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Q&A

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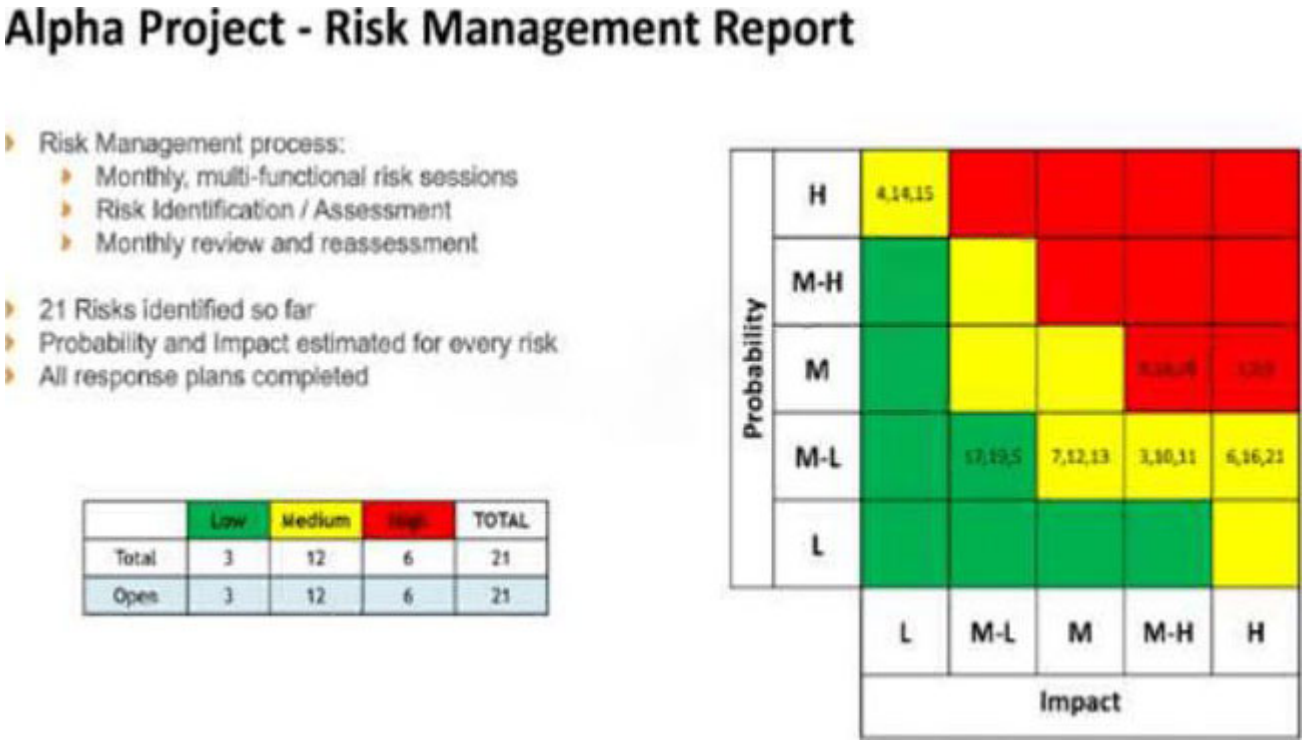
Exam : **PMP**

Title : Project Management Professional

Version : DEMO

1.According to the Alpha project's risk management report, which risks should the project manager prioritize? (Refer to Alpha Project — Risk Management Report exhibit.)



A.1,2,9
B. 4, 14, 15
C. 8, 18, 20
D. 17, 19, 5
Answer: A
Explanation:
The project manager should prioritize risks 1, 2, and 9 because risk prioritization is driven by relative exposure, determined through the combination of probability and impact. The Alpha Project exhibit shows a probability-impact matrix with color-coded zones, where red represents the highest level of concern, yellow represents moderate exposure, and green represents lower exposure. Since probability and impact have already been estimated for every identified risk and response plans have been completed, the project manager should focus attention on the risks with the highest combined probability-impact score. These risks should receive active monitoring, response ownership, trigger tracking, and escalation readiness if thresholds are exceeded. Risks in lower exposure zones may still require monitoring, but they should not receive the same priority as the most severe risks. PMBOK-aligned risk management emphasizes concentrating project management effort where uncertainty can most significantly affect objectives such as scope, schedule, cost, quality, and value. PMBOK® Guide Eighth Edition topics: risk identification, probability-impact assessment, risk prioritization, risk response planning, risk monitoring, and project control.

2.Health Records Modernization at Hospital Case Study
A project manager led a health records modernization project at a hospital with a project budget of $US5 million and an 18-month timeline. The project involved multiple stakeholder groups including medical, administrative, and IT staff; board members; patients; insurance companies; external vendors; regulatory

bodies; and union representatives.
Stakeholder management was complex and a major undertaking for the project manager, but it was critical to achieve a positive project outcome. When the project started, the project manager conducted stakeholder analysis, using the information to create both a power/interest and an influence/impact matrix. The analysis showed that while the hospital board members and regulatory bodies had high power but moderate interest, the medical staff (doctors and nurses) had both high influence and high impact on the project. Administrative staff showed high interest but lower power, while patients and insurance companies had moderate interest and varying levels of influence. Based on the analysis, the project manager created a stakeholder engagement strategy that documented expectations, communication preferences, and influence levels in a stakeholder register. The project manager also made a RACI (responsible, accountable, consulted, informed) chart to show roles and responsibilities; and created communication channels and frequency for each stakeholder group, an issue escalation system, and a feedback system for continuous stakeholder input.
To execute the modernization process of health records, the project manager realized that medical staff members would need to change their daily workflows. To facilitate change management for these stakeholders, the project manager created a clinical advisory committee, appointed department-specific "champions," created focus groups for requirements gathering, started a training program, and developed key performance indicators (KPIs) to measure satisfaction.
During project execution, several challenges emerged. The doctors expressed concerns about the system's impact on patient care, the nurses' union raised workload concerns, the IT department faced resource constraints, the insurance companies requested additional features, and the administrative staff worried about data security. The project manager responded to these challenges by increasing the frequency of stakeholder meetings, implementing a change management program, creating a beta system for stakeholder testing, developing contingency plans for various stakeholder scenarios, and establishing an issue resolution process.
Despite these mitigation efforts, the medical staff required additional training, leading to a change request for a 2-month extension and a 10% budget increase. The board of directors approved this to help ensure high adoption and satisfaction rates among staff members. The project helped establish new good practices in future programs for stakeholder management in the organization's project management office (PMO). The documented lessons learned became a reference for future projects of similar scope and complexity.
A project to modernize a hospital's records has a large and diverse stakeholder population. As stakeholders request changes, the project manager is aware that some will cause a negative impact to the project timeline and finances.
What should the project manager do? (Refer to the Health Records Modernization at Hospital Case Study exhibit.)
A. Defer working on changes that could change the baseline or create additional risks.
B. Escalate decisions to the project sponsor to ensure appropriate executive engagement.
C. Evaluate the impact, document the analysis, and present options to key decision-makers.
D. Review the work breakdown structure (WBS) to determine the impact of the changes.
Answer: C
Explanation:
The project manager should evaluate the impact, document the analysis, and present options to key decision-makers. The case describes a complex healthcare transformation with diverse stakeholder

groups, competing expectations, regulatory sensitivity, operational workflow changes, and adoption concerns. In this environment, stakeholder-requested changes cannot be accepted, rejected, or deferred informally. Each change must be assessed for effects on scope, schedule, cost, quality, risk, compliance, user adoption, and benefits realization. Documenting the analysis creates transparency and gives decision-makers a factual basis for approving, rejecting, deferring, or modifying the request. Reviewing the WBS may help determine scope impact, but it does not fully address financial, timeline, stakeholder, and risk implications. Escalating every decision directly to the sponsor without analysis weakens governance quality. Deferring changes automatically could cause the project to miss high-value stakeholder needs. PMBOK® Guide Eighth Edition topics: integrated change control, impact analysis, stakeholder engagement, healthcare governance, scope-cost-schedule trade-offs, and decision support.

3.Health Records Modernization at Hospital Case Study

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During project execution, several challenges emerged. The doctors expressed concerns about the system’s impact on patient care, the nurses’ union raised workload concerns, the IT department faced resource constraints, the insurance companies requested additional features, and the administrative staff worried about data security. The project manager responded to these challenges by increasing the frequency of stakeholder meetings, implementing a change management program, creating a beta system for stakeholder testing, developing contingency plans for various stakeholder scenarios, and establishing an issue resolution process.

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management office (PMO). The documented lessons learned became a reference for future projects of similar scope and complexity.
How should the project manager address the administrative staff's data security concerns related to project scope implementation? (Refer to the Health Records Modernization at Hospital Case Study exhibit.)
A. Proceed with implementation and address their security issues as part of the scope.
B. Engage the IT department to address the security issues.
C. Include them in security planning sessions and demonstrate the security measures.
D. Minimize system security to speed up the implementation.
Answer: C
Explanation:
The project manager should include the administrative staff in security planning sessions and demonstrate the security measures. The case identifies administrative staff as highly interested stakeholders and states that they were worried about data security. Their concern is not only technical; it is also related to trust, adoption, operational confidence, and stakeholder engagement. Including them in security planning allows the project manager to explain how patient data will be protected, how access will be controlled, and how privacy or confidentiality concerns will be handled. Demonstrating the security measures makes the response visible and practical rather than abstract. Engaging only the IT department may solve part of the technical issue but fails to directly address the concerned stakeholder group. Proceeding without active engagement risks resistance and reduced adoption. Minimizing security to accelerate implementation is unacceptable in a health records environment because security, privacy, and compliance are core nonfunctional requirements. PMBOK® Guide Eighth Edition topics: stakeholder engagement, communication, data security, healthcare compliance, change management, user trust, and adoption readiness.

4.Health Records Modernization at Hospital Case Study
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During the execution phase of a project to modernize a hospital’s records system, the insurance company stakeholders requested additional features to support integration to their systems.
What should the project manager do first? (Refer to the Health Records Modernization at Hospital Case Study exhibit.)
A. Contact the union representative to understand the necessity of the additional work.
B. Review the scope changes for validity and then notify the sponsor of the changes.
C. Evaluate the potential impact on the baseline and then present a change request.
D. Add the critical features to the scope in order to maintain stakeholder satisfaction.
Answer: C
Explanation:
The project manager should first evaluate the potential impact on the baseline and then present a change request. The insurance companies are legitimate stakeholders, and integration with their systems may provide business value. However, additional features during execution can affect approved scope, schedule, budget, technical design, testing, data security, regulatory compliance, and operational readiness. The project manager must therefore assess the request before recommending approval.
Contacting the union representative is unrelated to insurance-system integration. Reviewing validity and notifying the sponsor is incomplete because the project manager must also determine baseline impact and route the request through governance. Adding the features immediately may increase stakeholder satisfaction temporarily but creates uncontrolled scope change and may damage delivery predictability.
In a hospital records modernization project, integrations can create sensitive data, workflow, and compliance implications, so formal impact analysis is essential. PMBOK® Guide Eighth Edition topics: integrated change control, scope management, baseline impact analysis, stakeholder requests, healthcare system integration, change governance, and value-based decision-making.

5.Health Records Modernization at Hospital Case Study
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The project manager leading the project to modernize health records in a hospital has a particular concern about clinical stakeholders—the doctors and nurses. As part of the stakeholder engagement plan, the project manager created the clinical advisory committee.
What was the objective of the project manager's action? (Refer to the Health Records Modernization at Hospital Case Study exhibit.)
A. To obtain early stakeholder buy-in and continuous feedback from key medical staff.
B. To document medical specifications to improve the technical elements of the process.
C. To reduce project overhead by engaging the medical staff in the execution process.
D. To comply with medical regulatory requirements by learning about them from the medical team.
Answer: A
Explanation:
The objective was to obtain early stakeholder buy-in and continuous feedback from key medical staff. The case identifies doctors and nurses as stakeholders with both high influence and high impact. Their

daily workflows would change because of the modernization effort, so adoption by clinical staff was essential to the project outcome. Creating a clinical advisory committee gives these users a formal mechanism to provide input, raise workflow concerns, validate requirements, test assumptions, and support acceptance of the solution. This improves engagement and reduces resistance. Documenting medical specifications may occur during advisory discussions, but it is not the primary objective. Reducing project overhead is not correct because committees often require additional coordination effort. Compliance learning may be a secondary benefit, but regulatory bodies and legal/compliance experts normally manage regulatory interpretation. The committee is fundamentally a stakeholder engagement and change-management mechanism intended to secure buy-in and continuous feedback from the most influential user group. PMBOK® Guide Eighth Edition topics: stakeholder engagement, stakeholder buy-in, feedback loops, clinical workflow change, change management, adoption readiness, and benefits realization.