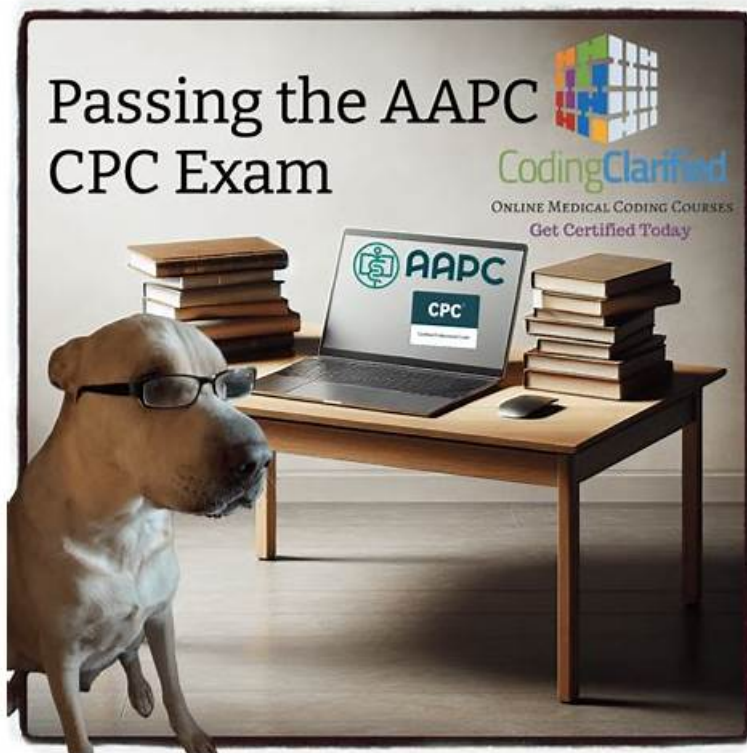


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## AAPC Certified Professional Coder (CPC) Exam Sample Questions (Q254-Q259):

### NEW QUESTION # 254

A patient was in a car accident as the driver and suffered a concussion with brief loss of consciousness (15 minutes). What ICD-10-CM codes are reported?

- A. S06.0X1A, V47.5XXA
- **B. S06.0X1A, V40.5XXA, V47.5XXA**
- C. S06.0X9A, V40.6XXA, V47.6XXA
- D. S06.0X9A, V47.6XXA

**Answer: B**

Explanation:

S06.0X1A = Concussion with brief LOC

V40.5XXA = Driver injured in collision with fixed object

V47.5XXA = Car accident, driver External cause codes correctly describe mechanism and role.

### NEW QUESTION # 255

A patient with three thyroid nodules is seen for an FNA biopsy. Using ultrasonic guidance, the provider inserts a 25-gauge needle into each nodule. Nodular tissue is aspirated and sent to pathology.

What CPT coding reported?

- A. 10006 x 3
- B. 10005, 10006 x 2, 76942
- C. 10021, 10004 x 2, 76942
- **D. 10005, 10006 x 2**

**Answer: D**

### NEW QUESTION # 256

A patient has nausea with several episodes of emesis along with severe stomach pain due to dehydration. Normal saline is infused in the same bag with 2 mg ondansetron to help with the nausea. Then a dose of 15 mg ketorolac tromethamine was given for the stomach pain.

What J codes are reported for these services?

- A. J2405 x 2, J1835 x 15
- B. J2405 x 2, J1885
- **C. J2405, J1885**
- D. J2405, J1885 x 15

**Answer: C**

Explanation:

The correct J codes are selected based on the specific medications administered and their quantities:

J2405 represents "ondansetron, 1 mg," and since the patient received a 2 mg dose, J2405 is reported once with a quantity of 2 mg.

J1885 represents "ketorolac tromethamine, 15 mg," which matches the single 15 mg dose administered to the patient, so J1885 is reported once.

Each J code is billed according to the precise dosage given, as no multipliers are required beyond the single-unit codes provided in choice A, making it the correct answer.

### NEW QUESTION # 257

(A patient arrives with pain due to a chest injury from blunt force. The provider takes X-ray imaging with 6 views of the chest. What CPT coding is reported?)

- A. 71048 x 6
- B. 0
- **C. 1**
- D. 71047 x 2

**Answer: C**

Explanation:

Chest radiography codes are selected by the number of views performed. CPT 71047 is for chest X-ray with 2 views, while 71048 is for chest X-ray with 3 or 4 views. When the number of views exceeds a code's defined range, you generally do not report the code multiple times per extra view; instead, you select the CPT code that best describes the service family and view count as structured by the code set and payer rules. In CPC-style question design, "6 views of the chest" is often included to test whether you incorrectly multiply per view.

The answer options provided do not include a dedicated "6+ view chest" code, and the correct choice in this question's answer set is to report 71048 (the higher view-count chest radiograph code offered) once, not "x6" or doubling 2-view codes. Option A and B reflect incorrect per-view/per-unit reporting. Therefore, within the provided choices, the correct answer is 71048.

#### NEW QUESTION # 258

Regarding the CPT Surgery Guidelines for a surgical code designated as a "Separate Procedure", which statement is FALSE?

- A. To identify a service designated as a "separate procedure" that is reported with an unrelated primary service, append modifier 79 to the code.
- B. When a procedure is designated as a separate procedure and carried out independently or considered to be unrelated from the total primary service, it may be reported.
- C. A service that is commonly carried out as an integral component of a total service or procedure is identified by the inclusion of the term "separate procedure."
- D. The codes designated as "separate procedure" should not be reported in addition to the code for the total procedure or service of which it is an integral component.

**Answer: A**

Explanation:

In CPT Surgery Guidelines, a "separate procedure" code is used to identify a service that is typically performed as part of a larger procedure and should not be coded separately when it is an integral component of that primary service. However, it may be reported independently if it is performed alone or is unrelated to the primary procedure.

A: is true because a separate procedure may be reported if it is performed independently or is unrelated to the primary procedure.

B: is true, as "separate procedure" codes are not reported in addition to the code for the primary procedure when they are part of the total procedure.

C: is correct because "separate procedure" designation indicates that the service is often part of a more comprehensive procedure but can be reported separately when performed alone.

D: is false because modifier 79 is not used for unrelated "separate procedures." Instead, modifier 59 is typically used to indicate a "distinct procedural service" when reporting a separate procedure that is unrelated to the primary service.

Therefore, the correct answer is D. To identify a service designated as a "separate procedure" that is reported with an unrelated primary service, append modifier 79 to the code.

#### NEW QUESTION # 259

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