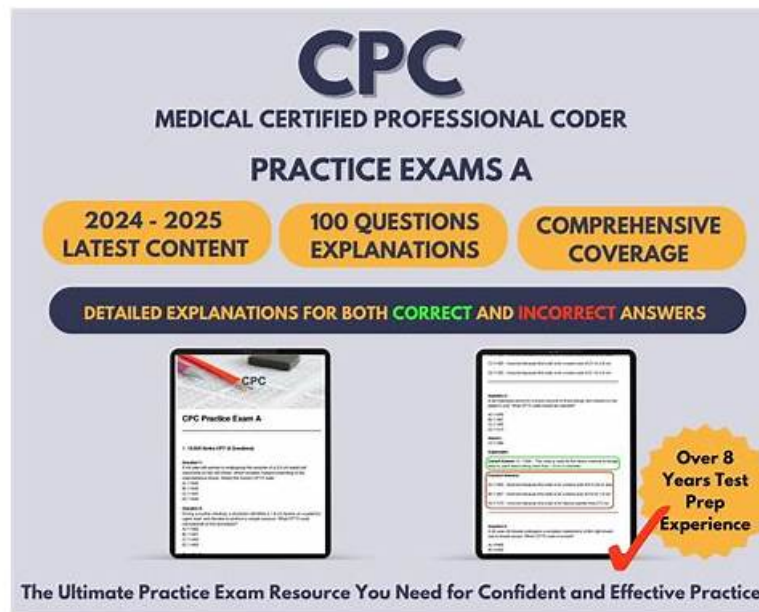


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AAPC Certified Professional Coder (CPC) Exam Sample Questions (Q325-Q330):

NEW QUESTION # 325

The documentation states:

He was then sterilely prepped and draped along the flank and abdomen in the usual sterile fashion. I first made a skin incision off the tip of the twelfth rib, extending medially along the banger's lines of the skin. This was approximately 3.5 cm in length. Once this incision was carried sharply, electrocautery was used to gain access through the external oblique, internal oblique, and transverse abdominis musculature and fascia.

What surgical approach was used for this procedure?

- A. Cannot determine based on the documentation
- B. Laparoscopic
- **C. Open**
- D. Percutaneous

Answer: C

NEW QUESTION # 326

A healthy 35-year-old undergoes EP study and ablation under general anesthesia. What anesthesia coding is correct?

- A. 00532-P2
- B. 01922-P2
- C. 01926-P1
- **D. 00537-P1**

Answer: D

Explanation:

00537 = Anesthesia for EP procedures

P1 = Normal healthy patient

NEW QUESTION # 327

A patient returns for embryo transfer. The lab thaws cryopreserved embryos and cultures them for two additional days. What CPT coding is reported?

- A. 89352 ×3, 89250 ×3
- B. 89352, 89250
- **C. 89258, 89250**
- D. 89342 ×3, 89250 ×3

Answer: C

Explanation:

89258 = Thawing of cryopreserved embryos

89250 = Culture of embryos, per day (reported once per encounter)

NEW QUESTION # 328

A patient is seen at the doctor's office for nausea, vomiting, and sharp right lower abdominal pain. CT scan of the abdomen is ordered. Labs come back indicating an increased WBC count with review of the abdominal CT scan. The physician determines the patient has chronic appendicitis. The physician schedules an appendectomy and takes the patient to the operating room. The appendix is severed from the intestines and removed via scope inserted through an umbilical incision. What CPT and diagnosis codes are reported?

- A. 44950, K35.80, R11.2, R10.31
- **B. 44970, K36**
- C. 44970, K36, R11.2, R10.31
- D. 44950, K35.80

Answer: B

Explanation:

1. Procedure and CPT Code Selection:

The patient underwent an appendectomy performed via laparoscopic approach. The procedure involved removal of the appendix using a scope inserted through an umbilical incision.

CPT Code 44970 is specific for a laparoscopic appendectomy, which is the correct code for this procedure.

Code 44950 would be used for an open appendectomy, but since this case was performed laparoscopically, 44970 is appropriate.

2. Diagnosis and ICD-10-CM Code Selection:

The diagnosis given by the physician is chronic appendicitis.

ICD-10-CM Code K36 is used to report chronic appendicitis, which is the definitive diagnosis in this case.

Additional codes for symptoms such as nausea (R11.2) and right lower quadrant pain (R10.31) are not necessary because the primary diagnosis of chronic appendicitis (K36) fully explains the symptoms, according to ICD-10-CM guidelines on coding symptoms when a definitive diagnosis is available.

3. AAPC and CPT Coding Guidelines:

AAPC guidelines indicate that when a definitive diagnosis is established, symptom codes should not be reported separately. The use of 44970 for laparoscopic appendectomy and K36 for chronic appendicitis is fully supported by these coding standards.

Therefore, the correct answer is C. 44970, K36.

NEW QUESTION # 329

Multiple laceration repairs were performed:

Simple: cheek (2.5 cm), nose (3 cm)

Intermediate: left leg (9 cm), right leg (11.5 cm)

Complex: left upper arm (4 cm)

What CPT codes are reported?

- A. 13121, 12036-59, 12013-59, 12011-59
- B. 13121, 12034-59, 12034-59, 12013-59, 12011-59
- C. 13121, 12036-59, 12014-59
- D. 13121, 12034-RT, 12034-LT, 12014-59

Answer: A

Explanation:

Complex (arm, 4 cm) → 13121

Intermediate legs total = 20.5 cm → 12036

Simple face closures coded separately:

12013 (cheek)

12011 (nose)

Modifiers allow separate anatomical reporting.

Correct answer: A

NEW QUESTION # 330

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