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Question 1

Question Type: MultipleChoice

A business requires drug testing for cocaine and methamphetamines prior to hiring a job candidate. A single analysis with direct optical observation is performed, followed by a confirmation for cocaine.

Which codes are used for reporting the testing and confirmation?



Answer:

С

Explanation:

For drug testing for cocaine and methamphetamines with a single analysis using direct optical observation and a subsequent confirmation for cocaine, the appropriate codes are:

80305 for the initial drug test (presumptive).

80353 for the confirmation test of cocaine.

AMA's CPT Professional Edition (current year)

Question 2

Question Type: MultipleChoice

A complete cardiac MRI for morphology and function without contrast, followed by contrast with four additional sequences and stress imaging, is performed on a patient with systolic left ventricular congestive heart failure and premature ventricular contractions.

What CPT and ICD-10-CM codes are reported?

Options:

A- 75557, 75559, 150.1, 149.1 B- 75561, 75563, 150.1, 149.1 C- 75563, 150.20, 149.3 D- 75559, 150.20, 149.3

Answer:

В

Explanation:

P2P

Procedure: Complete cardiac MRI for morphology and function without contrast, followed by contrast with four additional sequences and stress imaging.

CPT Codes:

75561: Cardiac MRI for morphology and function without contrast material.

75563: Cardiac MRI with contrast and further sequences.

ICD-10-CM Codes:

I50.1: Left ventricular failure.

I49.1: Premature ventricular contractions.

Code Selection Justification: The CPT codes accurately capture the MRI procedures performed. The ICD-10-CM codes represent the diagnoses of left ventricular failure and premature ventricular contractions.

AMA CPT Professional Edition (current year)

ICD-10-CM (current year)

HCPCS Level II (current year)

Question 3

Question Type: MultipleChoice

A comatose patient is seen in the ER. The patient has a history of depression. Drug testing confirm she overdosed on tricyclic antidepressant drugs doxepin, amoxapine, and clomipramine.

What CPT code is reported?



Options:			
A- 80366			
<mark>B</mark> - 80335			
<mark>C-</mark> 80332			
D- 80338			

Answer:

А



Explanation:

For a comatose patient who has overdosed on tricyclic antidepressant drugs (doxepin, amoxapine, and clomipramine), the correct CPT code is 80366. This code covers drug testing for tricyclic antidepressants, which includes the specific drugs mentioned in the scenario.

AMA's CPT Professional Edition (current year)

Question 4

Question Type: MultipleChoice

A 65-year-old man had a right axillary block by the anesthesiologist. When the arm was totally numb, the arm was prepped and draped, and the surgeon performed tendon repairs of the right first, second, and third fingers. The anesthesiologist monitored the patient throughout the case.

What anesthesia code is reported?



Options:

- A- 01830
- <mark>B-</mark> 01820
- C- 01810
- D- 01840

Answer:

Explanation:

The anesthesia code for an axillary block for procedures on the upper arm and elbow, which includes the monitoring by the anesthesiologist throughout the procedure, is 01830. This code is appropriate for anesthesia for all procedures on nerves, muscles, tendons, fascia, and bursae of the shoulder and axilla.

CPT Professional Edition, AMA

Anesthesia Coding Guidelines

Question 5

Question Type: MultipleChoice

The procedure is performed at an outpatient radiology department. From a left femoral access, the catheter is placed in the abdominal aorta and is then selectively placed in the celiac trunk and manipulated up into the common hepatic artery for an abdominal angiography. Dye is injected, and imaging is obtained. The provider performs the supervision and interpretation.

What CPT codes are reported?

Options: A- 36246, 75716-26 B- 36246, 75726-26 C- 36246, 75741-26 Answer: B

Explanation:

Procedure: Abdominal aorta catheterization and selective placement in the celiac trunk for angiography.

CPT Codes:

36246: This code is for the catheter placement in the abdominal aorta.

75726-26: This code represents the abdominal angiography with supervision and interpretation,

with the -26 modifier indicating the professional component.

Code Selection Justification: The procedure involves the catheterization of the abdominal aorta and the specific imaging performed with supervision and interpretation.

AMA CPT Professional Edition (current year)

ICD-10-CM (current year)

HCPCS Level II (current year)

Question 6

Question Type: MultipleChoice

View MR 099401

MR 099401

Established Patient Office Visit

Chief Complaint: Patient presents with bilateral thyroid nodules.

History of present illness: A 54-year-old patient is here for evaluation of bilateral thyroid nodules. Thyroid ultrasound was done last week which showed multiple thyroid masses likely due to multinodular goiter. Patient stated that she can "feel" the nodules on the left side of her thyroid. Patient denies difficulty swallowing and she denies unexplained weight loss or gain. Patient does have a family history of thyroid cancer in her maternal grandmother. She gives no other problems at this time other than a palpable right-sided thyroid mass.

Review of Systems:

Constitutional: Negative for chill<mark>s, fever, an</mark>d unexpected weight change.

HENT: Negative for hearing loss, trouble swallowing and voice change.

Gastrointestinal: Negative for abdominal distention, abdominal pain, anal bleeding, blood in stool, constipation, diarrhea, nausea, rectal pain, and vomiting

Endocrine: Negative for cold Intolerance and heat intolerance.

Physical Exam:

Vitals: BP: 140/72, Pulse: 96, Resp: 16, Temp: 97.6 F (36.4 C), Temporal SpO2: 97%

Weight: 89.8 kg (198 lbs), Height: 165.1 cm (65")

General Appearance: Alert, cooperative, in no acute distress

Head: Normocephalic, without obvious abnormality, atraumatic

Throat: No oral lesions, no thrush, oral mucosa moist

Neck: No adenopathy, supple, trachea midline, thyromegaly is present, no carotid bruit, no JVD

Lungs: Clear to auscultation, respirations regular, even, and unlabored

Heart: Regular rhythm and normal rate, normal S1 and S2, no murmur, no gallop, no rub, no click

Lymph nodes: No palpable adenopathy

ASSESSMENT/PLAN:

1) Multinodular goiter - the patient will have a percutaneous biopsy performed (minor procedure).

What E/M code is reported for this encounter?



Options:

A- 99212

B- 99214 C- 99213

D- 99215

Answer:

В

Explanation:

The patient is an established patient presenting with bilateral thyroid nodules and has a detailed history and examination performed.

Procedure Description:

Detailed history and examination of bilateral thyroid nodules.

Review of systems and physical examination.

Assessment and plan for a percutaneous biopsy.

CPT Coding:

99214: Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and moderate medical decision making.

AMA's CPT Professional Edition (current year).

CPT Assistant for detailed coding guidelines on evaluation and management services.

Question 7

Question Type: MultipleChoice

A patient underwent a cystourethroscopy with a pyeloscopy using lithotripsy to break up the ureteral calculus. An indwelling stent was also inserted during the same operative session on the same side. This service was performed in the outpatient hospital surgery center.

What CPT coding reported?



Options:

A- 52352, 52332-51 B- 52325, 52332-51 C- 52353, 52332-51 D- 52356

Answer:

D

Explanation:

Cystourethroscopy: This is a procedure that involves the use of a cystoscope to look inside the urethra and bladder.

Pyeloscopy: Involves the examination of the upper urinary tract, typically done through the cystoscope.

Lithotripsy: A procedure that uses shock waves or a laser to break up stones in the kidney, bladder, or ureter.

Indwelling stent insertion: A procedure to place a stent in the ureter to help urine flow from the kidney to the bladder.

52356: Cystourethroscopy with ureteroscopy and/or pyeloscopy; with lithotripsy (ureteral catheterization and/or ureteral stent placement).

The code 52356 includes all components mentioned: cystourethroscopy, pyeloscopy, lithotripsy, and stent insertion performed in the same operative session.

AMA's CPT Professional Edition (current year)

ICD-10-CM (current year), HCPCS Level II (current year)

Question 8

Question Type: MultipleChoice

Mr. Woolridge has had a suspicious lesion on his left shoulder for approximately eight weeks that is not healing. On the dermatologist's exam of left shoulder blade, there is excoriation and scabbing and the lesion not healing. Patient agrees and wishes to proceed with a punch biopsy of the lesion. A punch biopsy is taken of the lesion and sent to pathology. A simple repair is performed at the biopsy site.

What CPT and ICD-10-CM codes are reported?

Options: A- 11102, 12001-51, D49.2

<mark>B-</mark> 11102, L98.9

- C- 11104, D49.2
- D- 11104,12001-51, L98.9

Answer:

А

Explanation:

CPT code 11102 is for punch biopsy of skin, including simple closure. CPT code 12001-51 is for simple repair of superficial wounds, with modifier 51 indicating multiple procedures. ICD-10-CM code D49.2 is used for a neoplasm of unspecified behavior of the bone, soft tissue, and skin. This coding accurately reflects the punch biopsy and simple repair performed on the lesion. Reference: AMA's CPT Professional Edition (current year), ICD-10-CM (current year)

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