**Unit 1 Assessment: Check Your Understanding**

**NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Score \_\_\_/ 40**

**Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Instructions:*** *Complete the following questions and submit your completed assignment via email to your instructor. Do not utilize textbook or resources. Check the foundation of your own knowledge without the assistance of your resources.*

1. What is the complete description of the abbreviation ICD-9-CM? **(4 points)**

2. ICD-9-CM procedure codes are required to be used to code patients in which of the following settings? Place and “X” next to all that apply. **(1 point)**

\_\_\_\_\_\_ Hospital inpatient settings

\_\_\_\_\_\_ Physician offices

\_\_\_\_\_\_ Hospital outpatient departments

\_\_\_\_\_\_ Hospital emergency departments

3. What is the maximum number of digits in a valid ICD-9-CM procedure code? Place an “X’ next to the correct answer. **(1 point)**

\_\_\_\_\_\_ Two

\_\_\_\_\_\_ Three

\_\_\_\_\_\_ Four

\_\_\_\_\_\_ Five

4. Matching: Identify whether each ICD-CM classification listed below is a chapter, section, category, subcategory, or fifth-digit subclassfication code of the ICD Coding Manual. **(10 points)**

A. Chapter

B. Section

C. Category

D. Subcategory

E. Fifth-digit subclassification

\_\_\_\_\_ Disease of the Respiratory System (460–519)

\_\_\_\_\_ Pneumonia and Influenza (480–487)

\_\_\_\_\_ Emphysema (492)

\_\_\_\_\_ Acute Bronchitis (466.0)

\_\_\_\_\_ Stenosis of Larynx (478.74)

\_\_\_\_\_ Neoplasms (140–239)

\_\_\_\_\_ Benign Neoplasms (210–229)

\_\_\_\_\_ Lymphoid Leukemia (204)

\_\_\_\_\_ Malignant Neoplasm of Pancreas, Head of Pancreas (157.0)

\_\_\_\_\_ Multiple Myeloma without mention of remission (203.00)

5. Underline the main term for each diagnosis and procedure and identify where the main term is found in volumes 1, 2 or 3**. (10 points)**

a. Comminuted fracture of radius:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

b. Carotid artery occlusion:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

c. Acute myocardial infarction:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

d. Alcoholic cardiomyopathy:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

e. Enlargement of liver:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

f. Admission for chemotherapy:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

g. Benign prostatic hypertrophy:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

h. Endometrial ablation:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

i. Extracorporeal shockwave lithotripsy:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

j. Carpal tunnel neurolysis:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Place a “X” next to the descriptions that do not indicate a step in the initial coding process: **(7 points)**

\_\_\_Determine the place of service:

\_\_\_Determine the patients age

\_\_\_Determine the Provider:

\_\_\_Determine the type of service:

\_\_\_Determine the type of patient:

\_\_\_Determine the patient admission and discharge Dates

\_\_\_Was there an ancillary services?

7 .Indicate whether the following statements are “True” or “False”. Please write out the

entre word. **(3 points)**

\_\_\_\_\_\_\_\_\_\_The timeframe as to when a provider can indicate a present on

admission condition is within 24 hours of the patients admission.

\_\_\_\_\_\_\_\_\_\_Assign and “N” for any condition that the provider explicitly

documents as being present on admission.

\_\_\_\_\_\_\_\_\_\_ Leave the present on admission field blank if the condition is on the

“Exempt from reporting list.

8. Match the Present on Admission (POA) Options with the correct Definitions:

**(4 points)**

Reporting Options: Y, N, U, W

\_\_\_\_\_\_ Not present at the Time of Inpatient Admission

\_\_\_\_\_\_ Present at the Time of Admission

\_\_\_\_\_\_ Documentation is insufficient to determine if condition is POA

\_\_\_\_\_\_ Provider is unable to clinically determine whether a condition was POA