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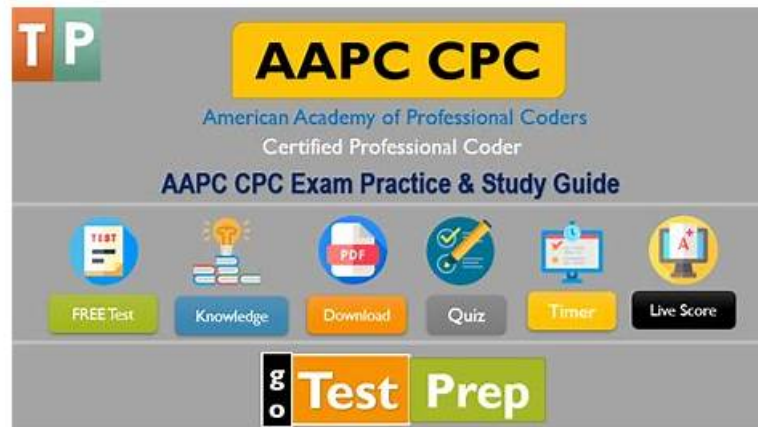
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Medical Tests American Academy of Professional Coders: Certified Professional Coder Sample Questions (Q12-Q17):

NEW QUESTION # 12
A provider documents that he spent 20 minutes with a patient. Based on this, an E/M can be chosen solely based on time.

- A. True
- B. False

Answer: A

Explanation:
The statement is true. According to AMA time documented is considered the minimum time the physician or other qualified health care professional spent on face-to-face and non-face-to-face services. This includes time spent reviewing the patient's medical record, consulting other healthcare professionals, or ordering prescriptions, tests, and/or other services.

NEW QUESTION # 13
Alzheimer's disease with early onset usually presents itself in which age group?

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

Answer: C

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 Alzheimers disease occurs after the age of 65 and is largely contributed to a combination of environmental and genetic factors.

NEW QUESTION # 14
What is NOT a function of the kidneys?

- A. Remove waste
- B. Regulate blood pressure
- C. Propel urine
- D. Filter blood

Answer: C

Explanation:
The role ofthe kidneys is to filter blood before it is transported back to the heart, remove waste materials from food and medication, and regulate blood pressure by excreting excess sodium.
The ureters propel urine from the kidneys into the bladder.

NEW QUESTION # 15
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. 93304-TC, 76700-TC, 76770-TC, 76604-TC
- C. 93308, 76705-59, 76770-59, 76604-59
- D. 93304-26, 76705-26, 76775-26, 76604-26

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 # 16
An obstetrical patient carrying twins is seen. The physician performs a fetal non stress test on each fetus. How should the CPT code(s) be reported?

- A. 59025-22
- B. 59025, 59025-59

- C. 0
- D. 59025-76

Answer: B

Explanation:
Modifier 76 is used to identify a repeated procedure, but the test was performed on a separate fetus. Modifier 22 indicates increased procedural services; however, the services were not increased. Rather, a separate, identifiable test was rendered, and the modifier 59 would therefore apply to the second fetal nonstress test.

NEW QUESTION # 17

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