

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 Charlie Snow										8 PATIENT ADDRESS b Camden										a 964 North Avenue c NJ d 9654 e											
10 BIRTHDATE		11 SEX		12 ADMISSION DATE				13 HR		14 TYPE		15 SRC		16 DHR		17 SAT		18 CONDITION CODES										29 A CDT STATE		30	
12-16-1979																															
12-31-1969																															
31 OCCURRENCE CODE		32 OCCURRENCE CODE		33 OCCURRENCE CODE		34 OCCURRENCE CODE		35 OCCURRENCE CODE		36 OCCURRENCE CODE		37																			
DATE		DATE		DATE		DATE		FROM		THROUGH		THROUGH																			
Charlie Snow 964 North Avenue New Jersey Camden, 9654 Mob. No.(965) 874-5685 Office. No.(321) 456-8546										a		b		c		d															
										CODE		AMOUNT		CODE		AMOUNT		CODE		AMOUNT		CODE		AMOUNT							
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									
73600		MRI Lower Extremity, Joint										73600		31-12-69				0.00													
122345		Description										122345		31-12-69				0.00													
73600		MRI Lower Extremity, Joint										73600		31-12-69				6,000.00													
Page ____1____ of ____1____										CREATION DATE		24-04-15		TOTAL		6,000.00		00		0		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		NPL		QUAL													
		CODE		DATE		CODE		DATE		CODE		DATE		ATTENDING																	
														LAST Medical Center										FIRST Wesley Woods							
74		OTHER PROCEDURE		a		OTHER PROCEDURE		b		OTHER PROCEDURE				77		NPL		QUAL													
		CODE		DATE		CODE		DATE		CODE		DATE		OPERATING																	
														LAST Medical Center										FIRST Wesley Woods							
80 REMARKS										81 CC						78		NPL		QUAL											
										a						OTHER															
										b						LAST Medical Center										FIRST Wesley Woods					
										c																Woods					
										d						79		NPL		QUAL						FIRST Wesley Woods					
																LAST Medical Center										Woods					