

MEDICAL CODING

What is HCPCS ?

HCPCS stands for Healthcare common procedural coding system. It consists of CPT codes known as level I HCPCS codes and HCPCS level II codes that represent hospital supplies, drugs, dental codes, etc.

The patient has a Tailors bunion at his 5th metatarsal the physician performs bunionectomy what is the CPT code that represent this service?

28110: Osteotomy, partial excision, fifth metatarsal head (bunionette) (separate procedure)

The physician does a knee arthroscopic notchplasty of femoral condyl what is the code to represent this?

Arthroscopic chondroplasty includes notchplasty so CPT code would be 29877

The patient underwent rubberband ligation of two hemorrhoid columns what is the CPT code to represent this?

Code 46221. It should be reported only once regardless of how many hemorrhoids are ligated.

The patient underwent arthroscopic chondroplasty in lateral and medial compartments what CPT codes are required to represent this service?

29877. Report 29877 only once even if chondroplasty is performed in more than one compartment.

The patient underwent a colonoscopy and polypectomy of three polyps by snare technique and one polyp was removed by Jumbo forceps.

45385 for polypectomy by snare technique. 45385 includes multiple polypectomies.

45384 for hot biopsy polypectomy (Jumbo forceps).

The patient has a history COPD and the final impression is Chronic Bronchitis. What is the ICD code?

491.20 is the combination code for chronic bronchitis and COPD.

The patient decompensated COPD ?

491.21 : Decompensated or exacerbated COPD is coded to 491.21

The patient has COPD and emphysema?

492.8

The patient was given Normal saline solution for 25 minutes and then Pepcid for one hour what are the CPT codes?

96365 for IV infusion for one hour. IV hydration (NSS) if given less than 30 minutes is not coded.

The physician excised a breast lesion by preoperative placement of radiological marker?

19125 Placement of radiological marker is included in this code.

Placement of Quinton Catheter for a patient 50 years old.

36558 Insertion of tunneled centrally inserted central venous catheter, without subcutaneous port or pump age 5 years or older

Repair of laceration of palate in the mouth less than 2 cm

42180 Repair, laceration of palate; up to two cm

Placement of Mediport Catheter for a patient 50 years old.

36561 Insertion of tunneled centrally inserted central venous access device, with subcutaneous port age 5 years or older

Cystoureteroscopy with lithotripsy and placement of Double J stent?

52353 Lithotripsy 52332 Double J stent placement Inpatient Coding Practice Test

All of the following statements are true regarding the coding of glaucoma, EXCEPT:

A. When a patient has bilateral glaucoma and both are documented as being the same type and stage, report only the code for the type of glaucoma and one code for the stage

B. When a patient has bilateral glaucoma and each eye is documented as having a different stage, assign one code for the type of glaucoma and one code for the highest glaucoma stage

C. When a patient has bilateral glaucoma and each eye is documented as having a different type and a different stage, assign one code for each type of glaucoma and one code for the highest glaucoma stage

D. If a patient is admitted with glaucoma and the stage progresses during the admission, assign codes for both stages

The correct answer was: D

Medical Coding Study Guides

J Spring



Medical Coding Study Guides:

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Table of Contents Medical Coding Study Guides

1. Understanding the eBook Medical Coding Study Guides
 - The Rise of Digital Reading Medical Coding Study Guides
 - Advantages of eBooks Over Traditional Books
2. Identifying Medical Coding Study Guides
 - Exploring Different Genres
 - Considering Fiction vs. Non-Fiction
 - Determining Your Reading Goals
3. Choosing the Right eBook Platform
 - Popular eBook Platforms
 - Features to Look for in an Medical Coding Study Guides
 - User-Friendly Interface
4. Exploring eBook Recommendations from Medical Coding Study Guides
 - Personalized Recommendations
 - Medical Coding Study Guides User Reviews and Ratings
 - Medical Coding Study Guides and Bestseller Lists

5. Accessing Medical Coding Study Guides Free and Paid eBooks
 - Medical Coding Study Guides Public Domain eBooks
 - Medical Coding Study Guides eBook Subscription Services
 - Medical Coding Study Guides Budget-Friendly Options
6. Navigating Medical Coding Study Guides eBook Formats
 - ePub, PDF, MOBI, and More
 - Medical Coding Study Guides Compatibility with Devices
 - Medical Coding Study Guides Enhanced eBook Features
7. Enhancing Your Reading Experience
 - Adjustable Fonts and Text Sizes of Medical Coding Study Guides
 - Highlighting and Note-Taking Medical Coding Study Guides
 - Interactive Elements Medical Coding Study Guides
8. Staying Engaged with Medical Coding Study Guides
 - Joining Online Reading Communities
 - Participating in Virtual Book Clubs
 - Following Authors and Publishers Medical Coding Study Guides
9. Balancing eBooks and Physical Books Medical Coding Study Guides
 - Benefits of a Digital Library
 - Creating a Diverse Reading Collection Medical Coding Study Guides
10. Overcoming Reading Challenges
 - Dealing with Digital Eye Strain
 - Minimizing Distractions
 - Managing Screen Time
11. Cultivating a Reading Routine Medical Coding Study Guides
 - Setting Reading Goals Medical Coding Study Guides
 - Carving Out Dedicated Reading Time
12. Sourcing Reliable Information of Medical Coding Study Guides
 - Fact-Checking eBook Content of Medical Coding Study Guides
 - Distinguishing Credible Sources
13. Promoting Lifelong Learning

- Utilizing eBooks for Skill Development
 - Exploring Educational eBooks
14. Embracing eBook Trends
- Integration of Multimedia Elements
 - Interactive and Gamified eBooks

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