

## **ECG Interpretation – CPT Code 93010**

The following are the requirements when billing for ECG interpretations:

1. The ECG must have a written order (this includes standing orders).
2. ECG findings, in order to qualify as a separately billable service, require more than just stating “normal” or “acute MI.” The interpretation must include comments on any 3 of the following components: • Rate

- Rhythm
- Axis
- Intervals
- Comparison to a prior ECG
- Summary of clinical condition

Some examples of appropriate interpretations:

- ECG reveals normal sinus rhythm, normal axis, no acute ST/T changes.
- ECG reveals normal sinus rhythm, normal intervals, no acute ST/T changes.
- ECG reveals atrial fibrillation with rate of 120, normal intervals, and no significant change compared to previous ECG on 10/10.
- ECG shows sinus bradycardia at 45 beats per minute, prolonged QRS with a LBBB pattern, and no significant changes compared to previous ECG in Oct. '99.
- ECG shows paced rhythm at 88 beats per minute with normal axis.
- ECG shows rate 70, normal rhythm, normal ECG.
- ECG reveals normal sinus rhythm, normal ECG. (Normal sinus rhythm is defined as the normal heartbeat initiated by the pacemaker in the sinus node, with a heart rate of 60-100 beats/minute, therefore normal sinus rhythm will count as 2 components: rate & rhythm).

The statement “ECG is normal” alone is not acceptable as a separately payable interpretation, and it would be considered a review and part of the E/M.