

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



**Provider:** Hodges, DO, Linda  
 NPI#1528074671  
**Location:** 1350 Boyson Road Building D, Suite 1  
 Hiawatha IA 52233  
**Tax ID:** 474260938

**First Symptoms or Accident Date:**

Workplace Injury  Personal Injury

**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	j2405			<input type="checkbox"/>	\$10.00	4	\$0	\$40.00
	Ondansetron per 1mg								
<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"/>	Office Procedures	KDKET			<input type="checkbox"/>	\$0.00	1	\$0	\$0.00
	Low Dose Ketamine Infusion								
<input type="checkbox"/>	Office Services	99212			<input type="checkbox"/>	\$75.00	1	\$0	\$75.00
	OFFICE/OUTPATIENT VISIT EST								
<input type="checkbox"/>	Other	PMDIS			<input type="checkbox"/>	-\$340.00	1	\$0	-\$340.00
	Flat Fee Procedure Adjustment								
	Payment Type: Credit Card								\$-400.00



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Total SalesTax:	\$0.00
Total Balance:	\$0.00

**Notes:** J3490 - Ketamine NDC - 67457-108-00