
Coding Clinic for ICD-10-CM/PCS

Continuing Education Quiz 212-10

Postmarked no later than December 1, 2021

Second Quarter 2021

1. A patient with developmental delays and epilepsy has chronic static encephalopathy secondary to epilepsy and epileptic encephalopathy. **Assign the appropriate ICD-10-CM diagnosis code assignments for chronic static encephalopathy secondary to epilepsy and epileptic encephalopathy.**

2. **Assign the appropriate code assignment for a major neurocognitive disorder without behavioral disturbance when the underlying etiology is unknown, or unspecified.**

3. A patient with a history of human immunodeficiency virus (HIV) disease is also diagnosed with neurosyphilis. **Assign the correct code assignments for HIV disease and neurosyphilis.**

4. A patient with an infrarenal para-aortic paraganglioma underwent surgical excision. During the procedure, an incision was made in the midline above and below the umbilicus. The peritoneal cavity was entered and the mass was found to be adjacent to the aorta and inferior to the left renal hilum. The mass was then removed. **Assign the correct diagnosis and procedure codes for this case.**

5. A patient has a secondary hypercoagulable state with a history of paroxysmal atrial fibrillation (AF) on anticoagulant maintenance. **Assign the appropriate ICD-10-CM code assignments for secondary hypercoagulable state.**

6. The patient is diagnosed with chronic bilateral subsegmental pulmonary emboli (PE). **Assign the correct ICD-10-CM code assignment for chronic bilateral subsegmental pulmonary emboli.**

7. **Assign the appropriate ICD-10-CM code for granulomatosis with polyangiitis, without documented Wegener's granulomatosis.**

8. Facilities may develop internal facility-specific coding policies, stipulating whether to report "unspecified" codes as additional codes, when more specific information is not documented and the unspecified code does not add any useful information. **A. True B. False**

9. The patient presented for repositioning of his intra-aortic balloon pump (IABP) due to distal migration of the catheter. In the cath lab, the balloon catheter was repositioned by advancing the tip of the catheter to the aortic knob. **Assign the correct ICD-10-PCS code for this procedure.**

10. A patient required placement of a peritoneal dialysis catheter during the admission due to end-stage renal disease. At surgery, a vertical incision was made lateral to the umbilicus on the left side of the abdomen. Dissection was carried down to the anterior fascia and the anterior fascia was incised. The rectus muscle was dissected to expose the posterior fascia. A purse-string suture was then made around the posterior fascia, and a small nick was made in the posterior fascia. A peritoneal dialysis catheter was inserted in the direction of the lower pelvis and then secured to the purse-string suture and the anterior fascia was closed. The dialysis catheter was tested and then tunneled exiting out the skin just below the level of the umbilicus. **Assign the appropriate ICD-10-PCS code for placement of a peritoneal dialysis catheter.**

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By: _____ On: _____

Coding Clinic
Continuing Education Quiz
Due on or before December 1, 2021

Instructions

Registered Health Information Technicians, Registered Health Information Administrators, Certified Coding Specialists and Certified Coding Specialists—Physician-based may earn one hour of continuing education credit toward AHIMA's continuing education requirement by completing this test with a minimum score of 70%. This test is available to both personal subscribers and employees of institutions that subscribe to Coding Clinic. Complete the quiz, fill in information on both sides, and type or print clearly your name and mailing address in the space provided. Fold the insert on the dotted lines on this page, and mail to the following address:

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P.O. Box 92247
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FOLD #2

FOLD #2

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FOLD #1

FOLD #1

Enclose check or money order for \$25 (handling fee). Make check payable to the American Hospital Association. Do not send cash.

The quiz will not be graded and the \$25 fee will be forfeited if the quiz is not postmarked on or before the date indicated on each test.

No credit will be given if the score is less than 70%, the test is incomplete, postmarked after the designated date, or submitted without the \$25 handling fee.

Forms may be photocopied for use by directors of medical records or coding supervisors for assessment of coding staff's understanding of topics presented in *Coding Clinic*.

Note: The Central Office on ICD-10-CM/PCS will not retain records of achievement. The practitioner is responsible for retaining the verification form returned by AHA and reporting the credit on AHIMA's official continuing education reporting form.

Do not send the AHA verification form to the American Health Information Management Association.

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