

Learner Feedback Questions #319

- The ICD-9-CM is the official system of assigning codes to diagnosis and procedures associated with:
 - hospital utilization
 - mortality data
 - morbidity and medical necessity reporting
 - patient admission data of all licensed healthcare facilities
- Besides the National Center for Health Statistics, what other governmental agency is responsible for overseeing changes to the ICD-9-CM?
 - Institute of Medicine
 - Centers for Medicare and Medicaid Services
 - CDC
 - Agency for Healthcare Research and Quality
- Which of the following is NOT included in the documentation for ICD-9-CM coding?
 - severity of illness
 - quality
 - proper utilization of resources
 - sentinel events
- Conditions that do NOT meet the criteria of a UHDDS secondary diagnosis are those that:
 - coexist at admission
 - develop subsequently
 - affect the treatment received
 - relate to an earlier episode
- 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:
 - dehydration
 - MI
 - angioplasty
 - MI and angioplasty
- If a diagnosis is documented as probable or rule out, it is coded as such if:
 - the patient has another principal diagnosis
 - the diagnosis is an inpatient in a hospital
 - the patient is treated as an outpatient
 - the patient is treated in a doctor's office
- Which of the following is NOT included in the determination of an MS-DRG, or Medicare Severity Diagnosis Related Groups?
 - extended length of stay
 - principal diagnosis
 - comorbidities
 - complications
- If the principal diagnosis relates to a residual effect from a previous acute illness or injury, "a late effect code":
 - can be used; there is no limit on duration
 - is not acceptable as any ICD-9-CM code
 - is only valid if the injury occurred within the past year
 - must always be coded as a secondary diagnosis
- In January 1999, the U.S. began using ICD-10 to code:
 - mortality data from death certificates
 - medical errors from IOM data
 - improved quality data from the National Quality Forum
 - mortality data related to FDA-sponsored clinical drug trials
- If two or more diagnoses equally meet the criteria for principal diagnosis, the appropriate coding is:
 - given to the one with the greatest severity
 - both are listed together
 - either one can be sequenced first
 - the physician's preference

Evaluation

- I can describe ICD-9-CM.
 - strongly agree
 - agree
 - neutral
 - disagree
 - strongly disagree
- I can describe the basics of ICD-9-CM code assignment.
 - strongly agree
 - agree
 - neutral
 - disagree
 - strongly disagree
- I can summarize the basic tenets of the official coding guidelines.
 - strongly agree
 - agree
 - neutral
 - disagree
 - strongly disagree
- The objectives relate to the overall goal of the article.
 - strongly agree
 - agree
 - neutral
 - disagree
 - strongly disagree
- The article is well-written and logically organized, and defines terms adequately.
 - strongly agree
 - agree
 - neutral
 - disagree
 - strongly disagree

ICD-9-CM Coding

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Registration/Answer Form #319

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EVALUATION

- A B C D E
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- A B C D E

How many minutes did you need to complete this CE offering?

Minutes: _____

Before November 9, 2011, print this page, complete the multiple choice questions by circling the correct answer and mail or fax to: *ADVANCE for Nurses*, Learning Scope, 2900 Horizon Dr., King of Prussia, PA 19406; 610-278-1426.

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- Private Practice
- Staff Development
- Staff Nurse

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