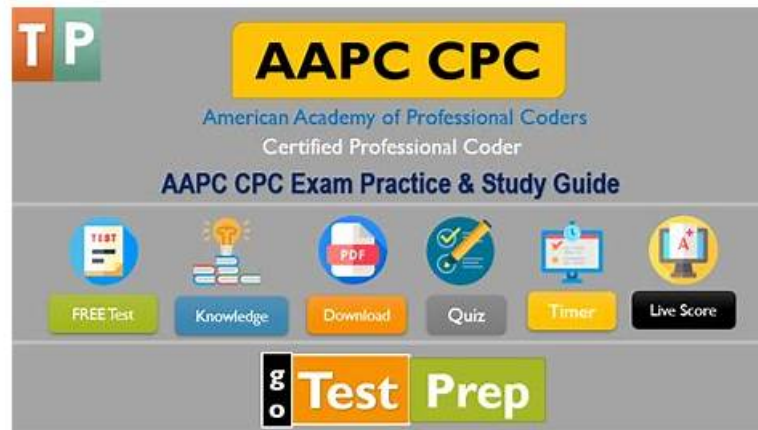


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Medical Tests American Academy of Professional Coders: Certified Professional Coder Sample Questions (Q112-Q117):

NEW QUESTION # 112

Which patient is receiving critical care services?

- A. A 60-year-old male is admitted with an acute chronic heart failure exacerbation causing hypoxic respiratory failure. The patient is intubated, sedated, and started on 50 mg ofertapenem for a potential lung infection.
- B. A 67 -year-old female receives chronic ventilator therapy after a cerebral infarction that caused hemorrhage in the brain.
- C. A 93 -year-old male is admitted to the intensive care unit for monitoring after a coronaryangioplasty procedure that was performed to relieve symptoms of atherosclerosis.
- D. A 47 -year-old female with a history of unrepaired chronic heart disease and anemia has anoxxygen saturation level of 80. She is put on a nasal cannula and given a blood transfusion to improve her oxygen-carrying capacity and oxygen saturation level.

Answer: A

Explanation:

CPT guidelines define critical care as an illness or injury that acutely impairs one or more vital organ systems, where there is a high probability of imminent or life-threatening deterioration in the patient's condition. Additionally, to report a critical care service, the documentation should provide evidence of high-complexity medical decision-making (e.g., endotracheal tube insertion, defibrillation, fluid administration for shock, Narcan, etc.). Answer B is the only option listed that contains documentation to support critical care services.

This male patient has Vyvo life-threatening conditions, in which emergent intervention is provided to prevent further deterioration. In answer A the female patient may have a life-threatening condition; however, administering oxygen via a nasal cannula and/or transfusing blood does not qualify as critical care. Management of a patient who receives chronic ventilator therapy is also not considered critical care because the medical decision-making involved in the therapy is quite low.

The care a patient receives after having surgery would be considered routine and postoperative, regardless of where they are sent, unless a complication arises in which one or more of the vital organ systems begins to deteriorate in a fashion that poses a threat to life.

NEW QUESTION # 113

A patient with right knee pain is seen in a physician's office for an x-ray. Anteroposterior and lateral views of the right knee were obtained by the technician, and images confirm right knee pain secondary to degenerative osteoarthritis. Which CPT and ICD-IO-CM code(s) should be reported?

- A. 73560-RT, MI 7.11
- B. 73560-TC-RT, MI 7.11, M25.561
- C. 73560-26-RT, MI 7.11, M25.561
- D. 73560-TC-RT, MI 7.11

Answer: A

Explanation:

The CPT crosswalk for x-ray of knee directs the coder to 73560-73580. Because two views were obtained, the correct code would be 73560 (radiologic examination, knee; 1 or 2 views).

Modifier TC and modifier 26 indicate only technical and professional components; however, because the x-ray was performed in a physician's office, 73560 would be reported without either because the practice provided both components. In terms of diagnosis, the knee pain would not be reported because it is a symptom of a definitive diagnosis.

NEW QUESTION # 114

Assign the appropriate procedure and diagnosis codes for a biopsy of a posterior mediastinal mass that was obtained through an incision at the base of the neck.

- A. 39000, R22.2
- B. 39401, R22.1
- C. 39000, D38.3
- D. 39401, D49.89

Answer: A

Explanation:

The procedure performed was a mediastinotomy with a biopsy, represented by CPT 39000.

CPT code 39401 is reported for a mediastinoscopy, which is the insertion of a scope through an incision in the notch above the sternum. ICD-IO-CM crosswalk for a mass found on the chest wall is R22.-. Although the approach is cervical, the location of the mass is mediastinal, falling under the anatomical site of the trunk.

NEW QUESTION # 115

What is/are the code(s) for the repair of an incarcerated hernia in the inner groin requiring mesh placement on a 32-year-old female patient?

- A. 0
- B. 1

- C. 2
- D. 3

Answer: B

Explanation:

There are several different types of hernias that are categorized by their location. A hernia located in the inner groin is inguinal, and a hernia located on the outer groin is femoral. The repair of an incarcerated inguinal hernia on a 32-year-old patient is coded to CPT 49507. Hernia mesh is used to reduce the risk of recurrence, and implantation of it is inclusive to an inguinal, umbilical, femoral, and laparoscopic hernia repair.

NEW QUESTION # 116

A 72-year-old patient is admitted due to atrial fibrillation. A comprehensive electrophysiology study is completed with fluoroscopic guidance, followed by a cardiac catheter ablation during the same procedure. The procedure took 22 minutes, and the patient was moderately sedated. Which CPT codes should the cardiologist report?

- A. 93650, 93619-26-59, 77001, 99152, 99153
- **B. 93656, 99152**
- C. 93656, 77001, 99152, 99153
- D. 93650, 93619-26-59, 99152

Answer: B

Explanation:

It is common practice to perform both an electrophysiology (EP) study and a cardiac ablation procedure in the same session. These procedures have been bundled in the CPC manual, and the coding of such is dependent on the type of arrhythmia being treated. The EP study and cardiac ablation are not to be reported separately. In this scenario, the patient has atrial fibrillation, which is reported with CPT 93656. When fluoroscopy is used for guidance rather than for diagnostic imaging, it is usually not reported separately from the primary procedure. Moderate sedation can be reported when used, and selection is based on time. CPT 99152 and 99153 are counted in 15-minute intervals. When the procedure does not fall on a 15-minute interval, it must at least meet the halfway point of the time stated to be reported.

NEW QUESTION # 117

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