## 2013 Annual Self-Review

CERTIFIED CODING SPECIALIST-PHYSICIAN BASED







## 2013 CCS-P Coding Self-Review

- The intent of codes 11010–11012 is to express the often-extensive wound excision and debridement necessary for
  - a. Closed fractures and dislocations
  - b. Open fractures and dislocations
  - c. Wound management
  - d. None of the above
- 2. The application of a bone-filler product in a non-spine, orthopaedic procedure, such as an open tibia fracture repair, is not considered inherent to the open fracture treatment.
  - a. True
  - b. False
- 3. Which of the following CPT codes describes the work of a complete laminectomy with full bilateral facetectomies and foraminotomies, procedures that surgeons rarely perform for lumbar lateral recess stenosis without a fusion?
  - a. 63020
  - b. 63030
  - c. 63045
  - d. 63047
- 4. There are no specific codes that encompass the following pulmonary tests performed by respiratory therapists: maximal inspiratory pressure (MIP), maximal inspiratory force (MIF), and maximal expiratory pressure (MEP), and negative inspiratory force (NIF).
  - a. True
  - b. False
- 5. What is the correct CPT code for online evaluation and management service provided by a physician or other qualified healthcare professional who may report an evaluation and management services provided to an established patient, guardian, or health care provider not originating from a related E/M service provided within the previous seven days, using the Internet?
  - a. 99441
  - b. 99442
  - c. 99443
  - d. 99444

- 6. When multiple surgical procedures are performed during a single anesthetic administration, the anesthesia code representing the most complex procedure is reported. How is the time reported?
  - a. Time reported is combined total for all procedures.
  - b. Time for the most invasive procedure performed is reported.
  - c. Time is not reported for anesthesia services.
  - d. None of the above
- 7. What is the appropriate anesthesia code to accompany procedure code 53450, Urethromeatoplasty, with mucosal advancement?
  - a. 00908
  - b. 00914
  - c. 00920
  - d. 00921
- 8. CPT code 99070 is used to report supplies and materials. Which of the following supplies are not included in this code?
  - a. Drugs
  - b. Trays
  - c. Spectacles
  - d. All the above
- 9. A basal cell carcinoma of the anterior surface of the ear is excised and a postauricular flap, which includes the dissected postauricular artery, is fashioned. It is then tunneled through the ear cartilage, posterior to anterior, to provide coverage to the anterior ear. The donor site of the flap is closed primarily. What is the appropriate CPT code?
  - a. 15740
  - b. 15750
  - c. 15756
  - d. 15758
- 10. Skin replacement surgery consists of
  - a. Surgical preparation
  - b. Autograft
  - c. Skin substitute graft
  - d. All the above

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- 11. What is the correct way to code for the repair of an intervertebral disc, such as with sutures or mesh, immediately following a discectomy?
  - a. 22899
  - b. 64999
  - c. Not coded separately
  - d. None of the above
- 12. What is the correct CPT code(s) for reporting nonselective mechanical debridement of a wound bed with normal saline gauze and chemical cautery of hypergranular tissue at 12 and 6 o'clock using one silver nitrate stick?
  - a. 97597
  - b. 97602
  - c. 97597, 17250
  - d. 97602, 17250
- 13. Two conditions have to be listed together in the diagnostic statement in order to assume an association in ICD-9-CM.
  - a. True
  - b. False
- 14. What is the code(s) for Charcot's arthropathy without documentation of syphilis?
  - a. 094.0
  - b. 094.0, 713.5
  - c. 349.9
  - d. 349.9, 713.5
- 15. What is the appropriate ICD-9-CM code(s) for a patient who is diagnosed with a urinary tract infection (UTI) and subsequently has an indwelling catheter?
  - a. 996.64
  - b. 996.64, 599.0
  - c. 599.0
  - d. 996.69
- 16. What is the appropriate diagnosis code for pediatric autoimmune neuropsychiatric disorders associated with post-streptococcal infections (PANDAS)?
  - a. 279.3, 034.0
  - b. 279.09
  - c. 279.49
  - d. 279.3

- 17. A patient was admitted with sepsis and cellulitis of the lower leg. The blood cultures grew Pasteurella multocida. The physician documented the final diagnosis as sepsis due to Pasteurella multocida. What are the correct ICD-9-CM codes?
  - a. 038.49, 995.91, 682.6
  - b. 038.49, 995.91, 027.2, 682.6
  - c. 038.49, 027.2, 682.6
  - d. 038.49, 682.6
- 18. A three-year-old patient has a history of speech-language, cognitive, and motor delays as well as difficulties with attention and behavior. The evaluation summary indicates autism and generalized developmental delays, and that his behavior and attention difficulties are related to his diagnosis of autism. What is the appropriate ICD-9-CM code(s)?
  - a. 299.00
  - b. 299.01
  - c. 299.00, 799,52
  - d. 299.01, 799.52
- 19. A patient experienced colon perforation at the splenic flexure during exploratory laparotomy that the provider specifically documented as a complication of the procedure. What are the code assignments for this surgical complication?
  - a. 997.49
  - b. 998.2
  - c. 998.2, 569.83
  - d. 998.89, 569.83
- 20. What is the code assignment for multifocal motor neuropathy (MMN)?
  - a. 356.9
  - b. 357.7
  - c. 357.89
  - d. 358.9
- 21. It is appropriate to code 356.9, Polyneuropathy, unspecified for peripheral neuropathy of bilateral lower extremities.
  - a. True
  - b. False

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- 22. Pulseless electrical activity (PEA) refers to electrical activity on a monitor without a detectable pulse. Which of the following statements is not accurate?
  - a. Some physicians are documenting PEA instead of cardiac arrest during a code blue.
  - b. It is appropriate to use code 427.5, cardiac arrest for the term PEA.
  - c. PEA can be caused by respiratory failure with hypoxia.
  - d. A false PEA is the absence of myocardial contraction despite coordinated electrical activity.
- 23. What is the appropriate ICD-9-CM diagnosis code for a newborn diagnosed with sacral dimple?
  - a. 757.2
  - b. 757.39
  - c. 757.8
  - d. 757.9

- 24. Which of the following code assignments are correct for a patient that experiences cardiac arrest during or following surgery and the patient cannot be resuscitated?
  - a. 427.5
  - b. 997.1
  - c. 997.1, 427.5
  - d. Not coded
- 25. The implementation date for ICD-10-CM and ICD-10-PCS is:
  - a. January 1, 2013
  - b. January 1, 2014
  - c. October 1, 2013
  - d. October 1, 2014