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**If you need to have a strong understanding of how ICD-9-CM diagnosis and procedure codes are determined, then you have chosen the right book, ICD-9-CM Inpatient Coding Reference and Study Guide. The author designed a book that goes beyond the fundamentals, that gets into the details of ICD-9-CM diagnosis and procedure code assignment as would be experienced on the job. This user-friendly reference teaches coders how to handle many coding situations, while also being comprehensive enough to teach someone with a basic knowledge of medical coding how to move to**

**the next level of advanced inpatient coding. Updated every year to reflect the annual ICD-9-CM coding changes, the text enables HIM professionals to master the concepts of medical coding while also gaining critical knowledge to pass the CCS exam administered by AHIMA and the CPC-H exam from the AAPC. The book also serves as an excellent desk reference and resource for coders who need to refresh their ICD-9-CM coding skills. Among the topics covered in Volume 1 are inpatient coding guidelines, coding conventions, coding tables, and a drug reference. However, the heart of this manual is the body system analysis, based on chapters 1 - 17 of the Tabular list in Volume I of the ICD-9-CM Official Coding Guidelines. The chapters are categorized by body system such as respiratory, digestive, et al. The chapters in this study guide follow the same sequence as the Official Coding Guidelines. All chapters, in addition to highlighting basic coding guidelines, contain situation-based coding tips and coding examples. A quiz follows each chapter reinforcing concepts in a rigorous manner that applies directly to the professional coding environment. The book also contains a selective discussion of invasive procedures that the coder will most likely encounter on the job and on the exam. At the end of ICD-9-CM Inpatient Coding Reference and Study Guide are 15 case studies, providing the reader with an opportunity to assess their ICD-9-CM coding skill set and speed at coding inpatient medical records. Each record contains a face sheet, history & physical, progress notes, and answer sheet. Some of the case studies contain ER reports, consultations, as well as operative and pathology reports. The answer key at the end of this study guide contains a rationale for all code assignments. 456 short answer questions 116 multiple choice questions 15 full medical record case studies Each question is highly relevant and reflects a coding situation most hospital-based inpatient coders will face. The text strives to ensure the reader understands every diagnosis and procedure discussed: thorough discussion of symptoms, standard treatment protocols, and medications. Coding examples and quizzes help clarify the information presented. Linda Kobayashi, BA, RHIT, CCS, has been a coder and coding manager for almost 20 years. Since 1998, Ms. Kobayashi has owned and operated Codebusters, Inc., a nationwide coding consulting company. Widely regarded as a medical coding and auditing expert, she has conducted workshops on a variety of coding topics, including CCS Exam preparation workshops. Throughout her career the author has remained professionally active, as an AHIMA member as well as a member of her state association, CHIA (California Health Information Association). Her formal training includes a teaching credential from California State University Los Angeles, a B.A. degree in English Literature from University of California Los Angeles, an RHIT from AHIMA after completing the RHIT program at East Los Angeles College, and a CCS certificate from AHIMA. Extensive experience as a hands-on coder, auditor and educator, and has given the author the expertise to help coders prepare for the professional coding environment. This money-saving package includes: Medical Coding Online for Step-by-Step Medical Coding 2013 (User Guide and Access Code) Step-by-Step Medical Coding 2013 Edition Textbook Workbook for Step-by-Step Medical Coding 2013 Edition 2014 ICD-9-CM for Hospitals, Volumes 1, 2**

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Preceded by: 2013 physician coding exam review / Carol J. Buck. 2013 ed. c2013

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*List. Additional elements within specific codes provide you with useful hints, tips, and definitions to aid in understanding difficult terminology, diseases and conditions, or coding in a specific category. Codingupdates.com companion website includes the latest changes to the ICD coding system. Items are included throughout Diseases: Tabular List, Volume 1 to provide information on common diseases and conditions to ensure that you code accurately. Age and Sex edits from the Definition of Medicare Code Edits denote codes that are used only with patients of a specific age or sex, helping to ensure accurate reporting. Omit Codes and Code First draw attention to government material needing special attention. UPDATED Coding Clinic® citations provide official ICD-9-CM coding advice, ensuring accurate coding by identifying the year, quarter, and page number for information about specific codes in the AHA's Coding Clinic for ICD-9-CM. UPDATED age edits from the Medicare Code Editor ensure that you have the latest information needed for accurate coding. 2015 ICD-9-CM for Hospitals, Volumes 1, 2 and 3 Standard Edition*

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operations definitions, a MS-DRG list, partial answer keys, and more. Learn to code effectively with ICD-9-CM medical coding and gain a thorough introduction to ICD-10-CM/PCS coding with one book! ICD-9-CM Coding, 2013/2014 Edition combines basic coding principles with proven, practical insight and the ICD-9-CM and ICD-10-CM/ICD-10-PCS Official Guidelines for Coding and Reporting to prepare you for the upcoming implementation of ICD-10-CM/PCS. Whether you're learning to code for the first time or making the transition from ICD-9-CM to ICD-10-CM/PCS, leading medical coding authors Karla Lovaasen and Jennifer Schwerdtfeger deliver the fundamental understanding you need to succeed in hospital and physician settings. Both ICD-9-CM codes and ICD-10-CM/ICD-10-PCS codes are shown in all coding exercises and examples (including answer keys). Emphasis on ICD-10-CM and ICD-10-PCS coding prepares you for the upcoming implementation of ICD-10. MS-DRG documentation and reimbursement details guide you through this key component of the coding process. Line coding exercises and activities challenge you to apply concepts to solve problems. ICD-10 Official Guidelines for Coding and Reporting (OGCR) are included in each coding chapter, immediately following the ICD-9-CM coding guidelines. Full-color A&P content, disease coverage, procedure guidelines, and drug data ensure that you're familiar with key topics affecting medical coding. Medical record coverage introduces the records and documents you'll encounter on the job. Updated Coding Clinic references direct you to the definitive coding resource from the American Hospital Association (AHA). A companion Evolve website provides convenient online access to the OGCR, medical and surgical root operations definitions, a MS-DRG list, partial answer keys, and more.

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Coding is a skill requiring in-depth knowledge of anatomy, physiology, new technology, coding guidelines, and

documentation issues. Both novice and experienced coders will have questions—so when the code book and guidelines do not provide the answers, the Coders' Desk Reference for ICD-9-CM Procedures will. With this comprehensive resource on all the ICD-9-CM procedure codes, you can improve coding confidence by gaining a better understanding of the technical terminology and intricacies of procedures, along with essential coding tips, before selecting a code. Features and benefits Optum Edge-ICD-10-PCS Spotlight. Each chapter features a special section explaining a coding guideline or a special coding issue in ICD-10-PCS to help you prepare for the transition. Optum Edge-Detailed procedure descriptions. Find procedures described in detail using terminology found in the medical record. Optum Edge-Numerical organization by ICD-9-CM code. Locate codes quickly with a resource developed to work hand-in-hand with your Optum ICD-9-CM code book. Chapter-by-chapter 2014 coding highlights. There may not be new codes FY 2014, but coding guidance continues to be updated. ICD-9-CM is still the official code set until Oct 2014 stay in compliance. ICD-9-CM instructional chapter. Eliminate guesswork when selecting ICD-9-CM procedure codes by mastering the coding conventions. Official coding tips and helpful scenarios. Improve overall coding accuracy with access to official coding advice specific to ICD-9-CM codes, plus correct coding rule application demonstrated through coding scenarios. AHA's Coding Clinic for ICD-9-CM references. Access the official ICD-9-CM procedural coding advice follow. Detailed illustrations. Understand how anatomy, physiology, and clinical terms affect coding. Eponym chapter. Meet the challenge of coding procedures identified by eponyms in the medical record.

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A Listing of Commonly Used Diagnosis Codes for Post Acute Health Care Settings

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