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**QUESTION 1**

A diagnostic mammogram is performed on the left and right breasts. Computer-aided detection is also used to further analyze the image for possible lesions. What CPT coding is reported for this radiology service?

- A. 77065-LT, 77065-RT
- B. 77066
- C. 77067-50
- D. 77066-50

Correct Answer: B

QUESTION 2

Where is a Warthin's tumor found?

- A. Ovary
- B. Bone
- C. Salivary gland
- D. Back of eye

Correct Answer: C

QUESTION 3

The gastroenterologist performs a simple excision of three external hemorrhoids and one internal hemorrhoid, each lying along the left lateral column. The operative report indicates that the internal hemorrhoid is not prolapsed and is outside of the anal canal.

What CPT and ICD-10CM codes are reported?

- A. 46320, 46945, K64.0, K64.9
- B. 46250, K64.0, K64.9
- C. 46255, K64.0, K64.4
- D. 46250, 46945, K64.0, K64.4

Correct Answer: B

QUESTION 4



View MR 002395 MR 002395 Operative Report Pre-operative Diagnosis: Acute rotator cuff tear Post-operative Diagnosis: Acute rotator cuff tear, synovitis Procedures: 1) Rotator cuff repair 2) Biceps Tenodesis 3) Claviclectomy 4) Coracoacromial ligament release Indication: Rotator cuff injury of a 32-year-old male, sustained while playing soccer. Findings: Complete tear of the right rotator cuff, synovitis, impingement. Procedure: The patient was prepared for surgery and placed in left lateral decubitus position. Standard posterior arthroscopy portals were made followed by an anterior- superior portal. Diagnostic arthroscopy was performed. Significant

synovitis was carefully debrided. There was a full-thickness upper 3rd subscapularis tear, which was repaired. The lesser tuberosity was debrided back to bleeding healthy bone and a Mitek 4.5 mm helix anchor was placed in the lesser tuberosity. Sutures were passed through the subcapulans in a combination of horizontal mattress and simple interrupted fashion and then tied. There was a partial-thickness tearing of the long head of the biceps. The biceps were released and then anchored in the intertubercular groove with a screw. There was a large anterior acromial spur with subacromial impingement. A CA ligament was released and acromioplasty was performed. Attention was then directed to the

supraspinatus tendon tear. The tear was V-shaped and measured approximately 2.5 cm from anterior to posterior. Two Smith and Nephew PEEK anchors were used for the medial row utilizing Healicoil anchors. Side-to-side stitches were placed. One set of suture tape from each of the medial anchors was then placed through a laterally placed Mitek helix PEEK knotless anchor which was fully inserted after tensioning the tapes. A solid repair was obtained. Next there were severe degenerative changes at the AC joint of approximately 8 to 10 mm. The distal clavicle was resected taking care to preserve the superior AC joint capsule. The shoulder was thoroughly lavaged. The instruments were removed and the incisions were closed in routine fashion. Sterile dressing was applied. The patient was transferred to recovery in stable condition.

What CPT coding is reported for this case?

- A. 29827, 29828-51, 29824-51, 29826
- B. 29827, 29824-51, 29826-51
- C. 29827, 29828-51, 29824-51, 29826, 29805-59
- D. 29827, 29824-51, 29826-51, 29805-59

Correct Answer: A

QUESTION 5

A 60-year-old male has three-vessel disease and supraventricular tachycardia which has been refractory to other management. He previously had pacemaker placement and stenting of LAD coronary artery stenosis, which has failed to solve the problem. He will undergo CABG with autologous saphenous vein and an extensive modified MAZE procedure to treat the tachycardia.

He is brought to the cardiac OR and placed in the supine position on the OR table. He is prepped and draped, and adequate endotracheal anesthesia is assured. A median sternotomy incision is made and cardiopulmonary bypass is initiated. The endoscope is used to harvest an adequate length of saphenous vein from his left leg. This is uneventful and bleeding is easily controlled. The vein graft is prepared and cut to the appropriate lengths for anastomosis. Two bypasses are performed: one to the circumflex and another to the obtuse marginal. The left internal mammary is then freed up and it is anastomosed to the ramus, the first diagonal, and the LAD. An extensive maze procedure is then performed and the patient is weaned from bypass. At this point, the sternum is closed with wires and the skin is reapproximated with staples. The patient tolerated the procedure without difficulty and was taken to the PACU.

Choose the procedure codes for this surgery.

- A. 33533, 33257, 33519, 33508



B. 33535, 33259, 33519, 33508

C. 33533, 33257-51, 33519-51, 33508-51

D. 33535, 33259 51, 33519-51, 33508-51

Correct Answer: A

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