Coding Basics Medical Billing And Reimbursement Fundamentals

CPT® 2021 Professional Edition is the definitive AMA-authored resource to help health care professionals correctly report and bill medical procedures and services. Providers want accurate reimbursement. Payers want efficient claims processing. Since the CPT® code set is a dynamic, ever-changing standard, an outdated codebook does not suffice. Correct reporting and billing of medical procedures and services begins with CPT® 2021 Professional Edition. Only the AMA, with the help of physicians and other experts in the health care community, creates and maintains the CPT code set. No other publisher can claim that. No other codebook can provide the official guidelines to code medical services and procedures properly. FEATURES AND BENEFITS The CPT® 2021 Professional Edition codebook covers hundreds of code, guideline and text changes and features: CPT® Changes, CPT® Assistant, and Clinical Examples in Radiology citations -- provides cross-referenced information in popular AMA resources that can enhance your understanding of the CPT code set E/M 2021 code changes - gives guidelines on the updated codes for office or other outpatient and prolonged services section incorporated A comprehensive index -- aids you in locating codes related to a specific procedure, service, anatomic site, condition, synonym, eponym or abbreviation to allow for a clearer, quicker search Anatomical and procedural illustrations -- help improve coding accuracy and understanding of the anatomy and procedures being discussed Coding tips throughout each section -- improve your understanding of the nuances of the code set Enhanced codebook table of contents -- allows users to perform a quick search of the codebook's entire content without being in a specific section Section-specific table of contents -- provides users with a tool to navigate more effectively through each section's codes Summary of additions, deletions and revisions -- provides a quick reference to 2020 changes without having to refer to previous editions Multiple appendices -- offer quick reference to additional information and resources that cover such topics as modifiers, clinical examples, add-on codes, vascular families, multianalyte assays and telemedicine services Comprehensive E/M code selection tables -- aid physicians and coders in assigning the most appropriate evaluation and management codes Adhesive section tabs -- allow you to flag those sections and pages most relevant to your work More full color procedural illustrations Notes pages at the end of every code set section and subsection The annual CPT™ Professional Edition provides the most comprehensive and convenient access to a complete listing of descriptive terms, identifying codes, and anatomical and procedural illustrations for reporting medical services and procedures. The 1999 edition includes more than 500 code changes. To make coding easy, color-coded keys are used for identifying section and sub-headings, and pre-installed thumb-notch tabs speed searching through codes. Also includes 125 procedural and anatomical illustrations and an at-a-glance list of medical vocabulary. Work for yourself. Set your own hours. Be your own boss. What exactly are the requirements? Learn about it now in this new book. From computer software to education, find out the ins and outs of this fast-paced, ever changing field. Learn how to market, promote, bill, and stay on top of the changes in this field. Run Your Own Home Medical Billing Service. Coding Basics: Medical Billing and Reimbursement Fundamentals is part of a series designed to provide you with the foundation to work in today's medical office. This installment features real-world claim forms and reports for hands-on practice to build the skills you need to acquire an entry-level job in today's medical office. Billing and reimbursement concepts are presented clearly and concisely, with opportunities for practice throughout. Important Notice: Media content referenced within the product description or the product text may not be available in the ebook version. Coding Basics: Understanding Medical Collections is part of a series designed to provide you with the foundation you need to work in today's medical office. This installment of the series introduces you to the collections process in the medical office. This worktext includes hands-on exercises, aging reports, denial and appeal letters, and common debt collection terms to familiarize you with the collections process. You will also find information on federal collection laws, HIPAA, contract negotiation, and the appeals process. Important Notice: Media content referenced within the product description or the product text may not be available in the ebook version. AAPC's CPB™ Certification Study guide is specifically designed to help individuals prepare for the CPB™ exam. The CPB™ study guide contains fourteen chapters to review each section of the CPB™ exam in detail and provides practical examples, sample questions, and test taking techniques. Topics include healthcare regulations pertinent to medical billing; insurance modules and consumer driven health plans; the patient registration process and data capture; the basics of ICD-10-CM, CPT®, and HCPCS coding; medical necessity; medical claim forms and the billing process; accounts receivable and the collection process; and detail on government carriers, common commercial carriers, and workers’ compensation. If you have billing experience or have successfully completed medical billing training, this study guide will optimize exam preparation. The study guide is not an introduction to billing but a review of billing concepts. Key Features: - Practical Examples - Testing Techniques for CPB™ exam - Questions designed to mimic the CPB™ certification exam - Each chapter includes ten review questions geared to test important concepts - Study guide written by same task force who wrote the CPB™ exam - 50 question practice test, including cases, with answers and rationales AAPC's CPB™ Online Practice Exams are highly recommended to supplement this study guide. These online practice exams will add an additional 150 questions to your preparation. AAPC's Official CPC® Certification Study guide is specifically designed to help individuals prepare for the CPC® exam. Twenty chapters will guide you through a review of anatomy and terminology, ICD-10, HCPCS, and CPT® coding for each body system, E/M coding, anesthesia, radiology, pathology/laboratory and appropriate use of modifiers. This covers all the content sections found on the exam and will also provide you with testing tips for taking the AAPC's CPC® exam. The study guide is not an introduction to coding but a review of coding concepts. Key Features: - Anatomy and Medical Terminology Review - Practical Examples - Testing Techniques for CPC® exam - Questions designed to mimic the
CPC® certification exam - Each chapter includes ten review questions geared to test important coding concepts - Study guide written by same task force who wrote the CPC® exam - 200+ Test your Knowledge questions with answers and rationales

The definitive guide to starting a successful career in medical billing and coding With the healthcare sector growing at breakneck speed—it's currently the largest employment sector in the U.S. and expanding fast—medical billing and coding specialists are more essential than ever. These critical experts, also known as medical records and health information technicians, keep systems working smoothly by ensuring patient billing and insurance data are accurately and efficiently administered. This updated edition provides everything you need to begin—and then excel in—your chosen career. From finding the right study course and the latest certification requirements to industry standard practices and insider tips for dealing with government agencies and insurance companies, Medical Billing & Coding For Dummies has you completely covered. Find out about the flexible employment options available and how to qualify Understand the latest updates to the ICD-10 Get familiar with ethical and legal issues Discover ways to stay competitive and get ahead The prognosis is good—get this book today and set yourself up with the perfect prescription for a bright, secure, and financially healthy future!

Learn the basics of physician-based medical billing with MEDICAL BILLING 101, 2E. Clear and practical guidelines introduce you to the job responsibilities and basic processes in the medical billing world. Case studies and software tools like SimClaimTM CMS-1500 software offer you practice on actual forms to build confidence and understanding of the reimbursement process. This easy-to-use guide starts you off on the right path as you begin your journey to becoming a medical billing professional. Important Notice: Media content referenced within the product description or the product text may not be available in the ebook version. Theory and practical review questions (located at the end of each chapter) focus on recalling important chapter information and application of codes. A step-by-step approach makes it easier for students to build coding skills and remember the material. Learning objective and glossary review questions reinforce student understanding of key chapter concepts and terms. 30-day trial to TruCode® Encoder Essentials gives students experience with using an encoder (plus access to additional encoder practice exercises on the Evolve website). UNIQUE! "Real-life" coding reports (cleared of any confidential information) simulate the reports students will encounter as coders, and help them apply coding principles to actual cases. Online activities on Evolve provide extra practice with assignments, including coding reports. More than 450 illustrations help in understanding the types of medical conditions and procedures being coded, and include examples taken directly from Elsevier's professional ICD-10 and HCPCS manuals. UNIQUE! Four coding-question variations — covering both single-code questions and multiple-code questions and scenarios — develop students' coding ability and critical thinking skills. UNIQUE! Coders' Index in the back of the book makes it easy to quickly locate specific codes. Official Guidelines for Coding and Reporting boxes show the official guidelines wording for inpatient and outpatient coding alongside in-text explanations. Exercises, Quick Checks, and Toolbox features reinforce coding rules and concepts, and emphasize key information. Valuable tips and advice are offered in features such as From the Trenches, Coding Shots, Stop!, Caution!, Check This Out, and CMS Rules. Sample EHR screenshots (in Appendix D) show examples similar to the electronic health records students will encounter in the workplace.

2010 Medical Billing Basics offers comprehensive, entry-level education for beginning coders and billers in the office or classroom. This book is designed to allow the user to understand and master the basic skills needed to be an effective coder or biller. Understanding Medical Coding contains instruction for both inpatient and outpatient coding, and links a connection to the billing/reimbursement/collections process. The book takes the user through all steps necessary to code a claim correctly, link the correct CPT and ICD-9-CM codes for reimbursement for various insurance carriers and government entities, explains adjustments and how and when to bill patients, and what to do if there is a denial or rejection. The book provides an overview of both CPT and ICD-9-CM coding, and also provides more code-specific information, concentrating on specialty coding and the levels of coding. Understanding the coding rationales increases knowledge and skill in one or more area, enhancing skills and performance for various facilities locations and departments. Important Notice: Media content referenced within the product description or the product text may not be available in the ebook version.

Medical Coding Book tabbing system
Take your first step toward a successful career in medical coding with guidance from the most trusted name in coding education! The bestselling Buck's Step-by-Step Medical Coding is a practical, easy-to-use resource that shows you exactly how to code using all current coding sets. To reinforce your understanding, practice exercises follow the explanations of each coding concept. In addition to coverage of reimbursement, ICD-10-CM, CPT, HCPCS, and inpatient coding, an Evolve website includes 30-day access to TruCode® Encoder Essentials. No other book so thoroughly covers all coding sets! Theory and practical review questions (located at the end of each chapter) focus on recalling important chapter information and application of codes. A step-by-step approach makes it easier to build your coding skills and remember the material. 30-day trial to TruCode® Encoder Essentials gives you experience with using an encoder (plus access to additional encoder practice exercises on the Evolve website). UNIQUE! "Real-life" coding reports simulate the reports you will encounter as a coder and help you apply coding principles to actual cases. Online activities on Evolve provide extra practice with assignments, including coding reports. More than 450 illustrations help you understand the types of medical conditions and procedures being coded, and include examples taken directly from Elsevier's professional ICD-10 and HCPCS manuals. Learning objective and glossary review questions reinforce your understanding of key chapter concepts and terms UNIQUE! Four coding-question variations — covering both single-code questions and multiple-code questions and scenarios — develop your coding ability and critical thinking skills. UNIQUE! Coders' Index in the back of the book makes it easy to quickly locate specific codes. Official Guidelines for Coding and Reporting boxes show the official guidelines wording for inpatient and outpatient coding alongside in-text explanations. Exercises, Quick Checks, and Toolbox features reinforce coding rules and concepts, and emphasize key information. Valuable tips and advice are offered in features such as From the Trenches, Coding Shots, Stop!, Caution!, Check This Out, and CMS Rules. Sample EHR screenshots (in Appendix D) show examples similar to the electronic health records you will encounter in the workplace. NEW! Coding updates include the latest information available, promoting accurate coding and success on the job.

Today's fast-paced and constantly changing health-care environment demands that you find the answers you need quickly and easily. This brand-new approach to billing and coding teaches you the who, what, why, when, and how of proper diagnostic and procedural coding, claim form completion, and medical recordkeeping.
Updated for 2018 ICD-10 guidelines, this 6 page laminated guide covers core essentials of coding clearly and succinctly. Author Shelley C. Safian, PhD, RHIA, CCS-P, COC, CPC-I, AHIMA-approved ICD-10-CM/PCS trainer used her knowledge and experience to provide the largest number of valuable facts you can find in 6 pages, designed so that answers can be found fast with color coded sections, and bulleted lists. A must for students seeking coding certification and a great desktop refresher for professionals. 6-page laminated guide includes: General Coding & Legal Guidelines Coding Tips Conditions & Diagnoses Diagnosis Coding Pathology & Laboratory Reimbursement & Billing Tips Coding Evaluation & Management Services ICD-10 Terms, Notations & Symbols Wounds & Injuries Important Resources Anesthesia, Surgery & Radiology Diagnostic Coding Pediatric Coding Basics was developed to give pediatric healthcare professionals a basic overview of medical coding for services completed. Provides an overview of the medical office environment, CPT and ICD-9-CM coding, and the major health insurance entities; includes information on how to obtain entry-level employment as a reimbursement specialist. This complete self-study course on coding combines content, practice, and self-assessment into one online learning tool that the learner can follow at his or her own pace. The online program assumes the role of instructor, guiding individuals through the material and directing them when to read relevant sections from the text, checking their comprehension along the way, and providing feedback and encouragement. Users follow the program and learn at their own pace, working through chapter "lesson lectures" and reading assigned sections of the text as they progress. Interactive exercises, questions, and activities allow users to check their comprehension and learn from immediate feedback. Illustrations clarify concepts and familiarize students with the clinical procedures they are learning to code. Chapter exams are scored and incorporated in a grade book, which users can view to evaluate their progress. A series of approximately 18 SlideShows with audio narration explain and demonstrate clinical procedures. Hypertext links incorporated into the lesson lectures open pop-up boxes with further explanations and/or definitions of concepts and terms. Links to relevant web sites provide additional resources to enhance learning or stimulate discussion within a cohort group. An extensive glossary of approximately 650 terms provides correct definition for key terms throughout the course. All content has been updated to current industry standards; for use with Step-by-Step Medical Coding, 5th Edition ensuring that students learn from the most up-to-date material available. Each online chapter includes engaging "lesson lectures" by the author, guiding the learner through the online and text content. Interspersed self-comprehension questions, learning activities, and lesson quizzes throughout the online content allow learners to check their comprehension and learn from feedback. End-of-chapter review and self-assessment exercises include a specially created case-based coding activity, as well as matching, fill-in-the-blank, and multiple choice. Answers to the textbook exercises allow students to check their work on the exercises printed in the text against the answers posted within the course. Completely updated to reflect the massive changes to healthcare law! Medical Billing and Coding Demystified clearly explains the practices used by medical offices, hospitals, and healthcare facilities to encode medical services in order to receive payment from government agencies and insurance companies. Like other entries in this bestselling series, this self-teaching guide uses a building-block approach that allows readers to learn at their own pace and test themselves along the way. No previous medical or accounting training or experience is necessary to benefit from Medical Billing and Coding Demystified, and the book can be used as a classroom textbook or as a complement to larger texts. This new edition offers detailed coverage of the sweeping revisions that have taken place in healthcare law, including the transition from ICD9 to ICD10 coding and the Patient Protection and Affordable Healthcare Acts. It also includes an important overview of medical billing software. Includes valuable learning aids such as end-of-chapter quizzes, a final exam, and key points Different from similar books on the market in that it explains basic medical concepts enabling the reader to actually understand the procedures and tests they are billing and coding for PROP - Coding Systems Custom Combining the basics of coding, insurance, and reimbursement in one concise text, this reader-friendly resource is your key to understanding the fundamentals of medical billing and coding. Clearly organized, full-color chapters guide you through the entire coding and claims process, detailing coding rules and applications, insurance guidelines, and the reimbursement system, all accompanied by real-world practice to help you apply what you've learned in the field! Highlighted examples illustrate concepts in realistic medical office settings to enhance your understanding. Coding exercises teach you how to correctly code using the ICD-9-CM and CPT-4 manuals. Test Your Knowledge questions within each chapter help you assess your strengths and weaknesses and prepare for exams. Critical thinking problems challenge you to apply chapter concepts to common coding scenarios. Code It and Claim It software familiarizes you with a professional coding claim interface similar to programs you'll use on the job and provides real-world practice with actual patient cases. Key term lists and an extensive glossary reinforce your understanding of important medical coding and insurance terminology. NEW application exercises help you put your knowledge of coding and reimbursement into practice. In clear and straightforward language, Medical Coding: What It Is and How It Works, Second Edition provides an overview of the evolution of medical coding and all the various coding systems, how they relate, and how they function. Reasoning and consequences of the delayed ICD-10 implementation are explained along with a sound overview of the ICD-10-CM and PCS classification systems. For those contemplating a career in the coding field, this book is ideal as a basic orientation. Other individuals in healthcare management and administration will also benefit from a basic understanding of how coding works. Unlike other publications that focus only on coding, this book integrates coding guidelines and principles into the billing and reimbursement process, giving the student a more practical foundation in the rationale for correct coding. Healthcare fraud and abuse is addressed as well, to assure that readers understand ethical concerns inherent in coding for reimbursement. Instructor Resources: Instructor's Manual, PowerPoint slides, Test Bank 2021 Official HCPCS Level II Expert Code Book An essential key to quality measures, durable medical goods, injectable drugs, outpatient surgery, Medicaid, Blue Cross/Blue Shield, and many other codes. Complete with supplementary information for each code, it's designed for clinical coders as both an easy-to-use office guide and the preferred choice to prepare for all AAPC certification exams. AAPC's difference means these features: HCC Reporting Guide Receive expert advice regarding HCC reporting in 2021 Tabs - Simply flip to the chapter you need, saving you time during your exam or in the office Comprehensive 2021 Code Updates – Stay up to date. AAPC code books will notify you about new, deleted, and changed codes modifiers. More Brand Name Drugs in Table of Drugs - Pairing drugs with codes can be difficult. Simplify the process with easy to understand tables and tips. Modifiers Easier to Find and Use - Modifiers are easy to use and handy to find with a front cover fold-out flap that contain the modifier information you need to code accurately Additional Information for Each Chapter - Included information will help you meet your quota or pass your exam APC Status Indicators and ASC Designation Symbols - Find the codes payable through OPPS, and we'll help you do it accurately DMEPOS Icon - AAPC books make billing DME easier with supplemental information. In-depth Illustrations - View the various items associated with codes, along with anatomical illustrations. AHA Coding Clinic for HCPCS References - AHA Coding Clinic® not only helps you report supplies and services accurately; it helps you stand up to challenges
User-friendly Appendixes - Appendixes have the extra information you want, including the relevant parts of Medicare’s Pub 100 Color-coded Bars and Icons - Ask around, no HCPCS Level II books are as color-coded and easy to use as this. With Pub. 100 references, age and sex data, quantity alerts, new/deleted/reviced codes changes, and government coverage and rules for each code, the 2021 Official HCPCS Level II Expert Code Book is an essential key.

CPT(R) 2022 Professional Edition is the definitive AMA-authored resource to help healthcare professionals correctly report and bill medical procedures and services.

This no nonsense book tells you all you need to know to understand medical billing. Written by a mother/daughter team who have been running a medical billing service since 1994 it contains the facts without the fluff. Revised in June 2010 to almost double the content. It contains information about primary, secondary and tertiary claims, participation with insurance carriers, indemnity, hmos, ppos, eops, Medicare, Medicaid, Medicare hmos, workers comp, no fault, NPI numbers, copays, coinsurance, deductibles, patient billing, fraud, HIPAA, audits, overpayments and much more. A must read for every member of the staff in the doctor's office. Whether you need to improve office efficiency, improve the cash flow, or just understand the medical billing process better, this book is for you.

Coding Basics Medical Billing and Reimbursement Fundamentals Delmar Pub

As unique as pain management is among medical specialties, coding for pain management is uniquely difficult. But we have the perfect solution to boost your reporting accuracy and ensure your claims establish medical necessity. What’s more, we’ll also help you boost your productivity! It’s all in the intelligently designed, easy-access layout of the Coders’ Specialty Guide 2021: Pain Management. On one page—at one glance—you get all the code info you need for clean, audit-ready claims: CPT®-to-ICD-10-CM crosswalks, lay terms, procedural illustrations, CCI edits, global indicators, RVUs, and more. We’ve even included HCPCS and BETOS codes with lay terms and coding tips for faster, on-target pain management coding. Error-proof your claims with everything you need at your fingertips: CPT® codes for pain management, including 2021 new and revised codes Official descriptors for Category I-III codes for simpler code selection Lay term explanations to help you understand complex procedures Insider coding and billing tips for reporting specific CPT® codes Updated Medicare reimbursement rates for physicians and hospitals RVUs for facility and non-facility for more accurate payments Modifier crosswalks CCI edits for easier bundling decisions Helpful indicators (global days, diagnostic tests, and more) Pain Management terminology with easy-to-understand definitions HCPCS codes, lay terms, and surefire reporting tipsto boost payment for supplies, equipment, and drugs Quick-view ICD-10-CM crosswalksto check medical necessity Index of all specialty codes with page numbers for simpler code look-up Dictionary-style headers with code ranges on each page Descriptive illustrations with related codes for each image Stay on top of CPT® changes and reap prompt and equitable reimbursement with the Coders’ Specialty Guide 2021: Pain Management. *CPT® is a registered trademark of the American Medical Association

Your professional coding coach at your fingertips. Increase your confidence with the expert guidance you’ll find in the 3rd Edition of this easy-to-use guide. Here’s all of the information you need to understand medical billing and coding procedures…in a snap! It’s your one-stop solution, revised for 2021 codes Category I-III codes with official descriptors for easier code selection ICD-10 references for locating codes that do. It’s like having a master coder by your side showing you how to use the coding reference manuals to increase your efficiency and accuracy.

Optum Learning: Medical Billing Basics offers comprehensive, entry-level education for beginning coders and billers in the office or classroom. This book is designed to allow the user to understand and master the basic skills needed to be an effective coder or biller. Features and benefits Optum Edge Complete foundation for coding and billing. Gives a broad overview of coding, payers, and the reimbursement process for the entry level coder or billing professional. Optum Edge Simple coding scenarios. Simple coding scenarios turn the abstract world of medical reimbursement into real case studies. Optum Edge Understandable coding basics. Helps users learn basic physician and hospital coding and billing. Updated code sets. Includes the latest CPT®, HCPCS Level II, and ICD-9-CM codes. Insurance and payer background. Takes the confusion out of the alphabet soup of different types of insurance and payers. Effective supportive material. Illustrations and coding scenarios ease understanding and put information into context. Developed by coding educators. This educational resource is designed to help offices grow and their staff prepare for certification and accreditation. Are you tired of skimming through thick coding books in search of the info you need to code a single service or procedure? Put an end to the chase with the Coders’ Specialty Guide 2021: Family Practice/Primary Care. Find everything you need to report a new or returning CPT® family practice code on one page—ICD-10 CrossRefs, RVUs, CCI edits, CPT® descriptors, lay terms, anatomical illustrations, and descriptive coding, billing, and reimbursement guidance. Streamline your workflow: Family practice and primary care CPT® codes, including new and revised 2021 codes Category I-III codes with their official descriptors for easier code selection Easy-to-understand definitions of intricate family practice and primary care procedures Expert coding and billing tips for reporting specific CPT® codes Easy access to revised Medicare reimbursement rates for hospitals and physicians Make accurate payments with facility and non-facility RVUs Modifier crosswalks Bundling decisions made easy with CCI edits Critical indicators for global days, diagnostic tests, and more Family practice and primary care terms Ensure accuracy and get the reimbursement you deserve: HCPCS codes, lay terms, and tips to boost reimbursement for supplies, equipment, and drugs Confirm medical necessity with ICD-10-CM crosswalks A complete index of codes with page numbers for instant code look up Dictionary-style page headers with code ranges Illustrations with related codes for greater understanding and coding accuracy And so much more! Hurdle your reporting obstacles with the Coders’ Specialty Guide 2021: Family Practice/Primary Care.

Medical Terminology and Anatomy for ICD-10 Coding integrates expanded anatomy, physiology, and pharmacology coverage with the latest medical terminology you need to correctly code in ICD-10. The ICD-10-CM classification system serves as the structure for organizing diseases and disorders, with carefully drawn, well-labeled illustrations to help you visualize the associated anatomy. ICD-10 coding guidelines and notes, along with electronic medical records and integrated exercises are interspersed throughout the text. A robust Evolve site includes games, activities, and animations to reinforce learning. Medical terminology specifically tailored to ICD-10-CM and ICD-10-PCS guidelines supply you with an excellent foundation for learning the medical terminology related to ICD-10-CM. Learn all the anatomy and physiology necessary to be able to understand medical reports and code accurately in ICD-10-CM/PCS. Pathology terms organized by ICD-10 disease and disorder categories let you learn terms in the same order they are presented in the coding manual. Guideline Alert! boxes highlight ICD-10-PCS coding information when relevant to medical terminology. Special Notes boxes present ICD-10 features that affect your understanding of the terminology presented. Root operation tables illustrate the root operations in PCS and their associated suffixes. Body Part key provides a complete list of body parts and how they should be coded in ICD-10. Pathology and procedure terminology lists the word parts for each term, along with the definition so you become familiar with prefixes, suffixes, and combining forms. Exercises interspersed throughout the text encourage you to practice and learn as you move through the material. Be Careful! boxes warn you about similar and potentially confusing word parts and medical terms. Games and activities on accompanying Evolve website offer an easily accessible source for extra interactive practice and learning. Electronic medical record format illustrates the appearance of electronic records now being used in many healthcare settings. NEW! Pharmacology in each body system and a Pharmacology Basics appendix help you recognize drugs and medications in medical reports. NEW! More than 50 new images bring terminology to life. NEW! Additional procedural terms supply a more complete picture of the number and kind of procedures you will encounter on medical reports. NEW! Normal Lab Values appendix familiarizes you with normal and abnormal lab values so you know when to search for a medical record for possible additional diagnoses. NEW! Tablet and mobile-optimized Evolve activities offer an easily accessible source for extra interactive practice and learning.