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Association for Healthcare Documentation Integrity (AHDI)

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1 Introduction

1.1 About AHDI

The Association for Healthcare Documentation Integrity (AHDI) is a not-for-profit professional association incorporated in California in February 1978 with headquarters in Modesto, California. AHDI offers information about the profession of healthcare documentation, provides continuing education for healthcare documentation professionals, and enhances communication among those allied with the profession of healthcare documentation. Over time, the industry has evolved, and with this evolution, new roles and duties have emerged. In addition to the traditional roles of medical transcription and speech recognition editing, facilities and practitioners have begun using medical scribes to assist with documentation, and as more documentation is created by providers using front-end speech recognition, the need for auditors has arisen to review the quality of this documentation and offer feedback to providers. This guide is intended for all healthcare documentation professionals (HDPs) who participate in the documentation of patient healthcare. Find out more about AHDI by visiting our website at www.ahdionline.org.

1.2 Why Credentials?

When considering the potential implications, risks, and benefits of a credentialing requirement in any profession, it must be determined if ultimately the industry is better served by the adoption of regulations that restrict entry to practice and access to the public sector than if those regulations did not exist. In some cases, it could be argued that an industry is hindered by such regulations. Where credentialing healthcare documentation professionals is concerned, however, attention must turn to what is ultimately in the best interests of patient care delivery. In what measurable ways would restricting entry to practice healthcare documentation potentially protect patients, enhance the delivery of patient care services, and create operational efficiencies in healthcare documentation professionals (HDPs).

While certainly there is much that has and can be said about protecting the privacy and security of patient records, it cannot be overlooked here that an unregulated, unmonitored healthcare documentation workforce creates an access point to patient records that is incongruent with the intent of the Health Insurance Portability and Accountability Act of 1996 (HIPAA). It might be tempting to stop at the access point and argue that healthcare documentation professionals do not need to be credentialed in order for their unique access to patient records to be tracked and monitored. However, of more critical concern than their access to patient records is the ability of healthcare documentation professionals to modify and alter the patient record. Safeguarding patient records does not just involve protecting the access points. It should likewise involve protecting patient records for the purpose of creating, modifying, reviewing, and formatting the clinical care record.

Healthcare documentation involves a highly interpretive skill set, where medical language specialists partner with providers to create an accurate reflection of a patient care encounter. Healthcare documentation demands the application of informed judgment and interpretive skill that extends beyond what is heard and seen. It requires a foundational understanding of the diagnostic process, clinical medicine, treatment, and care to be interpreted accurately and applied within the context of complex patient encounters. Given the increasing use of electronic health records and the need to accurately document all aspects of patient medical encounters, healthcare documentation professionals also bring a strong interpretive skillset to the documentation process.

Healthcare documentation professionals cannot bring that interpretive skill set to the table without a significant foundation of knowledge and training. The pace at which healthcare delivery is moving often does not allow for training or mentoring on the job. Unfortunately, an unregulated or informal training scenario creates unpredictable and dangerous gaps in knowledge and understanding that impact the interpretive process and limit the ability of the HDP to identify errors and inconsistencies – a role that is critical for risk management. Flagging inconsistencies and discrepancies in the health record is the guardian role of the healthcare documentation professional, and providers rely on the keen eyes, ears, and interpretive mind of the HDP to ensure that health data is captured and recorded accurately, that inconsistencies are addressed, and that the amended record is authenticated by the provider.

Promoting a credentialing requirement for the profession will send a clear message that healthcare documentation professionals have met minimum standards to engage in this risk management role. Given the vital role that medical encounter documentation plays in continuity of care and accurate, timely reimbursement, healthcare delivery would be well served to understand and recognize the pivotal difference a *skilled, credentialed* HDP can make to that process. An HDP with questionable or marginal skills, at the very least, is going to be limited in his/her ability to play a contributory role in risk management and record error analysis. But beyond that, healthcare needs to consider the <u>fiscal</u> impact to the system of an unregulated and questionably prepared healthcare documentation workforce.

Every time a patient encounter is documented by an HDP with a low level of knowledge and interpretive skill, the healthcare system as a whole takes the risks that the HDP will:

- Misinterpret key clinical data, resulting in the potential for this to be overlooked by the provider at the authentication point and for the error to become part of the patient's permanent record, upon which ongoing care decisions are based.
- Miss or fail to identify critical information, resulting in omitted words or phrases that the provider may not recognize are missing at the authentication point.
- Fail to recognize errors and inconsistencies and therefore neglect to flag them to the provider's attention, again with the potential of those errors becoming part of the patient's permanent record.
- Struggle with challenging or unfamiliar terminology, leaving blanks in the record that must be routed back to and/or filled in by the provider – a process that may suspend the forward progress of that record.

All of the above scenarios represent widespread impact and immeasurable cost to healthcare on a daily basis.

In a study conducted by the AHDI (then AAMT) in 2007 involving error analysis and quality review of a random sampling of acute care records across multiple US facilities, 63% of the errors found in those records were deemed to be critical and major errors; i.e., those defined by the study as having a potential impact on patient safety. Of that 63%, errors specifically attributed to the *dictator* totaled 27%.¹

¹ "AAMT Quality Assurance Report: A Survey of Error Trends." 8 March 2007. <http://ahdionline.siteym.com/?QA_Position>

Although the electronic health record and the roles of providers such as scribes and clinician-created documentation auditors were not ubiquitous at the time of this study, the study does draw into sharp relief the role an HDP plays in both accurate capture and interpretation of information during a medical encounter *and* being able to recognize, correct, and/or flag errors and inconsistencies.

The study, in which 73% of critical errors were attributable to healthcare providers, also underlines the importance of standardizing and certifying HDP skills and restricting access to the practice of healthcare documentation through credentialing. Thus, while providers bear responsibility in this scenario for ensuring that they are providing the kind of high-quality information that facilitates accurate capture and documentation, it must be stressed that healthcare facilities and providers across the nation are incurring hidden costs and risk on a daily basis by failing to set the same kind of credentialing and best practice standards for healthcare documentation professionals that they do for all other members of the allied health team. Whether the medical specialist is a physician assistant, a nurse, a radiographic technologist, or a healthcare documentation professional, any worker with marginal or substandard skills and preparation is a potential risk and cost to healthcare delivery and the facility that employs them. While healthcare documentation professionals do not provide hands-on patient care, they are part of a critical process in creating an accurate record of that care and, if unprepared, carry the potential for adversely affecting that process and/or hindering operational efficiency. At a time when healthcare delivery desperately needs processes and procedures that create *greater* operational efficiencies and reduced costs, tightening the restrictions around this sector of healthcare administration could serve to eliminate an ongoing drain on resources.

An HDP already working in a contributory, risk-management-impacting role through highly skilled and informed interpretive judgment has little to fear from mandatory credentialing and everything to gain by stepping across the line of accountability set by the standard. Healthcare providers likewise have much to gain and little to lose by drawing a line in the sand that will ensure our workforce is capable of doing this accurately with a measurable impact on healthcare's fiscal bottom line.

2 AHDI Credentials

2.1 Credentials Overview

AHDI offers voluntary credentials for healthcare documentation professionals:

- Certified Healthcare Documentation Professional (CHDP)
- Auditor Micro-credential (CHDP-A)
- Scribe Micro-credential (CHDP-S)

AHDI offers voluntary credentialing exams to individuals who wish to demonstrate job readiness and level-specific competency to prospective employers, clients, and industry colleagues. In offering credentialing exams for healthcare documentation professionals working to document the care of patients, AHDI is protecting the public interest by promoting professional standards, improving the practice of healthcare documentation, and recognizing those professionals who demonstrate competency through the fulfillment of stated requirements.

2.2 Test Development & Delivery

AHDI credentialing exams are created by <u>the Credentialing Commission for Healthcare Documentation</u> (<u>CCHD</u>), who develops the tests, interprets psychometric data, and completes domain analysis, item writing and editing, and technical review.

AHDI has overall responsibility for test development and administration; however, the CCHD provides guidance for the testing program. AHDI's CCHD, a representative group of content experts, has been trained to develop and review test questions and materials before these materials are used on exams to ensure relevancy and accuracy. The team also helps provide the job-related perspective that underlies valid exams. Each question is evaluated prior to its acceptance as a valid test item. The CCHD maintains responsibility for determining the exam content outline and test specifications, maintains an item bank of approved test items, approves the individual tests for administration, and, with psychometric guidance, sets the passing score for successful achievement.

AHDI exams are delivered by <u>Examroom.ai</u>, a test development and delivery company that provides secure online testing technology, integrating item banking, test delivery, and reports. Examroom.ai provides live Online Proctoring (OLP) integrated with advanced AI technology, which uses remote video monitoring to observe test takers where they live, learn, or work.

The credentialing department at AHDI determines individual eligibility for exam admission. Based on test specifications developed by AHDI, Examroom.ai prepares and administers the individual tests approved by AHDI. Examroom.ai is also responsible for overseeing online proctoring, test security, test administration, and related functions.

3 Certified Healthcare Documentation Professional (CHDP)

3.1 Purpose and Description

The Certified Healthcare Documentation Professional (CHDP) exam is a voluntary credentialing exam for individuals who wish to become Certified Healthcare Documentation Professionals. The CHDP exam is designed to assess competency in healthcare documentation by determining if a candidate has the core knowledge and skills needed to practice healthcare documentation effectively in today's healthcare environment.

AHDI recommends that candidates possess the knowledge and skills outlined in the CHDP Exam Blueprint (detailed later in this chapter) before attempting to take the exam. Potential candidates for the exam are advised to review the outlines and assess their knowledge and skills to determine their readiness for the exam.

Individuals who successfully complete this AHDI credentialing process are recognized as Certified Healthcare Documentation Professionals and are entitled to use the CHDP designation. The credential is valid for 3 years. CHDPs are required to recredential by earning a minimum of 30 continuing education credits (CECs). Upon passing the exam, each CHDP receives a wall certificate that shows the date the credential was obtained and the date through which the credential is valid (renewal date).

The CHDP exam consists of multiple-choice and fill-in-the-blank questions. These assessment types are used to test candidates' knowledge and applied interpretive judgment in all knowledge domains represented on the CHDP Exam Blueprint, including *Clinical Medicine; Health Information Technology and Compliance; and Documentation Standards and Patient Risk Evaluation*.

3.2 Eligibility and Requirements

Candidates may sit for the CHDP exam solely for the intent and purpose of seeking an AHDI credential and for no other purpose. NOTE: Individuals who already possess the CHDP credential are not eligible to take the examination.

Who should take this exam?

Anyone who participates in documenting patients' health care is eligible to take the CHDP exam. This includes but is not limited to:

- Practitioners who document patient care in the health record
- Clinician-created documentation auditors/analysts
- Allied healthcare professionals
- Scribes

Candidates are advised to first assess their skills and knowledge of the content areas outlined in the CHDP Exam Blueprint of this CHDP Certification Guide and prepare accordingly before registering to take the exam.

3.3 Content Focus

As described above, the CHDP exam is designed to assess the knowledge, skill, and interpretive ability of industry candidates who participate in the creation and review of healthcare documentation. It is set up to test the key concepts, vocabularies, processes, systems, and standards involved in the creation of healthcare documentation. The goal is to ensure that candidates have a sound grasp of fundamental domains necessary to step into industry documentation professional roles.

The knowledge and skill of CHDP candidates will be assessed through two question types:

- **Multiple-choice.** Most objectives involve assessment via a multiple-choice question type whereby the candidate will be asked to select an appropriate answer from a choice of 4 options, depending on the nature and scope of content.
- **Fill in the blank.** The candidate will be asked to provide a specific word(s) or phrase(s) to accurately complete a sentence.

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- Clinical Medicine Questions in this section will assess the candidate's understanding of clinical terms, definitions, standards, and processes, including:
 - > Medical terminology *(including acronyms and abbreviations)*
 - > Anatomy
 - Physiology
 - Disease processes
 - Diagnostics (including laboratory testing and imaging)
 - Pharmacology
 - Classification systems
- Health Information Technology and Compliance Questions in this section will assess the candidate's understanding of technology terms and usage, including:
 - Healthcare documentation technology (including terminology and best practices)
 - Health record privacy and security (including use, security, and disclosure of protected health information and the HIPAA Privacy Rule)
 - > Navigation of the electronic health record
- Documentation Standards and Patient Risk Evaluation Questions in this section will assess the candidate's understanding of:
 - > The various components of a healthcare record
 - Verification of trusted resources
 - > Potential implications of inaccurate documentation

3.4 CHDP Exam Blueprint

Section 1	Clinical Medicine
1.1	Given the meaning of a word, identify the correct prefix, suffix, combining word, or root word, <u>or</u> given a prefix, suffix, or combining form and a definition, identify what is needed to create another given word.
1.2	Given a/an anatomical/medical/clinical term, identify the definition, <u>or</u> given a definition, identify the correct anatomical/medical/clinical term.
1.3	Given sentences, identify the correct use of a medical term commonly confused for another.
1.4	Given a directional term, an anatomical position term, or a body plane term, identify the correct definition, <u>or</u> given a definition, identify the correct directional term, the correct anatomical position term, or the correct body plane term.
1.5	Given a laboratory panel, identify the tests associated with that panel, or identify the tests that are part of a laboratory panel.
1.6	Given a laboratory test, identify the normal values, <u>or</u> given a laboratory result, identify if the value is low, high, or normal.
1.7	Given a diagnostic test or laboratory study, identify what is being measured.
1.8	Given an imaging study type, identify the use, definition, or terminology related to that study type.
1.9	Given a drug or drug type, identify the route or form of administration, <u>or</u> given a route or form of administration, identify the drug or drug type.
1.10	Given a drug term, identify the definition, <u>or</u> given a definition of a drug term, identify the term.
1.11	Given a drug's generic name, identify the brand name, <u>or</u> given a drug's brand name, identify the generic name.
1.12	Given a drug, identify the pharmacological category.
1.13	Given a medication, identify the symptom or disease for which it is prescribed, <u>or</u> given a symptom or disease, identify the medication that is prescribed.
1.14	Given an abbreviation/acronym specific to a clinical specialty, identify the correct term.
1.15	Given a sign or symptom, identify the disease or syndrome.
1.16	Given a disease or syndrome, identify the treatment course.
1.17	Given a classification system, identify the disease or affected anatomical part.
1.18	Given a common medical abbreviation or acronym, identify the correctly expanded form within context.
1.19	Given a physiologic process, identify steps or functions related to that process.
1.20	Given a common type of anesthesia, identify the type of procedure that can be performed.

Section 2	Health Information Technology and Compliance
2.1	Given a term or concept related to the use of a normal, standard text, or a template, identify the correct definition; or, given the definition of a term or concept related to the use of a normal, standard text, or template, identify the term or concept.
2.2	Given an example of a normal, standard text, or a template, identify the risk to patient care.
2.3	Given examples of technology or human-factor workflow problems, identify recommended best practices.
2.4	Given a definition related to content importing technologies, identify the correct term; or, given a term related to content importing technologies, identify the correct definition.
2.5	Given a scenario, identify acceptable and unacceptable uses of content importing technologies.
2.6	Given a scenario, identify potential ethical or legal implications related to content importing.
2.7	Given a scenario, identify potential implications related to inaccurate coding.
2.8	Given abbreviations related to health record privacy, identify the correct expanded form.
2.9	Identify appropriate examples of PHI and/or disclosure of PHI under the HIPAA privacy rule.
2.10	Identify appropriate security measures for protecting PHI.
2.11	Identify documentation authentication practices considered dangerous by The Joint Commission.
2.12	Given a scenario, determine the location in the EHR that would need to be accessed.
2.13	Given a scenario, identify potential risk management issues.
Section 3	Documentation Standards and Patient Risk Evaluation
3.1	Identify the abbreviations found on the AMA or ISMP's error-prone abbreviations list or The Joint Commission's Do Not Use list of dangerous abbreviations.
3.2	Given sample report content, identify the correct report headings or subheadings; <u>or</u> given a heading or subheading, identify what content would be included.
3.3	Given a scenario, identify verifiable resources for medical information.
3.4	Given a report excerpt, use critical thinking to identify and/or edit content errors that have potential risk to patient outcomes.
3.5	Identify potential implications that may result from a patient's rapid access to their medical records through a patient portal.

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3.5 CHDP Sample Questions

- 1. Which combining form combined with hyper- and -emia would indicate elevated potassium?
 - o phosph/o
 - o calc/o
 - o natr/o
 - o kal/o
- 2. Using the prefix "hypo-," what is the condition known as low blood sugar?
 - o hypokalemia
 - hypothyroidism
 - o hypoglycemia
 - o hypoxia
- 3. Which bone is found within the ear?
 - o sacrum
 - sella turcica
 - o sternocleidomastoid
 - o **stapes**
- 4. Which of the following sentences uses the correct medical term?
 - On ultrasound, there was no yoke sac evident.
 - The perineal nerve is a branch of the sciatic nerve.
 - There is gangrene and obvious necrosis of the toe.
 - She has had melanotic stools for the last 3 days.
- 5. The urethra is located ______ to the kidney.
 - o proximal
 - o **sagittal**
 - o inferior
 - o **distal**
- 6. Which white blood cells combat bacterial infection by phagocytosis, increasing their numbers under stress?
 - Lymphocytes
 - Monocytes
 - o Neutrophils
 - Basophils
- 7. Which is an angina pectoris ointment, measured in inches on a marked piece of applicator paper?
 - nitroglycerin
 - $\circ \quad \text{topical corticosteroids} \\$
 - o insulin
 - o Maalox

- 8. An orthopedic surgeon performs a total hip replacement and uses standard text to document the operation. However, the surgeon fails to edit the text for hardware sizes, laterality, and patient gender. What is the best procedure to follow?
 - Ignore the missing information and leave the report as the provider created it.
 - Call the provider on their cell phone and ask them what they meant.
 - Flag the missing information and request that the provider edit the text.
 - Review other operative reports created by the provider and copy the information to the current report.
- 9. What does the abbreviation HIT stand for?
 - healthcare integrity terminology
 - healthcare investment technology
 - hospital information technology
 - health information technology
- 10. Based on the error-prone abbreviation list, which should be expanded if used with medication administration?
 - **b.i.d.**
 - o **p.c.**
 - o gtt.
 - o **neb.**

3.6 CHDP FAQs

Do I have to be a member of AHDI to take the exam?

No, you do not have to be a member of AHDI to take the exam. However, a sizable discount on the exam and exam prep materials is given to members of AHDI, so we do suggest that you consider membership prior to completing the exam application. Visit the <u>AHDI website</u> for more information about membership.

May I use reference materials during the exam?

No. Reference materials are not allowed for online proctoring exams. Electronic aids such as spellcheckers and abbreviation expanders will not be permitted. However, the exam has been designed to test core knowledge, which should not require reference materials.

Can keyboard shortcuts be used instead of the mouse?

No. Although HDPs rely on keyboard shortcuts for efficiency in their jobs, keyboard shortcuts are not integrated into the exam platform, nor are candidates tested on their knowledge of keyboard shortcuts. *The use of shortcut keys results in immediate termination of the exam*. <u>Candidates must use the mouse</u> to navigate through their exam.

When will I receive my results?

The results will be available immediately upon completion of the exam. All candidates will receive a pass/fail report both on-screen and by email at the end of the exam. If you pass the exam, you will receive a certificate in the mail 10 to 14 days after you earned your credential.

Will I see what items I got wrong?

You will receive only a "pass" or "fail" result and will not receive a score or breakdown of exam section results. It is prevailing practice with high-stakes credentialing exams to provide a pass/fail result *only*. AHDI does not publish its exam cut scores, nor do we provide candidates with specific feedback about

performance. Our exams are designed to measure skill and competency and should not be used as a diagnostic indicator of exam readiness.

What if I pass only part of the exam?

You must pass the entire exam to become certified. If you do not pass the exam in its entirety, you will need to retake the entire exam.

How soon may I retake the exam?

If you do not pass the exam, there is a 4-month waiting period before you are eligible to take it again.

If I fail my exam, do I have to pay again to retake it?

Yes. The price listed for the CHDP exam covers the cost of only <u>one</u> exam. If you fail an exam, you'll need to wait the required 4 months before you can reapply for eligibility. Upon receiving your Authorization-to-Test letter, you will need to follow the instructions outlined in the letter to purchase and schedule a new exam.

Can I contest my exam results?

The only ground for *contesting* an exam result is in the event of unforeseen technical or logistical difficulties that may have compromised your exam session. If you feel that has been the case for your exam session, you should file a complaint with AHDI directly, and the technical log of your exam session will be reviewed to determine if your exam was in fact compromised. If your session was deemed to have been compromised by a significant technical or logistical problem (this <u>does not</u> include internet connectivity issues, which are the responsibility of the candidate), AHDI may opt to refund your exam fees. Given your exposure to the exam, you would still not be eligible to reschedule for 4 months.

AHDI will not review **for any reason** the exam results of a first-time candidate. We will <u>not</u> respond to complaints or inquiries about failed exams on a first attempt. If you have failed an AHDI exam *more than once*, you may request a review of your exam file and general feedback on areas for improvement.

4 Certified Healthcare Documentation Professional – Auditor (CHDP-A)

4.1 Purpose and Description

The Certified Healthcare Documentation Professional - Auditor (CHDP-A) exam is a voluntary credentialing exam for individuals who have earned the Certified Healthcare Documentation (CHDP) credential and wish to earn the Auditor micro-credential. The CHDP-A exam is designed to assess competency in healthcare documentation auditing by determining if a candidate has the core knowledge and skills needed to effectively audit clinician-created documentation.

AHDI recommends that candidates possess the knowledge and skills outlined in the CHDP-A Exam Blueprint (detailed later in this chapter) before attempting to take the exam. Potential candidates for the exam are advised to review the outline and assess their knowledge and skills to determine their readiness for the exam. Individuals who successfully complete this AHDI credentialing process are recognized as Certified Healthcare Documentation Professional Auditors and are entitled to use the CHDP-A designation. The credential is valid for 3 years. CHDP-A credential-holders are required to recredential by earning a minimum of 35 continuing education credits (CECs). Upon passing the exam, each CHDP-A receives a wall certificate that shows the date the credential was obtained and the date through which the credential is valid (renewal date).

The CHDP-A exam consists of multiple-choice questions. These assessment types are used to test candidate knowledge and applied interpretive judgment in the knowledge domains represented on the CHDP-A Exam Blueprint, including *Clinical Medicine* and *Auditor Roles and Responsibilities*.

4.2 Eligibility and Requirements

Candidates may sit for the CHDP-A exam solely for the intent and purpose of seeking an AHDI credential and for no other purpose. NOTE: Individuals who already possess the CHDP-A credential are not eligible to take the examination. Holding a current Certified Healthcare Documentation Professional (CHDP) credential is a prerequisite for taking the CHDP-A exam.

Who should take this exam?

Anyone who participates in documenting patients' health care is eligible to take the CHDP-A exam. This includes but is not limited to clinician-created documentation auditors/analysts.

Candidates are advised to first assess their skills and knowledge of the content areas outlined in the CHDP-A Exam Blueprint of this CHDP Certification Guide and prepare accordingly before registering to take the exam.

4.3 Content Focus

As described above, the CHDP-A exam is designed to assess the knowledge, skill, and interpretive ability of industry candidates who participate primarily in review of clinician-created healthcare documentation. It is set up to test the key concepts, vocabularies, processes, systems, and standards involved in auditing healthcare documentation. The goal is to ensure that candidates have a sound grasp of fundamental domains necessary to step into industry documentation professional roles.

The knowledge and skill of CHDP-A candidates will be assessed through multiple-choice questions whereby the candidate will be asked to select an appropriate answer from a choice of 4 options, depending on the nature and scope of content.

The CHDP-A exam consists of 35 questions, distributed by predetermined weight and scope, within the following three content domains:

- Clinical Medicine Questions in this section will assess the candidate's understanding of clinical terms, definitions, standards, and processes, including:
 - > Commonly confused medical terms, medications, and medication doses
 - Physiologic processes and functions
 - > Anatomy
 - > Treatment
- Auditor Roles and Responsibilities Questions in this section will assess the candidate's understanding of auditor responsibilities, including:
 - > Identification of discrepancies within a document
 - > Coding implications of incorrect documentation
 - > Identification of error types (critical vs noncritical)
 - Risk management

4.4 CHDP-A Exam Blueprint

Section 1	Clinical Medicine
1.1	Given a sentence, identify the correct use of a commonly confused medical term.
1.2	Given a graphic showing anatomy or systems, identify the anatomy or system.
1.3	Given a physiologic process, identify the steps or functions related to that process.
1.4	Given a medication, identify the symptom or disease for which it may be prescribed, <u>or</u> given a symptom or disease, identify the medication that may be prescribed.
1.5	Given a sentence, identify the correct use of commonly confused medications and/or doses.
1.6	Given a sentence with laboratory information, identify documentation errors.
1.7	Given an excerpt or sentence from an operative report, identify potential discrepancies.
Section 2	Auditor Roles and Responsibilities
2.1	Given a scenario, identify potential discrepancies between documentation and coding.
2.2	Identify the location in the EHR that would be accessed to verify information found in a document.
2.3	Identify concerns that may need to be reported as risk management issues.
2.4	Given a sentence or scenario, identify the item containing a critical error.
2.5	Given a sentence, identify the item containing a potential demographic error.

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4.5 CHDP-A Sample Questions

- 1. Which sentence is documented correctly?
 - Patient presented to the emergency department complaining of palpations and fluttering in her chest.
 - After undergoing an AKA, the patient was fitted with a prostatic device.
 - \circ Obtaining a history from the patient was difficult due to his new-onset dysphasia.
 - His knee is warm and hot to the touch, quite tender, with pain on passive range of motion, and his thoracentesis was a dry tap.
- 2. Which organ performs filtration, reabsorption, and secretion?
 - o kidney
 - large intestine
 - o gallbladder
 - o pancreas
- 3. Which sentence contains a correct medication dose?
 - \circ I encouraged her to use ibuprofen 80 mg every 6 hours for the pain.
 - She has been on Celexa 40 mg per day for a long time for her depression.
 - Phenergan 125 mg was given for her persistent vomiting.
 - We gave tramadol 15 mg for pain.
- 4. Patient is a 26-year-old African American male. Where in the EHR would you verify this information?
 - o flowsheets
 - o encounters
 - o imaging
 - demographics
- 5. *Instructions: Read the excerpt below and then answer the question.*

EXCERPT

MEDICAL DECISION-MAKING: Patient presents after falling down 2 stairs and hitting her head on the railing. CT scan was performed and ruled out intracranial process. She presents with an abrasion above the right eye. The abrasion was cleaned and dressed. She was sent home with wound care instructions.

DIAGNOSIS: Right eye laceration.

Identify the potential documentation error that could affect coding.

- o diagnosis
- CT scan was performed
- wound care instructions given
- mechanism of injury

5 Certified Healthcare Documentation Professional -Scribe (CHDP-S)

5.1 Purpose and Description

The Certified Healthcare Documentation Professional - Scribe (CHDP-S) exam is a voluntary credentialing exam for individuals who have earned the Certified Healthcare Documentation Professional (CHDP) credential and wish to earn the Scribe micro-credential. The CHDP-S exam is designed to assess competency in healthcare documentation by determining if a candidate has the core knowledge and skills needed to effectively create documentation when acting as a scribe.

AHDI recommends that candidates possess the knowledge and skills outlined in the CHDP-S Exam Blueprint (detailed later in this chapter) before attempting to take the exam. Potential candidates for the exam are advised to review the outline and assess their knowledge and skills to determine their readiness for the exam.

Individuals who successfully complete this AHDI credentialing process are recognized as Certified Healthcare Documentation Professional Scribes and are entitled to use the CHDP-S designation. The credential is valid for 3 years. CHDP-S credential-holders are required to recredential by earning a minimum of 35 continuing education credits (CECs). Upon passing the exam, each CHDP-S receives a wall certificate that shows the date the credential was obtained and the date through which the credential is valid (renewal date).

The CHDP-S exam consists of multiple-choice questions., and 4 of those consist of audio encounters. These questions are used to test candidates' knowledge and applied interpretive judgment in all knowledge domains represented on the CHDP-S Exam Blueprint, including *Clinical Medicine, HIT and Compliance*, and *Scribe Roles and Responsibilities*.

5.2 Eligibility and Requirements

Candidates may sit for the CHDP-S exam solely for the intent and purpose of seeking an AHDI credential and for no other purpose. NOTE: Individuals who already possess the CHDP-S credential are not eligible to take the examination. Holding a current Certified Healthcare Documentation Professional credential is a prerequisite for taking the CHDP-S exam.

Who should take this exam?

Anyone who participates in documenting patients' health care is eligible to take the CHDP-S exam. This includes but is not limited to healthcare documentation professionals acting in the role of a scribe.

Candidates are advised to first assess their skills and knowledge of the content areas outlined in the CHDP-S Exam Blueprint of this CHDP Certification Guide and prepare accordingly before registering to take the exam.

5.3 Content Focus

As described above, the CHDP-S exam is designed to assess the knowledge, skill, and interpretive ability of industry candidates who participate in the creation of healthcare documentation in the role of a scribe. It is set up to test the key concepts, vocabularies, processes, systems, and standards involved in the creation of healthcare documentation. The goal is to ensure that candidates have a sound grasp of fundamental domains necessary to step into industry documentation professional roles.

The knowledge and skill of CHDP-S candidates will be assessed through multiple-choice questions whereby the candidate will be asked to select an appropriate answer from a choice of 4 options, depending on the nature and scope of content.

The CHDP-S exam consists of 35 questions, distributed by predetermined weight and scope, within the following three content domains:

- Clinical Medicine Questions in this section will assess the candidate's understanding of clinical terms, processes, and medications, including:
 - Medical terminology (including commonly confused medical terms)
 - > Anatomy
 - Physiology
 - Disease signs and symptoms
 - > Pharmacology (including side effects, interactions, and contraindications)
- Health Information Technology and Compliance Questions in this section will assess the candidate's understanding of technology terms and usage, including:
 - Required chart elements
 - Documentation workflow
- Scribe Roles and Responsibilities Questions in this section will assess the candidate's understanding of:
 - > Appropriate interactions with a provider and a patient
 - > Documentation responsibilities of a scribe
 - > Other responsibilities of a scribe

Section 1	Clinical Medicine
1.1	Given a sentence, identify the correct use of a commonly confused medical term.
1.2	Given a graphic showing anatomy or systems, identify the anatomy or system.
1.3	Given a physiologic process, identify the steps or functions related to that process.
1.4	Given a sign or symptom, identify diseases or syndromes that should be ruled out. (eg, SOB, rule out DVT)
1.5	Given a sign or symptom, identify the appropriate laboratory and/or diagnostic studies that may need to be performed.
1.6	Identify common drug side effects, interactions, and contraindications.
Section 2	HIT and Compliance
2.1	Identify the elements required for a medical record to be considered complete.
2.2	Given a scenario, identify the correct documentation workflow
2.3	Identify examples of and reasoning for an attestation statement to be included in a document created by a scribe.
Section 3	Scribe Roles and Responsibilities
3.1	Given the role of a scribe, identify appropriate interactions with the provider.
3.2	Given the role of a scribe, identify appropriate interactions with the patient.
3.3	Given a scenario, identify the responsibility of the scribe.
3.4	Given an audio excerpt of a patient encounter, identify key elements and/or the heading/subheading where the information should be documented.

5.4 CHDP-S Exam Blueprint

5.5 CHDP-S Sample Questions

- 1. What anatomic structure is highlighted red in the graphic shown here?
 - clavicles
 - o scapulae
 - o humeri
 - o manubrium



- 2. The patient complains of increased anxiety and panic attacks over the past week. The patient currently takes only alprazolam. Which medication below is contraindicated to add to their daily regimen?
 - o fluoxetine
 - o bupropion
 - paroxetine
 - o lorazepam

- 3. What information is required for the documentation of an encounter to be considered complete?
 - The patient's smoking history.
 - A list of previous injuries.
 - Current testing results.
 - \circ $\;$ The name of the patient's previous primary care provider.
- 4. A provider attestation is important for all of the following reasons except:
 - It confirms that the scribe's work is accurate and sufficient.
 - \circ It assures that the information has been reviewed and authenticated by the provider.
 - \circ $\;$ It confirms that the correct provider has reviewed the chart.
 - It assures the provider receives payment.
- 5. A nurse asks you to order an additional medication so that it can be obtained from the Pyxis MedStation and administered to the patient. As a scribe, what are you allowed to do?
 - Pend the medication order in the EMR system for the provider to confirm.
 - \circ Tell the patient's provider that the nurse is requesting a medication for the patient.
 - \circ $\;$ Obtain the medication from the Pyxis MedStation and give it to the nurse to administer.
 - Instruct the nurse to enter the order into the chart and give the medication to the patient.

6 When You Are Ready to Test

6.1 Submitting Your Eligibility Fee

Congratulations! You are now ready to apply for exam eligibility. By submitting an eligibility fee and requesting an authorization to test, you are confirming that you have:

- 1. Read and accepted the terms and policies outlined in this guide.
- 2. Reviewed the applicable exam blueprints and understand the competencies against which you will be evaluated on examination.
- 3. Understand the restrictions for determining which exam you will be deemed eligible to take based on prerequisite requirements.

Submission of the eligibility fee will constitute a request for authorization to test, and once granted, your exam eligibility will be valid for a period of 180 days from the date of processing. You will receive your Authorization-to-Test email within 5 days of eligibility fee submission. Once you receive your Authorization-to-Test letter, it is your responsibility to purchase your exam from the AHDI website. Once you have purchased your exam, a user profile will automatically be created for you with our test administrator, Examroom.ai, so that you can log in and schedule your online proctored exam on a date and time convenient for you. If you do not register and take your exam within the 180-day eligibility window, your eligibility will expire, and you will forfeit your exam fees. You will need to reapply for eligibility. Again, you pay your eligibility fee to AHDI first, and then you pay for your exam.

To submit your eligibility fee, go to the "Certification" tab on the AHDI home page and select "Sign Up for an Exam." Follow the instructions for adding the eligibility fee to your shopping cart. Submission of the fee is considered an online store purchase and requires you to be a registered user and logged in at the time of purchase.

6.2 AHDI Membership Discount

Membership in AHDI is not required to take AHDI's credentialing examinations. However, AHDI members do receive a significant discount on the credentialing exams as well as other valuable resources and benefits. Your eligibility and exam fees are paid directly to AHDI; then you schedule your exam with Examroom.ai. The price points offered to you on the Exam Fee webpage will be based on the membership type. Take advantage of the significant savings (reflected below) and myriad benefits of AHDI membership by purchasing membership before you submit your exam eligibility fee.

6.3 Exam Fees

Candidates seeking access to AHDI credentialing exams can find the pricing for these exams, based on membership status, outlined below:

CHDP Pricing (2-hour exam session)

Online proctored (OLP) exam, member: \$125 Online proctored (OLP) exam, nonmember: \$205

CHDP-A Micro-credential Pricing (1-hour exam session)

Online proctored (OLP) exam, member: \$75 Online proctored (OLP) exam, nonmember: \$100

CHDP-S Micro-credential Pricing (1-hour exam session)

Online proctored (OLP) exam, member: \$75 Online proctored (OLP) exam, nonmember: \$100

Employers can participate in AHDI's <u>bulk discount program</u> as an affordable option for transitioning current workforce candidates through the exams and moving toward the goal of having a fully credentialed workforce for our industry.

7 Examroom.ai – Online Proctoring (OLP)

7.1 How it Works

Exam candidates will take their exams remotely via the Examroom.ai online proctoring (OLP) platform. Candidates will launch their exams from a compatible computer using Google Chrome and are monitored live by proctors throughout the exam session. This is made possible using webcam video feed, whereby proctors can monitor the test taker to ensure a secure exam session.

Association for Healthcare Documentation Integrity (AHDI) Phone: Toll Free (800) 982-2182 - Direct (209) 527-9620 | Fax: (209) 527-9633 | www.ahdionline.org Copyright 2024 by the Association for Healthcare Documentation Integrity. All rights reserved. During a webcam-monitored session, exam candidates are asked to use a webcam such that the face of the candidate can always be viewed by the proctor. The session proctor will watch the candidate throughout the session to ensure the candidate is engaging in a high-integrity, secure exam interface. Candidates are required to take the exam in an isolated location to prevent interruptions (i.e., no other individuals can be in the room or testing area), are not allowed to access or use any resources or ancillary materials, and are restricted from accessing any other software or programs on their computers while the test session is in launch mode. Proctors communicate via on-screen chat messaging to alert candidates to conditions or concerns the proctors may have with the test session, and sessions will be terminated if a proctor feels that a candidate is engaging in any activity, including talking (even to themselves), that could compromise the integrity of the exam session.

7.2 Technical Requirements & Specifications

Candidates taking the online proctored exam should ensure compatibility with the recommended specifications for the testing computer, webcam, and microphone:

Computer & Internet Requirements

- 1. Windows or Macintosh Operating System**: Windows 8.1 or 10; Macintosh: Mac Catalina+ and Linux (Ubuntu 16.04 +).
- 2. Hard Drive Minimum 256 Gb+ available space is recommended.
- 3. RAM 4 Gb+.
- 4. Internet Access Internet access of at least 3.0 Mbps upload speed and 25 Mbps download speed. <u>Wireless/Wi-Fi connections are not recommended because of the likelihood of inconsistent</u> <u>connectivity and camera feed issues. If you opt to use a wireless connection and your exam is</u> <u>suspended due to poor connectivity, you risk forfeiture of your exam seat and fees.</u>
- 5. Webcam/Microphone Must be in working condition and drivers must be up to date.
- 6. Installed Applications Latest version of Google Chrome.
- 7. Screenshare Must be enabled from system settings. Refer to this link if using Mac OS: https://docs.Examroom.ai/usermanual/mac-chrome/%23mac-screensharing.
- 8. Network Requirements VPN or any firewall-enabled connection is not allowed.

Restrictions: Any scheduled or system resident software or hardware that has the capability to interrupt, intercept, or otherwise interfere with test delivery must be disabled during test sessions. This includes but is not limited to:

- Software that has the capability to produce alerts or popup messages, such as contact managers, calendars, email, instant messenger apps, etc.
- Screen and device capture utilities or anti-virus software
- Windows Updates

NOTE: To avoid interruption during a test session, it is important that all computer settings for Windows Updates be set for manual updates. You can do this by going to the Control Panel and clicking Automatic Updates on the menu. Select the option "Turn off Automatic Updates."

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7.3 What to Expect on Exam Day

Once you have submitted your eligibility fee, received your Authorization-to-Test email from AHDI, and paid your exam fees, you will log into the Examroom.ai platform, to schedule your online exam. Once your exam is scheduled, you will be asked to go through several steps for biometric (identity) enrollment and technical setup, including capture and upload of a webcam-generated photo of yourself and typing DNA on exam day.

On the day of your exam session, you must log into Examroom.ai at least 10 minutes early and select the "Start Exam" button next to the exam reflected on your scheduling profile. To ensure a high-integrity exam process and limit the number of potential conflicts that could result in unexpected termination of your exam session, all candidates will be required to read and acknowledge the rules and restrictions, which are also noted below. Please read this list carefully and contact AHDI with any questions.

- 1. This is **not** an open-book exam. Prior to logging into Examroom.ai, clear your desk of all books, reference materials, notes, and personal items.
- 2. Scratch paper is **not** allowed. Again, no notebooks, papers, or scratch pads, etc., can be on your desk.
- 3. No calculating devices, communication devices (e.g., pagers, cellular telephones), organizers, notes, reference books, dictionaries, or other aids are allowed.
- 4. Deactivate all pagers, cellular phones, and alarm-type watches until you have completed the examination and disconnected from the test site. If you fail to do this and your phone or pager rings, you will be notified by the proctor that you have performed a disallowed act and you may forfeit your exam.
- 5. You will be asked 4 demographic questions prior to the start of the exam; these are required and are not optional. Please take the time to answer them honestly. Assessing your background and experience assists us in evaluating the performance of our exam items.
- 6. The CHDP examination has 100 questions, and a maximum of 2 hours is permitted. The CHDP-S and CHDP-A micro exams each have 35 questions, and a maximum of 1 hour is permitted. Your exam session will be terminated at that time, even if you are not finished. If you complete the exam sooner than the allotted time, you may submit your exam early. Your session is then completed.
- 7. You will have the option to mark items for review. Beneath each question, you will note a box you can check to mark an item for review. Before submitting your exam at the end, we strongly recommend you go back through your marked items on the left panel and review those completely. You can access these at any time by clicking the "Review items with the Flag" in the left panel. Once you submit your exam, you cannot return to these items, and they will be scored in whatever state you left them in, even if they are still marked for review, so if you choose to mark an item for review without answering it, remember to go back and select an answer or you will automatically be given zero points for each of those questions.
- 8. Breaks are discouraged, but if *absolutely necessary*, you may take one 10-minute break. These are requested from the proctor during the exam. These should be used solely to use the bathroom, stretch your legs, or access food/drink. Failure to return to your desk and reinitiate your exam within the allotted break timeframe will result in exam termination without refund.
- 9. You are permitted to have a drink on your desk during your exam, but it must be in a clear, unmarked container with no labels or writing on it. Food must be consumed during your break time and will not be allowed on your desk at any time.
- 10. Scoring is based on the total number of correct answers selected/entered. Since there is no penalty for choosing an incorrect response, you should answer all exam items.
- 11. For the multiple-choice items on this exam, each question has only one (1) correct answer. Read each question carefully before responding.

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- 12. Do not read anything into the question that is not asked for. Be careful to make note of what the question is asking.
- 13. Instructions for the audio sections of the CHDP-S exam will be provided at the beginning of those sections. Please follow them very carefully to avoid formatting and keyboard errors.
- 14. If you lose your connection while taking your exam (loss of video feed, interruption in internet connectivity, loss of electricity, etc.) or if your computer locks up/freezes, please log back into your exam immediately and connect with an onboarding agent or call Examroom.ai support immediately to notify the proctor and seek assistance from the tech support team.
- 15. If you do lose connection and need to relaunch your exam, the testing interface by default will take you to your first unanswered question. If this was an earlier item you skipped and you wish to get back to the question you were on at the time you lost connection, select "Review All" at the bottom of the item window. This will take you to a listing of all exam questions by number and enable you to go back to the question you were on. Those marked with an asterisk represent items you had marked for review.
- 16. When you have finished the exam, have reviewed all marked items, and are confident that you are finished, select "End Exam" in the bottom of your item window. Keep in mind that, once submitted, your exam session will terminate and you will have no further access to your items, so only select "End Exam" when you are sure you are ready to submit your exam.
- 17. Do not use keyboard shortcuts during your exam. Although HDPs rely on keyboard shortcuts for efficiency in their jobs, keyboard shortcuts are not integrated into the Examroom.ai platform, nor are candidates tested on their knowledge of keyboard shortcuts. *The use of shortcut keys results in immediate termination of the exam*. Candidates must use the mouse to navigate through their exam (as well as to play audio files for the CHDP-S exam).

7.4 Special Accommodations

Candidates seeking special accommodations for AHDI credentialing examinations for online proctored (OLP) exams need to request those accommodations and seek approval from AHDI a *minimum of 30 days prior to testing*. Requests for accommodations related to test aids (reference books, foot pedals, scratch paper, calculators, and online resources) will not be accepted, as these items are prohibited for all candidates per the policies outlined in this guide (*See Section 7.3: What to Expect on Exam Day*), regardless of disability or special needs. For all other needs, particularly those related to visual or physical disability, medical condition/illness, etc., requests should be submitted via email to <u>credentialing@ahdionline.org</u>. Contact AHDI if you need assistance.

7.5 Online Proctoring FAQs

Can I use my foot pedal and headset?

Headsets are permitted, but foot pedals are not. Foot pedals are not compatible with the OLP testing software and audio player. The audio excerpts on the CHDP-S exam are short scenarios and can be easily manipulated via the on-screen controls using your mouse.

Can I take the online proctored exam using my laptop?

If your laptop and operating system are fairly new and meet the specifications outlined in the Test Taker Manual, you should be fine, but it will be important to secure direct connection to the internet and *not* rely on a wireless/Wi-Fi connection.

What happens if I lose electricity or internet connection?

When there is a loss of power or a break in internet connectivity, you will automatically be logged out of the OLP exam, and your exam timer will pause until you log back in. If you lose electricity or internet connectivity, have a computer freeze-up, or your webcam stops working, you should attempt to log back in immediately. If you do not have the option to relaunch the exam, call Examroom.ai Technical Support right away (keep the number somewhere close by before you launch your exam) so that they can get you right back into your exam. You must log back in and finish your exam before close of business of your exam day or you will forfeit your exam seat and fees, and your exposure to the exam will mean having to wait 4 months before you can retake it.

How does Examroom.ai ensure my identity?

Part of your biometric enrollment process during registration will be to submit a webcam photo for your user profile. On exam day, you will be asked to take another picture of yourself so that the Examroom.ai proctor can match your exam-day photo with the one in your registration file. In addition, you will be asked to hold up your government-issued photo ID (or equivalent for countries where IDs are not issued) so that proctors can verify that the name on your ID matches the name of the candidate on file and capture an image of your photo ID. When prompted to show your photo ID, hold it 10 inches from your webcam for 10 seconds.

What happens if I need to cancel or reschedule my exam?

You can reschedule your OLP exam at any time if it is prior to the 48-hour window (2 business days) just prior to your exam session. Prior to that 48-hour window (2 business days), a candidate can log in to Examroom.ai and change the date/time of an exam. Once you are within the 48-hour window (2 business days), you will be prohibited from changing your exam session date and time. No cancellations can be made, nor exams rescheduled beyond that point. If you choose to cancel your exam, a \$30 administrative processing fee will be charged. If you fail to show up for your exam at the time originally scheduled, you will forfeit your exam seat and fees. In cases of emergent exception, Examroom.ai will allow a candidate to reschedule despite being within the 48-hour window (2 business days) or even after the fact, if sufficient evidence can be provided to AHDI that an extreme circumstance was encountered. Rescheduling requests should be submitted to AHDI at <u>credentialing@ahdionline.org</u>.

8 Exam Preparation

8.1 Strategies for Exam Success

Successful completion of AHDI credentialing exams will depend not only on training and experience but very often on focused exam preparation and study. A goal-oriented approach to competency preparation can make the difference between earning and not earning that coveted credential. Candidates should consider the following recommendations for exam prep, independent exercise, and/or collaborative group study.

1. Know and understand your exam blueprint. The 100 items on the CHDP exam and the 35 items on each of the CHDP-A and CHDP-S exams come from specific core competency objectives outlined on the exam blueprints for each exam. Understanding what competency is going to be evaluated for each objective will assist a candidate in more focused and purposeful study. Blueprints for all exams along with sample assessment items and FAQs are housed in this certification guide.

2. Invest in exam prep resources and materials, such as:

- The Book of Style & Standards for Clinical Documentation, 4th Edition
- The Book of Style & Standards for Clinical Documentation Workbook
- CHDP Practice Exam
- CHDP-A Practice Exam
- CHDP-S Practice Exam

*Other supplemental study materials may be required with these resources, but the content in these publications is valid and aligns with the core competency objectives housed on the exam blueprints.

3. Join a CHDP, CHDP-A, or CHDP-S study group. One of the best ways to prepare for any exam is to partner with other candidates to study, learn, and tackle exam prep collaboratively. AHDI industry employers are some of the best sources for study group organization. Check the <u>AHDI Events Calendar</u> for available study groups. If you don't have a group meeting in your area, consider joining an online study group or hosting one of your own.

8.2 Recommended Study Materials

The exam covers a broad spectrum of knowledge and skills related to healthcare documentation, and no single set of resources can completely encompass all the information. This list is a sampling of references corresponding to each of the major content areas in the certification exam. It does not include all resources that could be helpful in preparing for the exam, nor is it intended to be an endorsement. It is not necessary to use any of these resources in order to pass the exam, and conversely, using all of these books will not guarantee passing the exam. The internet and local libraries and bookstores are excellent sources for these and other references. It is preferable to use the latest available edition. Ensure online resources used are reputable. No reference materials may be used during the exam itself.

Comprehensive English dictionary, for example:

- The American Heritage Dictionary of the English Language, Houghton Mifflin Co.
- *Merriam Webster's Collegiate Dictionary,* Merriam-Webster, Inc.

College-level business English, for example:

- Effective English for Colleges (Hubbert-Miller), South-Western Publishing Co.
- The Gregg Reference Manual (Sabin), Glencoe McGraw-Hill

Comprehensive medical dictionary, for example:

- Dorland's Illustrated Medical Dictionary, Elsevier Science
- Stedman's Medical Dictionary, Lippincott Williams & Wilkins

Comprehensive medical terminology, for example:

- The Language of Medicine (Chabner), Elsevier Science
- Saunders Manual of Medical Transcription (Sloane/Fordney), Elsevier Science
- The Medical Transcription Workbook, Health Professions Institute

New and/or hard-to-find terminology, for example:

• Let's Talk Terms columns in AHDI's Online Learning Library

Abbreviation references, for example:

- Global RPH (online) https://globalrph.com/abbrev/abc/
- Stedman's Medical Abbreviations, Acronyms, and Symbols (online) https://stedmansonline.com/public/LearnMore.aspx?resourceID=Abbreviations
- *Medical Abbreviations: 15,000 Conveniences at the Expense of Communications and Safety* (Davis), Neil M. Davis Publisher
- Taber's Medical Dictionary (Taber's Online), FA Davis https://www.tabers.com/tabersonline/view/Tabers-Dictionary/767492/all/Medical Abbreviations
- Medical Abbreviations & Acronyms, Open MD Dictionary <u>https://openmd.com/dictionary/medical-abbreviations</u>

Anatomy and physiology, for example:

- Essentials of Anatomy & Physiology (Scanlon/Sanders), F.A. Davis Co.: Philadelphia
- Understanding Human Anatomy & Physiology (Solomon/Phillips) (Elsevier Science)

Disease processes, for example:

- Diseases of the Human Body (Warden et al.), F.A. Davis Co.
- Essentials of Human Diseases and Conditions (Frazier et al.), Elsevier Science
- Human Diseases (Dirckx), Health Professions Institute

Style/transcription practice reference manual, for example:

- The Book of Style for Medical Transcription, 4th edition, AHDI
- American Medical Association Manual of Style, AMA, Oxford University Press

Pharmacology, for example:

- Quick Look Drug Book, Stedman's
- Understanding Pharmacology (Turley), Regents/Prentice-Hall
- Medications: A Guide for the Health Professions (Lane), F.A. Davis Co.

Surgery, for example:

• Surgical Technology, Principles and Practice (Fuller), Elsevier Science

Laboratory/pathology, for example:

- Laboratory Medicine: Essentials of Anatomic and Clinical Pathology (Dirckx), Health
- Professions Institute
- Stedman's Online <u>www.stedmansonline.com</u>
- A Word Book in Pathology and Laboratory Medicine (Sloane/Dusseau), Elsevier Science
- Manual of Diagnostic and Laboratory Tests (Mosby's), Pagana

Radiology, for example:

- The Language of Medicine (Chabner), Elsevier Science
- Understanding Medical Terminology (Frenay/Mahoney), Wm. C. Brown Publishers

Healthcare record, for example:

- The Book of Style & Standards for Clinical Documentation, 4th edition, AHDI
- Getting Practical with Privacy & Security Resource Book, AHIMA
- Health Information Management: Concepts, Principles and Practice (LaTour/Eichenwald), AHIMA

Health information technology, for example:

- The Book of Style & Standards for Clinical Documentation, 4th edition, AHDI
- *HIMSS Dictionary of Health Information and Technology Terms, Acronyms and Organizations*, 5th Edition, HIMSS
- Technology for the Medical Transcriptionist (Bryan), Stedman's
- Microsoft Word for Healthcare Documentation (Bryan), Stedman's

Critical thinking in healthcare documentation, for example:

• Advanced Medical Transcription (Bryan), Pearson

Healthcare Documentation Auditing Best Practice Toolkit

9 Recertification

9.1 Recredentialing

The CHDP credential is good for 3 years and expires on the last day of the month in which the credential was obtained. *Example*: A healthcare documentation professional who successfully passed the CHDP exam on August 3, 2022, would need to recredential by August 31, 2025.

CHDPs maintain their credential through participation in continuing education activities relevant to healthcare documentation and paying a recredentialing fee. Recredentialing is required every 3 years. CHDPs maintain and build on their competency in the field of healthcare documentation with continuing education (CE) activities. This is necessary for the practitioner to function effectively in today's fast-paced healthcare environment. A minimum of **30 continuing education credits (CECs)** must be accrued during that 3-year cycle, with at least 26 of these in the core areas of *Clinical Medicine, Technology & Tools, Professional Development,* and *Medicolegal Issues.* The remaining 4 required CECs may be obtained in either the Core areas mentioned above or the Optional area of *Complementary Medicine.* All 30 credits must be completed prior to the expiration date of the credential. CECs are documented on the CHDP Summary Form. This form, along with the recredentialing fee, must be turned in to AHDI up to 3 months prior to but no later than the expiration date of the credential.

At any time, a CHDP may opt to sit for the CHDP-A or CHDP-S exam. If they pass, they relinquish their CHDP credential in favor of the CHDP-A or the CHDP-S credential (eg, Jackie Smith, CHDP-A, <u>not</u> Jackie Smith, CHDP-A). If you take and pass both micro-credentialing exams, you still will relinquish your CHDP credential in favor of each micro-credential (e.g., Julie Wood, CHDP-A, CHDP-S; <u>not</u> Julie Wood, CHDP, CHDP-A, CHDP-S). However, they will remain on the same recertification cycle as their original CHDP credential earned. They must meet the recredentialing requirements to maintain their active credentialing status. If they do not pass their micro-credentialing exam, they continue in their cycle as a CHDP but must meet the recredentialing requirements to maintain their CHDP status.

If you hold an RHDS or CHDS credential upon passing the CHDP, you will add the CHDP after you name in addition to your RHDS or CHDS (eg, Jane Smith, CHDS, CHDP; Tonya Jones, RHDS, CHDP); likewise, if you pass a micro-credentialing exam, that credential will trump your CHDP and be added after your name along with your RHDS or CHDS (eg, Sara Thompson, RHDS, CHDP-A; Luke Collins, CHDS, CHDP-S). Your recertification cycle will be aligned with your original RHDS or CHDS cycle.

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Membership in AHDI is not a requirement for the CHDP credential; however, it is encouraged because of the opportunities and benefits afforded members.

Current CHDPs, CHDP-As, and CHDP-Ss can find further information about recredentialing, filing an extension, forms and procedures related to recredentialing, and end-of-cycle submissions and processes in the CHDP Recertification area of the AHDI website.