

ch02

Student: _____

1. The International Classification of Diseases, Ninth Revision, Clinical Modification, is abbreviated:
 - A. ICD-CM
 - B. IDNRCM
 - C. ICD-9-CM
 - D. ICD 9th
2. ICD-9-CM stands for:
 - A. Internal Category of Diseases, Ninth Edition, Clinical Modification
 - B. International Category of Diseases, Ninth Revision, Clinical Modification
 - C. International Classification of Diseases, Ninth Edition, Clinical Modification
 - D. International Classification of Diseases, Ninth Revision, Clinical Modification
3. The ICD-9-CM manual provides the _____ for the patient's service or procedure.
 - A. How
 - B. Where
 - C. When
 - D. Why
4. The diagnosis code selected from the ICD-9-CM manual provides the support for the patient's:
 - A. fee schedule
 - B. service
 - C. copay
 - D. return visit
5. The patient's diagnostic story is told by:
 - A. Using the ICD-9-CM manual as a translation dictionary
 - B. Providing supporting provider documentation with each CMS 1500 claim form
 - C. The Medical Assistant conveying a patient's vital signs to the provider
 - D. Using Volume III of the ICD-9-CM manual
6. Which of the following is not true about the ICD-9-CM manual?
 - A. The ICD-9-CM Volumes I & II are used exclusively by outpatient facilities
 - B. The ICD-9-CM manual is published in two- or three-volume sets
 - C. ICD-9-CM Volume III is used by facilities
 - D. ICD-9-CM Volume III is used to identify procedures in certain settings
7. Volume I of ICD-9-CM is also known as:
 - A. Index
 - B. Catalog
 - C. Tabular
 - D. Section
8. The index of the ICD-9-CM manual is also known as:
 - A. Volume I
 - B. Volume 2
 - C. Volume 3
 - D. Volume 4
9. The Tabular portion of the ICD-9-CM is also known as:
 - A. Volume 4
 - B. Volume 3
 - C. Volume 2
 - D. Volume 1

10. The portion of the ICD-9-CM manual that contains the full description (nomenclature) of each code is also known as the:
 - A. Manual
 - B. Subsection
 - C. Volume 1
 - D. Volume 2
11. Main terms are located in _____ of ICD-9-CM:
 - A. Volume 1
 - B. Volume 2
 - C. Tabular list
 - D. Guidelines
12. Coders are not assessed on Volume III of ICD-9-CM on the CPC exam because:
 - A. The CPC is an outpatient coding credential and Volume III is not used in outpatient settings
 - B. Coders are not assessed on Volume III of ICD-9-CM in any national coding certification exam
 - C. Volume III is only used by inpatient accounts receivable specialists
 - D. Volume III of ICD-9-CM is only published every five years
13. What is another name for the full description of an ICD-9-CM code?
 - A. Indentation
 - B. Identifier
 - C. Nomenclature
 - D. Definition
14. What does the index of the ICD-9-CM manual contain?
 - A. An alphabetic listing of main terms identifying procedures
 - B. An alphabetic listing of main terms identifying conditions
 - C. The nomenclature of each code
 - D. The full description of each code
15. In the index, what provides further clarification of the patient's condition?
 - A. Main term
 - B. Subcategory
 - C. Symptom
 - D. Subterm
16. What is an abbreviation that means "not elsewhere classified?"
 - A. NEC
 - B. NOS
 - C. NEWC
 - D. NOWS
17. When a more specific code is not provided in the ICD manual, the abbreviation _____ is used.
 - A. NOS
 - B. SA
 - C. NEC
 - D. S
18. The ICD-9-CM code 130.7 "Toxoplasmosis of other specified sites" would be appropriate to assign when the site of the patient's toxoplasmosis is not specifically described by another ICD-9-CM code. This is an example of a:
 - A. Not elsewhere classified code
 - B. See also code
 - C. See code
 - D. Not otherwise specified code

19. An unspecified code would be assigned to a code known as a _____ code:
- A. Not elsewhere classified
 - B. Not found elsewhere
 - C. Not otherwise specified
 - D. Not elsewhere specified
20. The diagnostic statement "Candidiasis" would be coded as:
- A. 112.9 Candidiasis of unspecified site
 - B. 112.3 Candidiasis of skin and nails
 - C. 112.85 Candidal enteritis
 - D. 112.5 Disseminated candidiasis
21. Typically, NEC-specified codes are also known as *other-specified* codes and have:
- A. 7 as the fourth digit or 9 as the fifth digit
 - B. 8 as the fourth digit or 7 as the fifth digit
 - C. 9 as the fourth digit or 8 as the fifth digit
 - D. 8 as the fourth digit or 9 as the fifth digit
22. The additional section that supplements the official ICD-9-CM coding conventions is known as the:
- A. Additional Guidelines section
 - B. Supplemental Conventions section
 - C. Additional Conventions section
 - D. Notations section
23. When the acute and chronic forms of a condition are present:
- A. Both the acute and chronic forms of the condition should be coded
 - B. The acute form of the condition only should be coded
 - C. The chronic form of the condition only should be coded
 - D. A combination code only must be used
24. A code that identifies both the chronic and acute forms of a condition in one code is known as a:
- A. Correlation code
 - B. Multiple use code
 - C. Abstract code
 - D. Combination code
25. A "with" statement connecting the subterms acute and chronic indicates:
- A. Distinct codes are provided for each condition
 - B. These conditions may not be coded together
 - C. The acute condition must be coded first
 - D. A combination code is provided for the acute and chronic conditions
26. This is the connecting term between the subterms acute and chronic to indicate ICD-9-CM provides a combination code to describe both conditions:
- A. with
 - B. and
 - C. also
 - D. from
27. An acute condition is one that:
- A. has a slow onset
 - B. is of long duration
 - C. can last a lifetime
 - D. has a sudden onset

28. A condition with sudden onset, usually without warning, and of brief duration is a(n) _____ condition:
- A. acute
 - B. chronic
 - C. bacterial
 - D. genetic
29. A condition with slow onset and of long duration, even the lifetime of the patient, is known as a(n) _____ condition:
- A. acute
 - B. chronic
 - C. bacterial
 - D. genetic
30. Per ICD-9-CM guidelines, the use of the word "and" is interpreted to mean:
- A. and/or
 - B. and/with
 - C. and/also
 - D. and/along with
31. The nomenclature "Onychia and paronychia of finger" may be selected:
- A. Only when onychia and paronychia are present in the finger
 - B. When onychia and/or paronychia are present in the finger or hand
 - C. When onychia and/or paronychia are present in the finger
 - D. When neither onychia or paronychia are present in the finger
32. The condition produced after the initial injury or condition has been healed is called the:
- A. Last effect
 - B. Subsequent effect
 - C. Sequela
 - D. Succession effect
33. A condition that is present and exists as a result of a past condition or injury is referred to as:
- A. Referred
 - B. Residual
 - C. Current
 - D. Consequential
34. In ICD-9-CM, the note indicating that the condition being coded is located elsewhere in the manual and should never be coded with the code under which it is located is the:
- A. Excludes
 - B. Without
 - C. See also
 - D. See
35. The _____ of an excludes note identifies the range of codes to which the note applies:
- A. Length
 - B. Indentation
 - C. Placement
 - D. Sequence
36. Excludes notes can be found in all of the following locations in the ICD-9-CM manual except:
- A. Beginning of a chapter
 - B. Directly below the code
 - C. Beginning of a section
 - D. Beginning of the index entry

37. The placement of an excludes note identifies:
- A. The range of codes to which the note applies
 - B. The range of codes to which the coder should refer for the condition
 - C. The category of the applicable late effect codes
 - D. The clarifying guideline applicable to that condition
38. An excludes note found at the chapter level:
- A. Governs the category immediately below it
 - B. Governs the category immediately above it
 - C. Governs the chapter immediately above it
 - D. Governs the chapter immediately below it
39. Notes that clarify the code or category being considered by providing definitions or examples of conditions are:
- A. Excludes notes
 - B. Qualifying notes
 - C. Includes notes
 - D. Clarification notes
40. At the fourth- and fifth-digit level, inclusion terms:
- A. Provide synonyms of the diagnostic statement being coded
 - B. Identify alternative codes to use for that diagnostic statement
 - C. Identify late effects of the diagnostic statement
 - D. Provide alternative diagnostic statements to consider
41. While includes notes are not found at the fourth- and fifth-digit levels, coders can find _____ at these levels.
- A. See also notes
 - B. Main terms
 - C. Inclusion terms.
 - D. Excludes notes
42. Heart palpitations is an example of a:
- A. Symptom
 - B. Virus
 - C. Sign
 - D. Syndrome
43. Light-headedness is an example of a:
- A. Qualifier
 - B. Symptom
 - C. Sign
 - D. Root condition
44. According to ICD-9-CM Section _____ guidelines, providers must use codes for signs and symptoms instead of codes for diagnosis when a definitive diagnosis has not been made.
- A. IV
 - B. V
 - C. III
 - D. II
45. A sign is a(n):
- A. Subjective condition that is relayed to the provider by the patient
 - B. Objective condition that can be measured and recorded
 - C. A summary of a patient's concurrent conditions
 - D. The type of procedure performed

46. When a definitive diagnosis has not been made:
- A. Providers must use codes for signs and symptoms
 - B. Providers must perform more diagnostic tests to identify the underlying condition before selecting a code
 - C. Providers cannot receive reimbursement for the service
 - D. Providers must use codes for symptoms only
47. In the medical record, the patient is documented to have the following conditions: lower back pain, blood in the urine, and a kidney infection. The coder would assign ICD-9-CM code(s) for the following condition(s):
- A. Blood in the urine and kidney infection
 - B. Lower back pain and blood in the urine
 - C. Blood in the urine only
 - D. Kidney infection only
48. The way the condition due to the underlying disease or condition presents itself is called the:
- A. Condition
 - B. Manifestation
 - C. Sign
 - D. Symptom
49. The following notation implies sequencing of the codes when reported:
- A. See
 - B. See also
 - C. Use additional code
 - D. Code also
50. A coder should only list an additional code when:
- A. Documentation provides the additional information needed to accurately select the code
 - B. A condition is documented in a previous note in the patient's chart
 - C. A condition is documented as being suspected prior to the definitive diagnosis being documented
 - D. The coder believes another condition is the root cause of the documented condition
51. In ICD-9-CM, these punctuation marks are used to enclose explanatory phrases or synonyms of the condition and valid fifth digits for the code being reviewed:
- A. parentheses
 - B. square brackets
 - C. slanted brackets
 - D. ampersands
52. Punctuation marks used in ICD-9-CM to identify the mandatory sequencing of etiology/manifestation coding are:
- A. square brackets
 - B. parentheses
 - C. hyphens
 - D. slanted brackets
53. Square brackets:
- A. Are found only in the tabular section
 - B. Are found only in the index
 - C. Are used to identify mandatory sequencing
 - D. Are found in both the tabular section and the index
54. The following punctuation marks are found only in the index of ICD-9-CM:
- A. Parentheses
 - B. Square brackets
 - C. Slanted brackets
 - D. Hyphens

55. Punctuation that encloses other terms or names of the condition in the nomenclature of the code or inclusion list are:
- A. Parentheses
 - B. Square brackets
 - C. Slanted brackets
 - D. Arrows
56. Parentheses are used to enclose:
- A. HCPCS modifiers
 - B. Supplemental modifiers
 - C. Nonessential modifiers
 - D. Irrelevant information
57. This punctuation is found in both the Tabular List and the Alphabetic Index:
- A. Parentheses
 - B. Slanted brackets
 - C. Square brackets
 - D. Ampersands
58. Approximately how many codes does ICD-9-CM contain?
- A. 15,000
 - B. 14,000
 - C. 16,000
 - D. 18,000
59. Coders may use all of the following to look up a term in the index except:
- A. anatomic site
 - B. condition
 - C. diagnosis
 - D. sign
60. When looking up an anatomic site in the ICD-9-CM index, the note _____ appears:
- A. Use also
 - B. Code also
 - C. See condition
 - D. Refer to
61. The provider's diagnostic statement, the term that identifies the patient's condition, injury, or disease, is known as the:
- A. Default code
 - B. Main term
 - C. Nonessential modifier
 - D. Subterm
62. In the Alphabetic Index, main terms are typed in:
- A. italics
 - B. bold face
 - C. underlined
 - D. plain text
63. A coder identifies _____ when he/she determines the answer to the question "What did the patient suffer from?"
- A. The sequel
 - B. The extender
 - C. The default code
 - D. The main term

64. Identify the main term in this diagnostic statement: "Bilateral proliferative recurrent retinopathy."
A. bilateral
B. recurrent
C. retinopathy
D. proliferative
65. Which of the following is not a major step in locating the appropriate ICD-9-CM code?
A. Determine the main term(s) from the documentation
B. Review all notes listed in the Alphabetic Index and Tabular List
C. Verify the code identified in the Alphabetic Index by checking it in the Tabular List
D. Select the appropriate default code listed in the Tabular List
66. A useful tip for coders when selecting the appropriate code is to look _____ codes above and _____ codes below the code identified in the index just to make sure they aren't missing something.
A. Four, four
B. Five, five
C. Four, five
D. Five, four
67. How many chapters does the ICD-9-CM manual contain?
A. 10
B. 17
C. 15
D. 13
68. Guidelines in Chapter 3 include information on coding diabetes. Codes require five digits and there are multiple sequencing guidelines.
A. Mental Disorders
B. Diseases of the Circulatory System
C. Diseases of the Digestive System
D. Endocrine, Nutritional, and Metabolic Diseases and Immunity Disorders
69. There are currently no guidelines for the following chapters:
A. Diseases of the Circulatory System, Diseases of the Respiratory System, and Congenital Anomalies
B. Congenital Anomalies, Symptoms, Signs, and Ill-Defined Conditions, and Mental Disorders
C. Diseases of the Nervous System and Sense Organs, Congenital Anomalies, and Symptoms, Signs, and Ill-Defined Conditions
D. Complications of Pregnancy, Childbirth, and the Puerperium
70. Very specific guidelines for coding pain are found in this chapter:
A. Complications of Pregnancy, Childbirth, and the Puerperium
B. Neoplasms
C. Diseases of the Nervous System and Sense Organs
D. Symptoms, Signs, and Ill-Defined Conditions
71. Diseases of Blood and Blood-Forming Organs contain guidelines about the following condition:
A. Hypoglycemia
B. Anemia
C. Low blood count
D. Ketinuria
72. The chapter containing guidelines for coding of pathologic fractures is:
A. Diseases of the Musculoskeletal System and Connective Tissue
B. Symptoms, Signs, and Ill-Defined Conditions
C. Injury and Poisoning
D. Endocrine, Nutritional, and Metabolic Diseases and Immunity Disorders

73. Guidelines for V and E codes are found:
- A. In the guidelines of Chapter 9
 - B. In the guidelines of each chapter-specific guideline section
 - C. In a separate chapter between the Alphabetic Index and Tabular List
 - D. There are no guidelines provided regarding use and sequencing of V and E codes
74. The following is true regarding the hierarchy of ICD-9-CM coding guidelines:
- A. outpatient guidelines take precedence over general and disease-specific guidelines
 - B. guidelines at the section level take precedence over guidelines at the code level
 - C. the closer a guideline or convention is to the code in the Tabular List, the higher it is in the hierarchy of guidelines
 - D. a guideline or convention listed in the chapter-specific guidelines takes precedence over a guideline above the code
75. The reason for admission after study is the:
- A. Unconfirmed diagnosis
 - B. First-listed diagnosis
 - C. Sign and symptom
 - D. Principal diagnosis
76. The first-listed diagnosis is:
- A. The reason for the visit
 - B. The reason for admission after study
 - C. The reason for the visit and is used for provider coding
 - D. The reason for the visit and is used for facility coding
77. Signs and symptoms:
- A. Are acceptable for reporting when a diagnosis has not been confirmed and reported by the provider
 - B. Are accepted for reporting when a diagnosis is confirmed by a pathology or lab report in the patient's . chart and has not been documented by the provider in the documentation of the visit
 - C. May be reported when a diagnosis has been made
 - D. Cannot be used as reason for admission codes
78. Coding to the highest level of specificity refers to:
- A. choosing the appropriate category
 - B. applying proper sequencing
 - C. use of fourth and fifth digits when required
 - D. chronic diseases

ch02 Key

1. The International Classification of Diseases, Ninth Revision, Clinical Modification, is abbreviated:
- A. ICD-CM
 - B. IDNRCM
 - C. ICD-9-CM**
 - D. ICD 9th

The International Classification of Diseases, Ninth Revision, Clinical Modification, is abbreviated ICD-9-CM.

ABHES: 3.d Recognize and identify acceptable medical abbreviations

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-01

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #1

Topic: Format of ICD-9-CM Manual

2. ICD-9-CM stands for:
- A. Internal Category of Diseases, Ninth Edition, Clinical Modification
 - B. International Category of Diseases, Ninth Revision, Clinical Modification
 - C. International Classification of Diseases, Ninth Edition, Clinical Modification
 - D. International Classification of Diseases, Ninth Revision, Clinical Modification**

The abbreviation ICD-9-CM stands for International Classification of Diseases, Ninth Revision, Clinical Modification.

ABHES: 3.d Recognize and identify acceptable medical abbreviations

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-01

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #2

Topic: Format of ICD-9-CM Manual

3. The ICD-9-CM manual provides the _____ for the patient's service or procedure.
- A. How
 - B. Where
 - C. When
 - D. Why**

The ICD-9-CM manual provides the "why" for the patient's service or procedure.

ABHES: 8.t Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-01

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #3

Topic: Format of ICD-9-CM Manual

4. The diagnosis code selected from the ICD-9-CM manual provides the support for the patient's:
- A. fee schedule
 - B. service**
 - C. copay
 - D. return visit

ICD-9-CM provides the "why" for the patient's service or procedure.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-01

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #4

Topic: Format of ICD-9-CM Manual

5. The patient's diagnostic story is told by:
- A. Using the ICD-9-CM manual as a translation dictionary**
 - B. Providing supporting provider documentation with each CMS 1500 claim form
 - C. The Medical Assistant conveying a patient's vital signs to the provider
 - D. Using Volume III of the ICD-9-CM manual

The ICD-9-CM manual is the translation dictionary that coders use to translate medical terminology from provider documentation into the codes used to tell the patient's diagnostic story.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-01

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #5

Topic: Format of ICD-9-CM Manual

6. Which of the following is not true about the ICD-9-CM manual?
- A. The ICD-9-CM Volumes I & II are used exclusively by outpatient facilities**
 - B. The ICD-9-CM manual is published in two- or three-volume sets
 - C. ICD-9-CM Volume III is used by facilities
 - D. ICD-9-CM Volume III is used to identify procedures in certain settings

Outpatient providers and inpatient facilities both use ICD-9-CM Volumes I & II to describe why procedures and services are performed.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-01

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #6

Topic: Format of ICD-9-CM Manual

7. Volume I of ICD-9-CM is also known as:
- A. Index
 - B. Catalog
 - C. Tabular**
 - D. Section

Volume I of ICD-9-CM is also known as the tabular portion.

ABHES: 8.t Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-01

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #7

Topic: Format of ICD-9-CM Manual

8. The index of the ICD-9-CM manual is also known as:
- A. Volume I
 - B. Volume 2**
 - C. Volume 3
 - D. Volume 4

ABHES: 8.t Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-01

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #8

Topic: Format of ICD-9-CM Manual

9. The Tabular portion of the ICD-9-CM is also known as:
- A. Volume 4
 - B. Volume 3
 - C. Volume 2
 - D. Volume 1**

The Tabular portion of the ICD-9-CM is also known as Volume 1.

ABHES: 8.t Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-01

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #9

Topic: Format of ICD-9-CM Manual

10. The portion of the ICD-9-CM manual that contains the full description (nomenclature) of each code is also known as the:
- A. Manual
 - B. Subsection
 - C. Volume 1**
 - D. Volume 2

The portion of the ICD-9-CM manual that contains the full description (nomenclature) of each code is also known as Volume 1.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-01

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #10

Topic: Format of ICD-9-CM Manual

11. Main terms are located in _____ of ICD-9-CM:
- A. Volume 1
 - B. Volume 2**
 - C. Tabular list
 - D. Guidelines

Volume 2, also known as the index of ICD-9-CM, contains an alphabetic listing of main terms identifying a patient's condition.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-01

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #11

Topic: Format of ICD-9-CM Manual

12. Coders are not assessed on Volume III of ICD-9-CM on the CPC exam because:
- A. The CPC is an outpatient coding credential and Volume III is not used in outpatient settings**
 - B. Coders are not assessed on Volume III of ICD-9-CM in any national coding certification exam
 - C. Volume III is only used by inpatient accounts receivable specialists
 - D. Volume III of ICD-9-CM is only published every five years

The Volume III of ICD-9-CM is used for facilities to code for services and procedures. The CPC credential utilizes the HCPCS Levels I and II code sets to describe services and procedures provided. Therefore, the CPC exam does not include Volume III codes.

ABHES: 1.c Understand medical assistant credentialing requirements and the process to obtain the credential. Comprehend the importance of credentialing

Blooms: Understand

CAAHEP: IX.C.5 Discuss licensure and certification as it applies to healthcare providers

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-01

Level of Difficulty: 2 Medium

Stewart - Chapter 002 #12

Topic: Format of ICD-9-CM Manual

13. What is another name for the full description of an ICD-9-CM code?
- A. Indentation
 - B. Identifier
 - C. Nomenclature**
 - D. Definition

The Tabular List of ICD-9-CM contains the codes and the full description, or nomenclature, of each code.

ABHES: 8.t Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-01

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #13

Topic: Format of ICD-9-CM Manual

14. What does the index of the ICD-9-CM manual contain?
- A. An alphabetic listing of main terms identifying procedures
 - B. An alphabetic listing of main terms identifying conditions**
 - C. The nomenclature of each code
 - D. The full description of each code

The index of ICD-9-CM contains an alphabetic listing of main terms identifying the patient's condition, injury, sign, or symptom.

ABHES: 8.t Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-01

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #14

Topic: Format of ICD-9-CM Manual

15. In the index, what provides further clarification of the patient's condition?
- A. Main term
 - B. Subcategory
 - C. Symptom
 - D. Subterm**

Subterms follow the main term in a graduated indented format and provide further clarification of the patient's condition.

ABHES: 8.t Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-01

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #15

Topic: Format of ICD-9-CM Manual

16. What is an abbreviation that means "not elsewhere classified?"

- A. NEC
- B. NOS
- C. NEWC
- D. NOWS

NEC is an abbreviation that means "not elsewhere classified."

ABHES: 3.d Recognize and identify acceptable medical abbreviations

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #16

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

17. When a more specific code is not provided in the ICD manual, the abbreviation _____ is used.

- A. NOS
- B. SA
- C. NEC
- D. S

NEC is a notation meaning "not elsewhere classified"; it indicates that a more specific code is not provided in the ICD manual.

ABHES: 8.t Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #17

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

18. The ICD-9-CM code 130.7 "Toxoplasmosis of other specified sites" would be appropriate to assign when the site of the patient's toxoplasmosis is not specifically described by another ICD-9-CM code. This is an example of a:

- A. Not elsewhere classified code
- B. See also code
- C. See code
- D. Not otherwise specified code

The code 130.7 "Toxoplasmosis of other specified sites" would be appropriate to assign when the site of the patient's toxoplasmosis is not specifically described in the 130 category. This is also known as a not elsewhere classified code.

ABHES: 8.t Perform diagnostic and procedural coding

Blooms: Apply

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 3 Hard

Stewart - Chapter 002 #18

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

19. An unspecified code would be assigned to a code known as a _____ code:
- A. Not elsewhere classified
 - B. Not found elsewhere
 - C. Not otherwise specified**
 - D. Not elsewhere specified

NOS is a notation meaning "not otherwise specified"; the equivalent of unspecified.

ABHES: 8.t Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #19

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

20. The diagnostic statement "Candidiasis" would be coded as:
- A. 112.9 Candidiasis of unspecified site**
 - B. 112.3 Candidiasis of skin and nails
 - C. 112.85 Candidal enteritis
 - D. 112.5 Disseminated candidiasis

When documentation does not provide enough information to assign a more specific code, the Not Otherwise Specified, or Unspecified, code is selected.

ABHES: 8.t Perform diagnostic and procedural coding

Blooms: Apply

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 3 Hard

Stewart - Chapter 002 #20

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

21. Typically, NEC-specified codes are also known as *other-specified* codes and have:
- A. 7 as the fourth digit or 9 as the fifth digit
 - B. 8 as the fourth digit or 7 as the fifth digit
 - C. 9 as the fourth digit or 8 as the fifth digit
 - D. 8 as the fourth digit or 9 as the fifth digit**

Typically, NEC-specified codes are also known as *other-specified* codes and have 8 as the fourth digit or 9 as the fifth digit.

ABHES: 8.t Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #21

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

22. The additional section that supplements the official ICD-9-CM coding conventions is known as the:
- A. Additional Guidelines section
 - B. Supplemental Conventions section
 - C. Additional Conventions section**
 - D. Notations section

The additional section that supplements the official ICD-9-CM coding conventions is known as the Additional Conventions section.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #22

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

23. When the acute and chronic forms of a condition are present:
- A. Both the acute and chronic forms of the condition should be coded**
 - B. The acute form of the condition only should be coded
 - C. The chronic form of the condition only should be coded
 - D. A combination code only must be used

An ICD-9-CM guideline instructs that when both the acute and chronic forms of a condition are documented, both conditions should be coded. They can be coded together as a combination code or separately with one code for the acute condition and another form for the chronic condition.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #23

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

24. A code that identifies both the chronic and acute forms of a condition in one code is known as a:
- A. Correlation code
 - B. Multiple use code
 - C. Abstract code
 - D. Combination code**

A code that identifies both the chronic and acute forms of a condition in one code is known as a combination code.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #24

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

25. A "with" statement connecting the subterms acute and chronic indicates:
- A. Distinct codes are provided for each condition
 - B. These conditions may not be coded together
 - C. The acute condition must be coded first
 - D.** A combination code is provided for the acute and chronic conditions

If the subterms acute and chronic are connected by a *with* statement, ICD-9-CM provides a combination code, or one code to indicate both conditions.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #25

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

26. This is the connecting term between the subterms acute and chronic to indicate ICD-9-CM provides a combination code to describe both conditions:
- A.** with
 - B. and
 - C. also
 - D. from

If the subterms acute and chronic are connected by a *with* statement, ICD-9-CM provides a combination code, or one code to indicate both conditions.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #26

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

27. An acute condition is one that:
- A. has a slow onset
 - B. is of long duration
 - C. can last a lifetime
 - D.** has a sudden onset

An acute condition is one that has sudden onset, usually without warning, and of brief duration.

ABHES: 2.b Identify and apply the knowledge of all body systems, their structure and functions, and their common diseases, symptoms and etiologies.

Blooms: Remember

CAAHEP: I.C.6 Identify common pathology related to each body system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #27

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

28. A condition with sudden onset, usually without warning, and of brief duration is a(n) _____ condition:
A. acute
B. chronic
C. bacterial
D. genetic

A condition with sudden onset, usually without warning, and of brief duration is an acute condition.

ABHES: 2.b Identify and apply the knowledge of all body systems, their structure and functions, and their common diseases, symptoms and etiologies.

Blooms: Remember

CAAHEP: I.C.6 Identify common pathology related to each body system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #28

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

29. A condition with slow onset and of long duration, even the lifetime of the patient, is known as a(n) _____ condition:
A. acute
B. chronic
C. bacterial
D. genetic

A condition with slow onset and of long duration, even the lifetime of the patient, is known as a chronic condition.

ABHES: 2.b Identify and apply the knowledge of all body systems, their structure and functions, and their common diseases, symptoms and etiologies.

Blooms: Remember

CAAHEP: I.C.6 Identify common pathology related to each body system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #29

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

30. Per ICD-9-CM guidelines, the use of the word "and" is interpreted to mean:
A. and/or
B. and/with
C. and/also
D. and/along with

An ICD-9-CM guideline specifies that the use of the word "and" is interpreted to mean "and/or."

ABHES: 8.t Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #30

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

31. The nomenclature "Onychia and paronychia of finger" may be selected:
- A. Only when onychia and paronychia are present in the finger
 - B. When onychia and/or paronychia are present in the finger or hand
 - C. When onychia and/or paronychia are present in the finger**
 - D. When neither onychia or paronychia are present in the finger

The term "and" is interpreted to mean "and/or"; therefore, in the nomenclature "onychia and paronychia of finger," the code may be selected when either condition is present in the finger.

ABHES: 8.t Perform diagnostic and procedural coding

Blooms: Understand

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 2 Medium

Stewart - Chapter 002 #31

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

32. The condition produced after the initial injury or condition has been healed is called the:
- A. Last effect
 - B. Subsequent effect
 - C. Sequela**
 - D. Succession effect

The condition produced after the initial injury or condition has been healed is called the sequela.

ABHES: 2.b Identify and apply the knowledge of all body systems, their structure and functions, and their common diseases, symptoms and etiologies.

Blooms: Remember

CAAHEP: I.C.6 Identify common pathology related to each body system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #32

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

33. A condition that is present and exists as a result of a past condition or injury is referred to as:
- A. Referred
 - B. Residual**
 - C. Current
 - D. Consequential

A condition that is present and exists as a result of a past condition or injury is referred to as a residual condition.

ABHES: 2.b Identify and apply the knowledge of all body systems, their structure and functions, and their common diseases, symptoms and etiologies.

Blooms: Remember

CAAHEP: I.C.6 Identify common pathology related to each body system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #33

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

34. In ICD-9-CM, the note indicating that the condition being coded is located elsewhere in the manual and should never be coded with the code under which it is located is the:
- A. Excludes
 - B. Without
 - C. See also
 - D. See

In ICD-9-CM, the note indicating that the condition being coded is located elsewhere in the manual and should never be coded with the code under which it is located is the Excludes note.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #34

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

35. The _____ of an excludes note identifies the range of codes to which the note applies:
- A. Length
 - B. Indentation
 - C. Placement
 - D. Sequence

The placement of an excludes note identifies the range of codes to which the note applies.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #35

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

36. Excludes notes can be found in all of the following locations in the ICD-9-CM manual except:
- A. Beginning of a chapter
 - B. Directly below the code
 - C. Beginning of a section
 - D. Beginning of the index entry

Excludes notes may be found at the beginning of a chapter, section, or category, or directly below the code.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #36

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

37. The placement of an excludes note identifies:
- A.** The range of codes to which the note applies
 - B. The range of codes to which the coder should refer for the condition
 - C. The category of the applicable late effect codes
 - D. The clarifying guideline applicable to that condition

Excludes notes may be found at the beginning of a chapter, section, or category or directly below the code. The placement of an excludes note identifies the range of codes to which the note applies.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #37

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

38. An excludes note found at the chapter level:
- A. Governs the category immediately below it
 - B. Governs the category immediately above it
 - C. Governs the chapter immediately above it
 - D.** Governs the chapter immediately below it

An excludes note found at the chapter level applies to the entire chapter of codes.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #38

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

39. Notes that clarify the code or category being considered by providing definitions or examples of conditions are:
- A. Excludes notes
 - B. Qualifying notes
 - C.** Includes notes
 - D. Clarification notes

Notes that clarify the code or category being considered by providing definitions or examples of conditions are includes notes.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #39

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

40. At the fourth- and fifth-digit level, inclusion terms:
A. Provide synonyms of the diagnostic statement being coded
B. Identify alternative codes to use for that diagnostic statement
C. Identify late effects of the diagnostic statement
D. Provide alternative diagnostic statements to consider

Inclusion terms may be found at the fourth- and fifth-digit level codes to aid the coder by providing synonyms of the diagnostic statement being coded.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #40

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

41. While includes notes are not found at the fourth- and fifth-digit levels, coders can find _____ at these levels.
A. See also notes
B. Main terms
C. Inclusion terms.
D. Excludes notes

While includes notes are not found at the fourth- and fifth-digit levels, coders can find inclusion terms at these levels.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #41

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

42. Heart palpitations is an example of a:
A. Symptom
B. Virus
C. Sign
D. Syndrome

An objective condition that can be measured and recorded is a sign.

ABHES: 2.b Identify and apply the knowledge of all body systems, their structure and functions, and their common diseases, symptoms and etiologies.

Blooms: Remember

CAAHEP: I.C.6 Identify common pathology related to each body system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #42

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

43. Light-headedness is an example of a:
- A. Qualifier
 - B. Symptom**
 - C. Sign
 - D. Root condition

A subjective condition that is relayed to the provider by the patient is a symptom.

ABHES: 2.b Identify and apply the knowledge of all body systems, their structure and functions, and their common diseases, symptoms and etiologies.

Blooms: Remember

CAAHEP: I.C.6 Identify common pathology related to each body system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #43

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

44. According to ICD-9-CM Section _____ guidelines, providers must use codes for signs and symptoms instead of codes for diagnosis when a definitive diagnosis has not been made.
- A. IV**
 - B. V
 - C. III
 - D. II

According to ICD-9-CM Section IV guidelines, providers must use codes for signs and symptoms instead of codes for diagnosis when a definitive diagnosis has not been made.

ABHES: 8.t Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #44

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

45. A sign is a(n):
- A. Subjective condition that is relayed to the provider by the patient
 - B. Objective condition that can be measured and recorded**
 - C. A summary of a patient's concurrent conditions
 - D. The type of procedure performed

A sign is an objective condition that can be measured and recorded.

ABHES: 2.b Identify and apply the knowledge of all body systems, their structure and functions, and their common diseases, symptoms and etiologies.

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #45

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

46. When a definitive diagnosis has not been made:
- A.** Providers must use codes for signs and symptoms
 - B. Providers must perform more diagnostic tests to identify the underlying condition before selecting a code
 - C. Providers cannot receive reimbursement for the service
 - D. Providers must use codes for symptoms only

Providers must use codes for signs and symptoms when a definitive diagnosis has not been made.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #46

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

47. In the medical record, the patient is documented to have the following conditions: lower back pain, blood in the urine, and a kidney infection. The coder would assign ICD-9-CM code(s) for the following condition(s):
- A. Blood in the urine and kidney infection
 - B. Lower back pain and blood in the urine
 - C. Blood in the urine only
 - D.** Kidney infection only

Signs and symptoms are not coded when they are commonly found with the definitive diagnosis. In this scenario, lower back pain and blood in the urine are common signs and symptoms associated with a kidney infection. Because the physician provided the definitive diagnosis of kidney infection, the kidney infection only would be coded.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Apply

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 3 Hard

Stewart - Chapter 002 #47

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

48. The way the condition due to the underlying disease or condition presents itself is called the:
- A. Condition
 - B.** Manifestation
 - C. Sign
 - D. Symptom

The way the condition due to the underlying disease or condition presents itself is the manifestation.

ABHES: 2.b Identify and apply the knowledge of all body systems, their structure and functions, and their common diseases, symptoms and etiologies.

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #48

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

49. The following notation implies sequencing of the codes when reported:
- A. See
 - B. See also
 - C. Use additional code**
 - D. Code also

The *use additional code* note differs from the *code also* instruction as *use additional code* implies sequencing of the codes when reported.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

CAHIIM: I.C.4 Adhere to current regulations and established guidelines in code assignment.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #49

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

50. A coder should only list an additional code when:
- A. Documentation provides the additional information needed to accurately select the code**
 - B. A condition is documented in a previous note in the patient's chart
 - C. A condition is documented as being suspected prior to the definitive diagnosis being documented
 - D. The coder believes another condition is the root cause of the documented condition

A coder should only list an additional code when documentation provides the additional information needed to accurately select the code.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Understand

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 2 Medium

Stewart - Chapter 002 #50

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

51. In ICD-9-CM, these punctuation marks are used to enclose explanatory phrases or synonyms of the condition and valid fifth digits for the code being reviewed:
- A. parentheses
 - B. square brackets**
 - C. slanted brackets
 - D. ampersands

In ICD-9-CM, square brackets are used to enclose explanatory phrases or synonyms of the condition and valid fifth digits for the code being reviewed.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #51

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

52. Punctuation marks used in ICD-9-CM to identify the mandatory sequencing of etiology/manifestation coding are:
- A. square brackets
 - B. parentheses
 - C. hyphens
 - D.** slanted brackets

Punctuation marks used in ICD-9-CM to identify the mandatory sequencing of etiology/manifestation coding are slanted brackets.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #52

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

53. Square brackets:
- A.** Are found only in the tabular section
 - B. Are found only in the index
 - C. Are used to identify mandatory sequencing
 - D. Are found in both the tabular section and the index

Square brackets are found only in the tabular section of ICD-9-CM.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #53

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

54. The following punctuation marks are found only in the index of ICD-9-CM:
- A. Parentheses
 - B. Square brackets
 - C.** Slanted brackets
 - D. Hyphens

Slanted brackets are found only in the index of ICD-9-CM.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #54

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

55. Punctuation that encloses other terms or names of the condition in the nomenclature of the code or inclusion list are:
- A. Parentheses
 - B. Square brackets**
 - C. Slanted brackets
 - D. Arrows

Square brackets are punctuation that encloses other terms or names of the condition in the nomenclature of the code or inclusion list.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #55

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

56. Parentheses are used to enclose:
- A. HCPCS modifiers
 - B. Supplemental modifiers
 - C. Nonessential modifiers**
 - D. Irrelevant information

Parentheses are used to enclose nonessential modifiers.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #56

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

57. This punctuation is found in both the Tabular List and the Alphabetic Index:
- A. Parentheses**
 - B. Slanted brackets
 - C. Square brackets
 - D. Ampersands

Parentheses are found in both the Tabular List and the Alphabetic Index.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-02

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #57

Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation

58. Approximately how many codes does ICD-9-CM contain?
- A. 15,000
 - B. 14,000**
 - C. 16,000
 - D. 18,000

ICD-9-CM contains approximately 14,000 codes.

ABHES: 8.t Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-03

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #58

Topic: Main Terms and the ICD-9-CM Index

59. Coders may use all of the following to look up a term in the index except:
- A. anatomic site**
 - B. condition
 - C. diagnosis
 - D. sign

Coders may use all of these except the anatomic site to look up the index. At the anatomic site, the index will state "see condition."

ABHES: 8.t Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-03

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #59

Topic: Main Terms and the ICD-9-CM Index

60. When looking up an anatomic site in the ICD-9-CM index, the note _____ appears:
- A. Use also
 - B. Code also
 - C. See condition**
 - D. Refer to

When looking up an anatomic site as a main term in the ICD-9-CM index, the message "see condition" appears.

ABHES: 8.t Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-03

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #60

Topic: Main Terms and the ICD-9-CM Index

61. The provider's diagnostic statement, the term that identifies the patient's condition, injury, or disease, is known as the:
- A. Default code
 - B. Main term**
 - C. Nonessential modifier
 - D. Subterm

The main term is the provider's diagnostic statement, the term that identifies the patient's condition, injury, or disease.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-03

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #61

Topic: Main Terms and the ICD-9-CM Index

62. In the Alphabetic Index, main terms are typed in:
- A. italics
 - B. bold face**
 - C. underlined
 - D. plain text

In the Alphabetic Index, main terms are typed in bold face type.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-03

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #62

Topic: Main Terms and the ICD-9-CM Index

63. A coder identifies _____ when he/she determines the answer to the question "What did the patient suffer from?"
- A. The sequel
 - B. The extender
 - C. The default code
 - D. The main term**

When unsure of the main term in a diagnostic statement, ask the question, "What did the patient suffer from?"

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-03

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #63

Topic: Main Terms and the ICD-9-CM Index

64. Identify the main term in this diagnostic statement: "Bilateral proliferative recurrent retinopathy."
A. bilateral
B. recurrent
C. retinopathy
D. proliferative

The main term identifies the patient's condition, injury, or disease. In this diagnostic statement, the main term is "retinopathy." The other terms, "bilateral, proliferative, and recurrent" describe the main condition.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Understand

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-03

Level of Difficulty: 2 Medium

Stewart - Chapter 002 #64

Topic: Main Terms and the ICD-9-CM Index

65. Which of the following is not a major step in locating the appropriate ICD-9-CM code?
A. Determine the main term(s) from the documentation
B. Review all notes listed in the Alphabetic Index and Tabular List
C. Verify the code identified in the Alphabetic Index by checking it in the Tabular List
D. Select the appropriate default code listed in the Tabular List

The final major step in locating the appropriate ICD-9-CM code is to determine the code to the highest degree of specificity, up to seven alphanumeric characters. Default codes are used only when the condition is not specified or a more specific code is not available.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-03

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #65

Topic: Main Terms and the ICD-9-CM Index

66. A useful tip for coders when selecting the appropriate code is to look _____ codes above and _____ codes below the code identified in the index just to make sure they aren't missing something.
A. Four, four
B. Five, five
C. Four, five
D. Five, four

A useful tip for coders when selecting the appropriate code is to look 5 codes above and 5 codes below the code identified in the index just to make sure they aren't missing something.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-03

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #66

Topic: Main Terms and the ICD-9-CM Index

67. How many chapters does the ICD-9-CM manual contain?
- A. 10
 - B. 17**
 - C. 15
 - D. 13

The ICD-9-CM manual contains 17 chapters, plus sections on V and E codes.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-04

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #67

Topic: ICD-9-CM Chapter-Specific Guidelines

68. Guidelines in Chapter 3 include information on coding diabetes. Codes require five digits and there are multiple sequencing guidelines.
- A. Mental Disorders
 - B. Diseases of the Circulatory System
 - C. Diseases of the Digestive System
 - D. Endocrine, Nutritional, and Metabolic Diseases and Immunity Disorders**

These are found in the guidelines for Chapter 3, Endocrine, Nutritional, and Metabolic Diseases and Immunity Disorders.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-04

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #68

Topic: ICD-9-CM Chapter-Specific Guidelines

69. There are currently no guidelines for the following chapters:
- A. Diseases of the Circulatory System, Diseases of the Respiratory System, and Congenital Anomalies
 - B. Congenital Anomalies, Symptoms, Signs, and Ill-Defined Conditions, and Mental Disorders**
 - C. Diseases of the Nervous System and Sense Organs, Congenital Anomalies, and Symptoms, Signs, and Ill-Defined Conditions
 - D. Complications of Pregnancy, Childbirth, and the Puerperium

The Congenital Anomalies, Symptoms, Signs, and Ill-Defined Conditions, and Mental Disorders chapters currently do not have any guidelines.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-04

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #69

Topic: ICD-9-CM Chapter-Specific Guidelines

70. Very specific guidelines for coding pain are found in this chapter:
- A. Complications of Pregnancy, Childbirth, and the Puerperium
 - B. Neoplasms
 - C. Diseases of the Nervous System and Sense Organs**
 - D. Symptoms, Signs, and Ill-Defined Conditions

The guidelines for Diseases of the Nervous System and Sense Organs contain specific guidelines regarding coding pain.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-04

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #70

Topic: ICD-9-CM Chapter-Specific Guidelines

71. Diseases of Blood and Blood-Forming Organs contain guidelines about the following condition:
- A. Hypoglycemia
 - B. Anemia**
 - C. Low blood count
 - D. Ketinuria

Diseases of Blood and Blood-Forming Organs contain guidelines about coding of anemia.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-04

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #71

Topic: ICD-9-CM Chapter-Specific Guidelines

72. The chapter containing guidelines for coding of pathologic fractures is:
- A. Diseases of the Musculoskeletal System and Connective Tissue**
 - B. Symptoms, Signs, and Ill-Defined Conditions
 - C. Injury and Poisoning
 - D. Endocrine, Nutritional, and Metabolic Diseases and Immunity Disorders

The Diseases of the Musculoskeletal System and Connective Tissue chapter contains guidelines for coding of pathologic fractures.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-04

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #72

Topic: ICD-9-CM Chapter-Specific Guidelines

73. Guidelines for V and E codes are found:
- A. In the guidelines of Chapter 9
 - B. In the guidelines of each chapter-specific guideline section**
 - C. In a separate chapter between the Alphabetic Index and Tabular List
 - D. There are no guidelines provided regarding use and sequencing of V and E codes

Guidelines for V and E codes are found in the guidelines of each chapter-specific guideline section.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-04

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #73

Topic: ICD-9-CM Chapter-Specific Guidelines

74. The following is true regarding the hierarchy of ICD-9-CM coding guidelines:
- A. outpatient guidelines take precedence over general and disease-specific guidelines
 - B. guidelines at the section level take precedence over guidelines at the code level
 - C. the closer a guideline or convention is to the code in the Tabular List, the higher it is in the hierarchy of guidelines**
 - D. a guideline or convention listed in the chapter-specific guidelines takes precedence over a guideline above the code

The closer a guideline or convention is to the code in the Tabular List, the higher it is in the hierarchy of guidelines and thus it supersedes the other guidelines or conventions.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Understand

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-05

Level of Difficulty: 2 Medium

Stewart - Chapter 002 #74

Topic: Diagnostic Outpatient Guidelines

75. The reason for admission after study is the:
- A. Unconfirmed diagnosis
 - B. First-listed diagnosis
 - C. Sign and symptom
 - D. Principal diagnosis**

The reason for admission after study is the principal diagnosis.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-05

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #75

Topic: Diagnostic Outpatient Guidelines

76. The first-listed diagnosis is:
- A. The reason for the visit
 - B. The reason for admission after study
 - C. The reason for the visit and is used for provider coding**
 - D. The reason for the visit and is used for facility coding

The first-listed diagnosis is the reason for the visit and is used for provider coding.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-05

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #76

Topic: Diagnostic Outpatient Guidelines

77. Signs and symptoms:
- A. Are acceptable for reporting when a diagnosis has not been confirmed and reported by the provider**
 - B. Are accepted for reporting when a diagnosis is confirmed by a pathology or lab report in the patient's chart and has not been documented by the provider in the documentation of the visit
 - C. May be reported when a diagnosis has been made
 - D. Cannot be used as reason for admission codes

Signs and symptoms are acceptable for reporting when a diagnosis has not been confirmed and reported by the provider.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Understand

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-05

Level of Difficulty: 2 Medium

Stewart - Chapter 002 #77

Topic: Diagnostic Outpatient Guidelines

78. Coding to the highest level of specificity refers to:
- A. choosing the appropriate category
 - B. applying proper sequencing
 - C. use of fourth and fifth digits when required**
 - D. chronic diseases

Coding to the highest level of specificity refers to use of fourth and fifth digits when required.

ABHES: 8.1 Perform diagnostic and procedural coding

Blooms: Remember

CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system

CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.

Est Time: 0-1 minute

Learning Outcome: 02-05

Level of Difficulty: 1 Easy

Stewart - Chapter 002 #78

Topic: Diagnostic Outpatient Guidelines

ch02 Summary

<u>Category</u>	<u># of Questions</u>
ABHES: 1.c Understand medical assistant credentialing requirements and the process to obtain the credential. Comprehend the importance of credentialing	1
ABHES: 2.b Identify and apply the knowledge of all body systems, their structure and functions, and their common diseases, symptoms and etiologies.	9
ABHES: 3.d Recognize and identify acceptable medical abbreviations	3
ABHES: 8.t Perform diagnostic and procedural coding	65
Blooms: Apply	3
Blooms: Remember	69
Blooms: Understand	6
CAAHEP: I.C.6 Identify common pathology related to each body system	7
CAAHEP: IX.C.5 Discuss licensure and certification as it applies to healthcare providers	1
CAAHEP: VIII.C.3 Describe how to use the most current diagnostic coding classification system	70
CAHIIM: I.C.2 Apply diagnosis/procedure codes according to current nomenclature.	78
CAHIIM: I.C.4 Adhere to current regulations and established guidelines in code assignment.	1
Est Time: 0-1 minute	78
Learning Outcome: 02-01	15
Learning Outcome: 02-02	42
Learning Outcome: 02-03	9
Learning Outcome: 02-04	7
Learning Outcome: 02-05	5
Level of Difficulty: 1 Easy	69
Level of Difficulty: 2 Medium	6
Level of Difficulty: 3 Hard	3
Stewart - Chapter 002	78
Topic: Abbreviations, Coding Conventions, Guidelines, Instructional Notes, and Punctuation	42
Topic: Diagnostic Outpatient Guidelines	5
Topic: Format of ICD-9-CM Manual	15
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