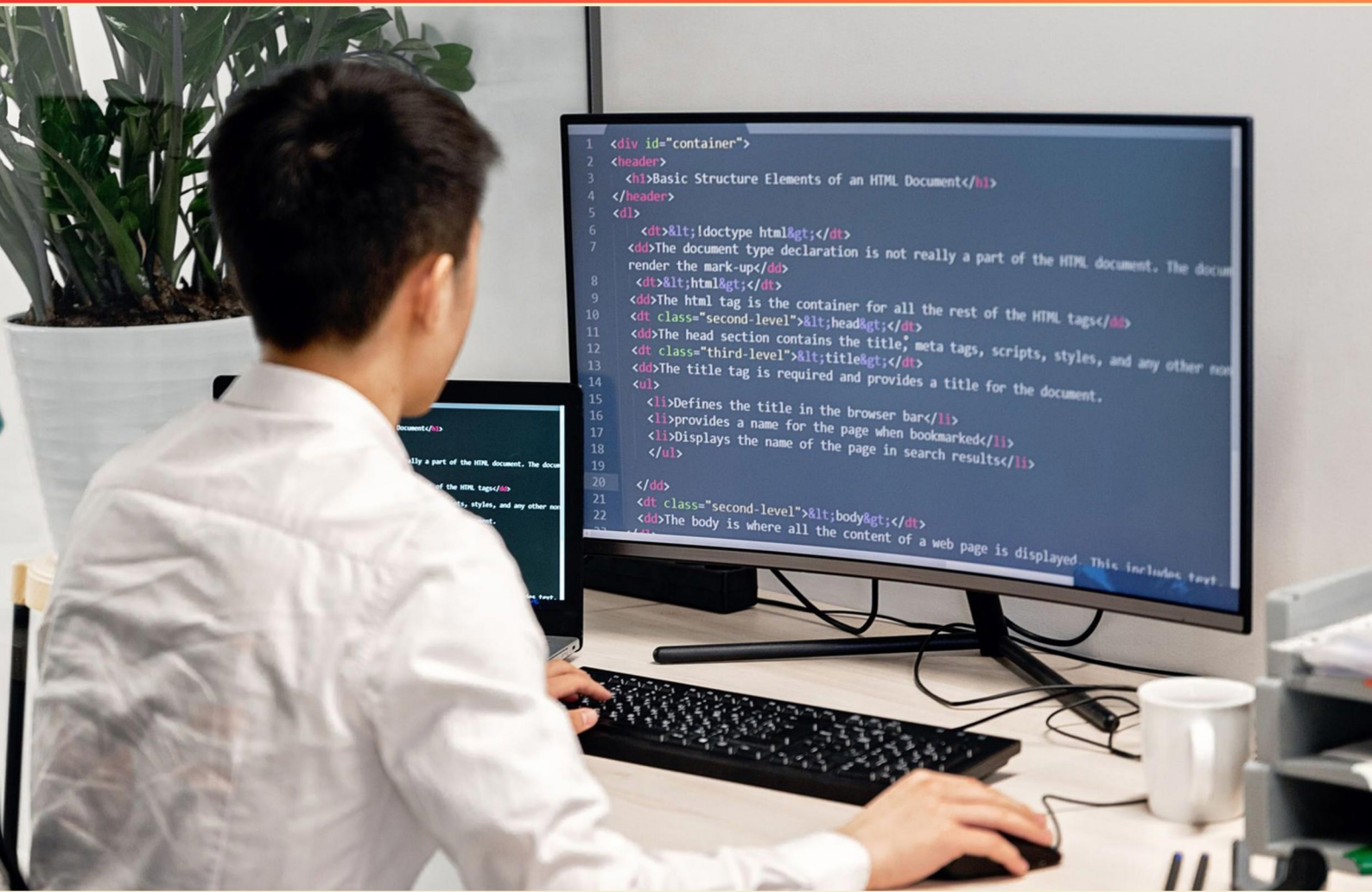


ICD-10-PCS CODING PRACTICE EXAM (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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THE FULL VERSION STUDY GUIDE

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Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

Remember: successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

How to Use This Guide

This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:

1. Start with a Diagnostic Review

Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.

2. Study in Short, Focused Sessions

Break your study time into manageable blocks (e.g. 30 – 45 minutes). Review a handful of questions, reflect on the explanations.

3. Learn from the Explanations

After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.

4. Track Your Progress

Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.

5. Simulate the Real Exam

Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.

6. Repeat and Review

Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.

There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!

Questions

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1. In which section would you find the codes for diagnostic radiology?
 - A. Section A
 - B. Section B
 - C. Section C
 - D. Section D

2. What code would be used to report an external approach measurement of a central nervous stimulator?
 - A. 4B00XVZ
 - B. 4B00YWZ
 - C. 4A030H1
 - D. 6A930ZZ

3. In Table 2W1, how many values are there for the device character?
 - A. One
 - B. Two
 - C. Three
 - D. Four

4. In code B2210ZZ, what does the 0 denote?
 - A. Low osmolar contrast
 - B. High osmolar contrast
 - C. Standard preparation
 - D. Not applicable

5. Which root operation would NOT be specified in the third-character position?
 - A. Application
 - B. Control
 - C. Resection
 - D. Placement

6. Which section value is used for Measurement and monitoring procedures?

- A. 2
- B. 3
- C. 4
- D. 5

7. In ICD-10-PCS, what value indicates an external approach in table 8C0?

- A. X
- B. Y
- C. Z
- D. W

8. Is the duration in Table 5A2 always reported as a single duration?

- A. True
- B. False
- C. Depends on the procedure
- D. Only for specific conditions

9. What does the 'Z' in code 7W04X6Z indicate about the procedure?

- A. It is a unique identifier
- B. It signifies a diagnostic procedure
- C. It corresponds to an unspecified procedure
- D. It indicates that anesthesia is not required

10. What defines the root operation of removal in the context of surgical procedures?

- A. Binding together body parts
- B. Taking out a body part
- C. Sewing up a body part
- D. Shaping a body part

Answers

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

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Explanations

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1. In which section would you find the codes for diagnostic radiology?

- A. Section A**
- B. Section B
- C. Section C
- D. Section D

The codes for diagnostic radiology are found in Section B of the ICD-10-PCS coding system. This section specifically encompasses imaging procedures, including those related to X-rays, CT scans, MRIs, and ultrasounds, all of which are integral components of diagnostic radiology. Each code within this section is structured to offer detailed information about the type of imaging performed, as well as the specific body part being examined. The other sections of ICD-10-PCS are designated for different categories of procedures. For instance, Section A is reserved for medical and surgical procedures, Section C pertains to obstetrics, and Section D covers the placement of devices, none of which relate to diagnostic imaging. Understanding how these sections are organized helps coders accurately classify and report various medical procedures.

2. What code would be used to report an external approach measurement of a central nervous stimulator?

- A. 4B00XVZ**
- B. 4B00YWZ
- C. 4A030H1
- D. 6A930ZZ

The code 4B00XVZ is appropriate for reporting an external approach measurement of a central nervous stimulator because it specifically denotes the external measurement process for the device or system that is used to stimulate the central nervous system. In ICD-10-PCS coding, the first character indicates the section of the procedure, with '4B' referring to 'Measurement,' which is relevant for obtaining quantitative or qualitative data from medical devices. The subsequent characters provide further specificity regarding the approach (external), the body part involved (central nervous system), and the specific device category. This coding reflects the unique characteristics of the procedure, ensuring it accurately describes both the methodology used (external measurement) and the anatomical region affected (the central nervous system). Other codes may relate to different types of procedures or approaches that do not align specifically with the action of measuring in this context. For example, codes that represent internal procedures or different body systems would not be suitable for external measurements of a central nervous system stimulator. This precision is critical for accurate medical records and billing purposes.

3. In Table 2W1, how many values are there for the device character?

- A. One
- B. Two**
- C. Three
- D. Four

In Table 2W1 of the ICD-10-PCS, the device character represents the specific type of device employed during a procedure involving the cardiovascular system. The coding system is structured to provide a distinct character for the device that can be used, which helps facilitate accurate reporting and data collection regarding the medical procedures performed. In examining Table 2W1, it is observed that there are indeed two values that can be applied for the device character, corresponding to different types of devices that might be utilized within the procedures pertaining to this section of the coding manual. The presence of two distinct device values facilitates the coding of varying procedural specifics without creating redundancy or confusion within the coding framework. This structure allows for a more refined and accurate capture of patient care details. While it's crucial to recognize the significance of accurately identifying the number of values available for the device character, it is also essential to understand how this aspect fits into the broader context of procedural coding, ensuring that healthcare providers can convey detailed and precise information about the interventions performed.

4. In code B2210ZZ, what does the 0 denote?

- A. Low osmolar contrast**
- B. High osmolar contrast
- C. Standard preparation
- D. Not applicable

In the code B2210ZZ, the "0" at the end signifies standard preparation. In ICD-10-PCS coding, each character in a code has a specific meaning, and the fifth character typically represents the type of preparation used for the procedure. In this context, a "0" indicates that the standard preparation is being utilized. By understanding the structure of ICD-10-PCS codes, we can see that options related to types of contrast solutions (like low osmolar or high osmolar) pertain to other characters in the code rather than the final character. The last character in this particular coding system is primarily reserved for denoting the preparation method, reinforcing that the designation of "standard preparation" is the correct interpretation of the "0" in this code.

5. Which root operation would NOT be specified in the third-character position?

- A. Application**
- B. Control
- C. Resection
- D. Placement

The root operation "Application" is categorized differently from the others mentioned. In ICD-10-PCS, the third character is reserved for specifying root operations that involve direct actions performed on the body, such as surgical interventions (Control, Resection, and Placement). However, "Application" refers to methods that do not involve a direct surgical approach; instead, it typically involves applying something to a body part without altering the structure. This characteristic distinguishes "Application" from operations like "Control," which involves stopping or preventing bleeding in a specific area, "Resection," which is the cutting away of a body part, and "Placement," which entails putting in a device. Those operations are straightforwardly assigned to the third-character position due to their surgical nature. Understanding this classification helps in accurately coding procedures within the ICD-10-PCS system.

6. Which section value is used for Measurement and monitoring procedures?

- A. 2
- B. 3
- C. 4**
- D. 5

The section value used for Measurement and monitoring procedures in the ICD-10-PCS coding system is 4. This section specifically encompasses procedures that are performed to assess the functioning of various systems in the body, or to measure specific parameters related to patient health. Procedures categorized under this section include those that provide valuable data for diagnosis and treatment, rather than therapeutic interventions. For example, monitoring vital signs, cardiac outputs, or any other relevant physiological metrics falls under this category. This distinction is crucial as it reflects the intent of the procedure, focusing on gathering important information rather than altering a patient's condition. Other section values in the ICD-10-PCS system serve different purposes, such as surgical procedures or therapeutic processes, which is why they would not apply to Measurement and monitoring procedures. This clarity helps coders in accurately selecting codes that best represent the procedures performed, ensuring proper documentation and reimbursement.

7. In ICD-10-PCS, what value indicates an external approach in table 8C0?

- A. X**
- B. Y
- C. Z
- D. W

In ICD-10-PCS, the approach value is an essential part of the procedure code that indicates how a procedure is performed. In this context, the external approach signifies that the procedure is conducted on the surface of the skin or mucous membrane, without any incision through a body cavity or organ. The correct value indicating an external approach in table 8C0 is X. This value is specifically designated to represent procedures performed externally, which is crucial for accurately coding and documenting the nature of the intervention. The understanding of approach values is vital for correct coding, as each value distinctly describes the method of access to the site of the procedure. Knowing that X denotes an external approach allows coders to effectively categorize the procedure within the context of external interventions performed on certain body systems.

8. Is the duration in Table 5A2 always reported as a single duration?

- A. True**
- B. False
- C. Depends on the procedure
- D. Only for specific conditions

In the context of ICD-10-PCS coding, the duration in Table 5A2 represents a standard measurement of time typically related to the procedure being coded. When coding a procedure that includes duration, it is important to note that this duration is generally reported as a single, definitive measurement. This means that the coding convention expects a straightforward representation of time, ensuring consistency and clarity in documentation. Reporting a single duration helps in standardizing data across various coding scenarios, making it easier for healthcare providers and coders to align on the specifics of the procedure performed. The nature of the table's design is to classify and communicate durations unambiguously, which is why the answer states that it is always reported as a single duration. While some procedures or conditions may involve multiple phases or steps, these still culminate in a singular representation in coding practices as laid out in Table 5A2, supporting the overall goal of clear and concise medical records.

9. What does the 'Z' in code 7W04X6Z indicate about the procedure?

- A. It is a unique identifier
- B. It signifies a diagnostic procedure
- C. It corresponds to an unspecified procedure**
- D. It indicates that anesthesia is not required

In the context of ICD-10-PCS coding, the last character of a code carries important information about the procedure performed. The character 'Z' in the code 7W04X6Z indicates that the procedure is unspecified. This means that while the procedure has been documented, the exact nature or specific details of the procedure performed cannot be determinate or are not explicitly stated in the documentation. Using 'Z' effectively identifies that the health care provider has not defined or detailed the procedure within the confines of the existing categories in the code set. This approach helps maintain flexibility in coding for cases where precision is lacking or when documentation does not provide sufficient detail to use a more specific code. The other options would not apply as they would imply distinctions about the procedure that aren't supported by the presence of 'Z'. This is why understanding the implications of the final character in ICD-10-PCS codes is critical for accurate coding and reporting.

10. What defines the root operation of removal in the context of surgical procedures?

- A. Binding together body parts
- B. Taking out a body part**
- C. Sewing up a body part
- D. Shaping a body part

The root operation of removal is specifically defined as the act of taking out or off a body part from its normal anatomical location. This includes procedures where tissues or organs are extracted, either surgically or through other methods. In the context of ICD-10-PCS, the term "removal" captures a very distinct process where the operative intent is to eliminate a specific body part from the patient. This could involve various surgeries such as appendectomy (removal of the appendix), nephrectomy (removal of a kidney), or even procedures where benign lesions, tumorous growths, or non-vital parts are excised. By contrast, other choices like binding together body parts, sewing up a body part, and shaping a body part refer to different root operations in surgical coding: binding describes fixation (an operation intended to hold parts together); sewing refers to closure (closing or fastening a surgical site); and shaping pertains to altering the form of a body part without removing it. These do not encapsulate the essence of what "removal" entails, which is exclusively focused on the extraction of a body part itself.

Next Steps

Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.

As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.

If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at hello@examzify.com.

Or visit your dedicated course page for more study tools and resources:

<https://icd10pcscoding.examzify.com>

We wish you the very best on your exam journey. You've got this!

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