Learner Feedback Questions #319

1. The ICD-9-CM is the official system of assigning codes to diagnosis and procedures associated with:
   a. hospital utilization
   b. mortality data
   c. morbidity and medical necessity reporting
   d. patient admission data of all licensed healthcare facilities

2. Besides the National Center for Health Statistics, what other governmental agency is responsible for overseeing changes to the ICD-9-CM?
   a. Institute of Medicine
   b. Centers for Medicare and Medicaid Services
   c. CDC
   d. Agency for Healthcare Research and Quality

3. Which of the following is NOT included in the documentation for ICD-9-CM coding?
   a. severity of illness
   b. quality
   c. proper utilization of resources
   d. sentinel events

4. Conditions that do NOT meet the criteria of a UNRDS secondary diagnosis are those that:
   a. coexist at admission
   b. develop subsequently
   c. affect the treatment received
   d. relate to an earlier episode

5. If a patient is admitted for hydration, but 3 days into the admission has an MI that results in an angioplasty, the principal diagnosis is:
   a. dehydration
   b. MI
   c. angioplasty
   d. MI and angioplasty

6. If a diagnosis is documented as probable or rule out, it is coded as such if:
   a. the patient has another principal diagnosis
   b. the diagnosis is an inpatient in a hospital
   c. the patient is treated as an outpatient
   d. the patient is treated in a doctor’s office

7. Which of the following is NOT included in the determination of an MS-DRG, or Medicare Severity Diagnosis Related Groups?
   a. extended length of stay
   b. principal diagnosis
   c. comorbidities
   d. complications

8. If the principal diagnosis relates to a residual effect from a previous acute illness or injury, “a late effect code”:
   a. can be used; there is no limit on duration
   b. is not acceptable as any ICD-9-CM code
   c. is only valid if the injury occurred within the past year
   d. must always be coded as a secondary diagnosis

9. In January 1999, the U.S. began using ICD-10 to code:
   a. mortality data from death certificates
   b. medical errors from IOM data
   c. improved quality data from the National Quality Forum
   d. mortality data related to FDA-sponsored clinical drug trials

10. If two or more diagnoses equally meet the criteria for principal diagnosis, the appropriate coding is:
    a. given to the one with the greatest severity
    b. both are listed together
    c. either one can be sequenced first
    d. the physician’s preference

Evaluation

1. I can describe ICD-9-CM.
   a. strongly agree
   b. agree
   c. neutral
   d. disagree
   e. strongly disagree

2. I can describe the basics of ICD-9-CM code assignment.
   a. strongly agree
   b. agree
   c. neutral
   d. disagree
   e. strongly disagree

3. I can summarize the basic tenets of the official coding guidelines.
   a. strongly agree
   b. agree
   c. neutral
   d. disagree
   e. strongly disagree

4. The objectives relate to the overall goal of the article.
   a. strongly agree
   b. agree
   c. neutral
   d. disagree
   e. strongly disagree

5. The article is well-written and logically organized, and defines terms adequately.
   a. strongly agree
   b. agree
   c. neutral
   d. disagree
   e. strongly disagree

Registration/Answer Form #319

LEARNER FEEDBACK QUESTIONS

1. A B C D
2. A B C D
3. A B C D
4. A B C D
5. A B C D
6. A B C D
7. A B C D
8. A B C D
9. A B C D
10. A B C D

Evaluation

1. A B C D E
2. A B C D E
3. A B C D E
4. A B C D E
5. A B C D E

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