1. Assign the correct ICD-10-CM code for a diagnosis of severe malnourishment.

2. A 73-year-old woman is diagnosed with acute alcoholic pancreatitis due to alcohol dependence. Assign the correct ICD-10-CM code(s) for the acute alcoholic pancreatitis and alcohol dependence.

3. A 33-year-old woman with a long-standing history of type 2 diabetic polyneuropathy underwent bariatric surgery. The patient no longer requires medication for the diabetes secondary to significant weight loss. The physician documents that the diabetes has resolved. However, the patient has developed an ulceration of the right foot with acute osteomyelitis secondary to diabetic polyneuropathy. Assign the appropriate ICD-10-CM codes.

4. Assign the correct ICD-10-CM code for acute flaccid myelitis.

5. A 16-year-old patient underwent a cholecystectomy for chronic calculus cholecystitis. While taking down attachments between the gallbladder and the liver bed, the provider noted an arterial bleed. The right upper quadrant was packed, and a vascular clamp was placed across the porta hepatitis to control the bleeding. The bleeding site was identified as the orifice of the cystic artery just beyond its takeoff from the right hepatic artery. The provider documented “Complication: intraoperative hemorrhage.” Assign the correct diagnosis code for the intraoperative hemorrhage.

6. A two-year-old male with Tetralogy of Fallot with pulmonary atresia and major aortopulmonary collateral arteries (MAPCA) presents for pulmonary artery unifocalization. A redo median sternotomy was performed and the Blalock-Taussig (BT) shunt was doubly ligated and divided. Non-duplicate MAPCAs to the left and right lung were taken off the descending aorta and unifocalized together with the native pulmonary arteries (PAs). These required extensive patching with PhotoFix (bovine) pericardium. A right ventriculotomy was performed, and an 8-mm Gore-Tex® conduit was sewn into the unifocalized PAs distally and the right ventricular outflow tract proximally. Assign the correct ICD-10-PCS codes for the pulmonary artery unifocalization.

7. A 35-year-old morbidly obese man presented for surgical repair of a buried penis. The patient underwent escutcheonectomy. At surgery, the penis was degloved to the suspensory ligament. Escutcheonectomy was performed with removal of excess suprapubic skin, fat and tissue. Split-thickness skin graft was excised from the right upper thigh. The graft was used to cover the penis where it had been degloved. Assign the correct ICD-10-PCS codes for surgical repair of a buried penis.

8. A patient who is status post left side mastectomy due to left breast cancer presents for delayed reconstruction. The reconstruction was performed using a left vertical upper gracilis musculocutaneous free flap. Assign the correct ICD-10-PCS codes for left breast reconstruction using left vertical upper gracilis musculocutaneous free flap.

9. A 32-year-old patient, status post-sternotomy, presented with sternal dehiscence and underwent debridement of the sternum with insertion of Sternal Talon® plating. The sternum was debrided with a saw and pectoralis flaps were advanced but left connected to the chest wall. Sternal Talon® plates were placed across the sternum beginning at ribs 3-6. Each plate was anchored with screws lateral to the sternum. The sternum and manubrium were reapproximated at the midline with the titanium plates and screws. The pectoralis muscles were sutured together at the fascia level over the plates. The fascia and chest wall were then reapproximated. Assign the correct ICD-10-PCS code for the procedure.

10. A 48-year-old woman with progressive idiopathic thoracolumbar scoliosis, spondylosis with foraminal stenosis and rib cage deformity was admitted for spinal fusion surgery. Through a right thoracotomy approach, a right anterior spinal fusion was performed with placement of screws into the vertebral body and seating of a rod cord at T5-T11. Significant correction of the scoliosis curve was obtained across the thoracic levels. The patient was repositioned for exposure of the left side to complete left anterior spinal fusion at T11-L4. Screws were placed into the vertebral body and a rod cord was secured across the levels with significant correction of the scoliosis and derotation of the lumbar segments. Assign the correct ICD-10-PCS codes for the procedure.

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