STANDARD DOWNTIME
CHARGE FORMS HOSPITAL EKG

McLaren HEALTH CARE

DATE OF SERVICE

DEPARTMENT NAME/NUMBER

This is the tracking form for EKG's performed in the acute hospital space. Unless noted, charges will be applied for 12 lead EKG tracing only, CPT 93005. **IF performing 15-lead tracing, please note this on the line with patient name so that the correct charge/CPT can be applied.**

PATIENT NAME	PATIENT DOB	PATIENT FIN NUMBER

Solution Lead: Donna Lafean (810) 434-8586 RI Analyst: Mitsu White (734) 306-7676 • Rebecca St. John (586) 242-3595