

Exceptional Health Solutions, PLC
 1350 Boyson Road, Building D, Suite 1, Hiawatha, IA 52233
 Tel: 319-531-7989 / Fax: 319-531-7989

Appt Date: 12-Jun-2018

Provider: Hodges, DO, Linda
 NPI#1528074671

Diagnosis: F33.1, G89.29, G57.90, M54.17

Location: 1350 BOYSON ROAD BUILDING D, SUITE
 1

First Symptoms or Accident Date:

Workplace Injury Personal Injury

Tax ID: HIAWATHA IA 52233
 474260938

Billing

No insurance provided - bill patient directly

Charges

Taxable Item	Type	Code	M1	M2	Ins	Charge	Units	Sales Tax	Total
<input type="checkbox"/>	Office Procedures	36000			<input type="checkbox"/>	\$50.00	1	\$0	\$50.00
	IV placement - vein								
<input type="checkbox"/>	Office Procedures	93041			<input type="checkbox"/>	\$0.00	1	\$0	\$0.00
	RHYTHM ECG TRACING								
<input type="checkbox"/>	Office Procedures	96365			<input type="checkbox"/>	\$400.00	1	\$0	\$400.00
	Infusion 1st Hour								
<input type="checkbox"/>	Office Procedures	96366			<input type="checkbox"/>	\$150.00	3	\$0	\$450.00
	Infusion each add'l hour								
<input type="checkbox"/>	Office Procedures	J2060			<input type="checkbox"/>	\$25.00	1	\$0	\$25.00
	2 mg LORAZEPAM INJECTION								
<input type="checkbox"/>	Office Procedures	J2250			<input type="checkbox"/>	\$10.00	2	\$0	\$20.00
	1 mg Midazolam injection								
<input type="checkbox"/>	Office Procedures	j2405			<input type="checkbox"/>	\$10.00	4	\$0	\$40.00
	Ondansetron per 1mg								
<input type="checkbox"/>	Office Procedures	J2550			<input type="checkbox"/>	\$25.00	1	\$0	\$25.00
	PROMETHAZINE HCL INJECTION								
<input type="checkbox"/>	Office Procedures	J3490			<input type="checkbox"/>	\$25.00	1	\$0	\$25.00
	Injection								
<input type="checkbox"/>	Office Procedures	J7050			<input type="checkbox"/>	\$150.00	1	\$0	\$150.00

250 CC NS Infusion							
<input type="checkbox"/>	Other	PMDIS	<input type="checkbox"/>	\$-85.00	1	\$0	\$-85.00
Flat Fee Procedure Adjustment							
Payment Type: Credit Card							\$-1,100.00
						Total SalesTax:	\$0.00
						Total Balance:	\$0.00

Notes: J3490 = Ketamine NDC 67457-108-00

