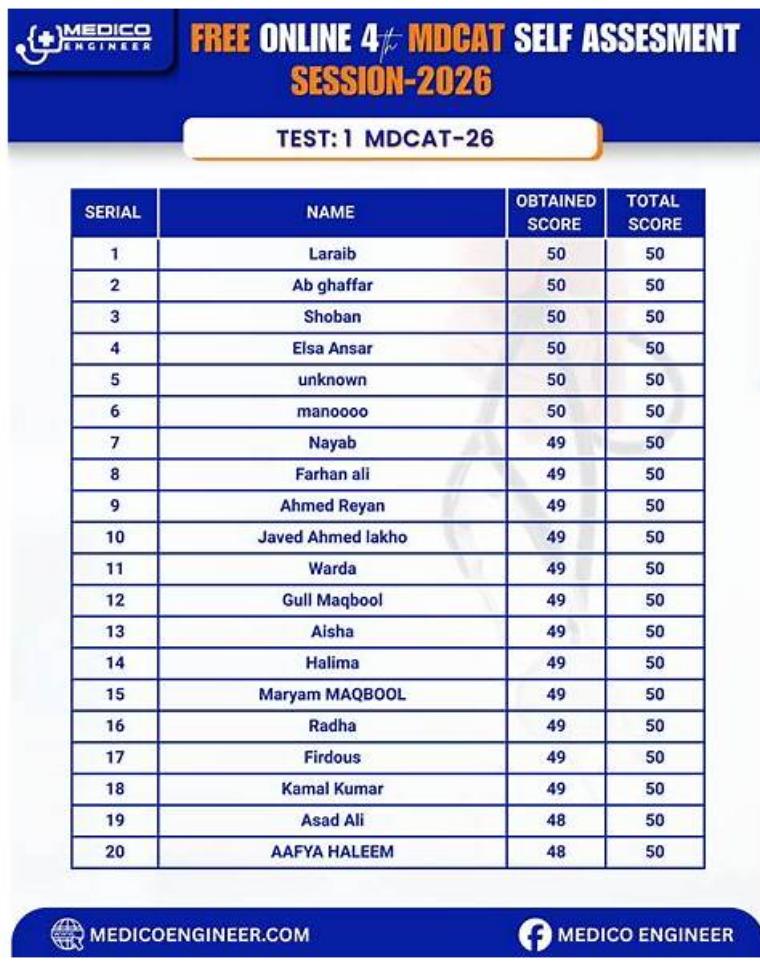


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2	Ab ghaffar	50	50
3	Shoban	50	50
4	Elsa Ansar	50	50
5	unknown	50	50
6	manoooo	50	50
7	Nayab	49	50
8	Farhan ali	49	50
9	Ahmed Reyhan	49	50
10	Javed Ahmed Iakho	49	50
11	Warda	49	50
12	Gull Maqbool	49	50
13	Aisha	49	50
14	Halima	49	50
15	Maryam MAQBOOL	49	50
16	Radha	49	50
17	Firdous	49	50
18	Kamal Kumar	49	50
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Medical Tests American Academy of Professional Coders: Certified Professional Coder Sample Questions (Q116-Q121):

NEW QUESTION # 116

A physician performs a simple repair on a Medicare patient who comes in with a 2.7 cm cut, an open wound, on the neck. The repair is made with Dermabond. Which CPT code(s) should be reported?

- A. 12002, G0168
- B. 0
- C. 99213-25, G0168
- D. G0168

Answer: D

Explanation:

When a wound is repaired with a tissue adhesive, Medicare accepts only the HCPC code G0168. Answers B and C accurately reflect the repair code for a commercial carrier. An E/M would not be added as an additional charge because the patient's encounter was only for the repair, thus eliminating answer D.

NEW QUESTION # 117

What must the documentation for a consultation include?

- A. Which family member prompted the consultation, a written report of the physical findings/recommendations, and the time spent discussing the recommended treatment plan
- B. Who requested the consultation, the consulting providers, professional opinion, and a written report that is provided to the referring physician
- C. Documentation of assumption of care, who requested the consultation, and the consulting providers, professional opinion
- D. The reason for the consultation, the time spent discussing the recommended treatment plan, and a medical decision-making of moderate complexity

Answer: B

Explanation:

Per CPT guidelines, the Office of Inspector General, and Medicare, a consultation must include who requested the consultation, the consulting provider's professional opinion, and a written report of the findings, which is provided to the referring physician. Time can be used to select the level of E/M; however, it is not required if all three components of the documentation are met (history, exam, and medical decision-making). Additionally, once the provider assumes care, a subsequent code appropriate for that place of service would be reported (e.g., 99211-99215) and not a consultation code.

NEW QUESTION # 118

V codes are related to which procedures/products?

- A. Hearing services
- B. Orthotic procedures
- C. Enteral therapy
- D. Durable medical equipment

Answer: A

Explanation:

Durable medical equipment is represented by E codes, orthotic procedures are L codes, and enteral therapy is inclusive to B codes in the HCPC manual.

NEW QUESTION # 119

What is NOT a condition related to the thyroid gland?

- A. Acosta disease
- B. Graves, disease
- C. Hashimoto,s disease
- D. Toxic adenoma

Answer: A

Explanation:

Toxic adenoma E05.2- is a thyroid nodule that may secrete hormones into the body that results in an overactive thyroid. Graves' disease E05.0- is an autoimmune disorder that attacks the thyroid, resulting in overactivity. Hashimoto's disease E06.3 is also an autoimmune disorder:

however, it usually results in an underactive thyroid. Acosta disease T 70.29- is altitude sickness.

Even if a coder is unfamiliar with these terms, by locating the ICD-IO-CM code that correlates to the condition, a coder can infer which body system a diagnosis relates to.

NEW QUESTION # 120

A patient is having difficulties breast-feeding and receives a lactation consultation by a certified lactation consultant under the general supervision of a mid-level practitioner. How should this service be reported?

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

Answer: B

Explanation:

CPT 98960 is used by nonphysician healthcare professionals who provide education to patients that enable them to self-manage established conditions. CPT 99078 could also be used to report lactation services, but these are specifically rendered in a group setting. CPT 98966 is used for healthcare management via the telephone, and CPT 99211 is not considered the most appropriate descriptor for services rendered in this instance.

NEW QUESTION # 121

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