

MEDICINE (MULTIPLE CHOICE)

CPC® STUDY GROUP WITH LEGACY EDUCATION

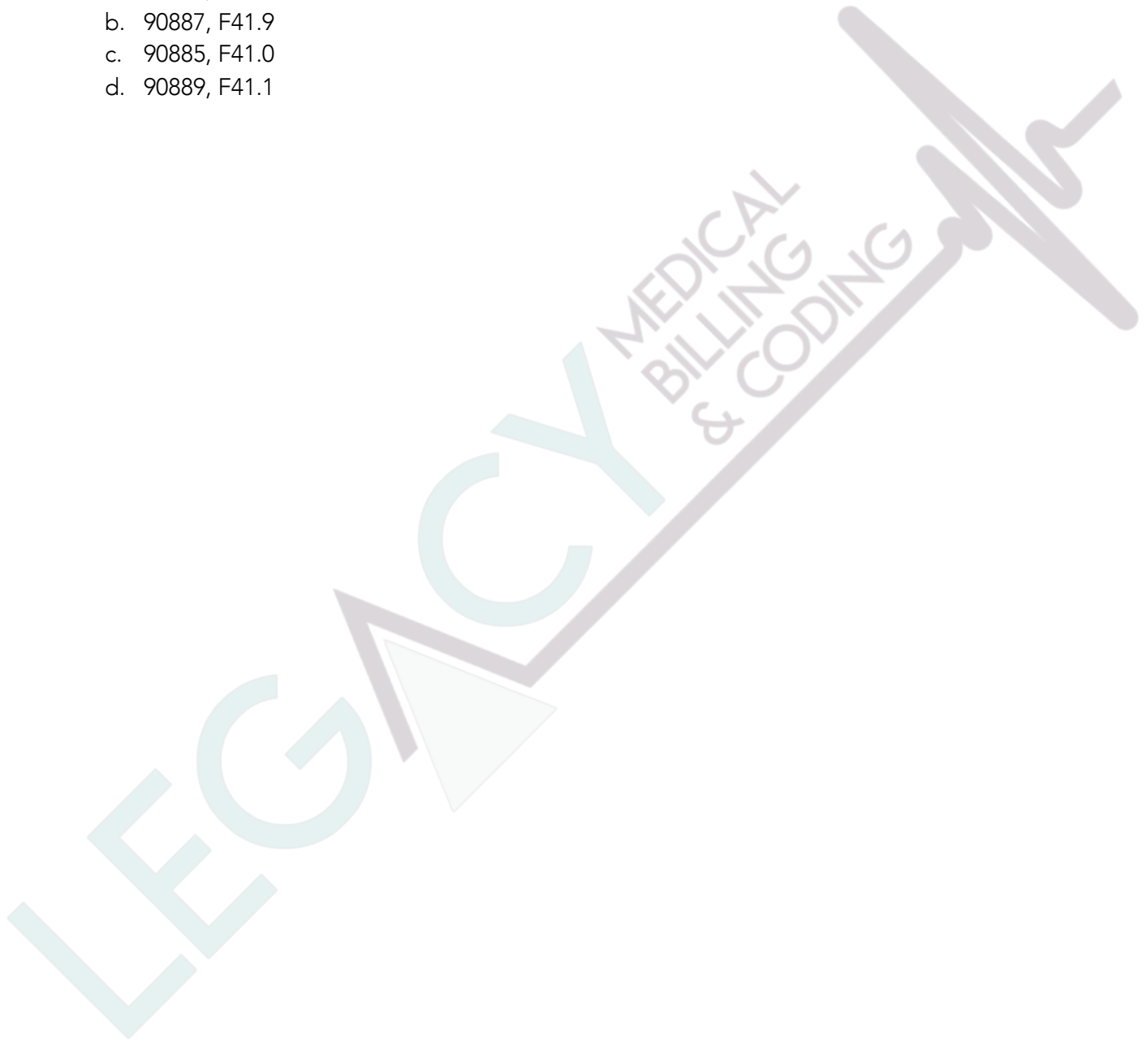
1. A 59-year-old male experienced left arm pain while cleaning the garage. There was no injury. His provider scheduled a 30-minute stress test using the Bruce Protocol at the hospital. There was no arm pain while on the treadmill; he did have a slight heart rhythm abnormality. The patient rested for 2 minutes. He had no further symptoms or pain. The cardiologist supervised the study, interpreted the test and dictated a report. What is the correct reporting for the stress test?
 - a. 93015
 - b. 93015-26
 - c. 93016, 93018
 - d. 93018
2. A 70-year-old patient with chronic obstructive asthma is brought to the urgent care center with increased wheezing and coughing. The provider initiated an albuterol inhalation treatment, one dose, delivered by nebulizer. After treatment, the patient's exacerbation was somewhat improved, but the provider determined a second treatment was necessary. What codes are reported?
 - a. 94644-76, J7609, J45.909
 - b. 94664, J7609, J44.1
 - c. 94680, J7609, J45.901
 - d. 94640, 94640-76, J7609 x 2, J44.1
3. A teenager has been chronically depressed since the separation of her parents 1 year ago and moving to a new city. Her school grades continued to slip and she has not made new friends. She has frequent crying episodes and is no longer interested in her appearance. She has attended the community mental health center and participates in group sessions. Recently her depression exacerbated to the point inpatient admission was required. The provider diagnosed adjustment disorder with emotional and conduct disturbances. Due to the length of the depression and no real improvement, the provider discussed electroconvulsive therapy with her mother. After discussing benefits and risks, the mother consented to the procedure. What CPT® and ICD-10-CM codes are reported for the electroconvulsive therapy?
 - a. 90882, F43.25
 - b. 90870, F43.25
 - c. 90867, F43.24, F43.25
 - d. 90870, F43.24, F43.25

4. A 30-year-old male cut his right hand on a nail repairing the gutter on his house. Six days later it became infected. He went to the intermediate care center in his neighborhood, his first visit there. The wound was very red and warm with purulent material present. The wound was irrigated extensively with sterile water and covered with a clean sterile dressing. An injection of Bicillin CR, 1,200,000 units was given. The patient was instructed to return in three to four days. The provider diagnosed open wound of the hand with cellulitis. A medically appropriate history and examination with a straightforward MDM were performed. What are the codes?
- a. 96372, S61.411A, L03.114, W45.0XXA, Y93.H9
 - b. 99202, J0558 x 4, S52.009A, W31.81XA
 - c. 99202, 96372, J0558 x 12, S61.411A, L03.113, W45.0XXA, Y93.H9
 - d. 99284, S41.009A, L03.113
5. A patient has an open wound on his left lower leg caused by a cat bite. The animal tested negative for rabies, but the wound has failed to heal and became infected by *Clostridium perfringens*. The patient underwent hyperbaric oxygen therapy attended and supervised by the provider. What CPT® and ICD-10-CM codes are reported?
- a. 99183, S81.852A, B96.7, W55.01XA
 - b. 97597, S81.001A, T63.891A
 - c. 97605, S81.802A, B95.5, W55.03XA
 - d. 97597, S81.852A, W55.01XA
6. A patient mangled his left hand in machinery requiring amputation at the wrist. The wound has healed and the patient is fitted with an artificial hand. The device has a molded socket, flexible elbow hinges and triceps pad. A total of 30 minutes was spent training the patient to use the prosthesis. What codes are reported for the prosthesis, training and diagnosis?
- a. 97761 x 2, L6050, Z44.8, Z89.112
 - b. 97761, Z89.112
 - c. L6055, S68.422A
 - d. 97763 x 2, S68.422A, Z89.112

7. A 54-year-old female with uncontrolled type 1 insulin dependent diabetes and related peripheral vascular disease presents with a deep diabetic ulceration on the bottom of her right foot. The wound is necrotic, reaches into the fascia, and appears to be draining. She acknowledges going barefoot frequently and is not certain how or when the wound occurred. After the provider discusses the seriousness of her condition he debrides the wound, using a water jet and surgical scissors. Size of wound is 70 sq. cm. He applied topical ointment and a sterile dressing. He counseled the patient about the need to wear shoes at all times and inspect her feet daily. He advised the patient to wear a water protective covering on her lower leg when taking a shower and to change the dressing daily, using ointment provided. A surgical shoe was provided. Patient is to return weekly until the wound heals and continue her insulin regime. If satisfactory progress does not occur, a graft may be considered. What codes are reported?
- a. 97602, L3260, E10.51, L97.502, Z79.4
 - b. 97597, 97598 x 3, L3260, E10.621, E10.51, L97.513
 - c. 97597 x 4, L3260, E10.621, L97.313
 - d. 97598 x 4, L3265, E10.52, L97.502, Z79.4
8. A young child received a mumps, measles, rubella and varicella (MMRV) injection at a neighborhood clinic with provider counseling. What CPT® codes are reported?
- a. 90707, 90716, 90471, 90472 x 3
 - b. 90707, 90716, 90460, 90461 x 3
 - c. 90710, 90460
 - d. 90710, 90460, 90461 x 3
9. A patient with carcinoma of the descending colon presents for chemotherapy administration at the infusion center. The infusion was started with 1000 cc of normal saline. Heparin, 1000 units was added and then Fluorouracil, 800 mg was added and infused over 2 hours. Dexamethasone, 20 mg was administered, IV push. At the end of the 2 hours, the IV was disconnected and the patient was discharged. What codes are reported?
- a. 96413, 96415, 96375, J9190 x 2, J1100 x 20, J1644, Z51.11, C18.6
 - b. 96413, 96375, J9190 x 2, J1100 x 20, Z51.12, C18.8
 - c. 96413, J9190, J1100, J1642, Z51.11, C18.6
 - d. 96415, 96375, J9190, J1100, J1644, Z51.0, C18.9

10. A patient had several panic attacks at work disturbing her coworkers. She had been unable to explain any particular reason for her behavior. Her employer requested she be referred for counseling. After several sessions, her psychiatrist provided reports for her primary care provider and her insurer about her status and prognosis. What CPT® and ICD-10-CM codes are reported for the preparation of the report?

- a. 90889, F41.0
- b. 90887, F41.9
- c. 90885, F41.0
- d. 90889, F41.1



MEDICINE (FILL IN THE BLANKS)

CPC® STUDY GROUP WITH LEGACY EDUCATION

1. A 59-year-old male experienced left arm pain while cleaning the garage. There was no injury. His provider scheduled a 30-minute stress test using the Bruce Protocol at the hospital. There was no arm pain while on the treadmill; he did have a slight heart rhythm abnormality. The patient rested for 2 minutes. He had no further symptoms or pain. The cardiologist supervised the study, interpreted the test and dictated a report. What is the correct reporting for the stress test?

CPT®: _____, _____

2. A 70-year-old patient with chronic obstructive asthma is brought to the urgent care center with increased wheezing and coughing. The provider initiated an albuterol inhalation treatment, one dose, delivered by nebulizer. After treatment, the patient's exacerbation was somewhat improved, but the provider determined a second treatment was necessary. What codes are reported?

CPT®: _____, _____

HCPCS: _____

ICD-10-CM: _____

3. A teenager has been chronically depressed since the separation of her parents 1 year ago and moving to a new city. Her school grades continued to slip and she has not made new friends. She has frequent crying episodes and is no longer interested in her appearance. She has attended the community mental health center and participates in group sessions. Recently her depression exacerbated to the point inpatient admission was required. The provider diagnosed adjustment disorder with emotional and conduct disturbances. Due to the length of the depression and no real improvement, the provider discussed electroconvulsive therapy with her mother. After discussing benefits and risks, the mother consented to the procedure. What CPT® and ICD-10-CM codes are reported for the electroconvulsive therapy?

CPT®: _____

ICD-10-CM: _____

4. A 30-year-old male cut his right hand on a nail repairing the gutter on his house. Six days later it became infected. He went to the intermediate care center in his neighborhood, his first visit there. The wound was very red and warm with purulent material present. The wound was irrigated extensively with sterile water and covered with a clean sterile dressing. An injection of Bicillin CR, 1,200,000 units was given. The patient was instructed to return in three to four days. The provider diagnosed open wound of the hand with cellulitis. A medically appropriate history and examination with a straightforward MDM were performed. What are the codes?

CPT®: _____, _____

HCPCS: _____

ICD-10-CM: _____, _____, _____

5. A patient has an open wound on his left lower leg caused by a cat bite. The animal tested negative for rabies, but the wound has failed to heal and became infected by *Clostridium perfringens*. The patient underwent hyperbaric oxygen therapy attended and supervised by the provider. What CPT® and ICD-10-CM codes are reported?

CPT®: _____

ICD-10-CM: _____, _____, _____

6. A patient mangled his left hand in machinery requiring amputation at the wrist. The wound has healed and the patient is fitted with an artificial hand. The device has a molded socket, flexible elbow hinges and triceps pad. A total of 30 minutes was spent training the patient to use the prosthesis. What codes are reported for the prosthesis, training and diagnosis?

CPT®: _____

HCPCS: _____

ICD-10-CM: _____, _____

7. A 54-year-old female with uncontrolled type 1 insulin dependent diabetes and related peripheral vascular disease presents with a deep diabetic ulceration on the bottom of her right foot. The wound is necrotic, reaches into the fascia, and appears to be draining. She acknowledges going barefoot frequently and is not certain how or when the wound occurred. After the provider discusses the seriousness of her condition he debrides the wound, using a water jet and surgical scissors. Size of wound is 70 sq. cm. He applied topical ointment and a sterile dressing. He counseled the patient about the need to wear shoes at all times and inspect her feet daily. He advised the patient to wear a water protective covering on her lower leg when taking a shower and to change the dressing daily, using ointment provided. A surgical shoe was provided. Patient is to return weekly until the wound heals and continue her insulin regime. If satisfactory progress does not occur, a graft may be considered. What codes are reported?

CPT®: _____, _____

HCPCS: _____

ICD-10-CM: _____, _____, _____

8. A young child received a mumps, measles, rubella and varicella (MMRV) injection at a neighborhood clinic with provider counseling. What CPT® codes are reported?

CPT®: _____, _____, _____

9. A patient with carcinoma of the descending colon presents for chemotherapy administration at the infusion center. The infusion was started with 1000 cc of normal saline. Heparin, 1000 units was added and then Fluorouracil, 800 mg was added and infused over 2 hours. Dexamethasone, 20 mg was administered, IV push. At the end of the 2 hours, the IV was disconnected and the patient was discharged. What codes are reported?

CPT®: _____, _____, _____

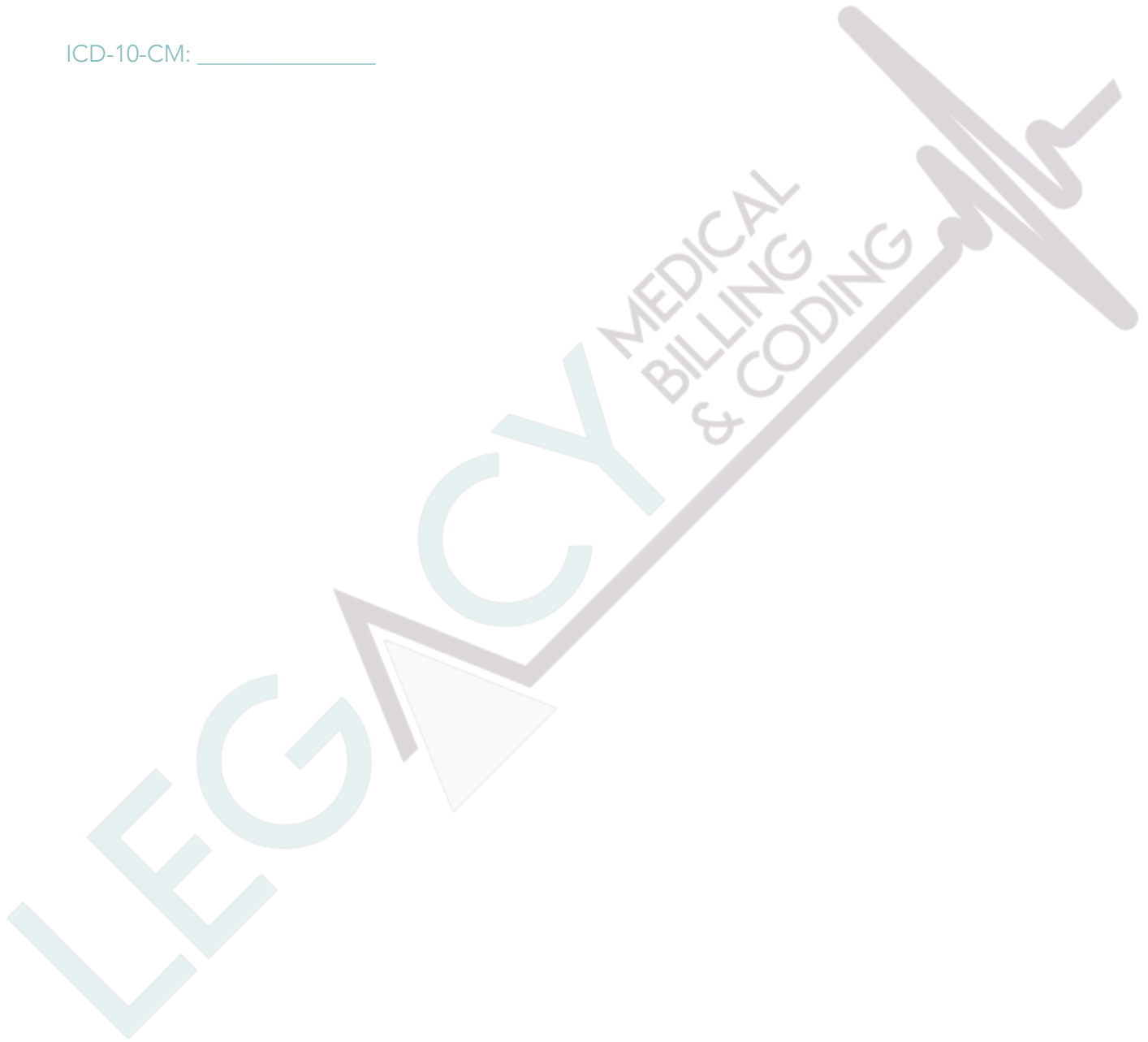
HCPCS: _____, _____, _____

ICD-10-CM: _____, _____

10. A patient had several panic attacks at work disturbing her coworkers. She had been unable to explain any particular reason for her behavior. Her employer requested she be referred for counseling. After several sessions, her psychiatrist provided reports for her primary care provider and her insurer about her status and prognosis. What CPT® and ICD-10-CM codes are reported for the preparation of the report?

CPT®: _____

ICD-10-CM: _____



ANSWER KEY

1. A 59-year-old male experienced left arm pain while cleaning the garage. There was no injury. His provider scheduled a 30-minute stress test using the Bruce Protocol at the hospital. There was no arm pain while on the treadmill; he did have a slight heart rhythm abnormality. The patient rested for 2 minutes. He had no further symptoms or pain. The cardiologist supervised the study, interpreted the test and dictated a report. What is the correct reporting for the stress test?
- a. 93015
 - b. 93015-26
 - c. 93016, 93018
 - d. 93018

Rationale: In the CPT® Index look for Stress Tests/Cardiovascular. The Bruce Protocol requires use of a treadmill. Code 93015 is used when the stress test is performed in a clinic because it includes the professional, technical component and supervision components. According to the CPT® Assistant, January 2010, when a provider performs the stress test in a hospital, the separate components of the portions the provider performed are reported. In this case, he performed supervision (93016) and interpretation with report (93018). It would be inappropriate to append modifier 52 to 93015 because there are codes available to report each component separately.

2. A 70-year-old patient with chronic obstructive asthma is brought to the urgent care center with increased wheezing and coughing. The provider initiated an albuterol inhalation treatment, one dose, delivered by nebulizer. After treatment, the patient's exacerbation was somewhat improved, but the provider determined a second treatment was necessary. What codes are reported?
- a. 94644-76, J7609, J45.909
 - b. 94664, J7609, J44.1
 - c. 94680, J7609, J45.901
 - d. 94640, 94640-76, J7609 x 2, J44.1

Rationale: In the CPT® Index look for Inhalation Treatment/for Airway Obstruction/Pressured or Nonpressured which directs you to 94640. Inhalation treatment was given therapeutically in treating the acute airway obstruction. Two treatments were given so code 94640 is reported twice. Under code 94640 there is a parenthetical instruction stating to use modifier 76 if more than one inhalation treatment is performed on the same date. Because treatment is in the office (urgent care is considered office treatment), the provider will also bill for the medication used. In this case, it is albuterol. In the HCPCS Level II code book go to the Table of Drugs and Biologicals and look for Albuterol, unit dose form which directs you to J7609, J7613. J7609 is reported for albuterol per dose. Two doses were given reporting J7609 x 2.

For the diagnosis in the ICD-10-CM Alphabetic Index look for Asthma/chronic obstructive/with exacerbation (acute) directing you to J44.1. There is no mention of status asthmaticus, but exacerbation is mentioned. The diagnosis code is J44.1. Verification in the Tabular List confirms code selection.

3. A teenager has been chronically depressed since the separation of her parents 1 year ago and moving to a new city. Her school grades continued to slip and she has not made new friends. She has frequent crying episodes and is no longer interested in her appearance. She has attended the community mental health center and participates in group sessions. Recently her depression exacerbated to the point inpatient admission was required. The provider diagnosed adjustment disorder with emotional and conduct disturbances. Due to the length of the depression and no real improvement, the provider discussed electroconvulsive therapy with her mother. After discussing benefits and risks, the mother consented to the procedure. What CPT® and ICD-10-CM codes are reported for the electroconvulsive therapy?
- a. 90882, F43.25
 - b. 90870, F43.25
 - c. 90867, F43.24, F43.25
 - d. 90870, F43.24, F43.25

Rationale: In the CPT® Index look for Electroconvulsive Therapy referring you to 90870. For the diagnosis, in the ICD-10-CM Alphabetic Index look for Disorder/adjustment/with/conduct disturbance/with emotional disturbance and you are directed to F43.25. F43.25 includes disturbances of conduct, so F43.24 is not reported separately. Verification in the Tabular List confirms code selection.

4. A 30-year-old male cut his right hand on a nail repairing the gutter on his house. Six days later it became infected. He went to the intermediate care center in his neighborhood, his first visit there. The wound was very red and warm with purulent material present. The wound was irrigated extensively with sterile water and covered with a clean sterile dressing. An injection of Bicillin CR, 1,200,000 units was given. The patient was instructed to return in three to four days. The provider diagnosed open wound of the hand with cellulitis. A medically appropriate history and examination with a straightforward MDM were performed. What are the codes?
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 - b. 99202, J0558 x 4, S52.009A, W31.81XA
 - c. 99202, 96372, J0558 x 12, S61.411A, L03.113, W45.0XXA, Y93.H9
 - d. 99284, S41.009A, L03.113

Rationale: The patient is a new patient to the clinic. Code selection is made from 99202-99205 for the office visit. For a new patient, a medically appropriate history and/or examination and straightforward medical decision making is required. The clinic visit is reported as 99202.

In the CPT® Index look for Antibiotic Administration/Injection. Code selection is based on the route of administration. The administration of the antibiotic is reported with 96372. The Bicillin CR is found in the HCPCS Level II code book in the Table of Drugs and Biologicals. Look for Bicillin C- which directs you to code J0558. The code descriptor for J0558 is 100,000 units. Report 12 units to correctly charge for the 1,200,000 units delivered to the patient, J0558 x 12.

In the ICD-10-CM Alphabetic Index look for Wound, open/hand/laceration which states to see Laceration, hand. Look for Laceration/hand/right directing you to S61.411-. Tabular Lists indicates a 7th character is needed to complete the code. Report A for the initial encounter. Next, look in the Alphabetic Index for Cellulitis/hand which states to see Cellulitis, upper limb. Look for Cellulitis/upper limb referring you to L03.11-. Complete code in the Tabular List to indicate right hand, L03.113. Then look in the ICD-10-CM External Cause of Injuries Index for Contact (accidental)/nail referring you to W45.0-. The Tabular List indicates the code is complete with seven characters. The complete code requires placeholders be placed at the 5th and 6th characters and a 7th character A for initial encounter. The second external cause code is used to identify the activity. In the External Cause of Injuries Index look for Activity/maintenance/property referring you to Y93.H9. Verification in the Tabular List confirms code selection.

5. A patient has an open wound on his left lower leg caused by a cat bite. The animal tested negative for rabies, but the wound has failed to heal and became infected by *Clostridium perfringens*. The patient underwent hyperbaric oxygen therapy attended and supervised by the provider. What CPT® and ICD-10-CM codes are reported?

- a. 99183, S81.852A, B96.7, W55.01XA
- b. 97597, S81.001A, T63.891A
- c. 97605, S81.802A, B95.5, W55.03XA
- d. 97597, S81.852A, W55.01XA

Rationale: In the CPT® Index look for Hyperbaric Oxygen Pressurization referring you to code 99183. The wound is complicated due to the infection. In the ICD-10-CM Alphabetic Index look for Bite(s) (animal) (human)/leg (lower) and you are directed to S81.85-. Tabular List shows seven characters are needed to complete the code. The 6th character 2 indicates the left leg. 7th character A indicates initial encounter for receiving active treatment. The infectious agent is identified as *Clostridium perfringens*. Look for Infection/*Clostridium perfringens*/as cause of disease classified elsewhere directing you to code B96.7. The external cause is the cat bite. Look in the ICD-10-CM External Cause of Injuries Index for Bite, bitten by/cat referring you to code W55.01-. Tabular List shows seven characters are needed to complete the code. A placeholder X is assigned to the 6th character and A is assigned for initial encounter for the 7th character.

6. A patient mangled his left hand in machinery requiring amputation at the wrist. The wound has healed and the patient is fitted with an artificial hand. The device has a molded socket, flexible elbow hinges and triceps pad. A total of 30 minutes was spent training the patient to use the prosthesis. What codes are reported for the prosthesis, training and diagnosis?

- a. 97761 x 2, L6050, Z44.8, Z89.112
- b. 97761, Z89.112
- c. L6055, S68.422A
- d. 97763 x 2, S68.422A, Z89.112

Rationale: In the CPT® Index look for Training/Prosthetics and you are directed to 97761. The code is reported for each 15 minutes. Since 30 minutes were spent training, 2 units are reported. In the HCPCS Level II code book, look for Wrist/Disarticulation prosthesis, and you are directed to codes L6050, L6055. Based on the description, the prosthesis is reported with code L6050. The wound has healed and is ready for fitting of the prosthesis.

In the ICD-10-CM Alphabetic Index look for Fitting (and adjustment) (of)/device NOS/prosthetic (external)/specified NEC directing you to code Z44.8. In the Alphabetic Index look for Absence (of) (organ or part) (complete or partial)/hand and wrist (acquired) referring you to code Z89.11-. Tabular List shows 6th character of 2 to indicate left hand amputation site.

7. A 54-year-old female with uncontrolled type 1 insulin dependent diabetes and related peripheral vascular disease presents with a deep diabetic ulceration on the bottom of her right foot. The wound is necrotic, reaches into the fascia, and appears to be draining. She acknowledges going barefoot frequently and is not certain how or when the wound occurred. After the provider discusses the seriousness of her condition he debrides the wound, using a water jet and surgical scissors. Size of wound is 70 sq. cm. He applied topical ointment and a sterile dressing. He counseled the patient about the need to wear shoes at all times and inspect her feet daily. He advised the patient to wear a water protective covering on her lower leg when taking a shower and to change the dressing daily, using ointment provided. A surgical shoe was provided. Patient is to return weekly until the wound heals and continue her insulin regime. If satisfactory progress does not occur, a graft may be considered. What codes are reported?
- a. 97602, L3260, E10.51, L97.502, Z79.4
 - b. 97597, 97598 x 3, L3260, E10.621, E10.51, L97.513
 - c. 97597 x 4, L3260, E10.621, L97.313
 - d. 97598 x 4, L3265, E10.52, L97.502, Z79.4

Rationale: In the CPT® Index look for Wound/Care/Debridement/Selective referring you to 97597, 97598. Code selection is based on the size of the area debrided. 70 sq. cm were debrided. Code 97597 is reported for the first 20 sq. cm and 97598 is reported three times to show the remaining area debrided (20 sq. cm, 20 sq. cm, 10 sq. cm). In the HCPCS Level II code book, look for Boot/Surgical, ambulatory referring you to L3260.

The patient has type 1 diabetes and peripheral vascular disease with a diabetic foot ulcer. According to ICD-10-CM guidelines, there is a casual cause and effect relationship between diabetes and peripheral vascular disease. The ulcer is also a diabetic complication. In the ICD-10-CM Alphabetic Index look for Diabetes, diabetic (mellitus) (sugar)/type 1/with/foot ulcer referring you to E10.621. In the Tabular List there is an instructional note to code from L97.4- or L97.5- for the location and type of ulceration. The ulcer is on the bottom of the right foot. Look in the Alphabetic index for Ulcer, ulcerated, ulcerating, ulceration, ulcerative/lower limb/foot/right/with/muscle necrosis which directs you to L97.513. In the Alphabetic Index look for Diabetes, diabetic (mellitus) (sugar)/type 1/with/peripheral angiopathy and you are directed to E10.51. ICD-10-CM guideline 1.C.4.a. states to assign as many diabetic codes as necessary to describe all complications. Verification in the Tabular List confirms code selection. Long term insulin usage (Z79.4) is not coded with type I diabetes.

8. A young child received a mumps, measles, rubella and varicella (MMRV) injection at a neighborhood clinic with provider counseling. What CPT® codes are reported?
- a. 90707, 90716, 90471, 90472 x 3
 - b. 90707, 90716, 90460, 90461 x 3
 - c. 90710, 90460
 - d. 90710, 90460, 90461 x 3

Rationale: In the CPT® Index look for Vaccine and Toxoids/Measles, Mumps, Rubella and Varicella (MMRV) referring you to 90710. According to the CPT® guidelines for Vaccines and Toxoids, an administration code from 90460-90474 is also reported. In the CPT® Index look for Immunization Administration/Toxoid/with Counseling. Because counseling was included, a code from 90460-90461 is used for the administration. According to the guidelines, 90460 and 90461 are reported per component of the vaccine. Although it is one vaccination, there are four separate components, 90460 is reported for mumps and 90461 x 3 (measles, rubella, and varicella).

9. A patient with carcinoma of the descending colon presents for chemotherapy administration at the infusion center. The infusion was started with 1000 cc of normal saline. Heparin, 1000 units was added and then Fluorouracil, 800 mg was added and infused over 2 hours. Dexamethasone, 20 mg was administered, IV push. At the end of the 2 hours, the IV was disconnected and the patient was discharged. What codes are reported?
- a. 96413, 96415, 96375, J9190 x 2, J1100 x 20, J1644, Z51.11, C18.6
 - b. 96413, 96375, J9190 x 2, J1100 x 20, Z51.12, C18.8
 - c. 96413, J9190, J1100, J1642, Z51.11, C18.6
 - d. 96415, 96375, J9190, J1100, J1644, Z51.0, C18.9

Rationale: In the CPT® Index look for Chemotherapy/Intravenous/Infusion. Chemotherapy infusion administration ran for two hours and is reported with 96413 for the 1st hour and 96415 for each additional hour. Dexamethasone was administered as a push technique. Dexamethasone is not a chemotherapy agent. In the CPT® Index, look for Injection/Intravenous Push referring you to 96374-96376. This is a sequential infusion following the initial service of chemotherapy and is reported with add-on code +96375. The chemotherapy drugs are Fluorouracil and Heparin. The Fluorouracil is reported with J9190 (HCPCS Level II). It is listed as 500 mg therefore two units are charged for 800 mg administered. Heparin (J1644) is listed as 1,000 units, therefore one unit is reported for the 1000 units given. Dexamethasone is packaged in 1 mg; charge 20 units for the 20 mg administered (J1100).

Per ICD-10-CM guideline I.C.2.e.2 a visit for the purpose of chemotherapy is reported with Z51.11 with the primary and the malignancy sequenced second. In the ICD-10-CM Alphabetic Index, look for Chemotherapy(session) (for)/cancer which directs you to Z51.11. Report also the reason for the chemotherapy. In this case, it is carcinoma of the descending colon. Look in the Alphabetic Index for Carcinoma which states see also Neoplasm, by site, malignant. Go to the ICD-10-CM Table of Neoplasms and look for Neoplasm, neoplastic/intestine, intestinal/large/descending and select from the Malignant Primary column which refers you to C18.6. Verification in the Tabular List confirms code selection.

10. A patient had several panic attacks at work disturbing her coworkers. She had been unable to explain any particular reason for her behavior. Her employer requested she be referred for counseling. After several sessions, her psychiatrist provided reports for her primary care provider and her insurer about her status and prognosis. What CPT® and ICD-10-CM codes are reported for the preparation of the report?

- a. 90889, F41.0
- b. 90887, F41.9
- c. 90885, F41.0
- d. 90889, F41.1

Rationale: The psychiatrist has prepared a report about her psychiatric status, history and current progress for other individuals, agencies, or insurance carriers. In the CPT® Index look for Psychiatric Treatment/Report Preparation referring you to code 90889. By definition in the code, this is not used for legal or consultative purposes.

Panic attacks not defined are reported as F41.0. In the ICD-10-CM Alphabetic Index look for Attack, attacks/panic. Verification in the Tabular List confirms code selection.