

Day Sheet for _____ / _____ / _____

Month Day Year

Individual Psychotherapy

- 90791 – Diagnostic evaluation
- 90832 – 16-37 minutes
- 90834 – 38-52 minutes
- 90837 – 53+ minutes (preauth)

Family Psychotherapy

- 90846 – Family w/o client
- 90847 – Family with client
- 90853 – Group therapy

Miscellaneous

- 90785 – Interactive complexity (add-on)
- 90839 – Crisis, 30-74 min (preauth)
- 90840 – Crisis, additional 30 min (preauth)

Broken Appointments

- LC – Late cancel
- LCNC – Late cancel, no charge
- MA – No show
- MANC – No show, no charge

Payments

- V – Visa
- MC – MasterCard
- DISC – Discover
- AMEX – American Express

	Client Name	CPT	Telehealth		DX 1	DX 2	DX 3	DX 4	Fee	Paid	Payment Method
			Home	Other							
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
The next day I am scheduled to be in the office is:											

Total Paid: \$

Signature _____