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Medical Tests American Academy of Professional Coders: Certified Professional Coder Sample Questions (Q22-Q27):

NEW QUESTION # 22

Which type of anesthesia is NOT separately reportable?

- A. Metacarpal blocks
- B. Spinal anesthesia
- C. Regional anesthesia
- D. Monitored anesthesia care

Answer: A

Explanation:

CPT surgery guidelines uphold that local infiltration, metacarpal/metatarsal/digital block, or topical anesthesia is always included in the surgical package. Under monitored anesthesia care (MAC), a patient is sedated but typically still aware, and the presence of qualified anesthesia personnel is required. Spinal and regional anesthesia is used for a variety of different procedures and is also separately reportable.

NEW QUESTION # 23

Assign the appropriate procedure and diagnosis codes for a biopsy of a posterior mediastinal mass that was obtained through an incision at the base of the neck.

- A. 39000, D38.3
- B. 39401, D49.89
- C. 39000, R22.2
- D. 39401, R22.1

Answer: C

Explanation:

The procedure performed was a mediastinotomy with a biopsy, represented by CPT 39000.

CPT code 39401 is reported for a mediastinoscopy, which is the insertion of a scope through an incision in the notch above the sternum. ICD-IO-CM crosswalk for a mass found on the chest wall is R22.-. Although the approach is cervical, the location of the mass is mediastinal, falling under the anatomical site of the trunk

NEW QUESTION # 24

A patient relocates after receiving treatment for an arm fracture. The patient schedules an appointment with a new orthopedist to remove the cast. The orthopedic office should report the fracture diagnosis code with the seventh character A to indicate active treatment.

- A. True
- B. False

Answer: B

Explanation:

The statement is false. When a patient is in the healing and/or recovery phase of an injury, the seventh character would be D to indicate that the care is subsequent-whether the provider has treated the patient in the past or not.

NEW QUESTION # 25

V codes are related to which procedures/products?

- A. Durable medical equipment
- B. Enteral therapy
- C. Orthotic procedures
- D. Hearing services

Answer: D

Explanation:

Durable medical equipment is represented by E codes, orthotic procedures are L codes, and enteral therapy is inclusive to B codes in the HCPC manual.

NEW QUESTION # 26

What would NOT be included in a global obstetrical package?

- A. A patient complains of flu-like symptoms and is prescribed an antibiotic.
- B. A patient with anemia comes in to check hemoglobin levels.
- C. Sutures are removed from a first-degree perineal laceration during the delivery.
- D. Contraception following delivery is discussed at length.

Answer: A

Explanation:

The treatment of flu-like symptoms is considered a non-obstetric service, and a separate E/M can be billed for reimbursement. All other answer choices would be included in the global obstetrical package as routine care.

NEW QUESTION # 27

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