

Your  
Hospital's  
Logo  
Here

# RECOVERY ROOM CHARGE VOUCHER

## PATIENT IDENTIFICATION

DATE:	TIME IN: (Military Time)	TIME OUT: (Military Time)
-------	--------------------------	---------------------------

21 - 2020 - 2   CARDIAC MONITOR	35 - 1001 - 3   OXYGEN SET UP
21 - 2100 - 2   PULSE OX.	35 - 1002 - 1   OXYGEN 1 - 4 HOURS
21 - 2150 - 7   SPIROMETRY	35 - 1003 - 9   OXYGEN 4 - 8 HOURS
	35 - 1004 - 7   OXYGEN 8 - 12 HOURS
21 - 2021 - 0   DEFIB / MONITOR	35 - 1005 - 4   OXYGEN 12 - 24 HOURS
35 - 1501 - 2   RESPIRATOR SET-UP	35 - 1101 - 1   HUMIDITY SET-UP
35 - 1502 - 0   RESPIRATOR 1 - 4 HOURS	35 - 1102 - 9   HUMIDITY 1 - 4 HOURS
35 - 1503 - 8   RESPIRATOR 4 - 8 HOURS	35 - 1103 - 7   HUMIDITY 4 - 8 HOURS
21 - 0010 - 5   REC ROOM 0 - 30 MIN	21 - 0020 - 4   REC ROOM 301 - 330 MIN
21 - 0011 - 3   REC ROOM 31 - 60 MIN (1 HR)	21 - 0021 - 2   REC ROOM 331 - 360 MIN (6 Hr)
21 - 0012 - 1   REC ROOM 61 - 90 MIN	21 - 0022 - 0   REC ROOM 361 - 390 MIN
21 - 0013 - 9   REC ROOM 91 - 120 MIN (2 HR)	21 - 0023 - 8   REC ROOM 391 - 420 MIN (7 HR)
21 - 0014 - 7   REC ROOM 121 - 150 MIN	21 - 0024 - 6   REC ROOM 421 - 450 MIN
21 - 0015 - 4   REC ROOM 151 - 180 MIN (3 HR)	21 - 0025 - 3   REC ROOM 451 - 480 MIN (8 HR)
21 - 0016 - 2   REC ROOM 181 - 210 MIN	21 - 0026 - 1   REC ROOM 481 - 510 MIN
21 - 0017 - 0   REC ROOM 211 - 240 MIN (4 HR)	21 - 0027 - 9   REC ROOM 511 - 540 MIN (9 HR)
21 - 0018 - 8   REC ROOM 241 - 270 MIN	21 - 0028 - 7   REC ROOM 541 - 570 MIN
21 - 0019 - 6   REC ROOM 271 - 300 MIN (5 HR)	21 - 0029 - 5   REC ROOM 571 - 600 MIN (10 HR)
