| 1 Mayo Surgical, LLC 600 Chastain Road, Suite 220 | John Gaston 4853 West 3 | Apt. 345, | 3a PAT. CNTL# | | 4 TYPE OF BILL | | | |
|---|--|-----------------------|------------------|--------------------------------|--|------|-----------------------|-----------------------|
| Kennesaw, GA 30144 2 866-411-2525 PHONE 800-865-8691 FAX | North Carolina Charlotte, 29584 7046589521 Contact | | | b.MED REC 5 FEED TAX No. | EED TAX 6 STATEMENT C | | VERS | 7 |
| 8 PATIENT NAME a George Baker b George Baker 10 BIRTHDATE 11 ADMISSION | b | DDRESS | | a c CON | IDITION COI | | 0 e_ | 29 A 30 |
| SEX 12-31-1996 12 Date 13 14 | DHR | | 19 20 | | | | 26 27 | CDT 28 STA TE |
| 12-31-1969 | LISIKO | | | | | | | 12 |
| 31 OCCURRENCE 32 OCCURRENCE 33 CODE DATE CODE DATE CODE | OCCURRENCE DE DATE | | | 35 OCCUR DDE FROM | | | | 37 ROUG H |
| George Baker | VALUE | CODES | | VALUE (| CODES | | VALUE C | ODES |
| | CODE AN | 4OUNT | COI | DE AMO | DUNT | CODE | E AMC | NT |
| Mob. No. a Office. No. b c | | | | | | | | |
| 42 43 DESCRIPTION 44 HCPCS/R 45 SERV. 47 TOTAL CHARGES 48 NON-COVERED 4 REV. CD. CODE CODE | | | | | | | | |
| 73721 New Office Visit, Expa 99213 Office Visit, Established, E 12234 Anesthesiologist Sen | xpanded | 7372 9921 12234 | .3 31-12-0 | 59 | 0.00 0.00 2,500.00 | | | |
| 5 73030 MRI Upper Extremity, | | 7303 | | | 0.00 | | | |
| Page1 of | _1 | CREATI | ION 27-03- | L5 TOTAL | 2,500.00 | 00 | 0 | 00 |
| | HEALTH 52 F | REL 53 | ASG. 5 | 4 PRIOR AYMENT | 55 EST. <i>A</i> | | 56 NPL | |
| | | | | | | | 57 OTHER PRV ID | |
| 58 INSUREDS NAME | 59 P. REL | 60 INSU | IREDS UNIQ | UE ID 61 GR | OUP NAME | 62 I | NSURANCE | GROUP NO. |
| | | | | | | | | |
| 63 TREATMENT AUTHORIZATION CODES 64 DOCUMENT CONTROL NUMBER 65 EMPLOYER NAME | | | | | | | | |
| 66 DX | | | | | | | | 68 |
| 69 ADMIT 70 PATIEN | | <u> </u> | 71 P | | 72 | | | 73 |
| DX REASON D | | OTLIEB | COD | | ECI | ND | OLIAL | |
| 7 PRINCIPAL PROCEDURE a OTHER PROCEDURE b OTHER PROCEDURE 75 76 NPL QUAL ATTENDING ATTENDING LAST Gaston FIRST John | | | | | | | | |
| 7 OTHER PROCEDURE a OTHER PR | OTHER F | OTHER PROCEDURE | | | 77 NPL QUAL OPERATING LAST Gaston FIRST John | | | |
| CODE DATE CODE DATE CODE DATE | | | | | | | | |
| 80 REMARKS 81 CC | · | | | • | 78 OTHE | :R | NPL QUA | |
| b c d | | | | | 79 OTHE | | NPL QUAI | Γ John - Γ John |