67-year-old female fractured a port-a-cath surgically placed a year ago. Under sonographic guidance a needle was passed into the right common femoral vein. The loop snare was positioned in the right atrium where a portion of the fractured catheter was situated. The catheter crossed the atrioventricular valve with the remaining aspect of the catheter in the ventricle. A pigtail catheter was then utilized to loop the catheter and pull the catheter tip into the inferior vena cava. The catheter was then snared and pulled through the right groin removed in its entirety. What CPT® and ICD-10-CM codes are reported?
A. 37200, T81.509D
B. 37197, T82.514A
C. 37193, T80.219A
D. 37217, T88.8XXA - ANSB. 37197, T82.514A

A 10-month-old child is taken to the operating room for removal of a laryngeal mass. What is (are) the appropriate anesthesia code(s) to report?
A. 00320
B. 00326
C. 00320, 99100
D. 00326, 99100 - ANSB. 00326

A 10-year-old patient had a recent placement of a cochlear implant. She and her family see an audiologist to check the pressure and determine the strength of the magnet. The transmitter, microphone and cable are connected to the external speech processor and maximum loudness levels are determined under programming computer control. Which CPT® code should be used?
A. 92601
B. 92603
C. 92604
D. 92562 - ANSB. 92603

A 10-year-old-male sustained a Colles' fracture in which the pediatrician performs an application of short arm fiberglass cast. Select the HCPCS Level II code that is reported.
A. Q4012
B. A4580
C. A4570
D. Q4024 - ANSA. Q4012

A 15 year-old female is to have a tonsillectomy performed for chronic tonsillitis and hypertrophied tonsils. A McIver mouth gag was put in place and the tongue was depressed. The nasopharynx was digitalized. No significant adenoid tissue was felt. The tonsils were then removed bilaterally by dissection. The uvula was a huge size because of edema, a part of this was removed and the raw surface oversewn with 3-0 chromic catgut. Which CPT® code(s) is (are) reported?
A. 42821

A 20-day-old infant was seen in the ER by the neonatologist admitting the baby to NICU for cyanosis and rapid breathing. The neonatologist performed intubation, ventilation management and a complete echocardiogram in the NICU and provided a report for the echocardiography which did indicate congenital heart disease. Select the correct codes for the physician service.
A. 99468-25, 93303-26
B. 99471-25, 31500, 94002, 93303-26
C. 99460-25, 31500, 94002, 93303-26
D. 99291-25, 93303-26 - ANSA. 99468-25, 93303-26

A 22-year-old is 14 weeks pregnant and wants to terminate the pregnancy. She has consented for a D&E. She was brought to the operating room where MAC anesthesia was given. She was then placed in the dorsal lithotomy position and a weighted speculum was placed into her posterior vaginal vault. Cervix was identified and dilated. A 6.5-cm suction catheter hooked up to a suction evacuator was placed and products of conception were evacuated. A medium size curette was then used to curette her endometrium. There was noted to be a small amount of remaining products of conception in her left cornua. Once again the suction evacuator was placed and the remaining products of conception were evacuated. At this point she had a good endometrial curetting with no further products of conception noted. Which CPT® code should be used?
A. 59840
B. 59841
C. 59812
D. 59851 - ANSB. 59841

A 23-year-old who is pregnant at 39-weeks and 3 days is presenting for a low transverse cesarean section. An abdominal incision is made and was extended superiorly and inferiorly with good visualization of the bladder. The bladder blade was then inserted and the lower uterine segment incised in a transverse fashion with the scalpel. The bladder blade was removed and the infant's head delivered atraumatically. The nose and mouth were suctioned with the bulb suction trap and the cord doubly clamped and cut. The placenta was then removed manually. What CPT® and ICD-10-CM codes are reported for this procedure?
A. 59610, O34.211, Z37.0, Z3A.39
B. 59510, O64.1XX0, Z37.0, Z3A.39
C. 59514, O82, Z37.0, Z3A.39
D. 59515, O82, Z37.0, Z3A.39 - ANSC. 59514, O82, Z37.0, Z3A.39

A 24-year-old patient had an abscess by her vulva which burst. She has developed a soft tissue infection caused by gas gangrene. The area was debrided of necrotic infected tissue. All of the pus was removed and irrigation was performed with a liter of saline until clear and clean. The infected area was completely drained and the wound was packed gently with sterile saline moistened gauze and pads were placed on top of this. The correct CPT® code is:
A. 56405

A 30-year-old female is having 15 sq cm debridement performed on an infected ulcer with eschar on the right foot. Using sharp dissection, the ulcer was debrided all the way to down to the bone of the foot. The bone had to be minimally trimmed because of a sharp point at the end of the metatarsal. After debriding the area, there was minimal bleeding because of very poor circulation of the foot. It seems that the toes next to the ulcer may have some involvement and cultures were taken. The area was dressed with sterile saline and dressings and then wrapped. What CPT® code should be reported?
A. 11043
B. 11012
C. 11044
D. 11042 - ANSC. 11044

A 34-year-old male developed a ventral hernia when lifting a 60 pound bag. The patient is in surgery for a ventral herniorrhaphy. The abdomen was entered through a short midline incision revealing the fascial defect. The hernia sac and contents were able to easily be reduced and a large plug of mesh was placed into the fascial defect. The edge of the mesh plug was sutured to the fascia. What procedure code(s) is (are) reported?
A. 49560
B. 49561, 49568
C. 49652
D. 49560, 49568 - ANSD. 49560, 49568

A 35-year-old male sees his primary care physician complaining of fever with chills, cough and congestion. The physician performs a chest X-ray taking lateral and AP views in his office. The physician interprets the X-ray views and the patient is diagnosed with walking pneumonia. Which CPT® code is reported for the chest X-rays performed in the office and interpreted by the physician?
A. 71046-26
B. 71047-26
C. 71046
D. 71045-26-TC - ANSC. 71046

A 35-year-old-female is getting a Levonorgestrel implant system with supplies. The HCPCS Level II code is:
A. S4989
B. J7306
C. A4264
D. J7301 - ANSB. J7306

A 37-year-old female has menorrhagia and wants permanent sterilization. The patient was placed in Allen stirrups in the operating room. Under anesthesia the cervix was dilated and the hysteroscope was advanced to the endometrium into the uterine cavity. No polyps or fibroids were seen. The Novasure was used for endometrial ablation. A knife was then used to make an incision in the right lower quadrant and left lower quadrant with 5-mm trocars inserted under direct visualization with no injury to any

abdominal contents. Laparoscopic findings revealed the uterus, ovaries and fallopian tubes to be normal. The appendix was normal as were the upper quadrants. Because of the patient's history of breast cancer and desire for no further children, it was decided to take out both the tubes and ovaries. This had been discussed with the patient prior to surgery. What are the codes for these procedures?
A. 58660, 58353-51
B. 5866 - ANSB. 58661, 58563-51

A 4-year-old is getting over his cold and will be getting three immunizations in the pediatrician's office by the nurse. The first vaccination administered is the Polio vaccine intramuscularly. The next vaccination is the live influenza (LAIV3) administered in the nose. The last vaccination is the Varicella (live) by subcutaneous route. What CPT® codes are reported for the administration and vaccines?
A. 90713, 90658, 90716, 90460, 90461 x 2
B. 90713, 90660, 90716, 90460, 90461 x 1
C. 90713, 90660, 90716, 90471, 90472, 90474
D. 90713, 90658, 90716, 90471, 90472, 90473 - ANSC. 90713, 90660, 90716, 90471, 90472, 90474

A 42-year-old male has a frozen left shoulder. An arthroscope was inserted in the posterior portal in the glenohumeral joint. The articular cartilage was normal except for some minimal grade III-IV changes, about 5% of the humerus just adjacent to the rotator cuff insertion of the supraspinatus. The biceps was inflamed, not torn at all. The superior labrum was not torn at all. The labrum was completely intact. The rotator cuff was completely intact. An anterior portal was established high in the rotator interval. The rotator interval was very thick and contracted. Adhesions were destroyed with electrocautery and the Bovie. The superior glenohumeral ligament, the middle glenohumeral ligament and the tendinous portion of the subscapularis were released. The arthroscope was placed anteriorly, adhesions were destroyed and the shaver was used to debride some of the posterior capsule and the posterior capsule was released - ANSD. 29825-LT

A 42-year-old with renal pelvis cancer receives general anesthesia for a laparoscopic radical nephrectomy. The patient has controlled type 2 diabetes otherwise no other co-morbidities. What is the correct CPT® and ICD-10-CM code for the anesthesia services?
A. 00860-P1, C64.9, E11.9
B. 00840-P3, C65.9, E11.9
C. 00862-P2, C65.9, E11.9
D. 00868-P2, C79.02, E11.9 - ANSC. 00862-P2, C65.9, E11.9

A 44-year-old had a history of adenocarcinoma of the cervix on a conization in March 20XX who has been followed with twice-yearly endocervical curettages and Pap smears that were all negative for two years, per the recommendation of a GYN oncologist. Her Pap smear results from the last visit noted atypical glandular cells. In light of this, she underwent a colposcopy and the biopsy of the normal-appearing cervix on colposcopy

his right wrist as well as a Gustilo-Anderson Type I open fracture of the hamate body. In the hospital, an orthopedic surgeon performed a flexor tendon decompression fasciotomy with extensive debridement of muscle, nerve tissue and bone as well as a 2-bone carpectomy. An ORIF of the fracture was also done. The surgery took place in the hospital the day after admission at Level 2 subsequent hospital care. This procedure was actually done in consult, but Medicare does not pay for consultation CPT® codes. The patient is placed in an extension control cock-up wrist splint. Code the encounter.
A. 25023-RT, 25628-51-RT, 25210-51-RT
B. 25023-RT, 25628-51-RT, 25210-51-RT x 2
C. 250 - ANSD. 25023-RT, 25645-51-RT, 25210-51-RT x 2, 99232-57

A 70-year-old female who has a history of symptomatic ventral hernia was advised to undergo laparoscopic evaluation and repair. An incision was made in the epigastrium and dissection was carried down through the subcutaneous tissue. Two 5-mm trocars were placed, one in the left upper quadrant and one in the left lower quadrant and the laparoscope was inserted. Dissection was carried down to the area of the hernia where a small defect was clearly visualized. There was some omentum, which was adhered to the hernia and this was delivered back into the peritoneal cavity. The mesh was tacked on to cover the defect. What procedure code(s) is (are) reported?
A. 49560, 49568
B. 49652
C. 49653
D. 49652, 49568 - ANSB. 49652

A 76-year-old female had a ground level fall when she tripped over her dog earlier this evening in her apartment. The Emergency Department took X-rays of the left wrist in oblique and lateral views which revealed a displaced distal radius fracture, type I open left wrist. What radiological service and ICD-10-CM codes are reported?
A. 73100-26, S52.502B, W18.31XA, Y92.039
B. 73110-26, S52.602A, W18.31XA, Y92.039
C. 73115-26, S52.502A, W18.31XA, Y92.039
D. 73100-26, S52.602B, W18.31XA, Y92.039 - ANSA. 73100-26, S52.502B, W18.31XA, Y92.039

A 76-year-old female had a recent mammographic and ultrasound abnormality in the 6 o'clock position of the left breast. She underwent core biopsies which showed the presence of a papilloma. The plan now is for needle localization with excisional biopsy to rule out occult malignancy. After undergoing preoperative needle localization with hookwire needle injection with methylene blue, the patient was brought to the operating room and was placed on the operating room table in the supine position where she underwent laryngeal mask airway (LMA) anesthesia. The left breast was prepped and draped in a sterile fashion. A radial incision was then made in the 6 o'clock position of the left breast corresponding to the tip of the needle localizing wire. Using blunt and sharp dissection, we performed a generous excisional biopsy around the needle localizing wire including all of the methylene blue-stained tissues. The specimen wa - ANSD. 19125, D24.2

A Medicare patient is receiving chemotherapy at her oncologist's office. While the patient is receiving chemotherapy, the oncologist called in a prescription for pain medication to a pharmacy in the same building. The pharmacy delivers the medication to the patient and the oncologist's office for the patient to take home. What part of Medicare should be billed for this pain medication by the pharmacy?
A. Part A
B. Part B
C. Part C
D. Part D - ANSD. Part D

A new patient is having a cardiovascular stress test done in his cardiologist's office. Before the test is started the physician documents a comprehensive history and exam and moderate complexity medical decision making. The physician will be supervising and interpreting the stress on the patient's heart during the test. What procedure codes are reported for this encounter?
A. 93015-26, 99204-25
B. 93016, 93018, 99204-25
C. 93015, 99204-25
D. 93018-26, 99204-25 - ANSC. 93015, 99204-25

A pathologist performs a comprehensive consultation and report after reviewing a patient's records and specimens from another facility. The correct CPT® code to report this service is:
A. 88325
B. 99244
C. 88323
D. 88329 - ANSA. 88325

A patient admitted for left hip replacement has a medical history of COPD, with hospitalization six months ago due to acute exacerbation, diabetes with neuropathy, appendicitis s/p RT appendectomy 1997, and a history of prostate cancer s/p TURP, radiation and chemotherapy, no NED and no medications noted.
Considering the importance of capturing comorbidities in the inpatient setting, which conditions should the providers document and address as active conditions for accurate code reporting during this admission?

A. Appendicitis, COPD, and diabetic neuropathy
B. COPD and diabetic neuropathy
C. COPD with exacerbation and diabetic neuropathy
D. COPD, diabetic neuropathy, and prostate cancer - ANSB. COPD and diabetic neuropathy

A patient came in to the ER with wheezing and a rapid heart rate. The ER physician documents a comprehensive history, comprehensive exam and medical decision of moderate complexity. The patient has been given three nebulizer treatments. The ER physician has decided to place him in observation care for the acute asthma

rescheduled to come back to have the other test performed. What CPT® code is reported?
A. 92520
B. 92700
C. 92520-52
D. 92614-52 - ANSC. 92520-52

A patient with chronic renal failure is in the hospital being evaluated by his nephrologist after just placing a catheter into the peritoneal cavity for dialysis. The physician is evaluating the dwell time and running fluid out of the cavity to make sure the volume of dialysate and the concentration of electrolytes and glucose are correctly prescribed for this patient. What code should be reported for this service?
A. 90935
B. 90937
C. 90947
D. 90945 - ANSD. 90945

A patient with severe asthma exacerbation has been admitted. The admitting physician orders a blood gas for oxygen saturation only. The admitting physician performs the arterial puncture drawing blood for a blood gas reading on oxygen saturation only. The physician draws it again in an hour to measure how much oxygen the blood is carrying. Select the codes for reporting this service.
A. 82805, 82805-51
B. 82810, 82810-91
C. 82803, 82803-51
D. 82805, 82805-91 - ANSB. 82810, 82810-91

A patients comes into the PCP's office complaining of pain while urinating. After a quick urine sample tested negative, and the patient has no other concerning symptoms, the physician gives the patient a cautionary antibiotic and state that, if he should develop a fever, to come back to the office. Which ICD-10 code would best fit this visit?.
A. R41
B. R06.4
C. R10.9
D. R30.0 - ANSD. R30.0

A peer-to-peer prior authorization entails:
A. A discussion between the ordering provider and nurse practitioner
B. A discussion between the ordering provider and payer's medical director or pharmacist
C. A discussion between two providers in the same office
D. A discussion between a pharmacist and pharmacy technician - ANSB. A discussion between the ordering provider and payer's medical director or pharmacist

A physician orders 90 minutes of HBOT. The documentation for the HBOT treatment indicates the patient was in the chamber at 100 percent oxygen for 90 minutes.

A. Cocaine, ampethamines1-5, and barbiturates only, per monthly testing period
B. All Drugs listed in the old class lists A and B only, per date of service.
C. Opioids and tramadol only, per date of service.
D. All Drugs and drug classes performed by the respective methodology per date of service. - ANSD. All Drugs and drug classes performed by the respective methodology per date of service.

For presumptive drug class screenings, which drugs are represented?

A. Cocaine, amphetamines 1-5, and barbiturates only, per monthly testing period
B. All Drugs listed in the old class lists A and B only, per date of service
C. Opioids and Tramadol only, per date of service.
D. All drugs and drug classes performed by the respective methodology per date of service. - ANSD. All drugs and drug classes performed by the respective methodology per date of service.

Fracturing the acetabulum involves what area?
A. Skull
B. Shoulder
C. Pelvis
D. Leg - ANSC. Pelvis

From a documentation standpoint, which is most useful in determining whether a patient has a true drug allergy or just a drug intolerance?
A. The underlying condition treated
B. The place of occurrence
C. The activity the patient was involved in when the drug was taken
D. The reaction the patient experienced and the drug that caused the reaction - ANSD. The reaction the patient experienced and the drug that caused the reaction

Glomerulonephritis is an inflammation affecting which system?
A. Digestive
B. Nervous
C. Urinary
D. Cardiovascular - ANSC. Urinary

Guard against insurance and patient check payment theft by:
A. Using insurance company direct deposit options
B. Using bank check scanners in your office for depositing checks
C. Using a bank lock box to avoid checks coming to the office
D. All of the above - ANSD. All of the above

Guidelines from which of the following code sets are included as part of the code set requirements under HIPAA?
A. CPT® Category III codes
B. ICD-10-CM