



## Corrections

*Basic Current Procedural Terminology/HCPCS Coding, 2017*

AHIMA Product # AC200617

### **Page 23, Case Study 8**

There is a note in CPT that states code 31576 cannot be reported with 31578. There is controversy concerning the use of a modifier with this example. This question will be removed from the textbook in 2018.

### **Page 72, Exercise 4.4, Question 1**

The answer key incorrectly states “arms” when the case is in regards to the patient’s back.

### **Page 93, Exercise 4.14, Question 3**

The answer key incorrectly states “medial” when the case is in regards to the posterior.

### **Page 94, Exercise 4.14, Question 7**

The answer key indicates the modifier “LT” by the case provides no laterality.

### **Page 147, Exercise 4.37, Question 5**

The correct answer is 58674.

### **Page 317, Case Study 58**

Answer should read: 62323

### **Page 233, Exercise 8.1, Question 3**

The correct codes are 90471 for administration and 90658 for typhoid.

### **Page 302, Case Study 37**

The correct answer is 62322 for injection

### **Page 314, Case Study 54**

12031 Intermediate repair 2.5 cm or less

**Page 317, Case Study 58**

The correct answer is 62323. The CPT Note before this section states that “the placement and use of a catheter to administer one or more epidural or subarachnoid injections on a single calendar day should be reported in the same manner as if a needle had been used.” CPT further explains that threading a catheter and removing the catheter should be treated as a single injection.