

**URGENT CARE**

Provider #

Federal ID #

LOCATION (CIRCLE ONE) 13  
15

**INJURY DATE:**

CPT	DESCRIPTION	FEE	CPT	DESCRIPTION	FEE	CPT	DESCRIPTION	FEE
<b>NEW PATIENTS</b>			<b>X-RAY; (cont'd)</b>			<b>SUPPLIES (SENT HOME WITH PATIENT)</b>		
99201	LEVEL 1, BRIEF: 10 min		73060	HUMERUS; 2+ VIEWS		02110	SLING, ARM	
99202	LEVEL 2, LIMITED: 20 min		73560	KNEE; AP & LAT		02084	UNIVERSAL THUMB SPLINT	
99203	LEVEL 3, EXPANDED: 30 min		72110	LS SPINE; COMPLETE W/OBLIQUES		02150	WRIST BRACE, LIBERTY	
99204	LEVEL 4, COMPREHENSIVE: 45 min		70110	MANDIBLE; COMPLETE		02010	WRIST SPLINT	
99205	LEVEL 5, COMPREHENSIVE: 60 min		70160	NASAL BONES; COMPLETE		<b>TRAYS AND OTHER SUPPLIES</b>		
99025	NEW PT. INITIAL VISIT W/PROC.		72190	PELVIS; 3-VIEWS		02534	EYE TRAY	
<b>ESTABLISHED PATIENTS</b>			04209	POST REDUCTION		02111	SIMPLE TRAY	
90025	OFFICE VISIT, NO CHARGE	N/C	71100	RIB, UNILATERAL, 2 VIEWS		02097	SMALL SUTURE TRAY W/ANES	
99211	LEVEL 1, BRIEF:		72220	SACRUM & COCCYX; 2+ VIEWS		02033	SUTURE REMOVAL KIT	
99212	LEVEL 2, LIMITED:		73050	SHOULDER AC JTS; BILATERAL		02094	TRAY, PELVIC / SMALL W/ANESTHESIA	
99213	LEVEL 3, EXPANDED:		73030	SHOULDER; COMPLETE		02795	TRAY, SMALL W/O ANESTHESIA	
99214	LEVEL 4, COMPREHENSIVE:		70360	SOFT TISSUE		02101	INSERTION TRAY W/FOLEY W/O BAG	
99215	LEVEL 5, COMPREHENSIVE:		72070	THORACIC SPINE; AP&LAT		02389	STRAIGHT TIP CATHETER	
99354	PROLONGED SERVICE 1st HOUR		73590	TIB-FIB; AP&LAT		02027	IV SUPPLIES	
99355	PROLONGED SERV. EA ADD'L 30min		73110	WRIST; COMPLETE		02795	I&D TRAY	
<b>PROCEDURES</b>			<b>LAB (POST CHARGES FROM LAB TICKET ONLY)</b>			J7030	INFUSION NORMAL SALINE; 1000 cc	
46600	ANOSCOPY		36415	VENIPUNCTURE		J7040	INFUSION N/S, STERILE; 500ml = 1 UNIT	
11730*	AVULSION NAIL, SIMPLE		82150	AMYLASE		J7120	LACTATED RINGERS; 1000cc	
16030*	BURN CARE; LG. NO ANEST		85025	CBC/PLATELETS		<b>MISCELLANEOUS</b>		
16025*	BURN CARE, MED. NO ANEST		80049	CHEM 7		93000	EKG; COMPLETE	
16020*	BURN CARE, SMALL, NO ANEST		80054	CHEM SURVEY; COMP METABOLIC		99291	CRITICAL CARE; 1ST HOUR	
53670	CATHETERIZATION (ADD TRAY)		87328	GIARDIA EIA		99292	CRITICAL CARE; EA ADD'L 30 MIN TOTAL TIME: to	
30903	EPISTAXIS CONTROL; COMPLEX		82962	GLUCOMETER		02474	DISPOSABLE CAUTERY UNIT	
30901	EPISTAXIS CONTROL, SIMPLE		82270	HEMOCULT 1-3 DETERMINATIONS		69210	EAR IRRIGATION	
10060*	I&D ABSCESS; SIMPLE		05250	I-STAT		94640	NEBULIZER TREATMENT	
10140*	I&D HEMATOMA/SEROMA/FLUID		86308	MONO SCREEN (HETEROPHILE)		02026	OXYGEN SUPPLIES	
10120*	REM. FB SUB Q; SIMPLE		84703	PREGNANCY, SERUM		94760	OXIMETRY	
65222*	REM. FB CORNEA W/SPLIT LAMP		81025	PREGNANCY TEST - URINE		<b>INJECTIONS AND ADMINISTRATIONS</b>		
07008	REMOVE CONSTRICTING RING		87045	STOOL CULTURE		90780	IV INFUSION; UP TO 1 HOUR	
<b>LACERATION REPAIRS</b>			87177	STOOL +		90781	IV INFUSION; EA ADD'L HR TO 8 HRS	
12001*	REP LAC 2.5cm OR LESS		88313	O&P		90782	THERAP/ DIAG INJECTION; SUB Q/ IM	
12002*	REP LAC 2.6 - 7.5cm		86588QW	RAPID STREP ANTIGEN		90784	THERAP/ DIAG INJECTION; IV	
12004*	REP LAC 7.6 - 12.5cm		84443	TSH		90788	IM INJECTION OF ANTIBIOTIC	
12011*	FACIAL LAC 2.5cm OR LESS		84480	T-3; TOTAL		J0150	ADENOSINE; 6mg X	
12013*	FACIAL LAC 2.6 - 5.0 cm		81001	UA COMPLETE		J1200	BENADRYL; 50mg	
12031*	LAYER CLOS. SCALP/AXILLA/TRUNK; <2.5CM		87088	URINE CULTURE		03524	CARDIAZEM PER 25MG X	
12032*	LAYER CLOS. SCALP/AXILLA/TRUNK 2.6-7.5CM		87086	URINE SCREEN CULTURE		J0702	CELESTONE; 3mg/ml X	
12041*	LAYER CLOSURE; NECK/HANDS/FEET <2.5CM		87220	KOH		J2175	DEMEROL; PER 100mg X	
12042*	LAYER CLOSURE; NECK/HANDS/FEET 2.6-7.5CM		87210	WET MOUNT		J1030	DEPOMEDROL 40mg X	
<b>SPLINTS / SUPPLIES</b>			<b>SUPPLIES (SENT HOME WITH PATIENT)</b>			J1160	DIGOXIN UP TO 0.5mg	
29505	APPLY LONG LEG SPLINT		02074	ACE WRAP 4"		J0170	EPINEPHRIN/SUSPHRINE; 1ml amp	
29515	APPLY SHORT LEG SPLINT		02075	ACE WRAP 6"		J3030	IMITREX 6mg	
29125	APPLY SHORT ARM SPLINT		02786	ADAPTIC DRESSING		J1940	LASIX UP TO 20mg X	
29105	APPLY LONG ARM SPLINT		02019	ANKLE BRACE		J2550	PHENERGAN 50mg X	
02222	ORTHOGLASS; ARM		02620	ANKLE BRACE; AIR CAST		J0696	ROCEPHIN PER 250mg; X	
02223	ORTHOGLASS; LEG		02604	ANKLE, E-Z WRAP; RIGID		J2930	SOLUMEDROL; 125MG X	
<b>X-RAY</b>			02686	BURN DRESSING, LARGE		J1885	TORADOL; PER 15mg; X	
74000	ABDOMEN (1 VIEW)		02685	BURN DRESSING, SMALL		<b>OTHER:</b>		
74022	ABDOMINAL SERIES		02066	CERVICAL COLLAR		99211	ADMINISTER PPD W/NO MD VISIT	
73610	ANKLE; COMPLETE		02007	CLAVICLE STRAP		86580	PPD	
72052	CERVICAL SPINE; COMPLETE		02077	DRESSINGS; LARGE		90471	IMMUNIZATION ADMINISTRATION	
71020	CHEST PA & LAT		03201	DRESSINGS; MEDIUM		90178	TETANUS; Td (V06.5 or Injury code)	
73000	CLAVICLE; COMPLETE		02076	DRESSINGS; SMALL		<b>OTHER CHARGES:</b>		
73080	ELBOW; COMPLETE		02011	ELBOW SUPPORT		<b>CHARGES:</b> \$		
70150	FACIAL BONES; COMPLETE		02082	FINGER SPLINT				
73630	FOOT; COMPLETE		02013	KNEE IMMOBILIZER				
73090	FOREARM; AP&LAT		02087	KNEE SLEEVE				
73130	HAND; 3+ VIEWS		02387	KWIK COLD				
73510	HIP; COMPLETE, UNILATERAL		02200	MALLET FINGER SPLINT				
			02127	ORTHO SHOE				
			02129	RIB BELT				

ICD9 CODE 1	ICD9 CODE 2	ICD9 CODE 3	ICD9 CODE 4
DIAGNOSTIC IMPRESSION		WORK PHONE	
PRIVATE PHYSICIAN		DR. #	EXAMINED BY
			DR #

PROVIDER NO: FEDERAL ID NO.

ACCIDENT  WORKERS COMPENSATION

YES, I HAVE AUTHORIZED MY RECORDS TO BE RELEASED AND HAVE TAKEN THEM WITH ME  
 NO, I DO NOT AUTHORIZE MY RECORDS TO BE RELEASED

X \_\_\_\_\_

NEW  ESTABLISHED \_\_\_\_\_

AUTHORIZATION TO TREAT MINOR GIVEN BY: PARENT / GUARDIAN (CIRCLE ONE)

NAME:

INITIALS