

URINARY & REPRODUCTIVE SYSTEMS (MULTIPLE CHOICE)

CPC® STUDY GROUP WITH LEGACY EDUCATION

1. Left ureteral stent placement and Extracorporeal Shock Wave Therapy or Lithotripsy (ESWL) of the left kidney are performed. What CPT® code(s) is/are reported for this service?
 - a. 52332-LT
 - b. 52353-LT
 - c. 50590-LT
 - d. 50590-LT, 52332-51-LT
2. Patient presents today for treatment of benign prostatic hypertrophy (BPH) and urinary retention by transurethral microwave thermotherapy (TUMT). What CPT® and ICD-10-CM codes are reported for this service?
 - a. 53850, N40.0, R33.8
 - b. 52648, N40.1, R33.8
 - c. 53850, N40.1, R33.8
 - d. 52648, N40.1
3. A partial cystectomy is performed due to the prior administration of radiation. It is complicated due to extensive adhesions and required an additional 2 hours beyond the usual cystectomy procedure. What CPT® code is reported for this service?
 - a. 51550
 - b. 51555
 - c. 51555-22
 - d. 51550-22
4. A 63-year-old gentleman comes into the ED complaining of the urge to urinate but has been unable to empty his bladder. The provider decides to place a Foley catheter to relieve the urine retention due to prostate hypertrophy. What is the code selection for the procedure and diagnosis codes?
 - a. 51701, R33.8, N40.1
 - b. 51702, N40.1, R33.8
 - c. 51702, R33.9, N40.1
 - d. 51701, N40.1, R33.9
5. Patient is a 68-year-old male admitted for left flank nephrectomy with partial ureterectomy. He has left renal atrophy and chronic renal inflammation. The pathology report reveals marked glomerulosclerosis, chronic inflammation of the kidney, renal pelvis and ureter. What CPT® and ICD-10-CM codes are reported for this service?
 - a. 50220-LT, N26.9, N28.89
 - b. 50230-LT, N03.9, N26.9
 - c. 50220-LT, N05.1, N29
 - d. 50230-LT, N00.9, N26.9
6. Mrs. Jones, G1P0, is diagnosed with polyhydramnios and is scheduled for amniocentesis to aspirate some of the excessive fluid from the amniotic sac. The amniocentesis is performed under ultrasound guidance. What is/are the code(s) for the procedure performed?
 - a. 59001
 - b. 59000, 76946-26
 - c. 59001, 76946-26
 - d. 00842
7. Patient has a LEEP conization for CIN II. What are the CPT® and ICD-10-CM codes reported for this procedure?
 - a. 57522, N87.1
 - b. 57460, N87.0
 - c. 57461, N87.1
 - d. 57520, D06.0
8. A 23-year-old woman presents with sudden LLQ (left lower quadrant) pain which does not resolve. The decision is made to perform exploratory laparoscopy revealing a cyst on the left ovary. The cyst is removed along with a partial oophorectomy. What is/are the CPT® code(s) reported for this procedure?
 - a. 49320, 58925-51
 - b. 58661
 - c. 58661, 49320-51
 - d. 58925

9. A pregnant patient presents to the hospital in active labor. The obstetrician providing her prenatal care is contacted to perform the delivery. The provider delivers twins vaginally. The obstetrician will also provide the postnatal care. What CPT® code(s) describe this procedure?
- a. 59430
 - b. 59400, 59409-51
 - c. 59510 x 2
 - d. 59409 x 2
10. A woman with abdominal pain and bleeding has a diagnosis of multiple fibroid tumors and undergoes laparoscopic resection without hysterectomy. After the abdomen is entered and inspected it is found she has 5 separate intramural fibroid tumors. The fibroid tumors are successfully removed, with a total weight of 300 grams. Pathology confirms leiomyoma (myomas or fibroids). What are the CPT® and ICD-10-CM codes reported for this service?
- a. 58146, D25.9
 - b. 58546, D25.1
 - c. 58545, D25.1
 - d. 58140, D25.9

URINARY & REPRODUCTIVE SYSTEMS (SCRATCH)

CPC® STUDY GROUP WITH LEGACY EDUCATION

1. Left ureteral stent placement and Extracorporeal Shock Wave Therapy or Lithotripsy (ESWL) of the left kidney are performed. What CPT® code(s) is/are reported for this service?

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- b. 52353-LT
- c. 50590-LT
- d. 50590-LT, 52332-51-LT

CPT®: _____, _____

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- b. 52648, N40.1, R33.8
- c. 53850, N40.1, R33.8
- d. 52648, N40.1

CPT®: _____

ICD-10-CM: _____, _____

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CPT®: _____

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- a. 51701, R33.8, N40.1
- b. 51702, N40.1, R33.8
- c. 51702, R33.9, N40.1
- d. 51701, N40.1, R33.9

CPT®: _____

ICD-10-CM: _____, _____

5. Patient is a 68-year-old male admitted for left flank nephrectomy with partial ureterectomy. He has left renal atrophy and chronic renal inflammation. The pathology report reveals marked glomerulosclerosis, chronic inflammation of the kidney, renal pelvis and ureter. What CPT® and ICD-10-CM codes are reported for this service?

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- d. 50230-LT, N00.9, N26.9

CPT®: _____

ICD-10-CM: _____, _____

6. Mrs. Jones, G1P0, is diagnosed with polyhydramnios and is scheduled for amniocentesis to aspirate some of the excessive fluid from the amniotic sac. The amniocentesis is performed under ultrasound guidance. What is/are the code(s) for the procedure performed?

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CPT®: _____

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- b. 58661
- c. 58661, 49320-51
- d. 58925

CPT®: _____

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CPT®: _____, _____

10. A woman with abdominal pain and bleeding has a diagnosis of multiple fibroid tumors and undergoes laparoscopic resection without hysterectomy. After the abdomen is entered and inspected it is found she has 5 separate intramural fibroid tumors. The fibroid tumors are successfully removed, with a total weight of 300 grams. Pathology confirms leiomyoma (myomas or fibroids). What are the CPT® and ICD-10-CM codes reported for this service?

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- b. 58546, D25.1
- c. 58545, D25.1
- d. 58140, D25.9

CPT®: _____

ICD-10-CM: _____

ANSWER KEY

1. Left ureteral stent placement and Extracorporeal Shock Wave Therapy or Lithotripsy (ESWL) of the left kidney are performed. What CPT® code(s) is/are reported for this service?
- a. 52332-LT
 - b. 52353-LT
 - c. 50590-LT
 - d. 50590-LT, 52332-51-LT

ANS: D

Rationale: Two procedures are performed. CPT® code 52353 describes laser lithotripsy and does not include ESWL. CPT® code 52332 describes the stent placement, but does not include the ESWL. CPT® code 50590 describes the ESWL but not the placement of the stent. CPT® codes 50590 and 52332 describe both procedures performed. Modifier LT is appended to 50590 to indicate the lithotripsy was performed on the left kidney. Modifiers 51 and LT are appended to code 52332 to indicate more than one procedure was performed on the left side. Look in the CPT® Index for Lithotripsy/Kidney and Insertion/Stent/Ureteral.

2. Patient presents today for treatment of benign prostatic hypertrophy (BPH) and urinary retention by transurethral microwave thermotherapy (TUMT). What CPT® and ICD-10-CM codes are reported for this service?
- a. 53850, N40.0, R33.8
 - b. 52648, N40.1, R33.8
 - c. 53850, N40.1, R33.8
 - d. 52648, N40.1

ANS: C

Rationale: In the CPT® Index look for

Transurethral Procedure/Prostate/Thermotherapy/Microwave which refers you to 53850. CPT® code 52648 describes laser vaporization rather than transurethral destruction of prostate tissue by microwave thermotherapy.

In the ICD-10-CM Alphabetic Index look for Enlargement, enlarged/prostate/with lower urinary tract symptoms (LUTS) directing you to code N40.1. In the Tabular List, locate N40.1 and you are directed to use additional code for associated symptoms. Code R33.8 is used to describe urinary retention. Verify code selection in the Tabular List.

3. A partial cystectomy is performed due to the prior administration of radiation. It is complicated due to extensive adhesions and required an additional 2 hours beyond the usual cystectomy procedure. What CPT® code is reported for this service?
- a. 51550
 - b. 51555
 - c. 51555-22
 - d. 51550-22

ANS: B

Rationale: In the CPT® Index look for Cystectomy/Partial/Complicated. The description of code 51555 is Cystectomy, partial; complicated (for example, post radiation, previous surgery, difficult location). Modifier 22 is not appended to the code as it already includes the additional work involved in the procedure.

4. A 63-year-old gentleman comes into the ED complaining of the urge to urinate but has been unable to empty his bladder. The provider decides to place a Foley catheter to relieve the urine retention due to prostate hypertrophy. What is the code selection for the procedure and diagnosis codes?
- a. 51701, R33.8, N40.1
 - b. 51702, N40.1, R33.8
 - c. 51702, R33.9, N40.1
 - d. 51701, N40.1, R33.9

ANS: B

Rationale: In the CPT® Index look for Catheter/Bladder referring you to codes 51701-51703. CPT® code 51702 is correct to report for this scenario since an indwelling catheter (for example a Foley catheter) is left in the bladder and urine is drained. Code 51701 is used when a non-indwelling catheter is inserted to determine post void residual urine; this is sometimes called a straight cath.

The patient is diagnosed with urine retention and prostate hypertrophy. In the ICD-10-CM Alphabetic Index look for Enlargement, enlarged/prostate/with lower urinary retention guiding you to code N40.1. In the Tabular List locate N40.1 and you are directed to use additional code for associated symptoms. Code R33.8 is used to describe urinary retention. Verify code selection in the Tabular List.

5. Patient is a 68-year-old male admitted for left flank nephrectomy with partial ureterectomy. He has left renal atrophy and chronic renal inflammation. The pathology report reveals marked glomerulosclerosis, chronic inflammation of the kidney, renal pelvis and ureter. What CPT® and ICD-10-CM codes are reported for this service?
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 - b. 50230-LT, N03.9, N26.9
 - c. 50220-LT, N05.1, N29
 - d. 50230-LT, N00.9, N26.9

ANS: A

Rationale: In the CPT® Index look for Nephrectomy/with Ureters. CPT® code 50220 describes the nephrectomy including a partial ureterectomy. CPT® code 50230 describes a radical nephrectomy procedure with regional lymphadenectomy, and in this case, there is no documentation to support a radical procedure. HCPCS Level II modifier LT is used to indicate the left side.

In the ICD-10-CM Alphabetic Index look for Glomerulosclerosis directing you to see also Sclerosis, renal. Look for Sclerosis, sclerotic/renal directing you to N26.9. To find inflammation of the ureter, look in the ICD-10-CM Alphabetic Index for Ureteritis referring you to N28.89. Verify all code selections in the Tabular List.

6. Mrs. Jones, G1P0, is diagnosed with polyhydramnios and is scheduled for amniocentesis to aspirate some of the excessive fluid from the amniotic sac. The amniocentesis is performed under ultrasound guidance. What is/are the code(s) for the procedure performed?
- a. 59001
 - b. 59000, 76946-26
 - c. 59001, 76946-26
 - d. 00842

ANS: A

Rationale: In the CPT® Index look for Amniocentesis/Therapeutic/Amniotic Fluid Reduction directing you to code 59001. Read the parentheses in the code descriptor; this code includes the ultrasound guidance. The ultrasound guidance is not separately reported. 59000 is for diagnostic amniocentesis.

7. Patient has a LEEP conization for CIN II. What are the CPT® and ICD-10-CM codes reported for this procedure?
- a. 57522, N87.1
 - b. 57460, N87.0
 - c. 57461, N87.1
 - d. 57520, D06.0

ANS: A

Rationale: In the CPT® Index, look for Conization/Cervix directing you to codes 57461, 57520, 57522. Code 57461 is LEEP performed with a colposcopy, but a colposcopy was not performed in this case. LEEP stands for loop electrode excision procedure and is reported with CPT® code 57522.

In the ICD-10-CM Alphabetic Index look for CIN, which directs you to see Neoplasia, intraepithelial, cervix. Look for Neoplasia/intraepithelial/cervix/grade II directing you to code N87.1. Tabular List confirms CIN II is coded N87.1. Moderate dysplasia of cervix is another name for CIN II.

8. A 23-year-old woman presents with sudden LLQ (left lower quadrant) pain which does not resolve. The decision is made to perform exploratory laparoscopy revealing a cyst on the left ovary. The cyst is removed along with a partial oophorectomy. What is/are the CPT® code(s) reported for this procedure?
- a. 49320, 58925-51
 - b. 58661
 - c. 58661, 49320-51
 - d. 58925

ANS: B

Rationale: Even though the patient started with a diagnostic (exploratory) laparoscopy it turned into a surgical laparoscopy. You cannot bill both procedures separately. Diagnostic laparoscopy is always included in a surgical laparoscopy. There was removal of the left ovary (partial oophorectomy) with the cyst. In the CPT® Index, look for Ovary/Laparoscopy directing you to codes 58660-58662, 58679. Reviewing the codes, 58661 is the correct code for the partial oophorectomy.

9. A pregnant patient presents to the hospital in active labor. The obstetrician providing her prenatal care is contacted to perform the delivery. The provider delivers twins vaginally. The obstetrician will also provide the postnatal care. What CPT® code(s) describe this procedure?
- a. 59430
 - b. 59400, 59409-51
 - c. 59510 x 2
 - d. 59409 x 2

ANS: B

Rationale: The delivery is vaginal. Look in the CPT® Index for Vaginal Delivery directing you to codes 59400, 59610-59614. As the physician has provided the prenatal care and will provide the postpartum care, the vaginal delivery for twin A is the global service described by 59400. The delivery of twin B is coded with 59409 with modifier 51 appended indicating this is a multiple procedure. Prenatal and postpartum care applies to the total care of the patient and not to both deliveries.

10. A woman with abdominal pain and bleeding has a diagnosis of multiple fibroid tumors and undergoes laparoscopic resection without hysterectomy. After the abdomen is entered and inspected it is found she has 5 separate intramural fibroid tumors. The fibroid tumors are successfully removed, with a total weight of 300 grams. Pathology confirms leiomyoma (myomas or fibroids). What are the CPT® and ICD-10-CM codes reported for this service?
- a. 58146, D25.9
 - b. 58546, D25.1
 - c. 58545, D25.1
 - d. 58140, D25.9

ANS: B

Rationale: Surgical laparoscopy is performed to remove the five fibroid tumors weighing over 250 grams. Look in the CPT® Index for Laparoscopy/Removal/Leiomyomata referring you to 58545, 58546. 58546 is correct for 5 or more fibroid tumors. In the ICD-10-CM Alphabetic Index, look for Leiomyoma/uterus/intramural referring you to code D25.1. Verify this code in the Tabular List.