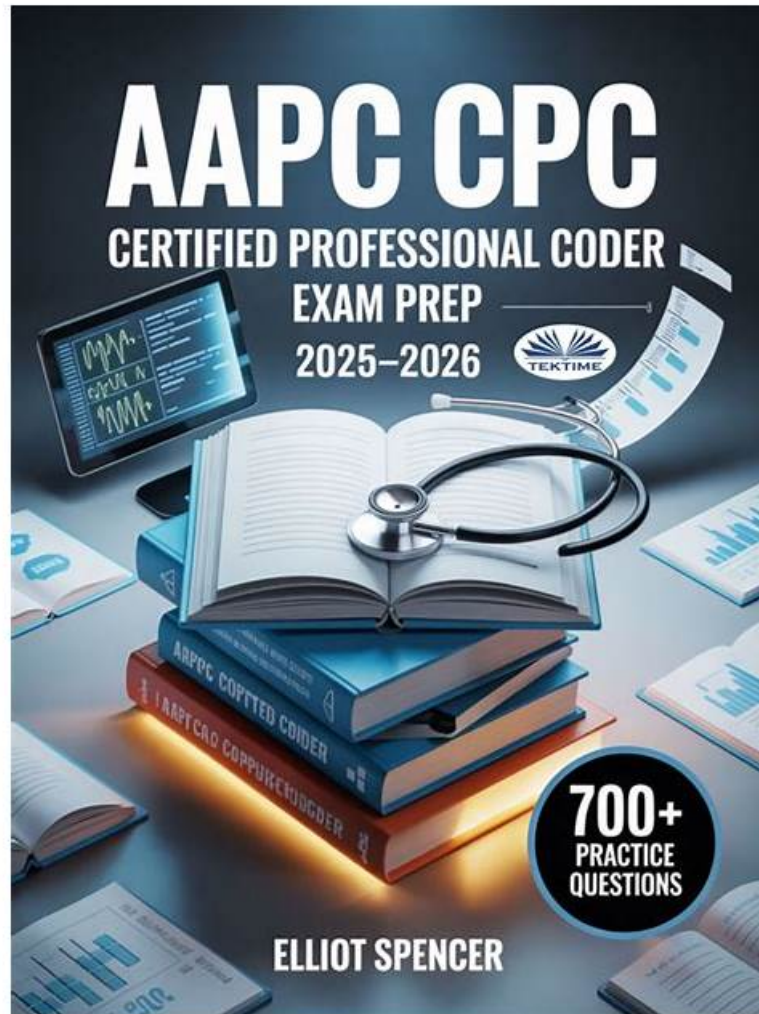


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## AAPC Certified Professional Coder (CPC) Exam Sample Questions (Q302-Q307):

### NEW QUESTION # 302

A 46-year-old female is admitted to the hospital by her urologist for a left ureteral calculus. The urologist visits her again on day two and performs a low for number and complexity of problems addressed, minimal for amount and/or complexity of data to be reviewed and analyzed, and moderate for risk of complications.

What E/M service is reported for day two?

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

**Answer: B**

Explanation:

1. E/M Service Code Selection:

On day two, the urologist provided an evaluation and management (E/M) service for a hospitalized patient with a low level for the number and complexity of problems addressed, minimal complexity for data reviewed, and moderate risk of complications.

CPTCode 99232 is for a subsequent hospital care E/M service with a level of "Expanded Problem Focused" history and examination, with Medical Decision Making (MDM) of Moderate complexity. This matches the description provided, as the MDM includes a low number of problems, minimal data, and moderate risk.

2. Rationale for Excluding Other Options:

Code 99233 is for a subsequent hospital care visit with high complexity MDM (e.g., addressing a high number of problems or higher levels of data review), which does not align with the moderate risk described here.

Code 99221 is for initial hospital care, not a subsequent visit.

Code 99231 represents a lower level of subsequent hospital care with straightforward or low complexity MDM, which does not meet the moderate risk criteria in this scenario.

3. AAPC and CPTCoding Guidelines:

AAPC and CPTguidelines indicate 99232 as appropriate for subsequent hospital visits with moderate MDM, such as this visit with moderate risk but minimal data complexity.

Therefore, the correct answer is B. 99232.

### NEW QUESTION # 303

A 7-year-old boy is brought to the pediatric clinic by his mother. She reported that her son is complaining of discomfort in both ears and loss of hearing in the left ear for the past two days. The pediatrician diagnosis is impacted cerumen. Pediatrician with the mother's consent removes impacted cerumen using water irrigation In the right ear. For the left ear the cerumen impaction is removed using instrumentation.

What CPT coding is reported'

- A. 69209-LT.69210-RT
- B. 69209-50
- C. 69210-50
- **D. 69209-RT.69210-LT**

**Answer: D**

Explanation:

69209-RT - Removal of impacted cerumen using irrigation

69210-LT - Removal of impacted cerumen using instrumentation

Coding Rules Applied:

Different techniques → different CPT codes

Different ears → RT/LT modifiers, not modifier -50

Why Other Options Are Incorrect:

A - Modifiers reversed

B / D - Modifier -50 inappropriate when different CPT codes are used

### NEW QUESTION # 304

In rhinoplasty:

- A. The lips are reconstructed
- B. The chin is reconstructed
- C. The nose is reconstructed
- D. The brow is reconstructed

**Answer: C**

### NEW QUESTION # 305

A patient receives 200 mg IM Depo-Testosterone.  
What HCPCS Level II coding is reported?

- A. J1071, 96372
- B. J1071, 90471
- C. J1071 ×200, 90471
- D. J1071 ×200, 96372

**Answer: A**

Explanation:

J1071 = Testosterone cypionate, 200 mg per unit  
96372 = Therapeutic IM injection  
Vaccine admin codes do not apply  
ANESTHESIA

### NEW QUESTION # 306

A patient undergoes a percutaneous liver biopsy with ultrasound guidance for primary biliary cirrhosis.  
What CPT and ICD-10-CM codes are reported?

- A. 47000, 76942, K74.3
- B. 47100, K74.5
- C. 47000, K74.5
- D. 47000, 10005, 76942, K74.3

**Answer: A**

Explanation:

47000 = Percutaneous liver biopsy  
76942 = Ultrasound guidance  
K74.3 = Primary biliary cirrhosis

### NEW QUESTION # 307

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