LEGACY MEDICAL BILLING & CODING STUDY SESSIONS

ICD-10-CM-WEEK 2

1. A 62-year-old patient presents for a follow-up visit to manage multiple chronic conditions. He reports occasional fatigue but denies chest pain, dizziness, or shortness of breath. His blood pressure today is 158/92. The provider documents essential hypertension, Type 1 diabetes mellitus without complications, and chronic kidney disease stage 3, noting that the CKD is due to hypertension. The patient continues long-term use of insulin and antihypertensive medications.

    a. I12.0, N18.30, E10.9, Z79.4
    b. I10, N18.3, E10.65, Z79.899
    c. I12.0, N18.30, E10.9
    d. I13.10, N18.30, E10.9, Z79.899

2. A 10-year-old child presents with fever, sore throat, swollen tonsils, and white exudate. A rapid strep test is positive. The provider documents acute streptococcal pharyngitis and notes exposure to a sick sibling.
    a. J02.0, B95.5, Z00.818
    b. J03.00, Z20.2, Z79.2
    c. J02.0, Z20.818
    d. B95.4, J02.0, Z76.89

3. A 52-year-old patient presents for diabetes management. He reports normal blood sugars and denies any other complications. Patient takes insulin daily to help control blood glucose.
    a. E11.9, Z79.4
    b. E10.9, Z79.84
    c. E10.9, Z79.4
    d. E13.9, Z79.4

4. A toddler presents with ear pain, irritability, and fever. Examination reveals a bulging tympanic membrane with purulent fluid. The provider documents acute otitis media, unspecified ear, and fever.
   a. H66.001, R50.81
   b. H66.90, R50.9
   c. H66.009, R50.9
   d. H66.90

5. A 34-year-old patient presents with wheezing triggered by pollen exposure. He denies nighttime symptoms. The provider documents mild intermittent asthma, seasonal allergic rhinitis, and pollen allergy.
   a. J45.40, J30.2, Z79.899
   b. J45.21, J30.1
   c. J45.20, J30.5, Z91.018
   d. J45.22, J30.9, Z91.010

6. A patient presents to the office with nausea, vomiting, and dehydration after a 24-hour “stomach bug”. The provider documents nausea with vomiting, dehydration, and viral enteritis.
   a. E86.0, A08.4
   b. R11.2, E86.0, A08.4
   c. R11.10, B97.89
   d. R11.10, R11.11, E86.0, A08.4

7. A 28-year-old woman presents with dysuria, urinary frequency, and suprapubic discomfort. Urinalysis shows leukocytes but no hematuria. The provider documents acute cystitis, without hematuria, and dysuria.
   a. N30.00
   b. N39.0, R82.90
   c. N30.00, R31.9
   d. N34.2, R30.0

8. A patient presents to the orthopedic surgeon after falling on ice and landing on an outstretched hand two days ago. X-ray taken in the ER on Monday confirms an extraarticular fracture of the distal radius, right side. The provider also documents right wrist pain. The provider determines no further treatment is necessary, places the patient in a splint, and instructs the patient to return in 4 weeks.
    a. S52.551A, M25.531, W00.0xxA
    b. S52.551D, W00.0xxD
    c. S52.551A, W00.0xxA
    d. S52.501S, M25.531, W00.0xxS

9. A 56-year-old patient presents with fatigue and pallor. Labs show low hemoglobin and ferritin. The provider documents iron deficiency anemia, fatigue, and history of anemia.
    a. D50.9, R53.1, Z86.2
    b. D50.9
    c. D50.9, R53.83
    d. D51.0, R53.83, Z86.39

10. A patient with AIDS is admitted for Pneumocystis pneumonia. The provider documents HIV disease with Pneumocystis jirovecii pneumonia.
    a. B20, B59
    b. Z21, B59
    c. B59, B20
    d. Z21, J18.9

11. A patient in her second trimester is seen for chronic hypertension complicating pregnancy. The provider documents chronic hypertension affecting pregnancy.
    a. O10.012, I10
    b. O10.012
    c. I10, Z34.82
    d. O13.2, I10

12. A patient who is 32 weeks pregnant presents for routine prenatal care. She has a known history of HIV disease, diagnosed several years ago, and is currently maintained on antiretroviral therapy. The provider documents that her HIV disease is complicating the pregnancy, but she has no current opportunistic infections and is clinically stable. Fetal growth and movement are normal, and no additional pregnancy-related complications are noted.
    a. O98.713
    b. O98.713, B20
    c. B20, O98.713
    d. Z21, O98.713

Answer Key

1. A 62-year-old patient presents for a follow-up visit to manage multiple chronic conditions. He reports occasional fatigue but denies chest pain, dizziness, or shortness of breath. His blood pressure today is 158/92. The provider documents essential hypertension, Type 1 diabetes mellitus without complications, and chronic kidney disease stage 3, noting that the CKD is due to hypertension. The patient continues long-term use of insulin and antihypertensive medications.

   a. I12.0, N18.30, E10.9, Z79.4
   b. I10, N18.3, E10.65, Z79.899
   c. I12.0, N18.30, E10.9
   d. I13.10, N18.30, E10.9, Z79.899

   Rationale: The documented conditions include essential hypertension, Type 1 diabetes mellitus without complications, and chronic kidney disease stage 3 due to hypertension. Because the provider explicitly links CKD to hypertension, the correct hypertensive CKD combination code is I12.0 (Hypertensive CKD with stage 5 or ESRD) only when stage 5 or ESRD is present. In this case, the CKD is stage 3, so the correct code is I12.9 (Hypertensive CKD, stage 1–4 or unspecified). N18.30 identifies CKD stage 3 unspecified. E10.9 identifies Type 1 diabetes without complications. Z79.4 is not assigned, because long-term insulin use is inherent to Type 1 diabetes and should not be coded separately.
   Alphabetic Index:
   - Hypertension → kidney → stage 1 through stage 4 chronic kidney disease
   - Disease → kidney → chronic → stage 3 (moderate)
   - Diabetes → type 1

2. A 10-year-old child presents with fever, sore throat, swollen tonsils, and white exudate. A rapid strep test is positive. The provider documents acute streptococcal pharyngitis and notes exposure to a sick sibling.
   a. J02.0, B95.5, Z00.818
   b. J03.00, Z20.2, Z79.2
   c. J02.0, Z20.818
   d. B95.4, J02.0, Z76.89

   Rationale: The documented condition is streptococcal pharyngitis. J02.0 is correct for strep pharyngitis. You do not report B95.5 since J02.0 identifies the streptococcal organism, and Z20.818 captures exposure to an infectious agent.
   Alphabetic Index:
   - Pharyngitis → streptococcal
   - Exposure (to) → communicable disease → bacterial

3. A 52-year-old patient presents for diabetes management. He reports normal blood sugars and denies any other complications. Patient takes insulin daily to help control blood glucose.
   a. E11.9, Z79.4
   b. E10.9, Z79.84
   c. E10.9, Z79.4
   d. E13.9, Z79.4

   Rationale: The documented condition is uncomplicated Type 2 diabetes with long-term insulin use. E11.9 captures uncomplicated Type 2 diabetes, Z79.4 captures long-term insulin use, and Z00.00 captures routine exam. Guideline I.C.4.a.2 states that if the type of diabetes is not documented, the default is type 2 diabetes mellitus. Guideline I.C.4.a.3 states that if the documentation indicates that the patient uses insulin, code E11.- should be assigned and additional code(s) should be assigned from category Z79 to identify long-term (current) use of insulin, oral hypoglycemic drugs, or injectable non-insulin antidiabetic.
   Alphabetic Index:
   - Diabetes → type 2
   - Long Term (current) drug therapy (use of) → insulin

4. A toddler presents with ear pain, irritability, and fever. Examination reveals a bulging tympanic membrane with purulent fluid. The provider documents acute otitis media, unspecified ear, and fever.
   a. H66.001, R50.81
   b. H66.90, R50.9
   c. H66.009, R50.9
   d. H66.90

   Rationale: The documented condition is acute otitis media with unspecified ear. H66.90 is correct for acute otitis media, unspecified. Fever is a common symptom with otitis media and is not coded separately.
   Alphabetic Index: Otitis → media → acute

5. A 34-year-old patient presents with wheezing triggered by pollen exposure. He denies nighttime symptoms. The provider documents mild intermittent asthma, seasonal allergic rhinitis, and pollen allergy.
   a. J45.40, J30.2, Z79.899
   b. J45.21, J30.1
   c. J45.20, J30.5, Z91.018
   d. J45.22, J30.9, Z91.010

   Rationale: The documented conditions are mild intermittent asthma and allergic rhinitis due to pollen. J45.21 captures mild intermittent asthma (the wheezing indicates there is an exacerbation), J30.1 captures allergic rhinitis that was triggered by the pollen exposure.
   Alphabetic Index:
   - Asthma → intermittent (mild) → with → exacerbation
   - Rhinitis → allergic → due to → pollen

6. A patient presents to the office with nausea, vomiting, and dehydration after a 24-hour "stomach bug". The provider documents nausea with vomiting, dehydration, and viral enteritis.
   a. E86.0, A08.4
   b. R11.2, E86.0, A08.4
   c. R11.10, B97.89
   d. R11.10, R11.11, E86.0, A08.4

   Rationale: The documented conditions are nausea with vomiting, dehydration, and viral enteritis. E86.0 captures dehydration, and A08.4 captures viral enteritis, unspecified. The nausea and vomiting are routinely associated with viral enteritis and should not be reported separately.
   Alphabetic Index:
   - Dehydration
   - Enteritis → viral

7. A 28-year-old woman presents with dysuria, urinary frequency, and suprapubic discomfort. Urinalysis shows leukocytes but no hematuria. The provider documents acute cystitis, without hematuria, and dysuria.
   a. N30.00
   b. N39.0, R82.90
   c. N30.00, R31.9
   d. N34.2, R30.0

   Rationale: The documented condition is acute cystitis without hematuria. N30.00 is correct for acute cystitis without hematuria. Dysuria, urinary frequency and suprapubic discomfort are all routinely associated with cystitis and should not be reported separately.
   Alphabetic Index: Cystitis → acute → without hematuria.

8. A patient presents to the orthopedic surgeon after falling on ice and landing on an outstretched hand two days ago. X-ray taken in the ER on Monday confirms an extraarticular fracture of the distal radius, right side. The provider also documents right wrist pain. The provider determines no further treatment is necessary, places the patient in a splint, and instructs the patient to return in 4 weeks.
   a. S52.551A, M25.531, W00.0xxA
   b. S52.551D, W00.0xxD
   c. S52.551A, W00.0xxA
   d. S52.501S, M25.531, W00.0xxS

   Rationale: The documented condition is an extraarticular distal radius fracture, right side. S52.501A is correct for right distal radius fracture, initial encounter since the provider is actively evaluating and treating the fracture. M25.531 captures right wrist pain.
   Alphabetic Index:
   - Fracture → radius → lower end → extraarticular
   - (External Cause Index) Slipping → on → ice

9. A 56-year-old patient presents with fatigue and pallor. Labs show low hemoglobin and ferritin. The provider documents iron deficiency anemia, fatigue, and history of anemia.
   a. D50.9, R53.1, Z86.2
   b. D50.9
   c. D50.9, R53.83
   d. D51.0, R53.83, Z86.39

   Rationale: The documented condition is iron deficiency anemia, unspecified. D50.9 is correct because no cause is documented. The fatigue is routinely associated with iron deficiency anemia so it would not be coded separately.
   Alphabetic Index: Anemia → iron deficiency

10. A patient with AIDS is admitted for Pneumocystis pneumonia. The provider documents HIV disease with Pneumocystis jirovecii pneumonia.
    a. B20, B59
    b. Z21, B59
    c. B59, B20
    d. Z21, J18.9

    Rationale: A diagnosis of AIDS requires assignment of B20 (HIV disease). Opportunistic infections such as Pneumocystis pneumonia are never coded first; they are sequenced after B20. Z21 is inappropriate because it represents asymptomatic HIV, which contradicts the documentation.
    Alphabetic Index:
    - AIDS
    - Pneumonia--? In (due to) → pneumocystosis (Pneumocystitis jirovecii)

11. A patient in her second trimester is seen for chronic hypertension complicating pregnancy. The provider documents chronic hypertension affecting pregnancy.
    a. O10.012, I10
    b. O10.012
    c. I10, Z34.82
    d. O13.2, I10

    Rationale: When chronic hypertension complicates pregnancy, assign the appropriate O10.- code. Since the patient is in the second trimester, you will use sixth character 2. Code I10 is not needed because the code for Chapter 15 represents the pregnancy and preexisting hypertension. O13.- is used for gestational hypertension, which is not documented.
    Alphabetic Index: Hypertension → complication → pregnancy → pre-existing

12. A patient who is 32 weeks pregnant presents for routine prenatal care. She has a known history of HIV disease, diagnosed several years ago, and is currently maintained on antiretroviral therapy. The provider documents that her HIV disease is complicating the pregnancy, but she has no current opportunistic infections and is clinically stable. Fetal growth and movement are normal, and no additional pregnancy-related complications are noted.
    a. O98.713
    b. O98.713, B20
    c. B20, O98.713
    d. Z21, O98.713

    Rationale: When HIV disease complicates pregnancy, the pregnancy-specific code O98.713 (HIV disease complicating pregnancy, third trimester) is sequenced first, followed by B20 to represent the patient's HIV disease. There is a use additional code note to identify the type of HIV disease, indicating that the Chapter 15 code should be sequenced first followed by B20 for HIV.
    Alphabetic Index:
    - Pregnancy → complicated by → HIV
    - HIV