

EMERGENCY ROOM CHARGE SHEET

THE GOOD SAMARITAN
HOSPITAL OF MARYLAND, INC.
5601 LOCH RAVEN BOULEVARD
BALTIMORE, MD. 21239-2995

Patient Label Here

DIAGNOSIS:

| Method of Arrival: |
|--------------------|
| 1 EMS/RUN # |
| 2 Personal Vehicle |
| 3 Walk-in |
| 4 Police Escort |
| 5 Private Ambo # |

Discharge Disposition: _____ HOME / ROOM # _____
 Was the patient transferred to OR? Yes No
 Transferred to: _____

| | |
|---|----------------------|
| (PLEASE CIRCLE ONE) TRIAGE CODE: 1 2 3 4 5 | TRIAGE TIME/DATE: |
| BOARDER PATIENT: YES NO | DEPARTURE TIME/DATE: |

ER CHARGES

| Code | Category A | Code | Category B Faster Care |
|----------|-------------------------------|----------|-------------------------------|
| 45100013 | Level 1 (0 < 15 mins CCT) | 45600004 | Level 1 (0 < 15 mins CCT) |
| 45100021 | Level 2 (15 - 29 mins CCT) | 45600012 | Level 2 (15 - 29 mins CCT) |
| 45100039 | Level 3 (30 - 59 mins CCT) | 45600038 | Level 3 (30 - 59 mins CCT) |
| 45100047 | Level 4 (60 - 119 mins CCT) | 45600046 | Level 4 (60 - 119 mins CCT) |
| 45100054 | Level 5 (120 + mins CCT) | 45600053 | Level 5 (120 + mins CCT) |
| 45100088 | Triage Only | 45100070 | Recheck |
| 45100096 | ER-No Charge | | |
| 45200045 | Extended Care/Per Hour | | |

SUPPLIES

| LAWSON # | DESCRIPTION | CDM # | LAWSON # | DESCRIPTION | CDM # |
|----------|-------------------------------------|----------|----------|------------------------------------|----------|
| 46098 | 14 FR FR SUCTION CATHETER | 62213335 | 10499 | OXI-SENSOR | 62255955 |
| 52836 | 16 FR 5 ML 2 WAY FOLEY CATHETER | 62204011 | 13216 | PACK,NASAL,POPE,POSTERIOR | 62207188 |
| 46431 | 16 FR FOLEY CATHETER INSERTION TRAY | 62204094 | 27450 | PRESSURE BAG INFUSER | 62207469 |
| 16120 | ADULT AMBO BAG | 62000344 | 10495 | PULSE OX SENSOR/PROBE - ADULT | 62002472 |
| 42863 | ANKLE AIR CAST | 62002266 | 10496 | PULSE OX SENSOR/PROBE - PEDIATRIC | 62002506 |
| 66372 | BLOOD TRANSFUSION KIT | 62216429 | 44313 | SLING ARM W/D-RING LOOP UNIV | 62000260 |
| 32561 | CAUT CORDLESS FINE HI-TEMP | 62203641 | 19400 | STAPLER SKIN | 62203989 |
| 61151 | DRSG DUODERM 4X4 SIGNAL | 62262928 | 17852 | THORACENTESIS RESERVOIR 2000ML | 62204896 |
| 17805 | DRSG TEGADERM 2.25X2.75IN | 62262969 | 24558 | THPRACENTESIS TRAY - 14 GA | 62216098 |
| 44064 | FECAL BAG COLLECTOR | 62247911 | 60610 | TRIPLE LUMEN CATHETER KIT | 62250865 |
| 19509 | IMMOB KNEE CANVAS XLG 19IN | 62000385 | 11040 | TUBE FEEDING 5FRX20 | 62216445 |
| 13623 | IMMOB KNEE LG 22IN | 62000393 | 50012 | TUBE GASTRO RPLCMNT 18FR | 62850300 |
| 13622 | IMMOB KNEE MD 22IN | 62000369 | 50013 | TUBE GASTRO RPLCMNT 20FR | 62826532 |
| 19245 | IMMOBILIZER,SHOULDER,LARGE | 62000245 | 19191 | TUBE TRACH UNCUF DIC SZ7 | 62204805 |
| 19246 | IMMOBILIZER,SHOULDER,MEDIUM | 62000252 | 66376 | TUBING IV CONT FLOW VT | 62206396 |
| 62231741 | IV START KIT | 62231741 | 16153 | TUBING HOT LINE FLUID WARMER | 62244926 |
| 17173 | KIT INTRO MICROPUNCT 5FRX10X40 | 62204714 | 47487 | URIMETER DRAINAGE BAG | 62203898 |
| 19290 | KIT, DRESSING, HYPERAL-TPN | 62265335 | 46433 | URIMETER FOLEY CATGHETER TRAY - 16 | 62219597 |
| 24479 | LUMBER PUNCTURE TRAY | 62207311 | 59620 | WOUND CARE STARTER KIT | 62231758 |