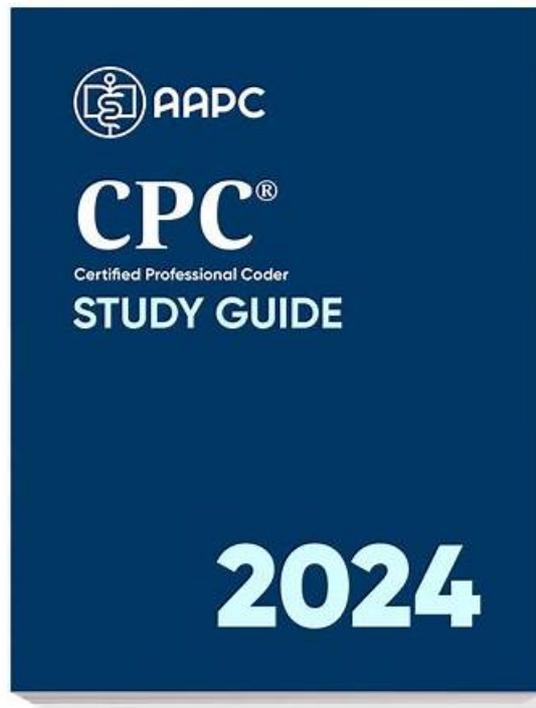


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## Professional Coder Sample Questions (Q36-Q41):

### NEW QUESTION # 36

Which statement is true regarding the diaphragm?

- A. It separates the thoracic cavity from the abdominal cavity.
- B. It forms tendons, ligaments, cartilage, and fat.
- C. It is a collection of organs held together by connective tissue.
- D. It performs an important function in blood flow.

**Answer: A**

Explanation:

The diaphragm separates the thoracic cavity from the abdominal cavity by means of skeletal muscle. When the diaphragm contracts, air is drawn into the lungs. It therefore plays a key role in respiration. The mediastinum is surrounded by loose connective tissue and contains several anatomical structures including the heart. Connective tissue is distributed throughout the body to form tendons, ligaments, cartilage, and fat.

### NEW QUESTION # 37

Code the following procedure note:

A 45-year-old female was referred for a urodynamics study due to complaints of bladder pain and weak urination. The provider places a rectal catheter simultaneously with a urethral catheter and begins to fill the bladder with water.

Using calibrated equipment, cytometry was done with a medium fill rate of 40 cc/ minute. A strong desire to void occurred at 84 cc. and the patient is instructed to void. The provider determines that the maximum urinary flow rate is 12 cc per second with a voiding time of 45 seconds and a voided volume of 102 cc. She voided with a sustained detrusor pressure. An abdominal pressure measurement was also taken, indicating no urinary leaking with abdominal straining. EMG patches were placed on the anal sphincter and found to be elevated with increased intra- abdominal pressure. All catheters and EMG patches were removed, and the procedure was completed without complications. A report will be forwarded to the referring provider, who will provide the interpretation of the results to the patient.

- A. 51728-TC, 51784-TC, 51797-TC
- B. 51726-TC, 51784-59-TC, 51797-59-TC, 51741-59-TC
- C. 51726-TC, 51784-51-TC, 51797-51-TC
- D. 51728-TC, 51784-TC, 51797-TC, 51741-TC

**Answer: D**

Explanation:

A urodynamics study is a diagnostic test to evaluate the function of the bladder. When performed using calibrated equipment, it becomes known as a complex cystometrogram (51726-

51729). In CPT code 51728, a complex cystometrogram is performed in conjunction with voiding pressure studies. In the provider's documentation, the bladder is filled with water, and voiding times and volume are recorded, thus fulfilling the requirements for this code. CPT code 51726 in answers A and B only describe a complex cystometrogram without the voiding pressure studies. Electromyography (EMG) studies were performed without a needle to evaluate pelvic floor activity and are represented by 51784. An intraabdominal voiding pressure study (51797) can be inferred in that the provider had earlier inserted a rectal catheter and, after instructing the patient to cough, obtained an abdominal pressure measurement. A complex urinary flow study (51741) was performed in obtaining the maximum urinary flow rate through calibrated equipment. This procedure is missing in answers B and C. Modifier TC (indicating only a technical component) is amended on all the procedures because the provider is not interpreting the results to the patient.

Modifiers 51 and/or 59 is not amended on any procedure (A and B) because these are routinely billed together.

### NEW QUESTION # 38

A young man is triaged in the emergency room after sustaining multiple injuries in a car accident. The physician performs the following limited exams with image documentation: an abdominal and retroperitoneal ultrasound, a transthoracic echocardiography, and a chest ultrasound. He indicates in his report that all findings are normal. What charges should the provider submit to the insurance company?

- A. 93308-26, 76705-26, 76775-26, 76604-26
- B. 93308, 76705-59, 76770-59, 76604-59

- C. 93304-26, 76705-26, 76775-26, 76604-26
- D. 93304-TC, 76700-TC, 76770-TC, 76604-TC

**Answer: A**

Explanation:

CPT code 93304 describes an echocardiography used to evaluate a congenital defect. In this case, the provider is screening for any trauma-related injuries to the heart. Bearing in mind that the study is limited leads you to CPT 93308. Modifier 26 is used on all CPT codes because the procedures are being performed in a hospital setting. Therefore, only the professional component of the service should be billed. Modifier TC is reported by the entity providing the equipment, which in this case would be the hospital. Modifier 59 is not necessary because the procedures are routinely done in conjunction with each other.

#### NEW QUESTION # 39

Which antibody test results indicate a current, acute infection?

- A. IgG positive, IgM positive
- B. IgG negative, IgM negative
- C. IgG positive, IgM positive
- D. IgM positive, IgG negative

**Answer: D**

Explanation:

Understanding immunology and antibody results are imperative to proper code selection and to be able to support any necessary repeat testing. Antibody isotypes IgM assist in attacking infectious pathogens and are indicative of an acute infection. Antibody isotypes IgG are formed as an infection subsides and help the body fight against future attacks from the same bacteria. When the results show IgG positive, it indicates immunity. When a patient has an infection, the results will show IgM positive, but as the IgG antibodies haven't fully formed yet to provide the body with immunity, that result will come back negative.

#### NEW QUESTION # 40

A 55-year-old patient is admitted into the hospital for dialysis to treat ESRD. On day 13, the admitting physician spends 25 minutes discussing new management options for the patient's hypertension before sending a nurse to initiate the hemodialysis procedure. What CPT and ICD-IO-CM codes should be reported?

- A. 90935, N18.6, Z99.2
- B. 90937, 112.0, N18.6, Z99.2
- C. 99232, 112.0, N18.6, Z99.2
- D. 90937, 99232, 110, N18.6, Z99.2

**Answer: C**

Explanation:

CPT codes 90935-90937 require the presence of a physician. If a physician visits the patient prior to or after the dialysis treatment but does not document their presence during the hemodialysis services, bill only the appropriate evaluation and management code (CPT 99232).

Additionally, unless otherwise stated, diagnosis selection should reflect the causal relationship that exists between hypertension and ESRD (112.-, N18.-)-they should not be reported as unrelated.

ICD-IO-CM Z99.2 is appended to indicate hemodialysis status.

#### NEW QUESTION # 41

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