Topic 1 - Exam A

Question #1 *Topic 1*

An increase in claim denials has prompted a clinical documentation integrity (CDI) manager to engage the CDI physician advisor/champion in an effort to avoid future denials. How does this strategy impact the goal?

A. Clinicians will not require documentation integrity education.

B. Physicians can manage the documentation integrity process.

C. Physicians will learn documentation integrity practices from peers.

D. The CDI manager will exclusively provide education.

Correct Answer: *C*

Question #2 *Topic 1*

A clinical documentation integrity practitioner (CDIP) generates a concurrent query and continues to follow retrospectively; however, the coder releases the bill before the query is answered. The CDIP wonders if it is appropriate to re-bill the account if the physician answers the query after the bill has dropped. Which policy should the hospital follow to avoid a compliance risk?

A. A rebilling is permissible when queries are answered after the initial bill.

B. A post bill query rarely occurs as a result of an audit of other internal monitor.

C. A post bill query is not appropriate when an error is found after an audit.

D. A second bill should not be submitted when the first bill was incomplete.

Correct Answer: *A*

Question #3 *Topic 1*

A patient is admitted for pneumonia with a WBC of 20,000, respiratory rate 20, heart rate 85, and oral temperature 99.0°. On day 2, sputum cultures reveal positive results for pseudomonas bacteria. The most appropriate action is to:

A. code pneumonia, unspecified

B. query the provider to see if pseudomonas sepsis is supported by the health record

C. code pseudomonas pneumonia

D. query the provider to document the etiology of pneumonia

Correct Answer: *D*

Question #4 *Topic 1*

Which of the following can be evidence of physician-hospital alignment?

A. A high clinical documentation integrity practitioner (CDIP) query rate

B. A high physician agreement rate

C. A high physician response rate

D. A low physician agreement rate

Correct Answer: *C*

Community vote distribution

B (100%)

Question #5 *Topic 1*

When a change in departmental workflow is necessary, the first step is to

A. re-engineer the process

B. assess the current workflow

C. define the gaps and solutions

D. set realistic timelines

Correct Answer: *C*

Community vote distribution

B (100%)

Question #6 *Topic 1*

The third quarter target concurrent physician query response rate for each physician in a hospital gastroenterology department was 80%. Nine physicians met or exceeded this metric; however, two physicians had third quarter concurrent physician query response rates of 19% and 64%. What is the best course of action for the clinical documentation integrity (CDI) physician advisor/champion?

A. Schedule a meeting with the chair of the gastroenterology department

B. Schedule individual meetings with each low-performing physician

C. Schedule a group meeting with all physicians

D. Schedule individual meetings with each physician

Correct Answer: *B*

Question #7 *Topic 1*

Patient is admitted with oliguria, pulmonary edema, and dehydration. Labs are remarkable for an elevated creatinine of 2.4, with a baseline of 1.1. Patient was hydrated for 48 hours with drop in creatinine. What would the appropriate action be?

A. No query is needed because the patient was dehydrated

B. Code acute renal failure since symptoms are there and documented

C. Query the physician to see if acute renal failure is clinically supported

D. Query the physician to see if acute renal failure with tubular necrosis is supported

Correct Answer: *D*

Community vote distribution

C (100%)

Question #8 *Topic 1*

A noncompliant query includes querying the provider regarding:

A. gram-negative pneumonia on every pneumonia case, regardless of documented clinical indicators

B. morbid obesity due to BMI of 40.9 documented on the history and physical

C. acute blood loss anemia due to low hemoglobin treated with iron supplements

D. sepsis that was present on admission because sepsis was only documented in the discharge summary

Correct Answer: *A*

Question #9 *Topic 1*

When there is a discrepancy between the clinical documentation integrity practitioner's (CDIP's) working DRG and the coder's final DRG, which of the following is considered a fundamental element that must be in place for a successful resolution?

A. Physician and CDIP interaction

B. Coder and CDIP interaction

C. Physician advisor/champion involvement

D. Executive oversight

Correct Answer: *B*

Question #10 *Topic 1*

A patient presented with shortness of breath, elevated B-type natriuretic peptide, and lower extremity edema to the emergency room. During the hospitalization, a cardiac echocardiogram was performed and revealed an ejection fraction of 55% with diastolic dysfunction. The patient's history includes hypertension (HTN), chronic kidney disease (CKD) (baseline glomerular filtration rate 40) and congestive heart failure (CHF). The clinical documentation integrity practitioner (CDIP) has queried the physician to further clarify the patient's diagnosis. Which response provides the highest level of specificity?

A. Acute CHF with hypertensive renal disease, CKD 3

B. Acute diastolic CHF with HTN and CKD 3

C. Acute on chronic diastolic CHF with hypertensive renal disease, CKD 3

D. Acute on chronic systolic CHF with hypertensive renal disease, CKD 3

Correct Answer: *C*

Question #11 *Topic 1*

Which of the following is nonessential to facilitate code capture when educating clinical staff on documentation practices associated with diabetes mellitus?

A. Manifestation

B. Type

C. Age

D. Cause

Correct Answer: *D*

Question #12 *Topic 1*

A query should be generated when the documentation is

A. consistent

B. legible

C. conflicting

D. complete

Correct Answer: *C*

Question #13 *Topic 1*

Besides the physician advisor/champion, who should be included as a key stakeholder in the clinical documentation integrity (CDI) steering committee to promote CDI initiatives?

A. Director of Risk Management

B. Manager of Surgical Services

C. Manager of HIM/Coding

D. Director of Informatics

Correct Answer: *C*

Question #14 *Topic 1*

A clinical documentation integrity practitioner (CDIP) hired by an internal medicine clinic is creating policies governing written queries. What is an AHIMA best practice for these policies?

A. Primary care physicians must answer written queries

B. Non-responses to written queries are grounds for discipline

C. Queries are limited to non-leading questions

D. Queries for illegible chart notes are unnecessary

Correct Answer: *C*

Question #15 *Topic 1*

A hospital administrator has hired a clinical documentation integrity (CDI) firm to improve its revenue objectives. The physicians object to this action. How should the firm collaborate with physicians to overcome their objections?

A. Identify an influential physician advisor/champion to promote support

B. Hire a consultant to communicate the benefits to the physicians

C. Create a vision statement that outlines the project objectives

D. Communicate the benefits of the CDI firm about the project

Correct Answer: *A*

Question #16 *Topic 1*

A patient is admitted due to pneumonia. On day 1, a sputum culture is positive for pseudomonas bacteria. If the physician is queried and agrees that the patient has pseudomonas pneumonia, this specificity would:

A. increase relative weight

B. not meet medical necessity

C. not increase relative weight

D. meet medical necessity

Correct Answer: *D*

Question #17 *Topic 1*

Whether or not queries should be kept as a permanent part of the medical record is decided by

A. federal law

B. physician preference

C. state law

D. organizational policy

Correct Answer: *D*

Question #18 *Topic 1*

A patient was admitted due to possible pneumonia Chest x-ray was positive for infiltrate. The physician's documentation indicates that the patient continues to smoke cigarettes despite recommendations to quit Patient also has a long-term history of chronic obstructive pulmonary disease (COPD) due to smoking. IV antibiotic was given for pneumonia along with oral Prednisone and Albuterol for COPD.
Discharge diagnoses:
1. Pneumonia
2. COPD
3. Current smoker
What is the correct diagnostic related group assignment?

A. DRG 190 Chronic Obstructive Pulmonary Disease with MCC

B. DRG 204 Respiratory Signs and Symptoms

C. DRG 194 Simple Pneumonia and Pleurisy without CC/MCC

D. DRG 202 Bronchitis and Asthma with CC-MCC

Correct Answer: *A*

Question #19 *Topic 1*

The ultimate purpose of clinical documentation integrity (CDI) expansion and growth is to

A. provide community education to healthcare consumers

B. show a direct relationship between clinical documentation and quality patient care

C. create synergy between clinical education and CDI principles

D. promote CDI functions so that physicians view the CDI staff as value-added service

Correct Answer: *B*

Question #20 *Topic 1*

Which of the following criteria for clinical documentation means the content of the record is trustworthy; sage, and yielding the same result when repeated?

A. Complete

B. Legible

C. Precise

D. Reliable

Correct Answer: *D*

Question #21 *Topic 1*

Hospital policy states that physician responses to queries should be no longer than timely payer filing requirements. A physician responds to a query after the final bill has been submitted. How should administration respond in this situation?

A. Maintain the original billing as supported by documentation in the medical record

B. Evaluate the payer’s timeframe for billing and reasons for the physician's delayed response

C. Review the record to determine any potential data integrity impact and/or rebilling implications

D. Report the physician’s delayed response to the Ethics and Compliance Committee

Correct Answer: *C*

Question #22 *Topic 1*

A patient has a history of asthma and presents with complaints of fever, cough, general body aches, and lethargy. The patient's child was recently diagnosed with influenza. Wheezing is heard on exam. The physician documents the diagnosis as asthma exacerbation and orders nebulizer treatments of Albuterol and a 5-day course of oral Prednisone. The clinical documentation integrity practitioner (CDIP) is unsure which signs and symptoms are inherent to asthma. Which reference resource should be used to obtain this information?

A. Physician's Desk Reference

B. AMA CPT Assistant

C. The Merck Manual

D. Medical Dictionary

Correct Answer: *C*

Question #23 *Topic 1*

A patient falls off a ladder and undergoes a right femur procedure. Three weeks later, the patient returns to the hospital for removal of the external fixation device. The ICD-10-CM 7th character code value should indicate

A. initial

B. sequela

C. aftercare

D. subsequent

Correct Answer: *D*

Question #24 *Topic 1*

A clinical documentation integrity (CDI) program that is compliant with regulations from the facility's payors results in

A. meeting external benchmarks

B. less risk from audits

C. need for more CDI staff

D. higher overall program cost

Correct Answer: *A*

Question #25 *Topic 1*

The clinical documentation integrity (CDI) metrics recently showed a drastic drop in the physician query rate. What might this indicate to the CDI manager?

A. The loss of a large volume of patients has impacted workflow

B. CDI staff need education on identifying query opportunities

C. The program is successful because documentation has improved

D. The decrease in hospital census has caused a lack of query opportunities

Correct Answer: *B*

Question #26 *Topic 1*

Several physicians at a local hospital are having difficulty providing adequate documentation on patients admitted with a diagnosis of pneumonia with or without clinical indications of gram-negative pneumonia. Subsequently, clinical documentation integrity practitioners (CDIPs) are altering health records. Which policy and procedure should be developed to ensure compliant practice?

A. Performance standards

B. Quality improvement standards

C. Accreditation standards

D. Professional ethical standards

Correct Answer: *D*

Question #27 *Topic 1*

The facility has received a clinical validation denial for sepsis. The denial states sepsis is not a clinically valid diagnosis because it does not meet Sepsis-3 criteria. The facility has a policy stating it uses Sepsis-2 criteria. What is the BEST next step?

A. Have the contracting department work with payors to obtain agreement on how sepsis will be clinically validated.

B. Remove sepsis from all claims where the diagnosis is not supported by sepsis 3 criteria.

C. Appeal the denial because all payors must use the hospital's sepsis criteria when reviewing their claims.

D. Query physicians when Sepsis-3 criteria is not met so they can provide additional documentation to support the diagnosis.

Correct Answer: *D*

Question #28

Topic 1

A 50-year-old with a history of stage II lung cancer is brought to the emergency department with severe dyspnea. The patient underwent the last round of chemotherapy 3 days ago. Vital signs reveal a temperature of 98.4, a heart rate of 98, a respiratory rate of 28, and a blood pressure of 124/82. O2 saturation on room air is 92%. The patient is 5'5" and weighs 98 lbs. The registered dietitian notes the patient is malnourished with BMI of 19. Chest x-ray reveals a large pleural effusion in the right lung. Thoracentesis is performed and 1000 cc serosanguinous fluid is removed. The admitting diagnosis is large right lung pleural effusion related to lung cancer stage II, documented multiple times. What post discharge query opportunity should be sent to the physician that will affect severity of illness (SOI)/risk of mortality (ROM)?

A. Query for malignant pleural effusion

B. Query for a diagnosis associated with the dietician's finding of malnutrition

C. Query if the malignant pleural effusion is the reason for admission

D. Query for protein calorie malnutrition

Correct Answer: *B*

Question #29

Topic 1

A patient's progress note states "The patient has chronic systolic heart failure". After reviewing clinical indicators suggestive of an exacerbation of systolic heart failure, the clinical documentation integrity practitioner (CDIP) queries the physician to clarify the current acuity of the diagnosis. Which subsequent documentation in the health record suggests the provider did not understand the query?

A. The patient has decompensated systolic heart failure

B. The patient did have an exacerbation of heart failure

C. The patient has chronic systolic heart failure

D. The patient has acute on chronic systolic heart failure.

Correct Answer: *C*

Question #30

Topic 1

The BEST place for the provider to document a query response is which of the following?

A. The next progress note and all subsequent notes including the discharge summary

B. The query form

C. The next progress note and the problem list

D. An addendum to the history and physical

Correct Answer: *A*

Question #31 *Topic 1*

The clinical documentation integrity (CDI) manager is meeting with a steering committee to discuss the adoption of a new CDI program The plan is to use case mix index (CMI) as a metric of CDI performance. How will this metric be measured?

A. Month-to-month and focus on patient volumes to determine the raise the overall CMI

B. Month-to-month to show CMI variability as a barometer of a specific month

C. Over time with a focus on high relative weight (RW) procedures that impact these procedures on overall CMI

D. Over time with a focus on particular documentation improvement areas in addition to the overall CMI

Correct Answer: *A*

Question #32 *Topic 1*

Hospital-acquired condition pay provisions apply only to

A. inpatient psychiatric hospitals

B. inpatient prospective payment system hospitals

C. critical access hospitals

D. long-term acute care hospitals

Correct Answer: *B*

Question #33 *Topic 1*

The clinical documentation integrity practitioner (CDIP) performed a verbal query and then later neglected following up with the provider. How should the CDIP avoid a compliance risk for this follow up failure according to AHIMA's Guidelines for Achieving a Compliant Query Practice?

A. Complete the documentation at the time of discussion or immediately following

B. Complete the documentation when there is a provider agreement

C. Complete the documentation at the end of the day when entering cases reviewed

D. Complete the documentation immediately after the provider's response

Correct Answer: *D*

Question #34 *Topic 1*

An otherwise healthy male was admitted to undergo a total hip replacement as treatment for ongoing primary osteoarthritis of the right hip. During the post-operative period, the patient choked on liquids which resulted in aspiration pneumonia as shown on chest x-ray. Intravenous antibiotics were administered, and the pneumonia was monitored for improvement with two additional chest x-rays. The patient was discharged to home in stable condition on post-operative day 5.

Final Diagnoses:

1 Primary osteoarthritis of right hip status post uncomplicated total hip replacement

2. Aspiration pneumonia due to choking on liquid episode

What is the correct diagnostic related group assignment?

A. 553 Bone Diseases and Arthropathies with MCC

B. 179 Respiratory Infections and Inflammations without CC/MCC

C. 470 Major Joint Replacement or Reattachment of Lower Extremity without MCC

D. 469 Major Joint Replacement or Reattachment of Lower Extremity with MCC

Correct Answer: *D*

Question #35 *Topic 1*

A 27-year-old male patient presents to the emergency room with crampy, right lower quadrant abdominal pain, a low-grade fever (101° Fahrenheit) and vomiting. The patient also has a history of type I diabetes mellitus. A complete blood count reveals mild leukocytosis (13,000/microliter). Abdominal ultrasound is ordered, and the patient is admitted for laparoscopic surgery. The patient is given an injection of neutral protamine Hagedorn insulin, in order to normalize the blood sugar level prior to surgery. Upon discharge, the attending physician documents “right lower quadrant abdominal pain due to possible acute appendicitis or probable Meckel diverticulitis”. What is the proper sequencing of the principal and secondary diagnoses?

A. Right lower quadrant abdominal pain, acute appendicitis, Meckel diverticulitis, fever, vomiting, leukocytosis

B. Acute appendicitis, Meckel diverticulitis, type I diabetes mellitus

C. Right lower quadrant abdominal pain, fever, vomiting, leukocytosis

D. Acute appendicitis, right lower quadrant abdominal pain, type I diabetes mellitus

Correct Answer: *B*

Question #36 *Topic 1*

A 70-year-old severely malnourished nursing home patient is admitted for a pressure ulcer covered by eschar on the right hip. The provider is queried to clarify the stage of the pressure ulcer. Because the wound has not been debrided, the provider responds “unable to determine”. How will the stage of this pressure ulcer be coded?

A. Undetermined stage pressure ulcer

B. Unstageable pressure ulcer

C. Stage III pressure ulcer

D. Stage IV pressure ulcer

Correct Answer: *B*

Question #37 *Topic 1*

Which of the following should be shared to ensure a clear sense of what clinical documentation integrity (CDI) is and the CDI practitioner's role within the organization?

A. Milestones

B. Mission

C. Productivity standards

D. Review schedule

Correct Answer: *B*

Question #38 *Topic 1*

A key physician approaches the director of the coding department about the new emphasis associated with clinical documentation integrity (CDI). The physician does not support the program and believes the initiative will encourage inappropriate billing. How should the director respond to the concerns?

A. Refer the physician to the finance department to discuss requited billing changes

B. Inform the physician that changes must be made

C. Develop an administrative panel to oversee CDI process

D. Involve the physician advisor/champion in addressing the medical staff's concerns

Correct Answer: *D*

Question #39 *Topic 1*

A patient receives a blood transfusion after a 400 ml blood loss during surgery. The clinical documentation integrity practitioner (CDIP) queries the physician for an associated diagnosis. The facility does not maintain queries as part of the permanent health record. What does the physician need to document for the CDIP to record the query as answered and agreed?

A. That the blood loss was not clinically significant

B. The associated diagnosis and the clinical rationale in the progress notes

C. The associated diagnosis directly on the query form

D. A cause-and-effect relationship between anemia and the underlying cause

Correct Answer: *B*

Question #40 *Topic 1*

Which of the following clinical documentation integrity (CDI) dashboard metrics is frequently used to help evaluate the credibility of CDI practitioner queries and the success of the CDI program?

A. Provider agreement rate
B. Provider response rate
C. CDI query rate
D. CDI agreement rate

Correct Answer: *B*

Question #41 *Topic 1*

Which of the following may make physicians lose respect for clinical documentation integrity (CDI) efforts and disengage?

A. CDI practitioners sending multiple queries to hospitalist physicians
B. Inconsistent clinically relevant queries
C. Providing many lectures, newsletters, tip sheets, and pocket cards for physician education
D. The physician advisor/champion's interventions with noncompliant physicians

Correct Answer: *B*

Question #42 *Topic 1*

Reviewing and analyzing physician query content on a regular basis

A. aids in discussion between physician and reviewer
B. assists in identifying gaps in skills and knowledge
C. helps to calculate query response rate
D. facilitates physician data collection

Correct Answer: *B*

Question #43 *Topic 1*

In order to best demonstrate the impact of clinical documentation on severity of illness and risk of mortality, which of the following examples is the most effective for physicians in a hospital?

A. Emphasize the Medicare requirements for documentation
B. Explanations on how severity of illness and risk of mortality impact reimbursement
C. The latest Medicare Provider and Analysis Review data
D. Examples from the hospital's actual cases

Correct Answer: *B*

Question #44 *Topic 1*

A 77-year-old male with chronic obstructive pulmonary disease (COPD) is admitted as an inpatient with severe shortness of breath. The patient is placed on oxygen at 2 liters per minute via nasal cannula. History reveals that the patient is on oxygen nightly at home CXR is unremarkable. The most compliant query is

A. Patient has COPD, and is on nocturnal oxygen at home and is on continuous oxygen since admission Please indicate if you are eating one of these diagnoses' chronic respirator failure, acute respiratory failure, acute on chronic respiratory failure, unable to determine, other.

B. Patient has COPD and is on oxygen every night at home and has been on continuous oxygen since admission, please document chronic respiratory failure, hypoxia, acute on chronic respiratory failure.

C. Patient has COPD and is on oxygen every night at home and has been on continuous oxygen since admission. Based on these indications, please document chronic respiratory failure, acute respiratory failure, acute on chronic respiratory failure.

D. Patient has COPD, and is on nocturnal oxygen at home and is on continuous oxygen since admission. Please order further tests so the patient' severity of illness can be captured with the most accurate coding assignment.

Correct Answer: *A*

Question #45 *Topic 1*

Which of the following is used to measure the impact of a clinical documentation integrity (CDI) program on Centers for Medicare and Medicaid Services quality performance?

A. Outcome measures

B. Risk of mortality

C. Severity of illness

D. Case mix index

Correct Answer: *A*

Question #46 *Topic 1*

A pressure ulcer stage III is documented in the progress note. The clinical documentation integrity practitioner (CDIP) has queried the attending regarding the present on admission status of the pressure ulcer but has not received a response in an appropriate time fame. What should the CDIP do next?

A. Query wound care nurse

B. Query surgical consultant

C. Escalate issue to hospital administration

D. Escalate issue to medical staff leadership

Correct Answer: *A*

Question #47 *Topic 1*

When benchmarking with outside organizations, the clinical documentation integrity practitioner (CDIP) must determine if the organization is benchmarking with which of the following criteria?

A. Hospitals that are its peers

B. Hospital within its region

C. Hospital within its state

D. Hospital within its country

Correct Answer: *A*

Question #48 *Topic 1*

AHIMA suggests which of the following for an organization to consider as physician response rate and agreement rate?

A. 80%80%

B. 80%40%

C. 75%75%

D. 70%50%

Correct Answer: *B*

Question #49 *Topic 1*

Which of the following individuals should the clinical documentation integrity (CDI) manager consult when developing query policy and procedures?

A. CDI practitioner

B. ChiefMedical Officer

C. Compliance Officer

D. ChiefFinancial Officer

Correct Answer: *B*

Question #50 *Topic 1*

Which of the following may result in an incomplete health record deficiency being assigned to a provider?

A. A quality query

B. An outstanding query

C. A retrospective query

D. A concurrent query

Correct Answer: *C*

Question #51 *Topic 1*

Collaboration between the physician advisor/champion and the clinical documentation integrity practitioners (CDIPs) would likely include?

A. educating physicians

B. performing data analysis

C. developing query forms

D. querying physicians

Correct Answer: *A*

Question #52 *Topic 1*

Which of the following should an organization consider when developing a query retention policy and procedure?

A. If the query is considered part of the health record

B. Who should be queried

C. How the query will be formatted

D. What the escalation process will be

Correct Answer: *A*

Question #53 *Topic 1*

A modifier may be used in CPT and/or HCPCS codes to indicate

A. a service or procedure was performed in its entirely

B. a service or procedure was increased or reduced

C. a service or procedure resulted in expected outcomes

D. a service or procedure was performed by one provider

Correct Answer: *A*

Question #54 *Topic 1*

Combination codes are used to classify two diagnoses, a diagnosis with a manifestation, or a diagnosis

A. with an associated complication

B. with a sequelae or late effect

C. that is an integral part of a disease process

D. with an associated procedure

Correct Answer: *A*

Question #55 *Topic 1*

The clinical documentation integrity practitioner (CDIP) is reviewing tracking data and has noted physician responses are not captured in the medical chart. What can be done to improve this process?

A. Provide education to physicians on query process

B. Require the CDIP to call physicians to follow up

C. Allow physician responses via e-mail

D. Update medical records with unsigned physician responses

Correct Answer: *A*

Question #56 *Topic 1*

Review the following query to determine if it is compliant:
Dr. Jones, this patient had a sodium level of 126 on admission and was started on a 0.9% saline IV. Can you indicate what condition is being treated?
_______Dehydration
_______Hyponatremia
_______Hypernatremia
_______Chronic kidney disease (indicate stage) _______
_______Other (please specify) _______

A. Yes, query is compliant as it provides clinical indicators and several options for response.

B. Yes, query is compliant as it offers the minimum number of multiple-choice answers.

C. No, query is noncompliant as it does not provide the option of “unable to determine”.

D. No, query is noncompliant as one of the multiple-choice options is clinically irrelevant.

Correct Answer: *A*

Question #57 *Topic 1*

A patient presents to the emergency room with complaint of cough with thick yellow greenish sputum, and generalized pain. Admitting vital signs are noted below and sputum culture performed. The patient is admitted with septicemia due to pneumonia and has received 2L of normal saline and piperacillin/tazobactam. After all results were reviewed, on day 2, the hospitalist continued to document septicemia due to pneumonia.

White blood count BC 18,000 -

Temperature 101.5 -

Heart rate 110 -

Respiratory rate 24 -

Blood pressure 95/67 -
Sputum culture (+) klebsiella pneumoniae
Which diagnosis implies that a query was sent and answered?

A. Septicemia due to klebsiella pneumoniae

B. Sepsis with pneumonia due to klebsiella pneumoniae

C. Severe sepsis with pneumonia due to klebsiella pneumoniae

D. Sepsis with respiratory failure due to pneumonia

Correct Answer: *B*

Question #58 *Topic 1*

Which of the following committees should determine the chain of command that will be used to manage physicians who are either unresponsive or uncooperative with the clinical documentation integrity (CDI) program?

A. Communications

B. Operations

C. Oversight

D. Compliance

Correct Answer: *D*

Question #59 *Topic 1*

Which physician would best benefit from additional education for unanswered queries?

Physician	Number of Queries	Agree	Disagree	No Response
Dr. A	31	25	5	1
Dr. B	32	28	2	2
Dr. C	18	2	16	0
Dr. D	10	0	1	9

A. Dr. A

B. Dr. B

C. Dr. C

D. Dr. D

Correct Answer: *D*

Question #60 *Topic 1*

A clinical documentation integrity practitioner (CDIP) in an acute care hospital was asked to create new query templates for ICD-10 based on AHIMA and ACDIS guidelines. What should the multiple-choice query format include?

A. Clinically significant options

B. Clinically insignificant options

C. Impact on reimbursement

D. Clinically unsupported diagnosis

Correct Answer: *A*

Question #61 *Topic 1*

A query should be generated when documentation contains a

A. principal diagnosis without an MCC

B. problem list with symptoms related to the chief compliant

C. postoperative hospital-acquired condition

D. diagnosis without clinical validation

Correct Answer: *D*

Question #62 *Topic 1*

The physician advisor/champion needs to provide ongoing education regarding coding and reimbursement regulations to the

A. clinical documentation integrity staff

B. Health Information Management coding staff

C. organization's medical and surgical staff

D. organization senior administration staff

Correct Answer: *C*

Question #63 *Topic 1*

The clinical documentation integrity (CDI) manager is reviewing physician benchmarks and notices a low-severity level being measured against average length of stay. What should the CDI manager keep in mind when discussing this observation with physicians?

A. The diagnosis with a higher degree of specificity has a lower severity of illness.

B. The indicator is a key factor of measurement for quality reports.

C. The query rate is too high while the agreement rate is low.

D. The query response rate directly correlates to quality reports.

Correct Answer: *A*

Question #64 *Topic 1*

A patient was admitted for high fever and pain in umbilical region. During the second day of the hospital stay, the patient stood up to use the restroom and fell on the floor, resulting in a broken chin bone. A physician noted the fall on the second day in progress note. Which further clarification should be done regarding present on admission (POA) indicator of fall?

A. No query is needed

B. Query physician for POA

C. Bring this case up in weekly Health Information Management meetings for further action

D. Take the case to physician advisor/champion to discuss further action

Correct Answer: *A*

Question #65 *Topic 1*

Which of the following is the definition of an Excludes 2 note in ICD-10-CM?

A. Neither of the codes can be assigned

B. This is not a convention found in ICD-10-CM

C. Two codes can be used together to completely describe the condition

D. Only one code can be assigned to completely describe the condition

Correct Answer: *C*

Question #66 *Topic 1*

The correct coding for heart failure with preserved ejection fraction is

A. 150.20 Unspecified systolic (congestive) heart failure

B. 150.32 Chronic diastolic (congestive) heart failure

C. 150.30 Unspecified diastolic (congestive) heart failure

D. 150.9 Heart failure, unspecified

Correct Answer: *C*

Question #67 *Topic 1*

Which of the following is considered a hospital-acquired condition if not present on admission?

A. Air leak

B. Stage I and II pressure ulcers

C. Diabetes with hypoglycemia

D. Blood incompatibility

Correct Answer: *A*

Question #68 *Topic 1*

Identify the error in the following query
This patient's echocardiogram showed an ejection fraction of 25%. The chest x-ray showed congestive heart failure (CHF). The patient was prescribed Lasix and an angiotensin-converting enzyme inhibitor (ACEI). Is this patient's CHF systolic?

A. The query contains irrelevant information

B. The query is leading

C. The query does not contain clinical indicators

D. The query is unclear

Correct Answer: *B*

Question #69 *Topic 1*

The key component of the auditing and monitoring process to ensure provider query response is to

A. review queries retrospectively to ensure that they are completed according to documented policies and procedures

B. audit individual providers to indicate improvement in health record documentation

C. have a process in place for ongoing education and training of the staff involved in conducting provider queries

D. make sure that the language in the query is not leading or otherwise inappropriate

Correct Answer: *A*