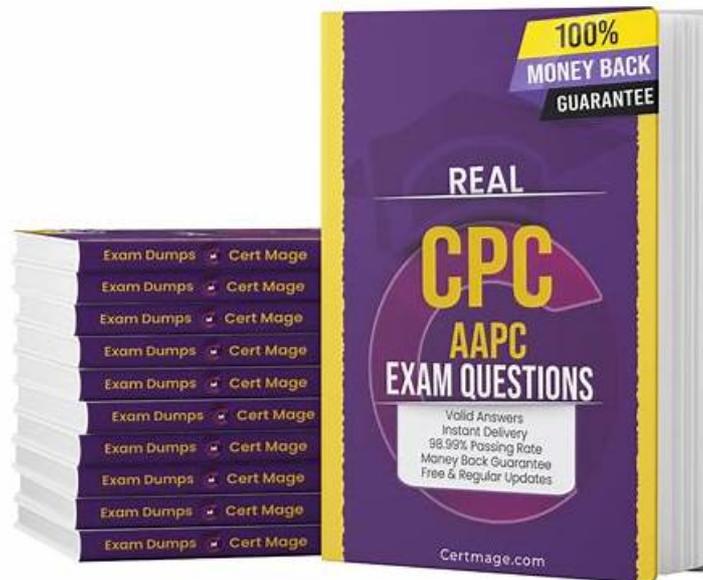


CPC Dumps & CPC Praxisprüfung



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Wenn man an sich glaubt, kann man wirklich was erreichen. Der Grund, warum DeutschPrüfung jedem IT-Fachmann helfen kann, liegt in seiner Fähigkeit. Die Prüfungsmaterialien zur AAPC CPC Zertifizierung von DeutschPrüfung können Ihnen zum Erfolg verhelfen. Jede Beschränkung fängt im Herzen an. Wenn Sie die AAPC CPC Prüfung bestehen wollen, werden Sie DeutschPrüfung wählen. Eigentlich ist die Distanz zwischen Erfolg und Niederlage nicht weit. DeutschPrüfung führt Sie zum Erfolg.

AAPC CPC Prüfungsplan:

Thema	Einzelheiten
Thema 1	<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.
Thema 2	<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.
Thema 3	<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.
Thema 4	<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.

Thema 5	<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.
Thema 6	<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.
Thema 7	<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.
Thema 8	<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.
Thema 9	<ul style="list-style-type: none"> • Accurate ICD-10-CM Coding: This section of the exam measures the skills of medical coders and focuses on the precise assignment of diagnosis codes using the ICD-10-CM system. The goal is to ensure accurate representation of patient conditions, proper sequencing, and a clear linkage between diagnoses and services.
Thema 10	<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.
Thema 11	<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.
Thema 12	<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.
Thema 13	<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 middle • inner ear, as well as related diagnostic procedures.
Thema 14	<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 Dumps <<

CPC Aktuelle Prüfung - CPC Prüfungsguide & CPC Praxisprüfung

Zurzeit ist AAPC CPC Zertifizierungsprüfung eine sehr populäre Prüfung. Wollen die CPC Zertifizierungsprüfung ablegen? Tatsächlich ist diese Prüfung sehr schwierig. Aber es bedeutet nicht, dass Sie diese Prüfung mit guter Note bestehen können. Wollen Sie die Methode, die CPC Prüfung sehr leicht zu bestehen, kennenzulernen? Das ist AAPC CPC dumps von DeutschPrüfung.

AAPC Certified Professional Coder (CPC) Exam CPC Prüfungsfragen mit Lösungen (Q209-Q214):

209. Frage

Mr. Roland has difficulty breathing and congestion with a productive cough. The physician takes frontal and lateral view chest X-rays in the office (the equipment is owned by the physician group). The physician reads the X-rays and determines a diagnosis of walking pneumonia. The physician's interpretation is placed in the patient's chart.

How does the physician bill for the chest X-ray?

- A. 71046-TC
- **B. 71046-26**
- C. 71046-26-TC
- D. 0

Antwort: B

210. Frage

A patient with empyema requires a Schede thoracoplasty.

What CPT code is reported for this procedure?

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

Antwort: D

Begründung:

The Schede thoracoplasty for empyema is accurately described by CPT code 32905, which covers the radical procedure involving the resection of multiple ribs and often the obliteration of the pleural cavity to treat chronic empyema.

References:

* AMA's CPT Professional Edition (current year)

211. Frage

A 42-year-old with chronic left trochanteric bursitis is scheduled to receive an injection at the Pain Clinic. A 22-gauge spinal needle is introduced into the trochanteric bursa under ultrasonic guidance, and a total volume of 8 cc of normal saline and 40 mg of Kenalog was injected.

What CPT code should be reported for the surgical procedure?

- A. 20611-LT, 76942
- B. 20610-LT
- **C. 20611-LT**
- D. 20610-LT, 76942

Antwort: C

212. Frage

Preoperative diagnosis: Right thigh benign congenital hairy nevus. *1

Postoperative diagnosis: Right thigh benign congenital hairy 0 nevus.

Operation performed: Excision of right thigh benign congenital >1 nevus, excision size with margins 4.5 cm and closure size 5 cm.

Anesthesia: General.0

Intraoperative antibiotics: Ancef.0

Indications: The patient is a 5-year-old girl who presented with her parents for evaluation of her right thigh congenital nevus. It has been followed by pediatrics and thought to have changed over the past year. Family requested excision. They understood the risks involved, which included but were not limited to risks of general anesthesia, infection, bleeding, wound dehiscence, and poor scar formation. They understood the scar would likely widen as the child grows because of the location of it and because of the age of the patient. They consented to proceed.

Description of procedure: The patient was seen preoperatively in > I the holding area, identified, and then brought to the operating room. Once adequate general anesthesia had been induced, the patient's right thigh was prepped and draped in standard surgical fashion. An elliptical excision measuring 6 x 1.8 cm had been marked. This was injected with Lidocaine with epinephrine, total of 6

cc of 1% with 1:100,000. After an adequate amount of time, a #15 blade was used to sharply excise this full thickness. This was passed to pathology for review. The wound required # limited undermining in the deep subcutaneous plane on both sides for approximately 1.5 cm in order to allow mobilization of the skin for closure. The skin was then closed in a layered fashion using 3-0 Vicryl on the dermis and then 4-0 Monocryl running subcuticular in the skin, the wound was cleaned and dressed with Dermabond and Steri-Strips.

The patient was then cleaned and turned over to anesthesia for S extubation.

She was extubated successfully in the operating room and taken S to the recovery room in stable condition.

There were no complications.

What E/M coding is reported?

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

Antwort: B

Begründung:

Emergency department visit with high severity

99285 = High complexity ED E/M

213. Frage

(Patient presents to the office for the removal of 15 actinic keratosis lesions. The provider destroys these lesions with laser surgery.

What CPT coding is reported for this visit?)

- A. 0
- B. 17110, 17111
- C. 1
- D. 17000, 17003

Antwort: A

Begründung:

Actinic keratoses (AKs) are coded using the premalignant lesion destruction CPT family 17000-17004, regardless of the destruction method (e.g., laser, cryotherapy, electrocautery), as long as the intent is destruction. Coding is based on the number of lesions treated in that session: 17000 covers the first lesion,

17003 is an add-on code for 2-14 additional lesions, and 17004 is used when treating 15 or more lesions.

Because the encounter documents destruction of 15 AK lesions, CPT requires reporting 17004 only (not 17000

+ multiple units of 17003). Codes 17110/17111 are for destruction of benign lesions (e.g., warts, molluscum), which is the wrong lesion category. On CPC exams, the key is matching premalignant vs benign and then selecting the correct code by lesion count threshold—here the threshold is met for 17004.

214. Frage

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In dieser Gesellschaft, wo es zahlreiche Talente gibt, muss man immer noch seine Kenntnisse verbessern. Und der Bedarf an den spitzen IT-Fachleuten nimmt weiter zu. In der internationalen Gesellschaft ist es auch so. So wollen viele Leute die AAPC CPC Zertifizierungsprüfung bestehen. Aber es ist nicht so leicht. Jedoch ist sehr wahrscheinlich, dass Sie gute Schulungsunterlagen wählen und die Prüfung somit bestehen können. Unsere Schulungsunterlagen zur AAPC CPC Zertifizierungsprüfung von DeutschPrüfung befähigen Sie, diese Zertifizierung zu bestehen. Die Schulungsunterlagen von DeutschPrüfung hat von vielen Kandidaten überprüft. Sie sind in der internationalen Gesellschaft immer Vorläufer. Wenn Sie die AAPC CPC Zertifizierungsprüfung bestehen wollen, schicken doch die Schulungsunterlagen zur AAPC CPC Zertifizierungsprüfung in den Warenkorb.

CPC Praxisprüfung: <https://www.deutschpruefung.com/CPC-deutsch-pruefungsfragen.html>

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