

1 Mayo Surgical, LLC 600 Chastain Road, Suite 220 Kennesaw, GA 30144 2 866-411-2525 PHONE 800-865-8691 FAX										Wesley Woods Medical Center										3a PAT. CNTL# b.MED REC # 5 FEED TAX No.				6 STATEMENT COVERS PERIOD FROM THROUGH				4 TYPE OF BILL 7					
8 PATIENT NAME a Art Best										8 PATIENT ADDRESS b Lawrenceville										a 24 Silver Street c GA d 30362 e													
10 BIRTHDATE		11 SEX		12 ADMISSION DATE				13 HR		14 TYPE		15 SRC		16 DHR		17 SAT		18 CONDITION CODES										29 A CDT 30 STATE					
08-25-2015																																	
12-31-1969																																	
31 OCCURRENCE CODE		32 OCCURRENCE DATE		33 OCCURRENCE CODE		34 OCCURRENCE DATE		35 OCCURRENCE CODE		36 OCCURRENCE FROM		37 OCCURRENCE THROUGH		38		39																	
Art Best 24 Silver Street Georgia Lawrenceville, 30362 Mob. No.(404) 851-7594 Office. No.(770) 965-7326										a		b		c		d																	
										CODE		AMOUNT		CODE		AMOUNT		CODE		AMOUNT													
										a																							
										b																							
										c																							
										d																							
42 REV. CD.		43 DESCRIPTION										44 HCPCS/RA TE/HIPPS CODE		45 SERV. DATE		46 SERV. UNITS		47 TOTAL CHARGES		48 NON-COVERED CHARGES		49											
73562		Xray Ankle										73562		31-12-69				0.00															
99214		Office Visit, Established, Detailed										99214		31-12-69				0.00															
73600		MRI Lower Extremity, Joint										73600		31-12-69				6,000.00															
122345		Description										122345		31-12-69				0.00															
		Page 1 of 1										CREATION DATE		22-04-15		TOTAL		6,000.00		00		00											
50 PAYER NAME										51 HEALTH PLAN ID		52 REL INFO		53 ASG. BEN		54 PRIOR PAYMENT		55 EST. AMOUNT DUE		56 NPL													
58 INSURED'S NAME										59 P. REL		60 INSURED'S UNIQUE ID		61 GROUP NAME		62 INSURANCE GROUP NO.																	
63 TREATMENT AUTHORIZATION CODES										64 DOCUMENT CONTROL NUMBER										65 EMPLOYER NAME													
66 DX																				68													
69 ADMIT DX				70 PATIENT REASON DX								71 PPS CODE				72 ECI				73													
74		PRINCIPAL PROCEDURE		a		OTHER PROCEDURE		b		OTHER PROCEDURE		75		76 ATTENDING		NPL		QUAL															
		CODE		DATE		CODE		DATE		CODE		DATE		LAST Medical Center				FIRST Wesley Woods															
74		OTHER PROCEDURE		a		OTHER PROCEDURE		b		OTHER PROCEDURE		77 OPERATING		NPL		QUAL																	
		CODE		DATE		CODE		DATE		CODE		DATE		LAST Medical Center				FIRST Wesley Woods															
80 REMARKS				81 CC		a						78 OTHER		NPL		QUAL																	
						b						LAST Medical Center				FIRST Wesley Woods																	
						c																											
						d						79 OTHER		NPL		QUAL																	
												LAST Medical Center				FIRST Wesley Woods																	