

**Medical
Decision-Making
Coding Scenarios**

99202

Scenario #1: 99202

LEFT KNEE PAIN

Provider Documentation

Visit Type:

New patient

Chief Complaint:

Patient presents today with a new concern of left knee pain.

The patient is a 32-year-old, male who presents today for an evaluation of his left knee. About a month ago, he began to feel medial and lateral knee pain and followed up with a walk in clinic. He was provided with an IM injection, which provided a few weeks of relief. The pain is described as a sharp pain. Sometimes, the knee will pop. It was thought that he may have a meniscal tear. He cannot recall any injury. Exercising on an elliptical will exacerbate his symptoms. He denies having any back or hip pain and also denies having any numbness or tingling distally. Over the past 10 days since he made this appointment, the symptoms have resolved.

Exam:

- Gait: normal, non-antalgic.
- Ecchymosis - Left: none.
- Effusion - Left: none.
- Swelling - Left: none.
- Maximum tenderness - Left: non-tender.

- Patella exam - Crepitation - Left: none.
- Knee ROM: PROM - Flexion: 135 degrees, Extension: 0 degrees.
- Neurological: No evidence of sensory loss in the affected area.
- X-rays obtained today were reviewed with the patient. There is a possibility that his symptoms are related to chondromalacia patella. He is not having any patellar tendon symptoms. His history is more consistent with a minor sprain that has resolved.

Assessment/Plan:

Given his resolved mechanical type symptoms, I recommend he discontinue his knee wrap and resume walking. If the pain recurs, he will let us know.

Time spent:

15 minutes

Coding

Number and Complexity of Problems addressed:

1 straightforward or minor problem: Straightforward

Amount and/or complexity of data to be reviewed and analyzed:

X-rays (technical and professional components) were separately billed: None

Risk of complications and/or morbidity or mortality of patient management:

Sprain, resolving: Low

***Level of MDM based on
2 out of 3 elements of MDM:***

Straightforward

Code:

99202

Rationale:

The risk of complications and/or morbidity or mortality of patient management for a sprain is typically Low, which would support Level 3. However, the number and complexity of problems addressed is minimal, and no data contributes to this case because X-rays in the office were separately billed.