.∞ Req - May 23, 2023

⊖rder Number: 833475 Bill Type: Third-Party Bill

PMS ID: Sex. DOB:

1358383 Male 09/07/1952 (309) 696-9686 1358383

LAB INFORMATION											
LAB NAME Sagis DX (Effkay)					PHONE	ACCOUNT	Τ#				
ORDER # 833475	STREET ADDRESS								BILL TYPE Third-Party Bill		
PATIENT INFORMATIO	GUARANTOR INFORMATION										
LAST NAME BALACO		FIRST NAME JOHN		J.	LAST NAME BALACO			FIRST NAME JOHN		м.i. J	
SSN XXX-XX-9977	09/07/1952		^{JRN} 1358383	*	RELATIONSHIP TO PATIENT Self						
STREET ADDRESS 5350 BAYSHORE AVE	STREET ADDRESS 5350 BAYSHORE AVE										
STREET ADDRESS CONTD.					STREET ADDRESS CONTD.						
DAPE CORAL			STATE ZIP CODE FL 33904		CAPE CORAL			STATE FL	ZIP CODE 33904		
939 686	3096969686		MPLOYER NAME		HOME PHONE 3096969686				WORK PHONE		
:: เช็กโด/I N s	SURANCE IN	(FORMATION				853 (1) (1)					
√ GALACO				suв. сов 09/07/1952	company name Humana Medicare PF	ме a Medicare PPO/PFFS		GRP/CONTRACT	r# MEMBER ID # H43995		
[™] SOX 14601	STREET ADDRESS CONTD.										
-sngton		STATE ZIP CODE 405124601			EMPLOYER NAME			4.			
	All Courts In Co			PATH RE	QUISITION						
ಾcation	Procedure		Clinical Information				ICD	Ac	cession#		
										SD23-151952	
A. left mid-upper back	Biopsy by H and E	Shave Method	1 DDX: Ne	ogy: papule, i coplasm of Ui cic Keratosis	rregularly , and pigmented nspecified Behavior vs. Irritated vs. MIS		D49.2				
DSXOYXOLLA			CCDOMIN	SIO NCI ALOSIS						Balaco, John	
								Sagis Dx			
B. left posterior shoulder	Biopsy by H and E	Shave Method	Morpholo DDX: Ne Seborrhe	ogy: erythem oplasm of Ur eic Keratosis			D49.2				

Electronically Signed By: Laura A Walgate, PA-C, 05/23/2023 03:56 PM EDT



left mid-upper back BALACO, JOHN PA-C: Walgate, Laura DOB:09/07/1952 - DOS:05/23/2023



left posterior shoulder BALACO, JOHN PA-C: Walgate, Laura DOB:09/07/1952 - DOS:05/23/2023 ACC#:



BALACO, JOHN J