



P.O. Box 843038
 Dallas, TX 75284-3038
 800-994-0371

07/29/2025
 Itemized Statement

Kelly Marie Coody
 7851 BROOK MEADOW LN
 FORT WORTH, TX 76133-7958

Guarantor ID: 110534017
 MRN: 7753451
 DOB: 05/08/1984

Visit Coverages: BCBS - Blue Essentials/HMO Blue
 Texas

Any self-pay discounts and/or financial assistance will be denied or revoked if the patient receives a third party financial settlement associated with the care rendered by BSWH. The patient is expected to use the settlement amount to satisfy any patient account balances.

This is not a bill. This is an itemization of your services for:

Patient: Coody, Kelly Marie Admission Date: 06/24/25
 Hospital Account: 33000636967 Discharge Date: 06/24/25

Facility Name: Baylor Scott & White Heart and Vascular Hospital - Fort Worth ID: 752834135

Hospital Charges

Svc Dt	Revenue Code	BSWH HB CPT(R)/HCPCS Code	Description	Qty	Amount
06/24/2025	ANESTHESIA - GENERAL CLASSIFICATION [0370]		HC ANESTHESIA WITH GAS/TIVA, ADDITIONAL 15 MIN	5	1,457.20
06/24/2025	ANESTHESIA - GENERAL CLASSIFICATION [0370]		HC ANESTHESIA WITH GAS/TIVA, BASE	1	1,387.11
06/24/2025	CARDIOLOGY - GENERAL CLASSIFICATION [0480]	93623	HC PROGRAMMED STIM AFTER DRUGINFU	1	10,781.45
06/24/2025	CARDIOLOGY - GENERAL CLASSIFICATION [0480]	93653	HC COMPREH ELECTROPH EVAL SOURCE OF ATRIAL R	1	87,788.83
06/24/2025	CARDIOLOGY - GENERAL CLASSIFICATION [0480]	G0269	HC OCCLUSIVE DEVICE IN	1	1,428.57
06/24/2025	EKG/ECG (ELECTROCARDIOGRAM) - GENERAL CLASSIFICATION [0730]	93005	HC ECG ROUTINE TRACING ONLY	1	503.55
06/24/2025	LABORATORY - CHEMISTRY [0301]	80048	HC BASIC METABOLIC PANEL TOTAL CALCIUM	1	231.24
06/24/2025	LABORATORY - CHEMISTRY [0301]	83735	HC MAGNESIUM	1	142.51
06/24/2025	LABORATORY - CHEMISTRY [0301]	84703	HC GONADOTROPIN, CHORIONIC (HCG), QUALITATIVE	1	212.06
06/24/2025	LABORATORY - GENERAL CLASSIFICATION [0300]	36415	HC VENIPUNCTURE, COLLECTION OF BLOOD	1	45.16
06/24/2025	LABORATORY - HEMATOLOGY [0305]	85025	HC COMPLETE CBC W/AUTO WBC DIFF	1	170.03
06/24/2025	LABORATORY - HEMATOLOGY [0305]	85610	HC PROTHROMBIN TIME W/INR	1	130.47
06/24/2025	MEDICAL/SURGICAL SUPPLIES AND DEVICES - STERILE SUPPLY [0272]	C1730	CATH CRNAND APLR SUP 5FRX120CM	2	1,005.04
06/24/2025	MEDICAL/SURGICAL SUPPLIES AND DEVICES - STERILE SUPPLY [0272]	C1730	CATH WBSTR CS BIDIR FJ CRV	1	2,436.50
06/24/2025	MEDICAL/SURGICAL SUPPLIES AND DEVICES - STERILE SUPPLY [0272]	C1732	CATH THERMO	1	10,298.97



Svc Dt	Revenue Code	BSWH HB CPT(R)/HCPCS Code	Description	Qty	Amount
06/24/2025	MEDICAL/SURGICAL SUPPLIES AND DEVICES - OTHER IMPLANT [0278]	C1760	PERCLOSE PROSTYLE SUTURE-MEDIATED CLOSURE AND REPAIR SYSTEM	3	3,289.29
06/24/2025	MEDICAL/SURGICAL SUPPLIES AND DEVICES - STERILE SUPPLY [0272]	C1769	INTRO SWRT BRAID TRNSPT 8.5FR	1	877.14
06/24/2025	MEDICAL/SURGICAL SUPPLIES AND DEVICES - STERILE SUPPLY [0272]	C1893	INTRO SHTH 8.5FR FASTSRO	1	774.81
06/24/2025	MEDICAL/SURGICAL SUPPLIES AND DEVICES - STERILE SUPPLY [0272]	C1894	INTRODUCER VASCULAR 8 FR 11 CM LENGTH WITHOUT CURVE HEMOSTATIC VALVE DILATOR WITH NEEDLE SIDE PORT STAINLESS STEEL GUIDEWIRE AVANTI+	1	42.29
06/24/2025	MEDICAL/SURGICAL SUPPLIES AND DEVICES - STERILE SUPPLY [0272]	C1894	SHEATH CORDIS 6F 11CM	2	84.58
06/24/2025	PHARMACY - EXTENSION OF 025X - DRUGS REQUIRING DETAILED CODING (A) [0636]	J0131	ACETAMINOPHEN IV 1,000 MG/100 ML (10 MG/ML) SOLN	100	170.40
06/24/2025	PHARMACY - EXTENSION OF 025X - DRUGS REQUIRING DETAILED CODING (A) [0636]	J1100	DEXAMETHASONE SOD PHOS 4 MG/ML SOLN	4	2.34
06/24/2025	PHARMACY - EXTENSION OF 025X - DRUGS REQUIRING DETAILED CODING (A) [0636]	J2405	ONDANSETRON 4 MG/2 ML SOLN	4	2.76
06/24/2025	PHARMACY - EXTENSION OF 025X - DRUGS REQUIRING DETAILED CODING (A) [0636]	J2704	PROPOFOL 10 MG/ML	100	180.00
06/24/2025	PHARMACY - EXTENSION OF 025X - DRUGS REQUIRING DETAILED CODING (A) [0636]	J2704	PROPOFOL 10 MG/ML EMUL	40	72.00
06/24/2025	PHARMACY - GENERAL CLASSIFICATION [0250]		0.9% SODIUM CHLORIDE (NACL) 0.9 % SOLN 1,000 ML BOTTLE	1	50.00
06/24/2025	PHARMACY - GENERAL CLASSIFICATION [0250]		0.9% SODIUM CHLORIDE (NACL) 0.9 % SOLN 1,000 ML BOTTLE	1	50.00
06/24/2025	PHARMACY - GENERAL CLASSIFICATION [0250]		ISOPROTERENOL HCL 0.2 MG/ML SOLN 1 ML VIAL	1	566.50
06/24/2025	PHARMACY - GENERAL CLASSIFICATION [0250]		SCOPOLAMINE 1 MG OVER 3 DAYS PT3D	1	36.76
06/24/2025	PHARMACY - IV SOLUTIONS [0258]		0.9% SODIUM CHLORIDE (NACL) SOLP	1	50.00
06/24/2025	PHARMACY - IV SOLUTIONS [0258]		0.9% SODIUM CHLORIDE (NACL) SOLP 50 ML BAG	1	50.00
06/24/2025	PHARMACY - OTHER PHARMACY [0259]	J1644	HEPARIN (PORCINE) 1,000 UNIT/ML SOLN 10 ML VIAL	1	30.24
06/24/2025	PHARMACY - OTHER PHARMACY [0259]	J1644	HEPARIN (PORCINE) 1,000 UNIT/ML SOLN 10 ML VIAL	2	32.49
06/24/2025	PHARMACY - OTHER PHARMACY [0259]	J2003	LIDOCAINE 10 MG/ML (1 %) SOLN	100	10.20
06/24/2025	RECOVERY ROOM - GENERAL CLASSIFICATION [0710]		HC RECOVERY ROOM 0 - 60 MINUTES	1	2,003.80
			Total Charges		126,394.29

Hospital Payments and Adjustments

Date	Description	Amount
07/07/25	BCBS Payments Coinsurance: 2,664.51	-121,797.66
06/16/25	Pre-Payment (Visa x9926)	-520.00



Current Account Balance: 4,076.63

Diagnosis:

I47.10 - Supraventricular tachycardia, unspecified

For questions, please call Customer Service at 800-994-0371, Monday through Friday from 8am–5pm, or email billingquestions@bswhealth.org.