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QUESTION 1

From a left femoral access, the catheter is placed within the proper hepatic artery, dye is injected, and imaging is obtained. A stenosis within this artery is identified. A percutaneous transluminal angioplasty is performed on the proper hepatic (visceral) artery in the outpatient radiology department.

What CPT?coding is reported?

- A. 36247, 75736-26-59, 37248-51
- B. 36247, 75726-26-59, 37246-51
- C. 36253, 75726-26-59, 37246-51
- D. 36253, 75736-26-59, 37248-51

Correct Answer: D

QUESTION 2

A 65-year-old man had a right axillary block by the anesthesiologist. When the arm was totally numb, the arm was prepped and draped, and the surgeon performed tendon repairs of the right first, second, and third fingers. The anesthesiologist monitored the patient throughout the case.

What anesthesia code is reported?

- A. 01830
- B. 01820
- C. 01810
- D. 01840

Correct Answer: C

QUESTION 3

A cardiologist uses the hospital's equipment for a cardiac stress test as he doesn't own equipment for the test. He supervises the test and provides the interpretation and report of the test. What CPT?codes are reported?

- A. 93016, 93018
- B. 93015, 93018
- C. 93015, 93016
- D. 93016, 93017, 93018

Correct Answer: B



QUESTION 4

Mr. Woolridge has had a suspicious lesion on his left shoulder for approximately eight weeks that is not healing. On the dermatologist's exam of left shoulder blade, there is excoriation and scabbing and the lesion not healing. Patient agrees and wishes to proceed with a punch biopsy of the lesion. A punch biopsy is taken of the lesion and sent to pathology. A simple repair is performed at the biopsy site.

What CPT and ICD-10-CM codes are reported?

- A. 11102, 12001-51, D49.2
- B. 11102, L98.9
- C. 11104, D49.2
- D. 11104, 12001-51, L98.9

Correct Answer: C

QUESTION 5

View MR 005398 MR 005398 Operative Report Preoperative Diagnosis: Nonfunctioning right kidney with ureteral stricture. Postoperative Diagnosis: Nonfunctioning right kidney with ureteral stricture. Procedure: Right nephrectomy with partial ureterectomy. Findings and Procedure: Under satisfactory general anesthesia, the patient was placed in the right flank position. Right flank and abdomen were prepared and draped out of the sterile field. Skin incision was made between the 11th and 12th

ribs laterally. The incision was carried down through the underlying subcutaneous tissues, muscles, and fascia. The right retroperitoneal space was entered. Using blunt and sharp dissection, the right kidney was freed circumferentially. The

right artery, vein, and ureter were identified. The ureter was dissected downward where it is completely obstructed in its distal extent. The ureter was clipped and divided distally. The right renal artery was then isolated and divided between 0

silk suture ligatures. The right renal vein was also ligated with suture ligatures and 0 silk ties. The right kidney and ureter were then submitted for pathologic evaluation. The operative field was inspected, and there was no residual bleeding

noted, and then it was carefully irrigated with sterile water. Wound closure was then undertaken using 0 Vicryl for the fascial layers, 0 Vicryl for the muscular layers, 2-0 chromic for subcutaneous tissue, and clips for the skin. A Penrose drain

was brought out through the dependent aspect of the incision. The patient lost minimal blood and tolerated the procedure well.

What CPT coding is reported for this case?

- A. 50234
- B. 50220
- C. 50230
- D. 50240



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Correct Answer: B

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