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## AAPC CPC FINAL EXAM PRACTICE QUESTIONS |231 REAL QUESTIONS WITH 100% CORRECT ANSWERS | LATEST UPDATED 2025 |

A 46-year-old female had a previous biopsy that indicated positive malignant margins anteriorly on the right side of her neck. A 0.5 cm margin was drawn out and a 15 blade scalpel was used for full excision of an 8 cm lesion. Layered closure was performed after the removal. The specimen was sent for permanent histopathologic examination. What are the CPT® code(s) for this procedure?

- A. 11626
- B. 11626, 12004-51
- C. 11626, 12044-51
- D. 11626, 13132-51, 13133

**Correct Answer: C. 11626, 12044-51**

A 30-year-old female is having 15 sq cm debridement performed on an infected ulcer with eschar on the right foot. Using sharp dissection, the ulcer was debrided all the way to down to the bone of the foot. The bone had to be minimally trimmed because of a sharp point at the end of the metatarsal. After debriding the area, there was minimal bleeding because of very poor circulation of the foot. It seems that the toes next to the ulcer may have some involvement and cultures were taken. The area was dressed with sterile saline and dressings and then wrapped. What CPT® code should be reported?

- A. 11043
- B. 11012
- C. 11044
- D. 11042

**Correct Answer: C. 11044**

A 64-year-old female who has multiple sclerosis fell from her walker and landed on a glass table. She lacerated her forehead, cheek and chin and the total length of these lacerations was 6 cm.

Her right arm and left leg had deep cuts measuring 5 cm on each extremity. Her right hand and right foot had a total of 3 cm lacerations. The ED physician repaired the lacerations as follows: The forehead, cheek, and chin had debridement and cleaning of glass debris with the lacerations being closed with one layer closure, 6-0 Prolene sutures. The arm and leg were repaired by layered closure, 6-0 Vicryl subcutaneous sutures and Prolene sutures on the skin. The hand and foot were closed with adhesive strips. Select the appropriate procedure codes for this visit.

- A. 99283-25, 12014, 12034-59, 12002-59, 11042-51
- B. 99283-25, 12053, 12034-59, 12002-59
- C. 99283-25, 12014, 12034-59, 11042-51
- D. 99283-25, 12053, 12034-59

**Correct Answer: D. 99283-25, 12053, 12034-59**

A 52-year-old female has a mass growing on her right flank for several years. It has finally gotten significantly larger and is beginning to bother her. She is brought to the Operating Room for definitive excision. An incision was made directly overlying the

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## Medical Tests American Academy of Professional Coders: Certified Professional Coder Sample Questions (Q143-Q148):

### NEW QUESTION # 143

A 59-year-old male patient presents for a routine colonoscopy. During the procedure, a polyp is discovered. What is the proper ICD- 10-CM coding for this encounter?

- A. K63.5, Z12.11
- **B. Z12.11, K63.5**
- C. K63.5
- D. Z12.11

**Answer: B**

Explanation:

Because the reason for the visit was a routine colonoscopy, the "encounter for screening for malignant neoplasm of colon" (Z12.11) would be the first-listed code. ICD-IO-CM guidelines advise that if there is a finding during a screening, the finding may be used as an additional code. In this example, the colon polyp (K63.5) is a physical finding and would be listed as the secondary diagnosis.

### NEW QUESTION # 144

A physician performs a simple repair on a Medicare patient who comes in with a 2.7 cm cut, an open wound, on the neck. The repair is made with Dermabond. Which CPT code(s) should be reported?

- A. 0
- B. 99213-25, G0168
- C. 12002, G0168
- **D. G0168**

**Answer: D**

Explanation:

When a wound is repaired with a tissue adhesive, Medicare accepts only the HCPC code G0168. Answers B and C accurately reflect the repair code for a commercial carrier. An E/M would not be added as an additional charge because the patient's encounter was only for the repair, thus eliminating answer D.

### NEW QUESTION # 145

A sternal closure using sutures is considered inclusive to CPT 33255 and should not be reported separately.

- **A. True**
- B. False

**Answer: A**

Explanation:

The statement is true. Regardless of how a sternal closure is performed, it would be considered integral to this, and any other open cardiac procedure, when a sternal approach is used as the method of exposure. If a sternal closure were performed as the only procedure to repair an injury, the closure would then be reported.

### NEW QUESTION # 146

Which healthcare professional may NOT report medical nutrition therapy?

- A. Dietician

- B. Nutritionist
- C. Registered nurse
- **D. Endocrinologist**

**Answer: D**

Explanation:

Medical nutrition therapy describes nutritional assessments and interventions in a face-to-face or group patient setting and is reported with CPT codes 97802-97804. These codes are used by nonphysician healthcare professionals only. When a physician provides nutritional advice, a preventative service or evaluation and management code should be reported.

#### **NEW QUESTION # 147**

Which term describes a migraine that is unmanageable with treatment?

- A. Classical migraine
- B. Status migrainosus
- **C. Intractable migraine**
- D. A migraine with aura

**Answer: C**

Explanation:

An intractable migraine is one that is continuous and obstinate to conventional treatment. If a migraine is preceded by symptoms of vision disturbances and/or transient muscle weakness, those symptoms are collectively known as aura. A migraine with aura is also called a classical migraine. Status migrainosus describes a severe, debilitating migraine that lasts longer than 72 hours and usually results in hospitalization.

#### **NEW QUESTION # 148**

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