.
- 3. Write short notes on Vital Statistics.
- 4. Write short notes on Computer Viruses.
- 5. Mention any three of AHIMA's code of ethics.
- 6. Write short notes on Rehabilitation Hospitals.
- 7. Write short notes on Peer Review.
- 8. What is Hospice Care?
- 9. Write short notes on Disease Registries.
- 10. Explain about Clinical Trials.

PAPER IV – HEALTH INFORMATION MANAGEMENT - I AND NOMENCLATURE

Q.P. Code: 801714

Time: Three Hours Maximum: 100 Marks

Answer all questions

I. Elaborate on: $(3 \times 10 = 30)$

1. Explain Organization of Hospital Service.

- 2. Briefly describe the principles of form design.
- 3. What is Indexes? Explain detail about its types.

II. Write notes on: $(8 \times 5 = 40)$

- 1. Explain Coding Policies and Procedures.
- 2. Write short notes on Optical Character Recognition Technology.
- 3. Explain Retention of the Health Record.
- 4. Explain Numbering system.
- 5. Types of filing system.
- 6. List the Code of Ethics for health information professionals.
- 7. Write short notes on Standardized Data Sets.
- 8. Functions of Health records and Health information.

III. Short answers on:

 $(10 \times 3 = 30)$

- 1. Clinical Trials.
- 2. Vital Statistics.
- 3. Certified Coding Specialist.
- 4. Define Health Information Management.
- 5. Implant Registries.
- 6. Confidentiality.
- 7. Unified Medical Language system.
- 8. Electronic Medical Record.
- 9. Define Health Record.
- 10. Types of Filing System.

PAPER IV – HEALTH INFORMATION MANAGEMENT - I AND NOMENCLATURE

Q.P. Code: 801714

Time: Three Hours Maximum: 100 Marks

Answer all questions

I. Elaborate on: $(3 \times 10 = 30)$

1. E – Health.

- 2. Computerized Patient Records [CPR] system attributes.
- 3. Explain the policies and procedure for corporate compliance.

II. Write notes on: $(8 \times 5 = 40)$

- 1. Explain clinical work stations.
- 2. Write down the steps in the coding process.
- 3. Write about organization and operation of modern hospital.
- 4. Write short notes on (a) HMO. (b) PPO.
- 5. What are the purposes of secondary Data sources?
- 6. Write short notes on ICD-10.
- 7. Explain Clinical Trials.
- 8. Write down any five of AHIMA's code of Ethics.

III. Short answers on:

 $(10 \times 3 = 30)$

- 1. Define Telemedicine.
- 2. Write short notes on Master Patient / Population Index.
- 3. Write short notes on Trauma Registers.
- 4. Data Security.
- 5. Electronic [computer-based] Medical Record.
- 6. What is TRICARE?
- 7. Define DGR.
- 8. What is Hospice Care?
- 9. What is the difference between an Index and Registry?
- 10. What is the difference between security and confidentiality?

PAPER IV – HEALTH INFORMATION MANAGEMENT - I AND NOMENCLATURE

Q.P. Code: 801714

Time: Three Hours Maximum: 100 Marks

Answer all questions

I. Elaborate on: $(3 \times 10 = 30)$

1. Define health information management. Explain in detail about scope of information.

- 2. Describe the processing and maintenance of secondary database.
- 3. Explain standards of ethical coding.

II. Write notes on: $(8 \times 5 = 40)$

- 1. Explain qualitative analysis of a health record.
- 2. Health care reimbursement systems.
- 3. Explain enterprise master patient indexes.
- 4. Explain current procedural terminology.
- 5. Explain characteristics of a health information profession.
- 6. Write short notes on data base life cycle.
- 7. Explain current status of computer based patient record system.
- 8. Write short notes on Medicare.

III. Short answers on:

 $(10 \times 3 = 30)$

Sub. Code: 1714

- 1. What is the difference between blue cross and blue shield?
- 2. Write short notes on peer review.
- 3. Rehabilitation services.
- 4. Define health records.
- 5. Autocoding.
- 6. Nosology.
- 7. Cancer register.
- 8. Clinical data.
- 9. Unique identifier.
- 10. Discharge summary.

[AHS 0321] MARCH 2021 Sub. Code: 1714

(AUGUST 2020 EXAM SESSION) B.Sc. MEDICAL RECORD SCIENCE

SECOND YEAR (Regulations 2010-2011, 2015-2016 & 2018-2019)

PAPER IV – HEALTH INFORMATION MANAGEMENT - I AND NOMENCLATURE

Q.P. Code: 801714

Time: Three hours Answer ALL Questions Maximum: 100 Marks

I. Elaborate on: $(3 \times 10 = 30)$

1. Define Informatics. Explain its tasks.

- 2. What are the different types the hospitals can be classified into? Explain any three types.
- 3. Scope of Health Information.

II. Write notes on: $(8 \times 5 = 40)$

- 1. Characteristics (Dimensions) of data quality.
- 2. Functions of Health Information technology.
- 3. Master Patient Index.
- 4. Registered Health Information Technician.
- 5. Health care reimbursement systems.
- 6. Comparison of Medicare and Medicaid programmes.
- 7. Explain current procedural terminology.
- 8. Key responsibilities of Health Information Administrator.

III. Short answers on:

 $(10 \times 3 = 30)$

- 1. Define Telemedicine.
- 2. What is an encoder?
- 3. What is the difference between Blue cross and Blue shield?
- 4. What is Hospice Care?
- 5. Write short notes on Disease Registries.
- 6. Explain Managed care.
- 7. Write short notes on ICD-9 CM.
- 8. Write short notes on Peer Review.
- 9. Write short notes on UML Unified Medical Language System.
- 10. Biometric technology.

[AHS 0222]

FEBRUARY 2022 (AUGUST 2021 EXAM SESSION)

Sub. Code: 1714

B.Sc. MEDICAL RECORD SCIENCE

SECOND YEAR (Regulations 2010-2011, 2015-2016 & 2018-2019)
PAPER IV – HEALTH INFORMATION MANAGEMENT - I AND NOMENCLATURE
O.P. Code: 801714

Time: Three hours Answer ALL Questions Maximum: 100 Marks

I. Elaborate on: $(3 \times 10 = 30)$

- 1. What are the basic principles of information management?
- 2. E-Health.
- 3. Scope of health information.

II. Write notes on: $(8 \times 5 = 40)$

- 1. What is certification? List of the advantages of certification.
- 2. Write notes on RHIA.
- 3. Explain clinical trials.
- 4. What is Accreditation?
- 5. Explain Voice Recognition Technology.
- 6. Managed care.
- 7. Comparison of Medicare and Medicaid program.
- 8. Current Procedural Terminology.

III. Short answers on:

 $(10 \times 3 = 30)$

- 1. Biometric technology
- 2. Electronic Medical records (Computer based)
- 3. Home Care Services
- 4. Integrated Delivery System (IDSs)
- 5. Peer Review
- 6. Mission, Vision and Values of a Hospital
- 7. Write short notes on Psychiatric Hospital
- 8. Explain SNOMED (Systematized Nomenclature of Medicine
- 9. What is Encryption?
- 10. Write any three specific responsibilities that the Board of Directors possess

[AHS 0423] APRIL 2023 Sub. Code: 1714

B.Sc. MEDICAL RECORD SCIENCE

SECOND YEAR (Regulations 2010-2011, 2015-2016 & 2018-2019 onwards)
PAPER IV – HEALTH INFORMATION MANAGEMENT - I AND NOMENCLATURE
O.P. Code: 801714

Time: Three hours Answer ALL Questions Maximum: 100 Marks

I. Elaborate on: $(3 \times 10 = 30)$

1. What are the major occupations in Allied Health Professional and explain them.

- 2. Explain Scope of Health Information.
- 3. Explain Unified Medical Language System.

II. Write notes on: $(8 \times 5 = 40)$

- 1. Medicare and Medicaid.
- 2. What are the characteristics of Data Quality?
- 3. Explain the policies and procedure for corporate compliance.
- 4. Registered Health Information Technician.
- 5. Explain Coding Policies and Procedures.
- 6. Health Maintenance Organizations.
- 7. What are the Purposes of Secondary Data Sources?
- 8. Explain Joint Commission on Accreditation of Healthcare Organizations.

III. Short answers on: $(10 \times 3 = 30)$

- 1. Define Informatics.
- 2. Master Patient Index.
- 3. Define Cryptography.
- 4. Define Encoders.
- 5. Define Tricare.
- 6. Biometric Technology.
- 7. Facility-Specific Indexes.
- 8. Define AHIMA.
- 9. Data Security.
- 10. Define Personal Health Records.

[AHS 1123] NOVEMBER 2023 Sub. Code: 1714

B.Sc. MEDICAL RECORD SCIENCE

SECOND YEAR (Regulations 2010-2011, 2015-2016 & 2018-2019 onwards)
PAPER IV – HEALTH INFORMATION MANAGEMENT - I AND NOMENCLATURE

O.P. Code: 801714

Time: Three hours Answer ALL Questions Maximum: 100 Marks

I. Elaborate on: $(3 \times 10 = 30)$

1. Explain Types of Hospitals and Types of Hospital Services Provided.

- 2. Explain E-Health.
- 3. Explain AHIMA Code of Ethics.

II. Write notes on: $(8 \times 5 = 40)$

- 1. Describe Voice Recognition Technology.
- 2. What are the Functions of Health Information Technology?
- 3. Registered Information Technician.
- 4. Explain Database Life Cycle.
- 5. What are the Types of Registers and explain any two of them?
- 6. What are the Elements of Coding Quality?
- 7. What is Certification and explain its Advantages?
- 8. Explain Types of Ownership.

III. Short answers on:

 $(10 \times 3 = 30)$

- 1. Home Care Services.
- 2. Define Clinical Work stations.
- 3. AHIMA's Professional Definition of Health Information Management.
- 4. Define Clinical Trials.
- 5. Define Mission, Vision and Value Statement of a Hospital.
- 6. ICD 10.
- 7. Define Physician Index.
- 8. Long-Term Care.
- 9. What is the difference between an Index and Registry?
- 10. Define Application Service Providers.