

Patient TERRY LYNN JENNER - D00048240162

Other Names

Med Rec Number MR00213719 Reg Status DEP SDC  
EMR Number T00219586 Soc Sec Num 451-76-3903  
Birthdate 12/10/1946  
Age 78 Birth Sex F  
VIP  
VIP Comment

## Patient Address

400 TAYLOR ST  
APT 6  
RYAN, OK 73565  
United States

## Patient Employer

RETIRED

## E-Mail

## Conf Comm Address

Phone Number Phone Type  
817-991-5434 Cell Phone

Marital Status Widowed

Religion Baptist

Affiliation

Language English

Interpreter Needed

Education Level

Citizenship

Place of Birth

Country of Origin

In School

Registered Voter

Veteran Status

Organ Donor

Marketing Comm

Privacy Notice Date 03/01/25

## Physical Handicaps

Ethnicity / Additional Ethnicities

Non Hispanic or Latino

Race / Additional Races

White

## Personal Contacts

Next of Kin Relationship Child

RETOS, MIKE  
PO BOX 312

TERRAL, OK 73569  
United States

Phone Number Phone Type  
817-997-5434 Cell Phone

Person to Notify Relationship Child InLaw

WHITFORD, CHRISTIE  
PO BOX 312

TERRAL, OK 73569  
United States

Phone Number Phone Type  
580-465-8764 Cell Phone

## Guarantor

GN00174969 Relationship Self

## Guarantor Employer

RETIRED

JENNER, TERRY LYNN

400 TAYLOR ST

APT 6

RYAN, OK 73565

United States

Email

Phone Number

817-991-5434

Phone Type

Cell Phone

## Financial Class

Financial Class Medicare Advantage

Standard Insurance Order

Medicare Part B Order

Medicare Part D Order

AETNA MEDICARE 60054

SELF PAY

## Insurances

Name AETNA MEDICARE 60054

Policy Number 101933416600

Address PO BOX 981106

City, State, Zip EL PASO, TX 79998-1106

Country US

Phone 800-624-0756

Fax

Email

Coverage Plan 0000030K

Group Name

Group Number 0000030K

Employment Status

Employer Name RETIRED

Location

Copay Deductible Coinsurance

Eligibility Status Received Status Date 08/11/25

Release Info Yes

Exp Info Date

Assign Benefits Yes

Subscriber JENNER, TERRY LYNN

Pat Rel to Subs Self

Address 400 TAYLOR ST

APT 6

City, State, Zip RYAN, OK 73565

Country United States

Email

Birthdate 12/10/1946

Birth Sex F

Soc Sec Num 451-76-3903

Marital Status Widowed

Race White

Citizenship United States

Language English

Phone Number

817-991-5434

Phone Type

Cell Phone

Authorization Number

Referral Number

Eff Date Exp Date Referral Type

Status

Referred By Referred To

Occurrence Codes

Date

Time

Accident State

DSI 11 - Onset of Symptom-OP Ther 08/11/25

## Physicians

## Other Physicians/Association

Primary Care Gillispie, Allon F

Roberson, Matthew Wayne

Admitting

Attending Miller, Byron Ronald

Family  
Emergency

Reg Date/Time 08/11/25 10:17

Discharge Date/Time 08/11/25 13:50

Requested Accom

Discharge Disposition Home/Assisted Living - 01

Room Rate Accom

Room/Bed

Service

Location Ambulatory Care Unit

Admit Priority Elective

Admit Source Physician Referral

Newborn Admit Src

Entry Code

Facility Directory

Clergy Visit

Adm Legal Status

Confidential

Conf Comment

Admit Comment

Dis Comment

Reason for Visit Age-related nuclear cataract, left eye 1

Last Hospitalization From Date: Thru Date:

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ICD10 Codes

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## Reason for Visit Diagnoses

Eff Date	Code	Name	Alt	Source
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08/11/25	H25.12	Age-related nuclear cataract, left eye	No	SUR
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## Diagnosis Codes

Eff Date	Num	Code	Name	POA
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08/06/25 -	1	H25.12	Age-related nuclear cataract,	
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## Procedure Codes

Num	Code	Name	Date	Surgeon/Assisting
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MR:   
JENNER, TERRY LYNN  
FN# D00048240162 78  
MR# MR00213719  
DOB: 12/10/1946 REG DT: 08/11/25  
ATT DR: Miller, Byron Ronald  
FN: 

Duncan Anesthesia Associates, Inc.  
ANESTHESIA CHARGE LIST

11/1/2023

8/11/25  
Bohannon  
Miller

Provider:  
Surgeon:

Anesthesia: General SAB (MAC) Epidural Bier Other TIVA

Procedure: Carotid-OS & IVC

CPT: 00142  
CPT:  
CPT:  
CPT:

ICD10: H25.12  
ICD10:  
ICD10:  
ICD10:

Modifier:  
Modifier:  
Modifier:  
Modifier:

Measure Codes	

SURGERY	BLOCK PROCEDURE
START: 1247	START:
STOP: 1321	STOP:
TOTAL: 34	TOTAL:

BILLING OFFICE USE  
POS 21 POS 22

Diagnosis:

MUST BE DOCUMENTED

MEASURE #424

☒ TEMP 30 MINUTES BEFORE OR 15 MINS AFTER ANESTHESIA END TIME  
☐ TEMP GREATER OR EQUAL 95.9

MEASURE #404

SMOKER ☐ YES ☒ NO

IF NO SKIP TO NEXT MEASURE

Elective Procedure ☒ Yes ☐ No  
Instructed to abstain ☐ Yes ☐ No  
Abstained ☐ Yes ☐ No

MEASURE #430

Inhalation Anes Recvd ☐ Yes ☒ No

IF NO SKIP TO NEXT MEASURE

3 Pt Risk Factors ☐ Yes ☒ No  
PONV Therapy ☐ Yes ☐ No

SPECIAL PROCEDURES

- ☐ Femoral Single 64447 (8 units)
- ☐ Brachial Plexus Single 64415 (8 units)
- ☐ Lumbar Epidural Continuous 62319 (8 units)
- ☐ Thoracic Epidural Continuous 62318 (8 units)
- ☐ Lumbar Puncture 62270 (8 units)
- ☐ Sciatic Single 64445 (7 units)
- ☐ Ultrasound 76942-26 (2 units)
- ☐ Nerve Block for Post-op Pain 64450 Hip/64415 Shoulder (5 Units)
- ☐ Epidural Steroid 62322 (8 units)
- ☐ Daily Epidural Mgmt 01996 (3 units)
- ☐ Art Line 36620 (3 units)
- ☐ PICC Placement 36569 (6 units) MEASURE #76
- ☐ Lumbar Blood Patch 62273 (8 units)
- ☐ Adductor Canal Block 64447 (8 units)
- ☐ Intubation Emergency 31500 (5 units)
- ☐ iPack Block 64999 (7 units)

Base Units: 4

Time Units: 2

- ☒ PS 3 (1 unit)
- ☐ PS 4 (2 units)
- ☐ PS 5 (3 units)
- ☒ Age: 99100 [<1 or >70] (1 unit)
- ☐ Emergency: 99140 (2 units)

SPECIAL PROCEDURES:

TOTAL UNITS: 8

ABG7 PAIN ASSESSMENT

☒ LUCID  
☐ NON COMMUNICATE  
☒ PACU ☐ ICU  
PAIN LEVEL ☒ OUT OF 10  
SCG8 DEPRESSION ASSESS.  
☐ YES ☒ NO  
DX: ☐ YES ☒ NO  
☒ ASA SCORE 2 REQUIRED