

J. Sargeant Reynolds Community College
Course Content Summary

Course Prefix and Number: HIM 251

Credits: 3

Course Title: Clinical Practice I

Course Description: Prepares the Health Information Technology Student to perform all functions commonly allocated to health record services. Gives practice in various settings under the supervision of an appropriate clinical practice HIM or HIT supervisor. Part I of II. Prerequisites or Co-requisites: General education program courses and HIM 110, HIM 130, HIM 141, HIM 142, HIM 151, HIM 220, HIM 226, HIM 229, HIM 230, HIM 233, HIM 249, HIM 250, HIM 255, and HIM 257. Laboratory 6 hours per week.

General Course Purpose: This course is designed to prepare the Health Information Management Student to perform all functions commonly allocated to health information services. The student will be exposed to the workplace setting and able to demonstrate entry-level competencies in various health information management service settings.

Course Prerequisites and Co-requisites:

Prerequisite or Co-requisite: General education program courses and HIM 110, HIM 130, HIM 141, HIM 142, HIM 151, HIM 220, HIM 226, HIM 229, HIM 230, HIM 233, HIM 249, HIM 250, HIM 255, HIM 257

Student Learning Outcomes:

Upon completing the course, the student will be able to

- a. Apply concepts, theories, and principles taught within the Health Information Management program;
- b. Apply policies and procedures for clinical data required for reimbursement and changing payment types in health care delivery;
- c. Demonstrate knowledge of the legal and regulatory requirements related to the health information infrastructure;
- d. Demonstrate skills in the use of technology to ensure data collection, storage, analysis, and reporting of health information to meet the organization's specific needs;
- e. Apply current laws, accreditation, licensure, and certification standards related to health information initiatives for the national state, local, and facility levels;
- f. Differentiate the roles of various providers and disciplines throughout the continuum of health care and respond to their information needs;
- g. Apply and promote AHIMA's code of ethics and standards of practice;
- h. Process ROI requests;
- i. Perform medical/patient record audit;
- j. Perform productivity audit of specified functional area (filing, coding, record completion, etc.); research benchmark standards for use in comparison; summarize and make recommendations; QA, scan, and index medical records; and
- k. Create multidisciplinary document/form that can be used during downtime of certain HER functions.

Major Topics to Be Included:

- a. Records management
- b. Coding/classification/case mix management
- c. Admission office
- d. Business office
- e. Committee preparation/attendance
- f. Quality/performance management
- g. Utilization management/clinical pathways

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