**accident** type of accident recorded

**address** the location of patient's residence

**amex** credit card company listed for a patient using an AmEx card

**amountPaid** total amount paid by patient or insured

**amountPaid** total amount paid thus far

**amountDue** total outstanding amount due

**appointment** reason for patient visit

**appointmentDate** the date of the appointment, format MM/DD/YYYY

**appointmentID** unique identificator for appointments. Table contains patientID, staffID, **appointmentDate** the given date the patient is expected to be at the clinic

**appointmentTime** the given time the patient is expected to be at the clinic

**attendingNurse** the attending nurse are placed in operation rooms, delivery rooms, or recovery rooms for patients who are recovering after surgery/operation; they assist in operations and/or deliveries, they monitor postoperative vital signs, assess levels of consciousness, and carefully observe patients for any adverse effects of a surgery

**attendingPractioner** the practitioner assigned to the patient who is responsible for the care of a patient in the recovery room; the practitioner also prescribes medication and/or pain relievers and provides follow-up care

**billID#** number of the monthly bill

**bloodPressure** the current blood pressure of the patient, which is the measurement of the force that moves blood through the circulatory system; a normal reading is 120/80 mmHg; the attending nurse will check the blood pressure every 2-4 hours

**bloodType** type of blood patient has

**BMI** the body mass index is the mass divided by the square of the body height; this is a measure of body fat based on height and weight of adult patients

**case** reason of service provided

**charges** amount charged by physician

**coInsurance** a percentage to pay of total insurance

**condition** patient's health state

**copayment** amount to pay after you’ve met deductible

**credit** amount provided on credit

**csvCode** security code on the card

**dateOfTreatment** the date the patient underwent treatment, format MM/DD/YYYY

**dateIn** the date the patient was admitted

**dateOfReport** date of the medical report, format 24hr hh:mm

**dateOut** the date the patient is released

**deductible** amount to pay before insurance plan starts

**description** type of receipt to patient

**description/note** physician's narrative regarding patient's health

**diagnosis** the identification an illness or other problem by examination of the symptoms from a medical doctor

**directions** complete directions of use of the drug

**discover** credit card company listed for a patient using a Discover card

**drugName** name of the prescribed drug to the patient

**dueNow** amount expected to be paid by end of the month

**dueDate** date current monthly payment is due

**email** clinic's email

**emergencyDay** the day of week when the staff worker is on emergency number

**employeeFirstName** the first legal name of the employee

**employeeID#** unique identification number each employee will have, medical and admin

**employeeLastName** the last family name of the employee

**employeeTitle** the role the employee is in the clinic (nurse, doctor, receptionist)

**estimatedInsuranceResponsibility** insurance provider's share of outstanding amount

**exam** type of examination conducted on patient

**expirationDate** credit card's expiration date

**flexibleSpendingAmount** employer pays you for this account

**followUpAppointments** follow up appointments after being discharged from the recovery room based on diagnosis and condition

**formulary** list of medicines your insurance covers

**genericMedicines** medicines with same ingredients but far less expensive **highDedictibleHealthPlan** a plan with higher deductibles

**healthSavingsAccount** Personal savings account used for healthcare

**height** the height of the patient expressed in the imperial unit

**HMO** health maintenance organization

**ICD-9Code** the International Classification of Diseases, 9th Revision

**illness** a disease or period of sickness diagnosed by physician

**in-Network** providers who are part of your insurance network

**information** information related to patient's condition

**injury** type of injury treated by physician

**inPatientcare** care that requires a hospital stay and continuous supervision by a healthcare provider

**insuredFirstname** first/legal name of the insured

**insuredLastname** last name of the insured

**IVSites** peripheral IVs are cannula/catheter inserted into a small peripheral vein to allow the flow of medications, fluids and/or blood products while recovering; common places where an IV site is located are on the hand, wrist, forearm, foot, or leg

mail clinic's mail address

**mastercard** credit card company listed for a patient using a Mastercard

**medicaid** Medicaid provides free or low-cost health insurance to certain groups Network The doctors, hospitals, and suppliers your health insurer has contracted with to deliver healthcare service

**medicalRecordNumber** a unique identification number that locates a specific operation or birth

**midwife** health professional who cares for mothers and newborns around childbirth

**notes** observations and/or remarks noted during an operation or a birth

**operationPerformed** the type of operation performed on the patient by the doctor

**operationType** type of operation that patient will undergo or underwent

**organDonor** whether or not the patient is an organ donor

**otherCard** credit card company not listed within the options

**outOfNetwork** care providers who are not a part of your insurance network outPatientCare Care that does not require an overnight stay in the hospital

**painLevel** the current pain level a patient is experiencing; based on a scale from 1 to 10 with 10 being at its worst

**patientResponsibility** patient's share of outstanding amount

**patientAge** age of patient expressed in years

**patientAllergies** list of allergies patients has, for example medications, plants, or foods

**patientCheckIn** time patient checks in

**patientCheckOut** time patient checks out

**patientDOB** the date of birth of the patient expressed in MM/DD/YYYY

**patientFirstName** the legal first name of the patient

**patientID** the given identification number of the patient created by the clinic

**patientLastName** the last legal name of the patient

**patientName** the given name of the patient

**patientPhoneNumber** the telephone number of the patient

**patientPostalCode** postal code in which patient resides

**patientsCreditCardNumber** patient's number of credit card

**patientsPhoneNumber** patient's mobile contact information

**patientStreet** number and street name of patient residence

**patientType** the medical classification of the patient (emergency, urgent, elective, routine care, expecting mother, etc)

**patientSocialSecurityNumber** the unique number used to track the income and determine state funded benefits

**patientTaxIDNumber** in lieu of social security number for non citizens

**paymentAddress** the address to which to send payments

**payment** patient's payment plan

**pharmacistsName** name of pharmacists who delivers medicines to patient PPO Stands for “preferred provider organization” and is a type of health insurance plan

**phlebotomists** the person who draws the blood for the test

**physicianFirstname** first/legal name of the examining physician

**physicianLastName** last name of the examining physician

**physicianOrderingTest** name of the physician who ordered the laboratory test

**physiciansFaxNumber** physician's fax number

**physicianSignature** physician's signature on the statement for the insurance provider

**physiciansPhoneNumber** physician's mobile number of contact

**physicianStamp** physician's stamp on the statement for the insurance provider

**policyNumber** type of policy of the insurance provider

**primaryPhysician** patient's physician

**pulseRate** the current pulse rate of the patient; the attending nurse will monitor the pulse rate every 2-4 hours

**purchaseDate** date the service was provided, format MM/DD/YYYY

**reasonForStay** description of the purpose of the patient's stay in the recovery room

recommendation physician's recommendation to improve patient's condition

**recoveryPlan** a plan written by the attending practitioners of instructions a patient should follow after being discharged from the recovery room

**respirationRate** the respiration rate of the patient, which is measured by the number of breaths taken per minute; the attending nurse will check the respiration rate every 4 hours.

**roomID#** unique identification number given to exam room, OR, delivery, and recovery

**roomNumber** the number of the room the operation/delivery took place

**RxNumber** the registration number printed on the receipt

**sexOfNewBorn** the sex assigned to newborn once born

**signature** patient's signature on monthly bill

**specialty** physician's field of expertise

**staffWorkingTimeFriday** the time when the staff works on Friday

**staffWorkingTimeMonday** the time when the staff works on Monday

**staffWorkingTimeSaturday** the time when the staff works on Saturday

**staffWorkingTimeThursday** the time when the staff works on Thursday

**staffWorkingTimeTuesday** the time when the staff works on Tuesday

**staffWorkingTimeWednesday** the time when the staff works on Wednesday

**statementDate** date the clinic's monthly statement was issued

**sumInsured** total coverage of the insurance

**surgeon** the name of the surgeon in the format

**surgeonID** unique identifiers given to surgeons

**symptoms** symptoms noted by the examining physician

**taxIdentificationNumber(SSN)** physician's tax code

**temperature** the current temperature of the patient measured in Fahrenheit; the attending nurse will check temperature every 2-4 hours

**testOrdered** laboratory test ordered by doctor

**testResult** result of the test measured in appropriate units based on testOrdered

**timeIn** the time the patient was admitted

**timeOfReport** time of medical report

**timeOut** the time the patient is released

**totalPrice** total price of the medication

**tripCanceled** if the patient was in no state to travel, was the trip canceled?

**typeOfDelivery** the type of method used to deliver a newborn; this includes vaginal birth, natural birth, scheduled Cesarean, unplanned Cesarean, vaginal birth after C-Section (VBAC), or scheduled induction

**unableToTravel** the patient was unable to travel

**underlyingMedicalConditions** a medical condition or disease that interferes with daily life or activities and requires continuous medical attention or medical care that lasts for longer than one year

**visa** credit card company listed for a patient using a Visa card

**walkIn** for patients that did not have an appointment and walked into the clinic

**weight** the weight of the patient, expressed in the imperial unit

**weightOfNewborn** the weight of the newborn expressed in the imperial unit