

権威のあるCPC試験関連赤本一回合格-一番優秀なCPC受験料過去問



2026年PassTestの最新CPC PDFダンプおよびCPC試験エンジンの無料共有: <https://drive.google.com/open?id=1PsmDpqBiYQfnG4sg7OqaQ6sl6COsOLXn>

CPC学習テストは、シラバスの変更と、AAPC歴史的な質問や業界の動向に基づいた理論と実践の最新の進展に
応じて、何百人もの専門家によって改訂された高品質の製品でした。あなたが学生であろうとオフィスワ
ーカーであろうと、ルーキーであろうと長年の経験を積んだベテランであろうと、CPCガイドトレントが最適で
す。CPC学習教材の主な利点は、98%以上のCertified Professional Coder (CPC) Exam高い合格率であり、CPC試験
に合格するには十分です。

AAPC CPC 認定試験の出題範囲:

トピック	出題範囲
トピック 1	<ul style="list-style-type: none">The Business of Medicine: This section of the exam measures the skills of medical coders and covers foundational knowledge regarding the healthcare system, reimbursement models, insurance payers, HIPAA compliance, and the ethical responsibilities coders hold within clinical and billing environments. It establishes the context in which coding decisions directly affect healthcare operations and financial outcomes.
トピック 2	<ul style="list-style-type: none">Special Senses (Ocular and Auditory): This section of the exam measures the skills of coding specialists and covers the coding of procedures related to the eyes and ears. Topics include surgeries on the cornea, retina, and middleinner ear, as well as related diagnostic procedures.
トピック 3	<ul style="list-style-type: none">Anesthesia: This section of the exam measures the skills of medical coders and involves coding anesthesia services based on surgical site, complexity, and time. It tests the understanding of anesthesia modifiers and the importance of linking anesthesia codes with the correct primary procedures.
トピック 4	<ul style="list-style-type: none">Musculoskeletal System: This section of the exam measures the skills of coding specialists and focuses on coding procedures involving bones, joints, muscles, and tendons. It covers surgeries, reductions, arthroscopies, and fracture treatments, emphasizing accurate mapping of procedures to anatomical areas.
トピック 5	<ul style="list-style-type: none">Integumentary System: This section of the exam measures the skills of medical coders and covers procedures related to the skin and related structures. Topics include excisions, biopsies, repairs, and destruction services, focusing on accurate code selection and modifier usage for integumentary interventions.

トピック 6	<ul style="list-style-type: none"> • Review of Anatomy: This section of the exam measures the skills of coding specialists and covers a high-level understanding of human anatomy. It includes organs, systems, directional terminology, and anatomical locations, enabling coders to link procedures and diagnoses to the correct bodily structures with accuracy and consistency.
トピック 7	<ul style="list-style-type: none"> • Hemic & Lymphatic Systems, Mediastinum, Diaphragm: This section of the exam measures the skills of medical coders and includes procedures related to the spleen, lymph nodes, bone marrow, as well as surgical interventions in the mediastinum and diaphragm. Coders must differentiate procedures by region and system accurately.
トピック 8	<ul style="list-style-type: none"> • Pathology & Laboratory: This section of the exam measures the skills of medical coders and includes lab tests, specimen analysis, and pathological examination procedures. It ensures that coders understand how to apply codes for chemistry panels, cultures, and histopathological diagnostics.
トピック 9	<ul style="list-style-type: none"> • Evaluation & Management Services: This section of the exam measures the skills of coding specialists and covers office visits, hospital care, consultations, and other E • M services. It tests the understanding of time-based coding, medical decision-making, and history • exam components per current CMS guidelines.
トピック 10	<ul style="list-style-type: none"> • Cardiovascular System: This section of the exam measures the skills of coding specialists and addresses services related to the heart, arteries, and veins. It involves the coding of diagnostic and therapeutic procedures, including catheterizations, bypasses, and repairs.:
トピック 11	<ul style="list-style-type: none"> • Radiology: This section of the exam measures the skills of coding specialists and focuses on diagnostic imaging procedures including X-rays, CT scans, MRIs, ultrasounds, and nuclear medicine. It emphasizes proper selection of codes based on anatomical site and modality used.
トピック 12	<ul style="list-style-type: none"> • Female Reproductive System and Maternity Care & Delivery: This section of the exam measures the skills of coding specialists and evaluates coding accuracy for gynecological and obstetric procedures. It includes deliveries, antepartum care, cesarean sections, and surgical procedures involving female reproductive anatomy.
トピック 13	<ul style="list-style-type: none"> • Introduction to CPT®, HCPCS Level II, and Modifiers: This section of the exam measures the skills of coding specialists and introduces candidates to CPT® coding for procedures, HCPCS Level II for supplies and services, and the correct use of modifiers. It helps learners distinguish between different code sets and understand their place in medical billing.
トピック 14	<ul style="list-style-type: none"> • Digestive System: This section of the exam measures the skills of coding specialists and evaluates the coding of surgeries and procedures involving the oral cavity, pharynx, esophagus, stomach, intestines, liver, pancreas, and related organs. Understanding endoscopic procedures is particularly critical here.
トピック 15	<ul style="list-style-type: none"> • Respiratory System: This section of the exam measures the skills of medical coders and evaluates the ability to code procedures involving the nose, sinuses, larynx, trachea, bronchi, and lungs. Attention is given to services like endoscopies, excisions, and resections within the respiratory tract.
トピック 16	<ul style="list-style-type: none"> • Endocrine System and Nervous System: This section of the exam measures the skills of medical coders and assesses the ability to assign codes for surgeries involving glands, the brain, spinal cord, and peripheral nerves. Procedures like resections and electrical stimulation are part of the evaluated content.
トピック 17	<ul style="list-style-type: none"> • Urinary System and Male Genital System: This section of the exam measures the skills of medical coders and assesses understanding of procedures on kidneys, bladder, ureters, prostate, and male reproductive organs. Proper use of CPT codes for surgical and diagnostic interventions is tested.

>> CPC試験関連赤本 <<

CPC受験料過去問、CPC関連受験参考書

我々PassTestでは、あなたは一番優秀なAAPC CPC問題集を発見できます。我が社のサービスもいいです。購入した前、弊社はあなたが準備したいCPC試験問題集のサンプルを無料に提供します。購入した後、一年間の無料サービス更新を提供します。AAPC CPC問題集に合格しないなら、180日内で全額返金します。あるいは、他の科目の試験を変えていいです。

AAPC Certified Professional Coder (CPC) Exam 認定 CPC 試験問題 (Q18-Q23):

質問 # 18

A cardiologist attempted to perform a percutaneous transluminal coronary angioplasty of a totally occluded blood vessel. The surgeon stopped the procedure because of an anatomical problem creating risk for the patient and preventing performance of the catheterization.

What modifier is appended to the procedure code?

- A. 0
- B. 1
- **C. 2**
- D. 3

正解: C

解説:

Modifier 53 is used to report a discontinued procedure. It indicates that a procedure was started but terminated due to the patient's well-being being at risk. In this scenario, the percutaneous transluminal coronary angioplasty was attempted but stopped because of an anatomical problem that created a risk for the patient, preventing the completion of the procedure. AMA's CPT Professional Edition, coding guidelines on the use of modifiers.

質問 # 19

A 32-year-old visited a provider due to skin itching and ongoing irritation and watering of the eyes. Suspecting an allergy, the provider suspects an allergic reaction and decides to conduct allergy testing. A prick on the skin of the patient's forearm is performed by introducing a small amount of an allergen and monitored for signs of an allergic reaction.

What CPT code is reported?

- A. 0
- **B. 1**
- C. 2
- D. 3

正解: B

解説:

93280 - In-person interrogation device evaluation with programming; dual-chamber pacemaker Includes:

Full electronic analysis

Lead function

Battery status

Threshold testing

Programming changes

Why others are incorrect:

93281 - Single-chamber pacemaker

93283 / 93284 - ICD device codes

質問 # 20

An interventional radiologist performs an abdominal paracentesis in his office utilizing ultrasonic imaging guidance to remove excess fluid. What CPT coding is reported?

- A. 49082, 76942
- B. 49082, 76942-26
- **C. 0**

- D. 49083, 76942-26

正解: C

質問 # 21

A patient presents to the ER from a nursing home after the patient was found to have foul smelling, large sacral pressure ulcer during daily nursing rounds. The ER provider swabbed the wound for culture (which measured at 7cm in largest diameter); then cleaned the site before painting with povidone around the entire sacrum to reduce cutaneous bacterial load. The provider made an elliptical excision with 3mm margins around the outer edge of the ulcer and removed the lesion in its entirety. Further examination revealed deep tissue damage, prompting muscle and segmental bone removal. The wound was then closed using a layered skin flap closure. What CPT coding and ICD-10-CM coding is reported?

- A. 15935, L89.156
- B. 15931, L89.153
- C. 15937, L89.156
- D. 15933, L89.153

正解: C

解説:

In this scenario, the procedure involved the excision of a large sacral pressure ulcer with deep tissue damage that required muscle and bone removal and was followed by a layered flap closure. The coding reflects both the extent of the ulcer and the procedure performed:

1. CPT Code 15937: This code describes excision of a pressure ulcer with muscle and bone removal followed by flap closure, which matches the detailed procedure performed on the sacral ulcer.
2. ICD-10-CM Code L89.156: This code is used for a stage 4 sacral pressure ulcer, indicating the presence of deep tissue damage down to muscle and possibly bone, which aligns with the clinical findings.

Explanation of other options:

A . 15933, L89.153 and B. 15931, L89.153: These codes do not adequately describe the excision with muscle and bone removal nor the stage 4 severity of the ulcer.

C . 15935, L89.156: Although L89.156 is correct for a stage 4 ulcer, 15935 does not account for both muscle and bone excision with flap closure.

Therefore, the correct answer is D. 15937, L89.156, accurately capturing the procedure performed and the severity of the ulcer.

質問 # 22

The gynecologist performs a colposcopy of the cervix including biopsy and endocervical curettage. What CPT code is reported?

- A. 0
- B. 1
- C. 2
- D. 3

正解: B

解説:

Colposcopy of the Cervix: This involves a visual examination of the cervix using a colposcope.

Biopsy and Endocervical Curettage: The procedures performed include taking a biopsy and scraping the lining of the cervical canal.

CPT Code 57454: This code represents a colposcopy of the cervix with biopsy and endocervical curettage.

Reference:

AMA's CPT Professional Edition (current year)

質問 # 23

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CPC試験に合格することが、最高のキャリアの機会です。関連する証明書の豊富な経験は、企業があなたの選択のために一連の専門的な空席を開くために重要です。状況によってはあなたを助けたり破ったりすることができるこの運命的な試験について、当社はこれらのCPC練習資料を説明責任を持って作成しました。他の場所

に受け入れられる可能性が高くなり、より高い給料や受け入れが得られることを理解しています。

CPC受験料過去問: <https://www.passtest.jp/AAPC/CPC-shiken.html>

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