

PATIENT IDENTIFICATION BELOW

PATIENT
NAME

ADDRESS

DATE DOB

ENCOUNTER #

EMERGENCY ROOM CHARGE SHEET

ALL CHARGE STICKERS
SHOULD BE PLACED ON
THE BACK OF COPY 2 -
BE SURE THAT
STICKERS ARE
ATTACHED AS SHOWN

SEE BACK OF 2ND PAGE
FOR ADDITIONAL CHARGES

YOUR HOSPITAL

NURSING AND TECHNICAL FEES		PROFESSIONAL FEES		MD INTERPRETATION SERVICES	
LEVEL SUPPORT SERVICE		LEVEL MD SERVICE			
2691004	LEVEL I HOSPITAL	2701118	LEVEL I PROF. FEE	2702462	ABGs INTERPRETATION
2691020	LEVEL II HOSPITAL	2701126	LEVEL II PROF. FEE	2691426	PULSE OXIMETER
2691046	LEVEL III HOSPITAL	2701134	LEVEL III PROF. FEE	2701852	EKG INTERP
2691061	LEVEL IV HOSPITAL	2701142	LEVEL IV PROF. FEE		
2691087	LEVEL V HOSPITAL	2701159	LEVEL V PROF. FEE		
2690500	VOID / TECHNICAL	2700508	VOID / PMD / PATIENT		
PROFESSIONAL FEES W/ PROCEDURE		SPECIAL TECHNICAL CHARGES			
2706208	LEVEL II HOSPITAL	2692069	OVER NIGHT HOLD		
2706216	LEVEL III HOSPITAL	2693083	CARDIAC MONITOR		
2706224	LEVEL IV HOSPITAL	2692093	AMBULANCE FEE		
2706232	LEVEL V HOSPITAL	2401099	LANCET		
2706240	LEVEL IV HOSPITAL				
OXYGEN CHARGES		MD PROCEDURES		MD CAST PROCEDURE	
3510013	OXYGEN SET-UP	2703346	CERUMEN REMOVAL	2705028	LONG ARM >10 YR CAST
3510021	OXYGEN 1 - 4 HRS	2702546	DEBRIDEMENT	2705069	SHORT ARM >10 YR CAST
3510039	OXYGEN 4 - 8 HRS	2702629	BURN MED.	2705002	LONG ARM <10 YR CAST
3517018	E.R. CODE BLUE	2703122	ANT. NASAL PACK	2705036	SHORT ARM <10 YR CAST
		2703585	SIMPLE CATH. PLACE	2705010	LONG ARM >10 YR SPLINT (OCL)
		2707503	FBR SIMPLE SUBQ.	2705044	SHORT ARM >10 YR SPLINT (OCL)
RESPIRATORY SUPPLIES		2703007	OPHTHALM. EXAM	2705077	CYLINDER CAST - Thigh to Ankle
2440089	ORAL ADULT AIRWAY	2702983	EYE LAVAGE	2705085	FINGER SPLINT
2440923	AMBU BAG DISPO	2702124	GAST. INTUB.	2705093	SHORT LEG CAST
2440022	NASA TRUMPET	2701761	ENDOTRACHEAL INTUB.	2705135	LONG LEG CAST
2481372	ENDOTRACH TUBE (7.5CM)	2701928	CENTRAL LINE	2705150	WALING CAST
2481372	ENDOTRACH TUBE ()	2709459	ANOSCOPIC/DIAGNOSTIC	2705127	LONG LEG SPLINT <10 YR (OCL)
		2704062	I & D PARONYCHIA	2705143	LONG LEG SPLINT > 10 YR (OCL)
		2704047	I & D SIMPLE ABCESS	2705184	SHORT LEG SPLINT
		2703700	I & D BARTHOLINS ABSCESS	2705192	CAST REMOVAL
		2709251	I & D PERIRECTAL ABSCESS	CAST SUPPLIES	
IV SUPPLIES				2444172	ARM/LONG CAST
2543460	NORMAL SALINE 0.9	2707123	FINGER	2444149	ARM/SHORT CAST
2542710	D5/.45 NAACL 1000 ML	2707099	RADIAL HEAD	2444412	LEG/LONG CAST
2541423	SET CONT. FLOW	2707073	SHOULDER	2444388	LEG/SHORT CAST
2540318	CATH INTRACAN 20G	LACERATIONS FACE SIMPLE		2444453	LEG/SHORT/WALKING
2540854	INJ SITE LUERLOCK (HEP LOCK)	2705382	UP TO 1 CM	2444446	LEG/LONG/WALKING
PATIENT SUPPLIES		2705408	1 TO 2.5 CM	NECK/HAND/FEET/EXT. GENITALIA	
2480408	LACERATION TRAY	2705424	2.6 CM TO 5 CM	2705804	UP TO 2.5 CM
2476067	VAG. SPEC STERILE	2705440	5.1 TO 7.5 CM	2705820	2.6 TO 7.5 CM
2476125	VAG SPEC PLASTIC	FACE/EAR/EYELIDS/NOSE/LIP		2705846	7.6 TO 12.5 CM
2441863	BED PAN	2706000	UP TO 2.5 CM		
2484079	URINAL	2706026	2.6 CM TO 5 CM	TRUNK	
2441178	ACE WRAP	2706042	5.1 TO 7.5 CM	2705234	UP TO 1 CM
2453538	CLEAN CATCH	2706067	7.5 TO 12.5 CM	2705242	1 TO 2.5 CM
2454098	CONT. GRADUATE	FACE/EAR/EYELIDS/NOSE/LIP		2705259	2.6 TO 7.5 CM
2441749	EMESIS BASIN	2705606	UP TO 2.5 CM	2705267	7.6 TO 12.5 CM
2685006	ENT TRAY	2705622	2.6 TO 7.5 CM		
2685014	EYE TRAY	2705648	7.6 CM TO 12.5 CM	PATIENT STATUS	
				<input type="checkbox"/> ADMIT	<input type="checkbox"/> VOID
				<input type="checkbox"/> DISCHARGE	<input type="checkbox"/> EXPIRED
				<input type="checkbox"/> TRANSFER	
				<input type="checkbox"/> AMA	

**DO NOT PLACE
STICKERS HERE!
(SEE BACK OF 2ND SHEET)**

