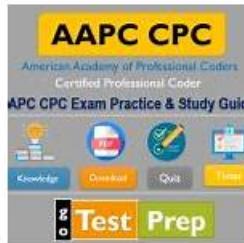


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Medical Tests American Academy of Professional Coders: Certified Professional Coder Sample Questions (Q58-Q63):

NEW QUESTION # 58

The appendix is removed through an abdominal incision due to metastatic colon malignancy. How should this be reported?

- A. 44970, C78.5
- B. 44950, C78.5, C18.9
- C. 44970, C18.9, C78.5
- D. 44950, C78.5

Answer: B

Explanation:

An open appendectomy procedure is reported with CPT 44950. A metastatic colon malignancy is a cancer that began in the colon but has spread to other areas. In this scenario, that means that the primary malignancy is the colon, and the secondary malignancy is the appendix.

Additionally, ICD-IO-CM guidelines state that when "treatment is directed toward the metastatic site only, the metastatic site is designated as the principal/first-listed diagnosis. The primary malignancy is coded as an additional code." The malignancy codes do not specifically state

"appendix," but the ICD-IO-CM coding crosswalk in the neoplasm table assigns this diagnosis as C78.5 secondary malignant neoplasm of large intestine and rectum.

NEW QUESTION # 59

A physician inserts a chest tube through the right chest wall and into the pleural cavity to release trapped air in a 19-year-old patient with recurring pneumothorax. A second physician assists in providing moderate sedation. In total, the procedure took 8 minutes.

What ICD-IO-CM and CPT codes should the provider report?

- A. 32550, 193.9
- B. 32551, 99156-59, 193.9
- C. 32550-62, 99156, 193.83
- D. 32551, 193.83

Answer: D

Explanation:

The code description "tube thoracostomy" is not clearly stated in the documentation, but CPT crosswalk for a 'tube placement' followed by "chest" leads the coder to CPT 32551. CPT 32550 describes the insertion of a catheter that allows the patient to drain pleural fluid in an outpatient setting. Moderate sedation can be separately billed but only by the provider administering the medication. The 193 series is circumstantial (e.g., spontaneous, acute). Even though the term "recurrent" is not used, it does describe the background of the patient's condition and so would fall into the other specified diagnosis rather than unspecified.

NEW QUESTION # 60

Alzheimer's disease with early onset usually presents itself in which age group?

- A. 50-60 years old
- B. 60-70 years old
- C. 30-40 years old
- D. 40-50 years old

Answer: D

Explanation:

According to CPT, the rarest form of Alzheimer's disease occurs before 30 years of age.

Early onset Alzheimer's disease usually affects those between the age of 40 and 50 years old. The most common form of Alzheimer's disease occurs after the age of 65 and is largely contributed to a combination of environmental and genetic factors.

NEW QUESTION # 61

A female patient presents to her obstetrical office 32 -weeks pregnant for a bi-weekly ultrasound. Code the following technician's report:

Fetal views obtained via transabdominal ultrasound as follows:

BPD: 32 mm

Femur Length: 63 mm

Head Circumference: 288 mm

Abdominal Circumference: 270 mm

BPP 8/8

NST from 11:15 to 12:17, showing 160 BPM and positive movement activity Doppler shows adequate systolic and diastolic flow velocities of the fetal umbilical artery.

- A. 76816, 76818, 76820
- B. 76815, 78819, 76820
- C. 76815-TC, 76819-TC, 76820-TC
- D. 76816-TC, 76816-TC, 76820-TC

Answer: A

Explanation:

CPT 76815 is a limited ultrasound, in which only the fetal heartbeat, position, placental location, and/or volume of amniotic fluid are evaluated. In this scenario, much more was done than a limited study. The ultrasound technician documented age-appropriate fetal measurements, which are supported by CPT 76816. A biophysical profile (BPP) was also done, which monitors the fetus's movements, tone, and breathing as well as evaluates the volume of amniotic fluid. Each of these elements counts as 2 units of grading to evaluate the general well-being of the fetus. The desired score of a BPP is 8/8. Because a fetal nonstress test (NST) was completed in conjunction with a BPP, report CPT 76818 instead of CPT 76819. Modifier TC is used to reflect that only a technical component of the procedure was completed. However, because the patient received these services in an obstetrical office that employs the physicians providing prenatal care and owns the ultrasound equipment the code should be submitted without modifiers TC or 26 to receive 100% reimbursement.

NEW QUESTION # 62

A 22-year-old patient presents with a 5.5 cm gaping laceration on the right forearm and a 2 cm superficial laceration on the right wrist caused by a table saw. A local anesthetic is injected around both laceration sites. The physician irrigates the laceration on the wrist before closing the wound with a tissue adhesive and then performs an extensive cleaning and single-layer closure with sutures on the forearm. What should be coded for this encounter?

- A. 12001, 12032-59, S61.411AS41.111A W31.2XXA
- B. 12032, 97597, G0168, S41.111A, S61.411A W31.2XXA
- C. 12032, 12001-59, S41.111A S61.411A W31.2XXA
- D. 12032, S41.111A, S61.411A, W31.2kX.A

Answer: C

Explanation:

A "gaping" injury and/or "single-layer closure" is indicative of an intermediate repair and a "superficial" injury and/or use of a "tissue adhesive" is indicative of a simple repair. Because the repairs are not in the same classification, each repair is reported in a single code, sequenced from the most to the least severe (eliminating answers B and D), with modifier 59 appended to the less complicated procedure(s). Local anesthesia is included in these procedures, as is debridement unless the provider specifically indicates that it is extensive. In answer A, an HCPC's code for tissue adhesive would be reported only if the patient had Medicare.

NEW QUESTION # 63

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