

224451

THE STATE OF SOUTH CAROLINA
In the Court of Appeals

APPEAL FROM SPARTANBURG COUNTY
Court of Common Pleas

J. Mark Hayes, II, Circuit Court Judge

Case No. 2013-CP-42-2404
Appellate Case No. 2015-001828

RECEIVED

APR 11 2016

SC Court of Appeals

Lisa McKaughan, Individually
and as Personal Representative
of the Estate of William Farr,

.....

Appellant

v.

Upstate Lung and Critical Care
Specialists, P.C. and Sau-Yin
Wan, M.D.

.....

Respondents.

RECORD ON APPEAL (VOLUME 3)

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1 conscious disregard for the Plaintiff on behalf of the
2 Defendants.

3 THE COURT: I thought they said that they weren't gonna
4 go for that.

5 MR. WILLIFORD: Yes -- and that's correct. Mr.
6 McKinnon stipulated to that being at the motion in limine
7 pre, pretrial stages. Just wanted to incorporate that again
8 and make, make that argument for the record again.

9 THE COURT: All right. Okay.

10 MR. WILLIFORD: Thank you, Your Honor.

11 THE COURT: Y'all haven't changed your position that
12 you're not going for gross negligence---

13 MR. MCKINNON: No.

14 THE COURT: ---and those things?

15 MR. MCKINNON: Certainly not, Your Honor.

16 THE COURT: Okay. You -- start with the standard of
17 care, which he believes that -- his position is that no one
18 criticized the clinical care of the doctor.

19 MR. MCKINNON: Well, I would say that's not true, Your
20 Honor, but I would first -- if he means clinical care as to
21 the drug she gave and the advice she gave, of course, that's
22 not the issue. The sole issue and what we've said all along
23 is for interpretation of that x-ray.

24 She admitted that she did not refer any follow-up with
25 the x-ray. She didn't say you need to get a CT Scan, you

1 need to get a biopsy, you need to get some kind of
2 follow-up. Our expert, Doctor Woodruff, was very clear that
3 was a breach of the standard of care to misread the x-ray,
4 that it required a follow-up. And if -- whether the word
5 clinical care makes a difference, makes a difference or not,
6 I don't know, Your Honor, but clearly he testified it was a
7 breach of the standard of care to not note that x-ray was
8 abnormal and refer that patient for follow-up, and, on that,
9 he could not of been clearer on that point, Your Honor.

10 THE COURT: All right. Well, to get to -- cut to the
11 chase, based on the standard of review that I have to apply
12 to the evidence, I have to view the evidence at this
13 juncture in a light most favorable to the Plaintiff as well
14 as draw all reasonable inferences from that evidence.

15 On the first issue, I would have to deny that motion.

16 MR. WILLIFORD: Thank you, Your Honor.

17 THE COURT: Address the second issue. I have some real
18 concerns that they, that they, in fact, might be correct if
19 you will take the testimony that I heard.

20 MR. MCKINNON: Your Honor, my, my -- the big picture I
21 see in that argument, that's a red herring, Your Honor. The
22 only reason Doctor Milby even talked about mechanism of
23 spread is because, when -- they brought it up in closing and
24 we knew they were gonna bring it up, Your Honor.

25 We don't have to prove mechanism of spread. Doctor

1 Milby testified very clearly this is a metastasis. As I
2 have looked at the cells under the microscope, he was very
3 clear on how he did it, the magnification he used, how the
4 cells were prepared, it's a thorough explanation of a
5 standard scientific procedure and he said, as a pathologist,
6 these cells are the same as these cells. This is a
7 metastasis and he backed his opinion up with the fact it was
8 the same three cell types on both sides.

9 His opinion -- plus he said, in general, if you have a
10 spread from one lung to another, it's a 95 percent chance
11 it's a metastasis anyway knowing nothing else.

12 Your Honor, that's what we have to prove. We have to
13 prove causation. He testified, without a doubt, no caveat,
14 that it was a metastasis.

15 THE COURT: I remember that.

16 MR. MCKINNON: And we don't have to prove the
17 mechanism. I mean the, the only reason we brought that up
18 is we knew they were gonna talk about it. But a lot of
19 times, in a cancer spread, Your Honor, there is no evidence.
20 You're, you're guessing.

21 He said his best guess, you know, his, his opinion was
22 it was aerogenic spread, but he said it also could of been
23 some way. He said it could of spread through the lymphatic
24 system.

25 We are not required, as part of our case, to prove the

1 mechanism of causation. They can certainly attack that in
2 their closing, but we have to provide evidence that it was
3 the spread of the cancer, and he clearly said, based on what
4 he saw, under the microscope and the types of tumors, that
5 that's why he believed it was a metastasis, and, Your Honor,
6 that's all we need.

7 MR. WILLIFORD: Your Honor, if I may address it
8 briefly?

9 THE COURT: I'll tell you what I just heard.

10 That he is saying that the witness is established that
11 the cancer, like I told you, mentioned to you when you were
12 making the motion, that it metastasized. You know, he said
13 that's, that's how it, that's how I say that one lung is the
14 same cancer from the other lung. But now he's saying to me
15 that that's all they have to show, and how it got from one
16 lung to the other is not their responsibility.

17 MR. WILLIFORD: Your Honor, that's actually incorrect.

18 If, if the posture of the case and the facts of the
19 case are if the right lung cancer were fully resected, and
20 it did not spread to the left side, then Doctor Wan would
21 not be negligent, and didn't cause his death as testified to
22 by Doctor Singer, Doctor Milby, and Doctor Woodruff. They
23 all testified to that. That's in the record. They said if
24 the right lung cancer was fully resected and taken out,
25 then, therefore, and it did not spread to the left side,

1 then Doctor Wan would not have caused this death. That's
2 the causation link. The metastasis must be the causation
3 link and it---

4 THE COURT: Okay. Let me -- can I ask you a question?

5 MR. WILLIFORD: Yes, Your Honor.

6 THE COURT: Don't lose your train of thought.

7 MR. WILLIFORD: Okay.

8 THE COURT: All right. But if the cancer, first cancer
9 that was taken out, if it was not all removed, that meant
10 there was some still there, does his theory still have to
11 apply that it traveled by air from one side to the other?

12 MR. WILLIFORD: Yes, sir, Your Honor, because one of
13 the---

14 THE COURT: Because if it's all taken out, then there's
15 nothing to move from one side to the other.

16 MR. WILLIFORD: Well, that's right, and, and that's
17 what the testimony is in the case and everyone has agreed to
18 that. We, we have had Doctor Nguyen's note put up. Doctor
19 Milby, Doctor Woodruff, Doctor Singer all agreed to that.
20 They, they didn't disagree to that.

21 So in going back to what Mr. McKinnon is saying I
22 believe is that all we have to do is offer testimony,
23 opinion testimony, that that metastasized. That's what he's
24 saying. He doesn't have to prove the details of it.

25 Well, he's actually incorrect because he can't just

1 offer testimony. He's got to back it up under the
2 reliability aspects under the law, under Rule 702, and the
3 Daubert South Carolina case progeny, which is Council.

4 THE COURT: The medicine has to be reliable that he---

5 MR. WILLIFORD: That's, that's right.

6 THE COURT: ---that he comes to Court to say, Jury,
7 this is our theory?

8 MR. WILLIFORD: He can give an opinion and we don't
9 dispute that he's qualified to give his opinion. But the
10 basis of his opinion is unreliable under the case law and
11 Rule 702 as we've talked about.

12 THE COURT: Okay. Let me throw this out at y'all.

13 I know I'm gonna hear evidence cause I heard evidence
14 already that possibly, when the first cancer was finally
15 diagnosed and the surgery, that maybe they didn't get it all
16 because the word recurrent or resurgent is in some of the
17 medical records.

18 MR. MCKINNON: Yes, sir.

19 THE COURT: But yet, I'm gonna also note that there
20 will be taking the factual position that no, that first
21 surgery was successful, everything was taken out.

22 So, either way, that cancer's got to get from one lung
23 to the other lung in order to hold this doctor responsible.
24 Medically, that, that cancer has to get from one lung to the
25 other lung.

1 MR. WILLIFORD: Yes, Your Honor.

2 THE COURT: And I think y'all've got that burden of
3 proof of establishing what -- some way how that cancer got
4 from one lung to the other. I don't---

5 MR. MCKINNON: Your Honor?

6 THE COURT: I'm just not convinced that it's enough for
7 a doctor to come in and look at the end result and say okay,
8 this cancer's the same as the other cancer, it met -- it
9 metastasized and not say well, how did it -- that happen---

10 MR. MCKINNON: Well, Your Honor, for and I guess---

11 THE COURT: --- and allow the jury to speculate as to
12 how it got from one lung to the other.

13 MR. MCKINNON: How something happens is not our burden,
14 Your Honor.

15 Let's just forget Doctor Milby for a second. We had
16 our oncologist, who was undisputedly a qualified medical
17 oncologist, a cancer specialist, he can't offer an opinion
18 on how it spread. He doesn't have to. But he said, as an
19 oncologist, I'm telling you it metastasized based on what
20 he's read. That is enough. Forget Doctor Milby.

21 I mean this, this whole mechanism of spread thing is a
22 red herring, Your Honor. There -- I mean the science, as
23 far as what he saw under the microscope, is indisputable.
24 It spread.

25 There is no way, and Doctor Nguyen will not say this,

1 there is no way Doctor Nguyen can say I got every cell when
2 I cut it out. That is a ridiculous proposition and he won't
3 say that.

4 THE COURT: Well---

5 MR. MCKINNON: Doctor Milby said cells, when asked
6 specifically about skip spread, he said cells can spread
7 through the lymphatic system and -- without making a node
8 positive. He talked about that.

9 But I mean, I mean the bottom---there is no red flag
10 when you get another tumor that says this is how the cancer
11 spread. You can look at factors. You can give an opinion.
12 But that's not relevant to the case, Your Honor. I mean---

13 THE COURT: But we don't have res ipsa loquitur in
14 South Carolina.

15 MR. MCKINNON: Right.

16 But, Your Honor, if you can prove something happened
17 for sure, which we have done, the mechanism is just not
18 relevant, Your Honor. I mean they're, they're attacking us
19 by -- I mean there are possible methods. This cancer could
20 have spread through the blood. It could have spread through
21 the lymph -- it's not impossible. So, it spread for sure,
22 and making us prove how it spread is just not our burden,
23 Your Honor. We have---

24 THE COURT: Yes, sir.

25 MR. WILLIFORD: Well, they absolutely have that burden

1 and we didn't come up with the aerogenic theory. They did
2 because there's no lymphatic spread, there's no blood
3 spread, and there's no direct extension spread. And so they
4 thought, wow, it didn't spread, we've got to come up with a
5 theory and they did and they can't support it and that is
6 critical and they came up with it. They have that burden,
7 Your Honor.

8 MR. MCKINNON: Your Honor, if you find someone dead,
9 they're dead regardless of how if you can prove that they
10 died or not. If you -- the mechanism doesn't matter. Our,
11 our doctor says it metastasized, here is the evidence. The
12 mechanism is just not -- we don't have to prove that.

13 THE COURT: But, but if someone is dead, to hold
14 someone legally responsible for that death, you've got to
15 prove how they died --

16 MR. MCKINNON: Right, but the---

17 THE COURT: -- and that somehow that person was a
18 proximate cause of that death.

19 MR. MCKINNON: But the fact of the metastasis is all we
20 need here, Your Honor. I mean there's, there's not---

21 THE COURT: All right.

22 MR. MCKINNON: Well, let me look at -- before we get
23 to, if you want me to talk -- if you don't buy that I'll go
24 on.

25 THE COURT: Let me, let me hear -- argue that medicine

1 again.

2 MR. WILLIFORD: Yes, Your Honor.

3 THE COURT: The, the medicine. Not the medical
4 testimony. The medicine.

5 MR. WILLIFORD: Yes, Your Honor.

6 THE COURT: Okay. What, what -- why am I not suppose
7 to be trustworthy of this theory?

8 MR. WILLIFORD: Yes, Your Honor.

9 You should not be trustworthy of this theory because it
10 is not a -- specifically to this case, and, and really in
11 general, the theory of connection in terms of metastasis of
12 the right lung to the left, in terms of the Plaintiff's
13 theory, rests on the fact that it must metastasize.

14 THE COURT: Okay. Now, let me, let me reask my
15 question cause you're answering something that I'm not
16 wanting---

17 MR. WILLIFORD: Oh.

18 THE COURT: I mean I want to hear whatever you want to
19 hear. But I'm, I'm asking a question that it's---

20 MR. WILLIFORD: Sure.

21 THE COURT: ---not where you're going.

22 Mr. Davis made a point of bringing out, from these
23 witnesses, the lack of reliability of the medicine as found
24 in or lack of location in journals, supported by research
25 studies.

1 Argue that. Argue -- let me understand where Mr. Davis
2 was going with that in, in establishing that this theory
3 that the cancer spread through the air from one lung to the
4 other is not supported by the medical community.

5 MR. WILLIFORD: And it's not.

6 It's not supported by the medical community and Doctor
7 Milby himself, when he testified that I can't prove this
8 theory, I have --- there's no documentation, that
9 specifically papillary predominant adenocarcinoma of the
10 right side when they're no lymphatic spread, there's no
11 spread by blood, and no spread by direct extension---

12 THE COURT: And he -- and if I remember correctly, that
13 was his testimony, that it was not through the blood, was
14 not through the lymph nodes, and was not through -- what's
15 the other?

16 MR. WILLIFORD: Through direct extension.

17 THE COURT: Direct extensions, yeah.

18 MR. WILLIFORD: That was his testimony. That's been
19 the testimony throughout Court with, with medical records
20 and other witnesses. And if it didn't spread through those
21 three known and accepted ways in the medical community, then
22 it didn't spread and metastasize and the Plaintiff has come
23 up with a theory that it spread aerogenously---

24 THE COURT: Right.

25 MR. WILLIFORD: ---or aerogenically through the airways

1 into another lung and turned into a different kind of
2 cancer, a lepidic predominate cancer, with an acinar pattern
3 and that can not happen---

4 THE COURT: Well, I---

5 MR. WILLIFORD: ---and it's not been supported by any
6 reliable literature at all as testified to by Doctor Milby.

7 THE COURT: Okay. I will --.

8 MR. WILLIFORD: He couldn't cite any literature on it.

9 THE COURT: Okay. I will tell you but that -- on that
10 last part, the way you described the second cancer, I have
11 to give them -- view the evidence in the light most
12 favorable to them that the fact that one might be lepidic
13 or -- what's the other one?

14 MR. WILLIFORD: Papillary predominate and lepidic
15 predominate---

16 THE COURT: Yeah. Right.

17 MR. WILLIFORD: ---right and left side.

18 THE COURT: Cause one of the witnesses testified that
19 that does not matter, that that -- when the transfer occurs,
20 you can have that. So I, I, I'm more concerned about the
21 medical support of how it got from one side to the other.

22 MR. WILLIFORD: Doctor Milby could not cite or point to
23 any literature that this is happened ever in the -- ever in
24 a, in a human body.

25 THE COURT: And I, I heard that. That was, that was

1 significant.

2 MR. MCKINNON: Your Honor, he wasn't -- he's not asked
3 to do a literature search. He provided two standard
4 textbooks where it is so uncontroversial I mean in the
5 footnote. I mean the standard -- this textbook says it
6 spreads -- says lung adenocarcinoma spreads aerogenously to
7 other regions of the lungs, and this is a, this is a
8 pulmonology training -- a pathology lung textbook. It's --
9 and he read from it on the stand.

10 It spreads that way and then they say oh, where are the
11 footnotes?

12 If I brought those articles, they would of said well,
13 where are the footnotes for those.

14 I mean, Your Honor, it's -- these are standard
15 textbooks. The other article we brought in, Your Honor,
16 is -- talks about the exact mechanism how it works. It says
17 neutrophil immune cells strip the cells off. I mean this is
18 the mechanism of how it works, and, Your Honor, if you
19 remember, he even said, on the microscope, he showed the
20 loose cancer cells in the airways. He said these are the
21 free floating cells, this is how it works, and he pointed to
22 that on the microscope slides in the high magnification.

23 I mean that's -- he showed the jury where the cell --
24 the free floating air -- cells were in the airways, the
25 malignant cells.

1 THE COURT: But under -- argue that through Council
2 though.

3 what, what am I suppose to take from the evidence that
4 has been presented, how am I suppose to view your -- the
5 medical theory that you want me to allow the jury to
6 address?

7 MR. MCKINNON: Well, Your Honor, I said the fact that
8 it's accepted at two textbooks where it's not even
9 controversial. -- The, the standard pathology textbook and
10 standard cytology textbook that say this is standard, that
11 it's -- it's not even remarkable, Your Honor. They don't --
12 plus we have an article here, you know, from a cancer
13 journal that explains how the process works.

14 They studied the cytology. They studied it on a
15 molecular level and they showed that -- how the immune cells
16 strip off the loose cells which then move aerogenously and
17 he showed the science from the stand, Your Honor. I mean
18 studies under microscopes are as reliable -- it's been
19 around for 300 years. He said -- he circled for the jury,
20 here are the loose cells and we're entitled to every
21 inference, Your Honor.

22 MR. WILLIFORD: Your Honor, if I may?

23 Mr. McKinnon keeps pointing to these, these two books
24 and that one article, the only ones that he brought in
25 through testimony today with Doctor Milby.

1 The first book, and I have it written down here and the
2 record will reflect, that Doctor Milby said book number one
3 doesn't prove my theory, the book that he just presented to
4 him last night for the first time.

5 Number two, the second book, the one paragraph that was
6 read it says, in contrast, bronchoalveolar carcinoma can
7 spread aerogenously with, again, no footnotes. But that's
8 bronchoalveolar carcinoma. That's BAC. Not papillary
9 carcinoma.

10 The article that he mentioned, the first line, under
11 purpose, it says adenocarcinoma with bronchoalveolar
12 carcinoma, BAC, it's not the cancer that he had.
13 Mr. McKinnon is not being honest with the Court in terms of
14 trying to just describe the medicine in the case. He's,
15 he's mixing it all up. They're different cancers.

16 MR. MCKINNON: As Your Honor's already pointed out, the
17 clear testimony was both tumors had all three types of cells
18 including the lepidic, which is bronchoalveolar. That was
19 the clear testimony and I'm, I'm entitled to every
20 inference, Your Honor.

21 MR. WILLIFORD: But then he---

22 MR. MCKINNON: Your Honor, the proof thing just -- it's
23 just a red herring. If you look at the textbook and it says
24 acceleration of gravity is 9.8 meters per second -- 9.8 feet
25 per second squared, that's standard. The textbook doesn't

1 prove it because it's a standard scientific fact.

2 That's not what they're asking him -- you know, did
3 this book prove it?

4 Of course, the book itself doesn't prove it. But it's
5 accepted science. It's like looking up the force of gravity
6 or the distance of the Earth from the sun. I mean the
7 book -- every textbook doesn't have to out step-by-step the
8 proof of the theory. I mean it's a standard pathology
9 textbook studying a standard fact of pathology.

10 MR. WILLIFORD: And, Your Honor, that's why they
11 brought in an expert who could not support it. Mr. McKinnon
12 clearly is trying to produce some literature and get his
13 expert to support it and admitted, he being Doctor Milby, he
14 admitted he can not support it.

15 THE COURT: All right. Let me step down for a few
16 moments. We'll stand at ease and take a break if y'all --
17 anybody needs to use the restroom.

18 MR. DAVIS: Thank you, Your Honor.

19 (WHEREUPON, a short recess was taken at this time.)

20 THE COURT: At the stage that we are, now, again, I
21 have to view the facts in the light that's most favorable to
22 the nonmoving party. Here that would be the Plaintiff.

23 I am giving, not giving, I am applying that standard.
24 I do not believe I can contest the fact that the cancer
25 moved from one lung to the other. I also do not believe

1 that I can not view and say that the Plaintiff has been
2 successful in establishing a link that the same cancer is on
3 one side as the other.

4 But the, the factual evidence that has been
5 presented -- so I -- and so I do not believe though it is
6 enough to say that, because this cancer came from this
7 cancer, that that's all that the Plaintiff has to establish,
8 and that's where the medicine comes into play, and I think
9 it's still the Plaintiff's responsibility, burden, to
10 present the theory of medicine that they want the jury to
11 look at and apply.

12 And so the fact that the cancer showed up on the other
13 side is the same kind of cancer I just don't think is
14 enough. So I think the Plaintiff has to explain to the
15 jury, medically, how that transfer happened.

16 Here all of the testimony is that the cancer from one
17 side can transfer to the other side through lymph nodes,
18 through blood, through extension, or through the air, and
19 that's not -- using nonmedical terms. And so no one had --
20 I have not heard, and correct me if I'm, if I'm, if I've
21 heard this, if I'm saying this wrong, no one has testified
22 that this transfer from the cancer from one side to the
23 other was through blood or through the lymph nodes or
24 through extension and that we have focused on this was a
25 transfer that was done through the air.

1 Okay. The witness that was called was this Doctor
2 Wilby?

3 MR. MCKINNON: Milby, Your Honor.

4 THE COURT: Milby. Thank you.

5 To establish that.

6 Defense has raised a Council argument as to addressing
7 the medicine in this case. They, they've addressed -- they,
8 they've attacked it applying the Council factors that
9 they've looked at the literature, they're saying it's
10 unreliable. They attack the theory itself as being
11 unreliable and they've attacked the witness himself as being
12 unreliable.

13 I have to give to Plaintiff, based at a summary
14 judgment -- based on a directed verdict motion stage, I have
15 to give them the literature issue. They presented
16 literature that has this thing in there, that has this
17 theory in there.

18 What I'm having difficulty giving to Plaintiff at this
19 stage, viewing the evidence in a light most favorable to the
20 plaintiff, is the witness testimony as it relates to the
21 Council factors on reliability of prior times that this
22 theory has actually been applied.

23 He said, he was asked do you know -- you don't know
24 there's any medical literature out there that's proven your
25 theory in any patient, in any study, in all the 135 years

1 this theory has been kicked around and his answer was I'm
2 not aware of any. That makes it difficult for me not to
3 grant this motion for directed verdict.

4 I, in all of my years, I've never granted a directed
5 verdict motion in a case like this. But I feel like I have
6 to in this one based on that testimony of that witness
7 because it, to me, it would -- if I didn't, then I would be
8 allowing a view of medicine that I believe has been
9 established as being unreliable to allow this jury to then
10 engage in improper speculation in applying that theory on
11 how this cancer got from one side to the other, and I
12 believe that that is Plaintiff's burden is to establish how
13 it got from one side to the other.

14 I just don't think that Plaintiff -- it's, it's enough
15 for Plaintiff to say that that is the same cancer from one
16 to the other, and, therefore, you know, we don't -- there's
17 no -- nothing else we have to meet.

18 So I have to grant the motion.

19 MR. WILLIFORD: Thank you, Your Honor.

20 MR. DAVIS: Thank you, Your Honor.

21 MR. MCKINNON: Thank you, Your Honor.

22 THE COURT: Thank y'all. We'll step down.

23 (Pause.)

24 THE COURT: I've got to dismiss the jury.

25 Do you want me to do that on the record?

1 MR. DAVIS: You address the jury -- dismissing the
2 jury, if you want us to be here in the courtroom we are
3 here.

4 MR. MCKINNON: We're fine if Your Honor wants to---

5 THE COURT: I was going to go in the jury room and
6 dismiss the jury.

7 MR. MCKINNON: Since Your Honor has granted the motion,
8 we're fine if you go back in the jury room and dismiss the
9 jury. That's fine with the Plaintiff.

10 THE COURT: okay.

11 MR. DAVIS: We don't need it to be on the record.
12 We're fine if you go in the jury room.

13 THE COURT: okay.

14 MR. WILLIFORD: Thank you very much.

15 MR. DAVIS: Thank you, Your Honor.

16

17

18 * * *END OF REQUESTED TRANSCRIPT OF RECORD* * *

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20

21

22

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24

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C E R T I F I C A T E

I, Pamela E. Green, Official Court Reporter for the Seventh Judicial Circuit of the State of South Carolina, do hereby certify that the foregoing is a true, accurate and complete Transcript of Record of the proceedings had and evidence introduced in the trial of the captioned case, relative to appeal, in the Court of Common Pleas for Spartanburg County, South Carolina, on the 27th, 28th and 29th day of July, 2015.

I do further certify that I am neither of kin, counsel nor interest to any party hereto.

September 17th, 2015



PAMELA E. GREEN, Court Reporter

Upstate Lung and Critical Care

Medical Billing

William Farr

Dec. 11. 2012 12:26PM Upstate Lung & Critical Care

No. 4851 P. 2

Patient Ledger

Date Printed: 12/11/2012

Upstate Lung & Critical Care Specialists, P.C.1091 Boiling Springs Road
SPARTANBURG, SC 29303-2248

Filters: Patient Number: (28559)

Ticket No	Date	CPT Code	Transaction Description	Charges	Payment	Chg. Adj.	Pymt Adj.	Balance
<u>Patient Information</u>				<u>Responsible Party Information</u>				
Name:	FARR, WILLIAM G							
Patient Number:	28559							
Address:	1506 GUNTER DR WEST COLUMBIA, SC 29169							
Home Phone:	(864)251-0531							
Work Phone:								
Sex:	M							
Birth Date:	[REDACTED]							
Chart No.:	31219							

23413

01/11/2010	94010	SPMTRY W/VC EXPIRATORY FLO + MXML VOL VNTJ	\$100.00	\$0.00	\$0.00	\$0.00	\$100.00
01/11/2010	71020	RADEX CH 2 VIEWS FRNT & LAT	\$81.00	\$0.00	\$0.00	\$0.00	\$81.00
01/11/2010		Patient Copayment Cash	\$0.00	\$31.21	\$0.00	\$0.00	(\$31.21)
01/11/2010	99204	OFFICE OUTPT NEW 45 MIN	\$175.00	\$0.00	\$0.00	\$0.00	\$175.00
01/25/2010		Primary Insurance payment	\$0.00	\$44.60	\$0.00	\$0.00	(\$44.60)
04/05/2011		Charge Adjustment (CO- Contractual Obligation)	\$0.00	\$0.00	\$150.38	\$0.00	(\$150.38)
04/05/2011		Primary Insurance payment	\$0.00	\$5.92	\$0.00	\$0.00	(\$5.92)
Total (Net) Charges:			\$356.00	\$81.73	\$150.38	\$0.00	\$123.89
Total (Gross) Charges:			\$356.00	\$81.73	\$150.38	\$0.00	\$123.89
Gross Total:			\$356.00	\$81.73	\$150.38	\$0.00	\$123.89

Dec. 11. 2012 12:27PM Upstate Lung & Critical Care

Print Date: 12/11/2012 12:28:57 No. 4851 P. 3
Ticket Number: 23413

Walkout Statement

Upstate Lung & Critical Care Specialists, P.C.
1091 Boiling Springs Road
SPARTANBURG, SC 29303-2248
Phone: (864) 573-6320
Federal ID: 570962059

Wan, Sau Yin MD
1091 Boiling Springs Road
SPARTANBURG, SC 29303-2248 Medicare ID:
Phone: (864) 573-6320 Medicaid ID: [REDACTED]
NPI: 1831350271

Responsible Party

Name: FARR, WILLIAM G
Address: 1506 GUNTER DR
WEST COLUMBIA, SC 29169

Patient Information

Name: FARR, WILLIAM G
Account#: 28559
DOB: [REDACTED]

Home Phone: (864) 251-0531

Office Phone:

Other Phone:

Diagnosis:

1. 786.09
2. 496
3. 305.1
4. 799.02

Date	CPTCode	Description	Render Prov	POS Code	Units	Charges	Payments	Adjustments
01/11/2010	99204	NEW PATIENT COMPLEX OFFICE VISIT	Sau Yin Wan	ULCCS	1.000	\$175.00	\$0.00	\$0.00
		Diag 786.09						
01/11/2010		Patient Copayment Cash				\$0.00	\$31.21	\$0.00
01/11/2010	94010	SPIROMETRY	Sau Yin Wan	ULCCS	1.000	\$100.00	\$0.00	\$0.00
		Diag 786.09						
01/11/2010	71020	RADEX CH 2 VIEWS FRNT&LAT	Sau Yin Wan	ULCCS	1.000	\$81.00	\$0.00	\$0.00
		Diag 786.09						
01/25/2010		Primary Insurance payment				\$0.00	\$44.60	\$0.00
01/25/2010		Patient Responsibility (PR-Patient Responsibility):				\$0.00	\$0.00	\$0.00

(Continued)

Dec. 11. 2012 12:27PM Upstate Lung & Critical Care

No. 4851 P. 4

Print Date: 12/11/2012 12:28:57

Ticket Number: 23413

Walkout Statement

Upstate Lung & Critical Care Specialists, P.C.
 1091 Boiling Springs Road
 SPARTANBURG, SC 29303-2248
 Phone: (864) 573-6320
 Federal ID: 570962059

Wan, Sau Yin MD
 1091 Boiling Springs Road
 SPARTANBURG, SC 29303-2248 Medicare ID:
 Phone: (864) 573-6320 Medicaid ID: [REDACTED]
 NPI: 1831350271

Responsible Party**Patient Information**

Name: FARR, WILLIAM G
 Address: 1506 GUNTER DR
 WEST COLUMBIA, SC 29169

Name: FARR, WILLIAM G
 Account#: 28559
 DOB: [REDACTED]

Home Phone: (864) 251-0531

Office Phone:

Other Phone:

Diagnosis:

1. 786.09
2. 496
3. 305.1
4. 799.02

Date	CPTCode	Description	Revd Prov	POS Code	Units	Charges	Payments	Adjustments
01/25/2010		\$148.01 Patient Responsibility (PR-Patient Responsibility):				\$0.00	\$0.00	\$0.00
		\$5.61						
04/05/2011		Primary Insurance payment				\$0.00	\$5.92	\$0.00
04/05/2011		Charge Adjustment (CO-Contractual Obligation)				\$0.00	\$0.00	-\$150.38
04/05/2011		Patient Responsibility (PR-Patient Responsibility):				\$0.00	\$0.00	\$0.00
		\$154.43						
04/05/2011		Patient Responsibility (PR-Patient Responsibility):				\$0.00	\$0.00	\$0.00

(Continued)

Dec. 11, 2012 12:27PM Upstate Lung & Critical Care

Print Date: 12/11/2012 12:28:57 No. 4851 P. 5
Ticket Number: 23413**Walkout Statement**

Upstate Lung & Critical Care Specialists, P.C.
1091 Boiling Springs Road
SPARTANBURG, SC 29303-2248
Phone: (864) 573-6320
Federal ID: 570962059

Wan, Sau Yin MD
1091 Boiling Springs Road
SPARTANBURG, SC 29303-2248 Medicare ID:
Phone: (864) 573-6320 Medicaid ID: [REDACTED]
NPI: 1831350271

Responsible Party

Name: FARR, WILLIAM G
Address: 1506 GUNTER DR
WEST COLUMBIA, SC 29169

Patient Information

Name: FARR, WILLIAM G
Account#: 28559
DOB: [REDACTED]

Home Phone: (864) 251-0531

Office Phone:

Other Phone:

Diagnosis:

1. 786.09
2. 496
3. 305.1
4. 799.02

Date	CPTCode	Description	Revd Prov	POS Code	Units	Charges	Payments	Adjustments
		\$0.67						

Total:	\$356.00	\$81.73	(\$150.38)

Today's Balance:	\$123.89

Previous Balance:	\$0.00

Total Balance Due:	\$123.89

STATE OF SOUTH CAROLINA

CERTIFICATION OF VITAL RECORD

STATE BIRTH NUMBER

State of South Carolina
Department of Health and Environmental Control
CERTIFICATE OF DEATH

STATE FILE NUMBER

12-020613

1. DECEDENT'S LEGAL NAME (Include AKA's, if any) (First, Middle, Last) William Gault Farr				2. SEX Male		3. SOCIAL SECURITY NUMBER [REDACTED]	
4a. AGE-Last Birthday (Years) 69		4b. UNDER 1 YEAR Months: _____ Days: _____		4c. UNDER 1 DAY Hours: _____ Minutes: _____		5. DATE OF BIRTH (MM/DD/YYYY) [REDACTED]	
6. BIRTHPLACE (City and State or Foreign Country) Union, SC							
7a. RESIDENCE-STATE South Carolina				7b. COUNTY Union		7c. CITY OR TOWN Union	
7d. STREET AND NUMBER 1032 Jonesville Lockhart Hwy				7e. APT. NO. [REDACTED]		7f. ZIP CODE 29379	
7g. INSIDE CITY LIMITS? ☐ Yes ☒ No							
8. EVER IN US ARMED FORCES? ☐ Yes ☒ No		9. MARITAL STATUS AT TIME OF DEATH ☒ Married ☐ Married, but separated ☐ Widowed ☐ Divorced ☐ Never Married ☐ Unknown		10. SURVIVING SPOUSE'S NAME (If wife, give name prior to first marriage) Delores Folsom			
11. FATHER'S NAME (First, Middle, Last) Willie Hattie Farr				12. MOTHER'S NAME PRIOR TO FIRST MARRIAGE (First, Middle, Last) Lenna Gault			
13a. INFORMANT'S NAME Delores F. Farr		13b. RELATIONSHIP TO DECEDENT Wife		13c. MAILING ADDRESS (Street and Number, City, State, Zip Code) 1032 Jonesville Lockhart Hwy Union, SC 29379			
14. PLACE OF DEATH (Check only one: see instructions)							
IF DEATH OCCURRED IN A HOSPITAL: ☐ Inpatient ☐ Emergency Room/Outpatient ☐ Dead on Arrival				IF DEATH OCCURRED SOMEWHERE OTHER THAN A HOSPITAL: ☐ Hospice facility ☐ Nursing home/Long term care facility ☒ Decedent's home ☐ Other (Specify): _____			
15. FACILITY NAME (If not institution, give street and number) 1032 Jonesville Lockhart Hwy				16. CITY OR TOWN, STATE AND ZIP CODE Union SC 29379		17. COUNTY OF DEATH Union	
18. METHOD OF DISPOSITION ☐ Burial ☐ Cremation ☐ Donation ☐ Entombment ☐ Removal from state ☐ Other (Specify): _____				19. PLACE OF DISPOSITION (Name of cemetery, crematory, other place) Union Memorial Gardens			
20. LOCATION-CITY, TOWN, AND STATE Union, SC				21. NAME AND ADDRESS OF FUNERAL FACILITY Holcombe Funeral Home 310 W. South St. Union, SC 29379			
22. SIGNATURE OF FUNERAL SERVICE LICENSEE OR OTHER AGENT [Signature]				23. LICENSE NUMBER (Of Licensee) 1981		23a. LICENSE NUMBER (Of Facility) 350	
23b. EMBALMER LICENSE NUMBER 2457							
ITEMS 24-28 MUST BE COMPLETED BY PERSON WHO PRONOUNCES OR CERTIFIES DEATH				24. DATE PRONOUNCED DEAD (MM/DD/YYYY) 06/19/2012			
25. TIME PRONOUNCED DEAD 4:15 PM							
26. SIGNATURE OF PERSON PRONOUNCING DEATH (Only when applicable)				27. LICENSE NUMBER		28. DATE SIGNED (MM/DD/YYYY)	
29. ACTUAL OR PRESUMED DATE OF DEATH (Spell Month) June 19, 2012				30. ACTUAL OR PRESUMED TIME OF DEATH 4:15 PM		31. WAS CORONER OR MEDICAL EXAMINER CONTACTED? ☒ Yes ☐ No	
CAUSE OF DEATH (See instructions and examples) DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Enter only one cause on a line. Add additional lines if necessary. IMMEDIATE CAUSE (Final disease or condition resulting in death) a. Metastatic lung cancer Due to (or as a consequence of): b. _____ Due to (or as a consequence of): c. _____ Due to (or as a consequence of): d. _____ Sequitally (if conditions, if any, leading to the cause listed on line a. Enter the UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST PART II. Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I.							
32. PART I. Enter the chain of events-disease, injuries, or complications that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Enter only one cause on a line. Add additional lines if necessary. IMMEDIATE CAUSE (Final disease or condition resulting in death) a. Metastatic lung cancer Due to (or as a consequence of): b. _____ Due to (or as a consequence of): c. _____ Due to (or as a consequence of): d. _____ Sequitally (if conditions, if any, leading to the cause listed on line a. Enter the UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST PART II. Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I.							
33. WAS AN AUTOPSY PERFORMED? ☐ Yes ☒ No							
34. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH? ☐ Yes ☒ No							
35. DID TOBACCO USE CONTRIBUTE TO DEATH? ☐ Yes ☒ Probably ☐ No ☐ Unknown		36. IF FEMALE: ☐ Not pregnant within past year ☐ Pregnant at time of death ☐ Not pregnant, but pregnant within 42 days of death ☐ Not pregnant, but pregnant 43 days to one year before death ☐ Unknown if pregnant within the past year		37. MANNER OF DEATH ☒ Natural ☐ Homicide ☐ Accident ☐ Pending investigation ☐ Suicide ☐ Could not be determined			
38. DATE OF INJURY (Spell Month)		39. TIME OF INJURY		40. PLACE OF INJURY (e.g., Decedent's home, construction site, restaurant, wooded area)		41. INJURY AT WORK? ☐ Yes ☒ No	
42. LOCATION OF INJURY: State: _____ City or Town: _____ County: _____ Street & Number: _____ Apartment Number: _____ Zip Code: _____							
43. DESCRIBE HOW INJURY OCCURRED: [REDACTED]							
44. IF TRANSPORTATION INJURY, SPECIFY: ☐ Driver/Operator ☐ Pedestrian ☐ Passenger ☐ Other (Specify): _____							
45. CERTIFIER (Check only one) ☒ Certifying physician/To the best of my knowledge, death occurred due to the cause(s) and manner stated. ☐ Pronouncing and Certifying physician/To the best of my knowledge, death occurred at the time, date, and place, and due to the cause(s) and manner stated. ☐ Coroner/Medical Examiner/On the basis of examination and/or investigation, in my opinion, death occurred at the time, date, and place, and due to the cause(s) and manner stated. Signature of certifier: [Signature]							
46. NAME, ADDRESS, AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH (Item 32) 300 September Dr. Suite 200 Spartanburg, SC 29303				46a. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER [REDACTED]			
47. TITLE OF CERTIFIER MS		48. LICENSE NUMBER 30418		49. DATE CERTIFIED (MM/DD/YYYY) 06/24/2012		50. FOR REGISTRAR ONLY-DATE FILED (MM/DD/YYYY) 07/03/2012	

SC 02130345

ISSUED JUL 03 2012

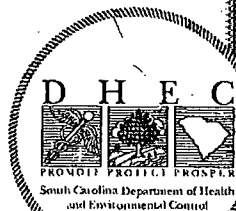
This is a true certification of the facts on file in the Division of Vital Records, SC Department of Health and Environmental Control.

C. Earl Hunter
C. Earl Hunter
Commissioner and State Registrar

Guang Zhao
Guang Zhao
Assistant State Registrar

This copy is not valid unless prepared on an engraved border displaying the state seal and issuing agency logo.

Revision Date: 08/01/2009



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

STATE OF SOUTH CAROLINA
COUNTY OF UNION

IN THE MATTER OF WILLIAM GAULT FARR

IN THE PROBATE COURT
CERTIFICATE OF APPOINTMENT

CASE NUMBER: 2012ES4400145

This is to certify that

LISA F MCKAUGHAN

is/are the duly qualified

☒ PERSONAL REPRESENTATIVE

☐ GUARDIAN

☐ CONSERVATOR

☐ TRUSTEE

In the above matter and that this appointment, having been executed on the 6th day of July, 2012 is now in full force and effect, including authorization to receive all monies, income, principal, interest & dividends of and belonging to said estate.

RESTRICTIONS: FOR LITIGATION PURPOSES ONLY

Executed this 16th day of July, 2012

Do not accept a copy of this certificate without
the raised seal of the Probate Court.

Donna P. Cudd
DONNA CUDD, PROBATE JUDGE

Remit payment to:

CAROLINA MEDICAL AFFILIAT
PO BOX 2288
SPARTANBURG, SC 29304-2288
(864) 585-5433

Patient Receipt

-629-

Monday, May 04, 2015

Amount Due	Amount Paid
\$25.48	\$30.55

WILLIAM G FARR
1032 JONESVILLE LOCKHART HWY
UNION, SC 29379

Date	Description	Check #	Ins	Unins	Insurance	Patient
	WILLIAM G FARR(114958)/COURTNEY H DEVANE MD/479699					
	Hypopotasemia (276.8)					
	Nondependent tobacco use disorder (305.1)					
	Polycythemia, secondary (289.0)					
	Unspecified essential hypertension (401.9)					
	Personal history of malignant neoplasm of large intestine (V10.05)					
	Pure hypercholesterolemia (272.0)					
01/27/2010	ESTABLISHED PATIENT LEVEL 3 (99213)		\$68.00	1.0	\$68.00	\$0.00
01/28/2010	PAYMENT Payment from FARR, WILLIAM G				\$0.00	-\$12.22
01/28/2010	PAYMENT Payment from FARR, WILLIAM G				\$0.00	-\$5.45
02/12/2010	CONTRACTUAL ADJ Adjustment from MEDICARE SC	140621283			-\$6.91	\$0.00
02/12/2010	PAYMENT Payment from MEDICARE SC	140621283			-\$48.87	\$0.00
02/12/2010	Transfer from Insurance	140621283			-\$12.22	\$12.22
	YOUR INSURANCE CARRIER STATES THIS AMOUNT IS YOUR RESPONSIBILITY FOR UNMET DEDUCTIBLE.					
04/22/2011	PAYMENT Payment from MEDICARE SC	881131247			\$48.87	\$0.00
04/22/2011	CONTRACTUAL ADJ Adjustment from MEDICARE SC	881131247			\$1.90	\$0.00
04/22/2011	PAYMENT Payment from MEDICARE SC	881131247			-\$50.39	\$0.00
04/22/2011	Transfer from Insurance	881131247			-\$0.38	\$0.38
	Balance:				\$0.00	-\$5.07
	WILLIAM G FARR(114958)/COURTNEY H DEVANE MD/533994					
	Hypopotasemia (276.8)					
	Pure hypercholesterolemia (272.0)					
	Acute upper respiratory infections of unspecified site (466.9)					
	Nondependent tobacco use disorder (305.1)					
08/23/2010	ESTABLISHED PATIENT LEVEL 3 (99213)		\$68.00	1.0	\$68.00	\$0.00
08/23/2010	At least one prescription created during the encounter was generated and transmitted electronically using a qualified ex system (G8553)		\$0.00	1.0	\$0.00	\$0.00
08/23/2010	PAYMENT Payment from FARR, WILLIAM G				\$0.00	-\$12.88
09/10/2010	CONTRACTUAL ADJ Adjustment from MEDICARE SC	880919194			-\$3.62	\$0.00
09/10/2010	PAYMENT Payment from MEDICARE SC	880919194			-\$51.50	\$0.00
09/10/2010	Transfer from Insurance	880919194			-\$12.88	\$12.88
	Balance:				\$0.00	\$0.00

Total Balance	Ins. Balance	Pat. Balance
-\$5.07	\$0.00	-\$5.07

-630-

SPARTANBURG MEDICAL CENTER
PO BOX 277723
ATLANTA, GA 30384-7723

F/C:SM P/T:FAC

FARR, WILLIAM G

1031200979

11/08/10 11/08/10 1

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/05/15

316507 MEDICARE 1500 F/C MC

05/05/15

	CODE	DESCRIPTION	QTY	
11/08	***510 040035	CLINIC EST PATIENT EXPANDED	1	120.00
		AREA TOTAL ***		120.00
11/08	***960 020020	PRO FEE OFFICE/OUTPATIENT VISIT, NEW	1	245.00
		AREA TOTAL ***		245.00
TOTAL CHARGES				365.00
11/29	I5205	M53 ERA MEDICARE PAYMENT PART B	316	125.41CR
11/30	I5200	MC6 ERA MEDICARE PAYMENT	316	53.27CR
11/29	A5002	M53 Adjustment - Medicare Pro Fee	316	88.24CR
11/30	A5041	MC6 Adjustment Medicare Outpatient	316	53.40CR
TOTAL PAYMENTS/ADJUSTMENTS				320.32CR

44.68

0.00

44.68

-631-

PAHTANBURG MEDICAL CENTER
PO BOX 277723
ATLANTA, GA 30384-7723

F/C:SM P/T:FAC

FARR, WILLIAM G

1031900900

11/15/10 11/15/10 1

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/05/15

316507 MEDICARE 1500 F/C MC

05/05/15

	CODE	DESCRIPTION	QTY	
11/15	***510	CLINIC		
	040035	EST PATIENT EXPANDED	1	120.00
		AREA TOTAL ***		120.00

11/15	***960	PRO FEE		
	020045	OFFICE/OUTPATIENT VISIT, EST	1	163.00
		AREA TOTAL ***		163.00

TOTAL CHARGES

283.00

12/06	I5205	M53 ERA MEDICARE PAYMENT PART B	316	83.26CR
12/08	I5200	MC5 ERA MEDICARE PAYMENT	316	53.27CR
12/06	A5002	M53 Adjustment - Medicare Pro Fee	316	58.93CR
12/08	A5041	MC5 Adjustment Medicare Outpatient	316	53.40CR

TOTAL PAYMENTS/ADJUSTMENTS

248.86CR

SAC

34.14

0.00

34.14

-632-

F/C:SM P/T:IP

FARR, WILLIAM G

1032100540

12/02/10 12/15/10 13

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/05/15

316507 MEDICARE 1500 F/C MC

05/05/15

	CODE	DESCRIPTION	QTY	
01/05	A5040	MC3 Adjustment Medicare Inpatient	316	61,036.74CR
01/05	A5040	MC3 Adjustment Medicare Inpatient	316	60,295.40
01/05	A5002	M54 Adjustment - Medicare Pro Fee	316	5,877.10CR
01/05	A5002	M54 Adjustment - Medicare Pro Fee	316	2,757.94CR
TOTAL PAYMENTS/ADJUSTMENTS				86,646.06CR

1,561.39

0.00

1,561.39

-633-

SPARTANBURG MEDICAL CENTER
PO BOX 277723
ATLANTA, GA 30384-7723

F/C:MC P/T:FAC

FARR, WILLIAM G

1035600131

12/22/10 12/22/10 1

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/05/15

316507 MEDICARE 1500 F/C MC

05/05/15

12/22	CODE	DESCRIPTION	QTY	
	***960	PRO FEE		
	021460	P-POST OP CARE, GLOBAL	1	0.00
		AREA TOTAL ***		0.00

TOTAL CHARGES

0.00

TOTAL PAYMENTS/ADJUSTMENTS

0.00

0.00

0.00

0.00

-634-

SPARTANBURG MEDICAL CENTER
PO BOX 277723
ATLANTA, GA 30384-7723

F/C:MC P/T:FAC

FARR, WILLIAM G

1101900126

01/19/11 01/19/11 1

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/05/15

316507 MEDICARE 1500 F/C MC

05/05/15

	CODE	DESCRIPTION	QTY	
01/19	***960	PRO FEE		
	021460	P-POST OP CARE, GLOBAL	1	0.00
		AREA TOTAL ***		0.00

TOTAL CHARGES

0.00

TOTAL PAYMENTS/ADJUSTMENTS

0.00

0.00

0.00

0.00

-635-

SPARTANBURG MEDICAL CENTER
PO BOX 277723
ATLANTA, GA 30384-7723

F/C:MC P/T:FAC

FARR, WILLIAM G

1103300411

02/02/11 02/02/11 1

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/05/15

316507 MEDICARE 1500 F/C MC

05/05/15

CODE	DESCRIPTION	QTY	
02/02	***960		
	PRO FEE		
	021460		
	P-POST OP CARE, GLOBAL	1	0.00
	AREA TOTAL ***		0.00
TOTAL CHARGES			0.00
TOTAL PAYMENTS/ADJUSTMENTS			0.00

E TSAS D

0.00

0.00

0.00

-636-

F/C:SM P/T:OPS

FARR, WILLIAM G

1106200081

03/04/11 03/10/11 3

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/05/15

316507 MEDICARE 1500 F/C MC

05/05/15

	CODE	DESCRIPTION	QTY	
03/31	A5002	M54 Adjustment - Medicare Pro Fee	316	3,535.76CR
03/31	A5002	M54 Adjustment - Medicare Pro Fee	316	651.22CR
04/21	A5041	854 Adjustment Medicare Outpatient	316	7,954.22CR
05/05	A5041	MC5 Adjustment Medicare Outpatient	316	7,954.22CR
05/05	A5041	MC5 Adjustment Medicare Outpatient	316	7,954.22
TOTAL PAYMENTS/ADJUSTMENTS				14,154.07CR

504.13

0.00

504.13

-637-

SPARTANBURG MEDICAL CENTER
PO BOX 277723
SPARTANBURG, GA 30384-7723

F/C:MS P/T:FAC

FARR, WILLIAM G

1210200319

04/11/12 04/11/12 1

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/05/15

316507 MEDICARE 1500 F/C MC

05/05/15

	CODE	DESCRIPTION	QTY	
04/11	***510	CLINIC		
	040035	EST PATIENT EXPANDED	1	129.00
		AREA TOTAL ***		129.00
04/11	***960	PRO FEE		
	020035	OFFICE/OUTPATIENT VISIT, EST	1	76.00
		AREA TOTAL ***		76.00

TOTAL CHARGES

205.00

05/03	I5205	M52 MEDICARE PART B - ERA	316	37.80CR
05/04	I5200	MC1 MEDICARE - ERA	316	54.52CR
05/17	I5212	276 UHC-AARP - ERA	850	13.64CR
06/11	I6112	S23 COMMERCIAL INSURANCE PAYMENT	850	9.45CR
04/19	A5041	360 MEDICARE OUTPATIENT- ADJ	316	60.84CR
05/03	A5002	M52 MEDICARE PRO FEE- ADJ	316	28.75CR
05/04	A5041	MC1 MEDICARE OUTPATIENT- ADJ	316	60.84CR
05/04	A5041	MC1 MEDICARE OUTPATIENT- ADJ	316	60.84

TOTAL PAYMENTS/ADJUSTMENTS

205.00CR

BENEFITS ASSIGNED

0.00

0.00

0.00

-638-

F/C:SI D/T:IP

FARR, WILLIAM G

1210301383

04/17/12 04/20/12 6

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/05/15

316507 MEDICARE 1500 F/C MC

05/05/15

CODE	DESCRIPTION	AREA TOTAL ***	QTY
04/17	***960 PRO FEE		
030755	THORACOSCOPY W/DX BX, UNILAT		1
	AREA TOTAL ***		1,095.00
			1,095.00

TOTAL PAYMENTS/ADJUSTMENTS

0.00

BILLS ASSIGNED

0.00

0.00

-639-

035 Remittance Advice

Payer Name: PALMETTO GBA
 NPI: 1518998038
 ERA Date: 5/11/2012
 Check Number: 881571213

Patient Name: FARR, WILLIAM G
 HIC Number: 250680627A (HIC)
 Control Number: 1210301383
 Account: 1210301383

Facility: SPARTANBURG REGIONAL
 Filing Indicator: MB - Medicare Part B
 Bill Type: -
 Claim Status: 19 - Processed as Primary, Forwarded to Additional Payor(s)
 Date of Service: 4/17/2012 - 4/17/2012 (1 day)

MRN: 000478694
 ICN Number: 1012118352600
 DRG: -
 DRG Amount: -

Service Level Information

Code	Qty	Submitted & Charge	Service Line	Adjustments	Date of Service	Covered Units & Amount
HC 32607	1	1,095.00	CO 45	807.48	4/17/12	1 230.02
			PR 2	57.50		
		1,095.00	864.98			230.02

Modifiers: GC, LT

Adjustments Summary

Claim Level Adjustments

<none>

Service Level Adjustments

45 807.48 Charges exceed your contracted/ legislated fee arrangement.
 2 57.50 Coinsurance Amount

Monetary Amounts Information

Total Deductibles: 0.00
 Co-Insurance Charges: 57.50
 Co-Payment Charges: 0.00
 Covered Charges: N/A
 Non-Covered Charges: N/A
 Denied Amount: 0.00
 Contractual Adjustments: 807.48
 Other Adjustments:

-640-

F/C:SM P/T:OPS

FARR, WILLIAM G

1106200081

03/04/11 03/10/11 2

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/05/15

316507 MEDICARE 1500 F/C MC

05/05/15

CODE	DESCRIPTION	AREA TOTAL ***	QTY

03/10	***960	~~NO-REF~~	
03/10	028315	P-INSERT TUNNELED CV CATH W/PORT	1 3,786.00
03/10	028780	US GUIDE, VASCULAR ACCESS	1 53.00
03/10	029115	P-INS/REM CV CATH W/FLUORO GUID	1 67.00
		AREA TOTAL ***	3,906.00

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835 Remittance Advice

Payer Name: PALMETTO GBA
 NPI: 1518998038
 ERA Date: 3/31/2011
 Check Number: 891103745

Patient Name: FARR, WILLIAM G
 HIC Number: 250690627A (HIO)
 Control Number: 1106200081
 Account: 1106200081

Facility: SPARTANBURG REGIONAL
 Filing Indicator: MB - Medicare Part B
 Bill Type: -
 Claim Status: 1 - Processed as Primary
 Date of Service: 3/10/2011 - 3/10/2011 (1 day)

MRN: 000478694
 ICN Number: 0211076039600
 DRG: -
 DRG Amount: -

Service Level Information

Code	Qty	Submitted & Charge	Service Line	Adjustments	Date of Service	Covered Units	Amount
HC 36561	1	3,786.00	CO 45	3,448.91	3/10/11	1	269.67
			PR 2	67.42			
Remarks: M16, N45							
HC 77001	1	67.00	CO 45	48.42	3/10/11	1	14.86
			PR 2	3.72			
Modifiers: 26							
HC 76937	1	53.00	CO 45	38.43	3/10/11	1	11.66
			PR 2	2.91			
Modifiers: 26							
		3,906.00	3,609.81				296.19

Adjustments Summary

Claim Level Adjustments

<none>

Service Level Adjustments

45 3,535.76 Charges exceed your contracted/ legislated
 fee arrangement.
 2 74.05 Coinsurance Amount

Monetary Amounts Information

Total Deductibles: 0.00
 Co-Insurance Charges: 74.05
 Co-Payment Charges: 0.00
 Covered Charges: N/A

Lung and Chest Medical Associates SP
 Patient Transaction Report
 Patient Name: FARR, WILLIAM G
 DOB: [REDACTED]; Record #: 65468; Acct #: 72213 PROB
 Date Range: 01/01/2010-12/31/2012

Provider	Bill#	Encounter	SDate	Code/CPT	Amount
CRUZ, RAUL B	107042	282809	10/14/2010	94060 BRONCHOSPASM	95.00
CRUZ, RAUL B	107042	282809	10/14/2010	99204 Office Visit, New Pt., Level 4	155.00
	107042	282809	10/14/2010	Patient	-40.00
	107042	282809	11/01/2010	MEDICARE (adjust)	-45.59
	107042	282809	11/01/2010	MEDICARE	-163.52
	107042	282809	11/01/2010	LESS THAN \$3.00 GENERAL WRITE OFF	-0.89
				Balance	0.00
CRUZ, RAUL B	108255	284018	11/01/2010	99215 Office Visit, Est Pt., Level 5	140.00
	108255	284018	11/17/2010	MEDICARE (adjust)	-9.55
	108255	284018	11/17/2010	MEDICARE	-104.36
	108255	284018	01/04/2011	Patient	-26.09
				Balance	0.00
CRUZ, RAUL B	108564	286250	10/19/2010	31628 BRONCHOSCOPY/LUNG BX, EACH	585.00
CRUZ, RAUL B	108564	286250	10/19/2010	31624 BAL BRONCHOSCOPE/LAVAGE	420.00
	108564	286250	11/23/2010	MEDICARE (adjust)	-816.00
	108564	286250	11/23/2010	MEDICARE	-151.20
	108564	286250	01/04/2011	Patient	-37.80
				Balance	0.00

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Lung and Chest Medical Associates SP

Patient Transaction Report

Patient Name: FARR, WILLIAM G

DOB: [REDACTED]; Record #: 65468; Acct #: 72213 PROB

Date Range: 01/01/2010-12/31/2012

Provider	Bill#	Encounter	SDate	Code/CPT	Amount
SMITH, WILSON P	109241	287968	11/11/2010	94060 BRONCHOSPASM INTERPRETATION	30.00
SMITH, WILSON P	109241	287968	11/11/2010	94720 Invalid in 2012 DLCO -INT ONLY Use 94729	30.00
SMITH, WILSON P	109241	287968	11/11/2010	94360 Invalid for 2012 MEAS. AIRFL. RESIST. INTERP	35.00
SMITH, WILSON P	109241	287968	11/11/2010	94260 Invalid in 2012 THORACIC GAS- INTERP use 94726 for LVS	20.00
	109241	287968	12/06/2010	MEDICARE (adjust)	-69.81
	109241	287968	12/06/2010	MEDICARE	-36.16
	109241	287968	01/04/2011	Patient	-9.03
				Balance	0.00
SMITH, WILSON P	112499	295642	12/03/2010	99232 HOSP SUB CARE-MOD CPLX	180.00
SMITH, WILSON P	112499	295642	12/03/2010	31622 DX BRONCHOSCOPE	420.00
SMITH, WILSON P	112499	295642	12/03/2010	31624 BAL BRONCHOSCOPE/LAVAGE	420.00
	112499	295642	02/07/2011	MEDICARE (adjust)	-598.28
	112499	295642	02/07/2011	MEDICARE	-337.37
	112499	295642	04/04/2011	Patient	-84.35
				Balance	0.00

Lung & Chest Medical Associates 003

Lung and Chest Medical Associates SP
 Patient Transaction Report
 Patient Name: FARR, WILLIAM G
 DOB: [REDACTED]; Record #: 65468; Acct #: 72213 PROB
 Date Range: 01/01/2010-12/31/2012

Provider	Bill#	Encounter	SDate	Code/CPT	Amount
MCCRAW, CHARLENE NP	112500	295643	12/08/2010	99232 HOSP SUB CARE-MOD CPLX	90.00
	112500	295643	02/16/2011	MEDICARE (adjust)	-32.14
	112500	295643	02/16/2011	MEDICARE	-46.29
	112500	295643	04/04/2011	Patient	-11.57
				Balance	0.00
CRUZ, RAUL B	115451	285513	01/04/2011	94010 SPIROMETRY	50.00
CRUZ, RAUL B	115451	285513	01/04/2011	99214 Office Visit, Est Pt., Level 4	110.00
	115451	285513	03/04/2011	MEDICARE (adjust)	-28.19
	115451	285513	03/04/2011	MEDICARE	-105.45
	115451	285513	04/04/2011	Patient	-26.36
				Balance	0.00
CRUZ, RAUL B	118415	293589	04/04/2011	94010 SPIROMETRY	50.00
CRUZ, RAUL B	118415	293589	04/04/2011	99214 Office Visit, Est Pt., Level 4	110.00
	118415	293589	04/20/2011	MEDICARE (adjust)	-28.19
	118415	293589	04/20/2011	MEDICARE	-105.45
	118415	293589	05/31/2011	Patient	-26.36
				Balance	0.00

Lung and Chest Medical Associates SP

Patient Transaction Report

Patient Name: FARR, WILLIAM G

DOB: [REDACTED]; Record #: 65468; Acct #: 72213 PROB

Date Range: 01/01/2010-12/31/2012

Provider	Bill#	Encounter	SDate	Code/CPT	Amount
CRUZ, RAUL B	122351	315371	05/31/2011	99214 Office Visit, Est Pt., Level 4	110.00
	122351	315371	05/31/2011	Patient	-19.64
	122351	315371	06/20/2011	MEDICARE (adjust)	-11.79
	122351	315371	06/20/2011	MEDICARE	-78.57
				Balance	0.00
CRUZ, RAUL B	126865	316282	08/17/2011	99214 Office Visit, Est Pt., Level 4	110.00
CRUZ, RAUL B	126865	316282	08/17/2011	85025 CBC; COMPLETE W/AUTO DIFF WBC	15.00
CRUZ, RAUL B	126865	316282	08/17/2011	36415 Venipuncture, routine	10.00
	126865	316282	09/02/2011	MEDICARE (adjust)	-23.36
	126865	316282	09/02/2011	MEDICARE	-92.00
	126865	316282	03/13/2012	Patient	-19.64
	126865	316282	12/20/2011	BAD DEBT W/O OFF/ COLLECT BEFORE BEING SEEN	-19.64
	126865	316282	03/13/2012	BAD DEBT COLLECTED	19.64
				Balance	0.00
CRUZ, RAUL B	127784	328432	08/22/2011	31629 BRONCHOSCOPY/NEEDLE BX, EACH	620.00
	127784	328432	09/26/2011	MEDICARE (adjust)	-423.39
	127784	328432	09/26/2011	MEDICARE	-157.29
	127784	328432	03/13/2012	Patient	-39.32

Lung and Chest Medical Associates SP

Patient Transaction Report

Patient Name: FARR, WILLIAM G

DOB: [REDACTED]; Record #: 65468; Acct #: 72213 PROB

Date Range: 01/01/2010-12/31/2012

Provider	Bill#	Encounter	SDate	Code/CPT	Amount
	127784	328432	12/20/2011	BAD DEBT W/O OFF/ COLLECT BEFORE BEING SEEN	-39.32
	127784	328432	03/13/2012	BAD DEBT COLLECTED	39.32
				Balance	0.00
CRUZ,RAUL B	128459	330083	09/01/2011	94060 BRONCHOSPASM INTERPRETATION	30.00
CRUZ,RAUL B	128459	330083	09/01/2011	94720 Invlaidd in 2012 DLCO -INT ONLY Use 94729	30.00
CRUZ,RAUL B	128459	330083	09/01/2011	94360 Invalid for 2012 MEAS. AIRFL. RESIST. INTERP	30.00
CRUZ,RAUL B	128459	330083	09/01/2011	94260 Invalid in 2012 THORACIC GAS- INTERP use 94726 for LVS	20.00
	128459	330083	09/30/2011	MEDICARE (adjust)	-66.06
	128459	330083	09/30/2011	MEDICARE	-35.16
	128459	330083	10/25/2011	AARP UNITEDHEALTHCARE	-8.78
				Balance	0.00
ONYEBUEKE,IKENNA F	136372	346600	12/29/2011	99223 INIT HOSP-HI CPLX	200.00
ONYEBUEKE,IKENNA F	136372	346600	12/29/2011	99233 HOSP SUB CARE-HI CPLX	145.00
ONYEBUEKE,IKENNA F	136372	346600	12/29/2011	99232 HOSP SUB CARE-MOD CPLX	90.00
	136372	346600	02/13/2012	MEDICARE (adjust)	-85.55
	136372	346600	02/13/2012	MEDICARE	-279.57

Lung and Chest Medical Associates SP

Patient Transaction Report

Patient Name: FARR, WILLIAM G

DOB: [REDACTED]; Record #: 65468; Acct #: 72213 PROB

Date Range: 01/01/2010-12/31/2012

Provider	Bill#	Encounter	SDate	Code/CPT	Amount
	136372	346600	02/28/2012	AARP UNITEDHEALTHCARE	-69.88
				Balance	0.00
CRUZ, RAUL B	140505	353020	03/13/2012	94010 SPIROMETRY	50.00
CRUZ, RAUL B	140505	353020	03/13/2012	99214 Office Visit, Est Pt., Level 4	110.00
CRUZ, RAUL B	140505	353020	03/13/2012	85025 CBC; COMPLETE W/AUTO DIFF WBC	15.00
CRUZ, RAUL B	140505	353020	03/13/2012	36415 Venipuncture, routine	10.00
	140505	353020	04/02/2012	MEDICARE (adjust)	-40.44
	140505	353020	04/02/2012	MEDICARE	-13.50
	140505	353020	04/09/2012	AARP UNITEDHEALTHCARE	-131.06
				Balance	0.00
CRUZ, RAUL B	141232	356151	03/19/2012	31628 BRONCHOSCOPY/LUNG BX, EACH	585.00
CRUZ, RAUL B	141232	356151	03/19/2012	31624 BAL BRONCHOSCOPE/LAVAGE	420.00
CRUZ, RAUL B	141232	356151	03/19/2012	31623 BRONCH W/ BRUSHING	420.00
	141232	356151	04/09/2012	MEDICARE (adjust)	-1,241.51
	141232	356151	04/09/2012	MEDICARE	-146.79
	141232	356151	04/24/2012	AARP UNITEDHEALTHCARE	-36.70
				Balance	0.00

Lung and Chest Medical Associates SP

Patient Transaction Report

Patient Name: FARR, WILLIAM G

DOB: [REDACTED]; Record #: 65468; Acct #: 72213 PROB

Date Range: 01/01/2010-12/31/2012

Provider	Bill#	Encounter	SDate	Code/CPT	Amount
CRUZ, RAUL B	141411	356407	03/23/2012	99214 Office Visit, Est Pt., Level 4	110.00
	141411	356407	04/11/2012	MEDICARE (adjust)	-12.00
	141411	356407	04/11/2012	MEDICARE	-78.40
	141411	356407	04/24/2012	AARP UNITEDHEALTHCARE	-19.60
				Balance	0.00
CRUZ, RAUL B	144371	362055	04/17/2012	99222 INIT HOSP-MOD CPLX	140.00
CRUZ, RAUL B	144371	362055	04/17/2012	99232 HOSP SUB CARE-MOD CPLX	270.00
	144371	362055	05/22/2012	MEDICARE (adjust)	-83.84
	144371	362055	05/22/2012	MEDICARE	-260.93
	144371	362055	05/31/2012	AARP UNITEDHEALTHCARE	-65.23
				Balance	0.00
CRUZ, RAUL B	145270	363902	04/24/2012	99222 INIT HOSP-MOD CPLX	140.00
CRUZ, RAUL B	145270	363902	04/24/2012	99232 HOSP SUB CARE-MOD CPLX	270.00
CRUZ, RAUL B	145270	363902	04/24/2012	99232 HOSP SUB CARE-MOD CPLX	90.00
CRUZ, RAUL B	145270	363902	04/24/2012	99232 HOSP SUB CARE-MOD CPLX	180.00
CRUZ, RAUL B	145270	363902	04/24/2012	99232 HOSP SUB CARE-MOD CPLX	90.00
CRUZ, RAUL B	145270	363902	04/24/2012	99232 HOSP SUB CARE-MOD CPLX	90.00
CRUZ, RAUL B	145270	363902	04/24/2012	31624 BAL BRONCHOSCOPE/LAVAGE	420.00
CRUZ, RAUL B	145270	363902	04/24/2012	31623 BRONCH W/ BRUSHING	420.00
CRUZ, RAUL B	145270	363902	04/24/2012	99232 HOSP SUB CARE-MOD CPLX	90.00

Lung and Chest Medical Associates SP

Patient Transaction Report

Patient Name: FARR, WILLIAM G

DOB: [REDACTED]; Record #: 65468; Acct #: 72213 PROB

Date Range: 01/01/2010-12/31/2012

Provider	Bill#	Encounter	SDate	Code/CPT	Amount
	145270	363902	06/04/2012	MEDICARE (adjust)	-922.69
	145270	363902	06/04/2012	MEDICARE	-693.87
	145270	363902	06/26/2012	AARP UNITEDHEALTHCARE	-173.44
				Balance	0.00
MENDOZA, RICO V. I	145271	363903	05/06/2012	99232 HOSP SUB CARE-MOD CPLX	90.00
	145271	363903	06/04/2012	MEDICARE (adjust)	-23.33
	145271	363903	06/04/2012	MEDICARE	-53.34
	145271	363903	06/15/2012	AARP UNITEDHEALTHCARE	-13.33
				Balance	0.00
SMITH, WILSON P	145902	365154	04/28/2012	99232 HOSP SUB CARE-MOD CPLX	180.00
	145902	365154	06/11/2012	MEDICARE (adjust)	-46.66
	145902	365154	06/11/2012	MEDICARE	-106.67
	145902	365154	06/26/2012	AARP UNITEDHEALTHCARE	-26.67
				Balance	0.00
CRUZ, RAUL B	145983	363816	05/25/2012	71020 CHEST X-RAY PAL	85.00
CRUZ, RAUL B	145983	363816	05/25/2012	99214 Office Visit, Est Pt., Level 4	110.00
	145983	363816	06/13/2012	MEDICARE (adjust)	-68.43
	145983	363816	06/13/2012	MEDICARE	-101.26
	145983	363816	06/26/2012	AARP UNITEDHEALTHCARE	-25.31
				Balance	0.00

Lung and Chest Medical Associates SP

Patient Transaction Report

Patient Name: FARR, WILLIAM G

DOB: [REDACTED]; Record #: 65468 ; Acct #: 72213 PROB

Date Range: 01/01/2010-12/31/2012

Lung & Chest Medical Associates 0010

Provider	Bill#	Encounter	SDate	Code/CPT	Amount
SMITH, WILSON P	147314	367520	04/26/2012	93010 EKG INTERPRETATION AND REPORT ONLY	12.00
	147314	367520	06/28/2012	MEDICARE (adjust)	-3.87
	147314	367520	06/28/2012	MEDICARE	-6.50
	147314	367520	07/12/2012	AARP UNITEDHEALTHCARE	-1.63
				Balance	0.00
SMITH, WILSON P	147759	368393	04/26/2012	93010 EKG INTERPRETATION AND REPORT ONLY	12.00
	147759	368393	07/12/2012	MEDICARE (adjust)	-3.87
	147759	368393	07/12/2012	MEDICARE	-6.50
	147759	368393	07/23/2012	AARP UNITEDHEALTHCARE	-1.63
				Balance	0.00
CLARK, J. DOUGLAS	148755	370411	06/10/2012	99223 INIT HOSP-HI CPLX	200.00
CLARK, J. DOUGLAS	148755	370411	06/10/2012	99233 HOSP SUB CARE-HI CPLX	145.00
	148755	370411	08/01/2012	MEDICARE (adjust)	-14.29
	148755	370411	08/01/2012	MEDICARE	-148.57
	148755	370411	08/16/2012	MEDICARE (adjust)	-49.43
	148755	370411	08/16/2012	MEDICARE	-76.46
	148755	370411	08/17/2012	AARP UNITEDHEALTHCARE	-37.14
	148755	370411	09/05/2012	AARP UNITEDHEALTHCARE	-19.11
				Balance	0.00

Lung and Chest Medical Associates SP

Patient Transaction Report

Patient Name: FARR, WILLIAM G

DOB: [REDACTED] ; Record #: 65468 ; Acct #: 72213 PROB

Date Range: 01/01/2010-12/31/2012

Lung & Chest Medical Associates 0011

Provider	Bill#	Encounter	SDate	Code/CPT	Amount
CRUZ, RAUL B	149635	372080	05/31/2012	99223 INIT HOSP-HI CPLX	200.00
CRUZ, RAUL B	149635	372080	05/31/2012	99232 HOSP SUB CARE-MOD CPLX	90.00
CRUZ, RAUL B	149635	372080	05/31/2012	99232 HOSP SUB CARE-MOD CPLX	180.00
	149635	372080	08/01/2012	MEDICARE (adjust)	-84.28
	149635	372080	08/01/2012	MEDICARE	-308.58
	149635	372080	08/22/2012	AARP UNITEDHEALTHCARE	-77.14
				Balance	0.00
CRUZ, RAUL B	151260	375276	08/10/2012	S9982 MEDICAL RECORDS COPYING FEE-PAGE	47.00
	151260	375276	08/10/2012	MEDICAL RECORDS PAYMENT	-47.00
				Balance	0.00
Total Charges					9,621.00
Total Payments					-4,787.57
Total Contractual Adjustments					-4,832.54
Total Insurance Withheld					0.00
Total Writeoff/ Adjustments					-0.89
Total Refunds					0.00
Unposted Payments					0.00
Total Balance					0.00

Patient Ledger Report

Filtered by:

- Date: from 1/1/2010 to 12/31/2012
(Filtered by Transaction Date)
- Patient: FARR, WILLIAM G
- Ledger: PHOA/SRMC

Grouped by:

Ledger

Department

PROC DATE	TRAN DATE	TYPE	DESCRIPTION	PROF CHG	TECH CHG	DEBIT	CREDIT	BALANCE

PHOA/SRMC

MGC HEM ONC Sptbg/ Palmetto Hem Onc

10/27/2009	07/11/2011	Adj	MOVE \$ CR	0.00	0.00	0.00	(17.53)	(17.53)
12/08/2009	04/25/2012	Adj	COLLECTION	0.00	0.00	0.00	(2.26)	(2.26)
12/08/2009	07/11/2011	Adj	MOVE \$ CR	0.00	0.00	0.00	(15.27)	(17.53)
12/22/2009	01/13/2010	Pay	Electronic	0.00	0.00	0.00	(3.00)	(3.00)
12/22/2009	01/13/2010	Adj	Cont Allwd	0.00	0.00	0.00	(7.00)	(10.00)
12/22/2009	01/13/2010	Pay	Electronic	0.00	0.00	0.00	(10.83)	(10.83)
12/22/2009	01/13/2010	Adj	Cont Allwd	0.00	0.00	0.00	(21.17)	(32.00)
01/05/2010	01/07/2010	Chg	36415 - LAB DRAW FEE	10.00	0.00	10.00	0.00	10.00
01/05/2010	01/22/2010	Pay	Electronic	0.00	0.00	0.00	(3.00)	7.00
01/05/2010	01/22/2010	Adj	Cont Allwd	0.00	0.00	0.00	(7.00)	0.00
01/05/2010	01/07/2010	Chg	85025 - CBC with Auto Diff	32.00	0.00	32.00	0.00	32.00
01/05/2010	01/22/2010	Pay	Electronic	0.00	0.00	0.00	(10.62)	21.38
01/05/2010	01/22/2010	Adj	Cont Allwd	0.00	0.00	0.00	(21.38)	0.00
01/05/2010	01/07/2010	Chg	99406 - SMOKING CESSATION	17.00	0.00	17.00	0.00	17.00
01/05/2010	04/25/2012	Adj	COLLECTION	0.00	0.00	0.00	(12.61)	4.39
01/05/2010	04/06/2011	Pay	Electronic	0.00	0.00	0.00	0.00	4.39
01/05/2010	01/15/2010	Adj	Deductible	0.00	0.00	12.53	0.00	16.92
01/05/2010	01/15/2010	Adj	Deductible	0.00	0.00	0.00	(12.53)	4.39
01/05/2010	01/15/2010	Pay	Electronic	0.00	0.00	0.00	0.00	4.39
01/05/2010	01/15/2010	Adj	Cont Allwd	0.00	0.00	0.00	(4.47)	(0.08)
01/05/2010	04/06/2011	Adj	Reassign	0.00	0.00	0.08	0.00	0.00
01/05/2010	04/06/2011	Adj	Reassign	0.00	0.00	0.00	(0.08)	(0.08)
01/05/2010	04/06/2011	Pay	Electronic	0.00	0.00	0.00	(0.34)	(0.42)
01/05/2010	04/06/2011	Adj	Cont Allwd	0.00	0.00	0.42	0.00	0.00
01/05/2010	01/07/2010	Chg	99213 - Follow-up Visit: 3	72.00	0.00	72.00	0.00	72.00
01/05/2010	02/18/2010	Adj	Reassign	0.00	0.00	12.22	0.00	84.22
01/05/2010	02/18/2010	Adj	Reassign	0.00	0.00	0.00	(12.22)	72.00
01/05/2010	02/18/2010	Pay	Electronic	0.00	0.00	0.00	(48.87)	23.13
01/05/2010	02/18/2010	Adj	Cont Allwd	0.00	0.00	0.00	(10.91)	12.22
01/05/2010	07/11/2011	Adj	MOVE \$ DEB	0.00	0.00	32.40	0.00	44.62
01/05/2010	04/06/2011	Pay	Electronic	0.00	0.00	0.00	0.00	44.62
01/05/2010	04/06/2011	Pay	Electronic	0.00	0.00	0.00	0.00	44.62
01/05/2010	01/05/2010	Pay	Cash	0.00	0.00	0.00	(45.00)	(0.38)
01/05/2010	05/12/2011	Adj	Reassign	0.00	0.00	0.38	0.00	0.00
01/05/2010	05/12/2011	Adj	Reassign	0.00	0.00	0.00	(0.38)	(0.38)
01/05/2010	05/12/2011	Pay	Electronic	0.00	0.00	0.00	(50.39)	(50.77)
01/05/2010	05/12/2011	Adj	Cont Allwd	0.00	0.00	1.90	0.00	(48.87)
01/05/2010	05/12/2011	Pay	Electronic	0.00	0.00	48.87	0.00	0.00
07/20/2010	07/26/2010	Chg	36415 - LAB DRAW FEE	22.50	0.00	22.50	0.00	22.50

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PROC DATE	TRAN DATE	TYPE	DESCRIPTION	PROF CHG	TECH CHG	DEBIT	CREDIT	BALANCE
MGC HEM ONC Spbtg/ Palmetto Hem Onc - continued								
07/20/2010	08/10/2010	Pay	Electronic	0.00	0.00	0.00	(3.00)	19.50
07/20/2010	08/10/2010	Adj	Cont Allwd	0.00	0.00	0.00	(19.50)	0.00
07/20/2010	07/26/2010	Chg	85025 - CBC with Auto Diff	32.00	0.00	32.00	0.00	32.00
07/20/2010	08/10/2010	Pay	Electronic	0.00	0.00	0.00	(10.62)	21.38
07/20/2010	08/10/2010	Adj	Cont Allwd	0.00	0.00	0.00	(21.38)	0.00
07/20/2010	07/26/2010	Chg	99214 - Follow-up Visit: 4	105.00	0.00	105.00	0.00	105.00
07/20/2010	04/25/2012	Adj	COLLECTION	0.00	0.00	0.00	(4.89)	100.11
07/20/2010	08/10/2010	Adj	Reassign	0.00	0.00	19.31	0.00	119.42
07/20/2010	08/10/2010	Adj	Reassign	0.00	0.00	0.00	(19.31)	100.11
07/20/2010	08/10/2010	Pay	Electronic	0.00	0.00	0.00	(77.25)	22.86
07/20/2010	08/10/2010	Adj	Cont Allwd	0.00	0.00	0.00	(8.44)	14.42
07/20/2010	07/20/2010	Pay	Cash	0.00	0.00	0.00	(14.42)	0.00
08/17/2010	08/18/2010	Chg	36415 - LAB DRAW FEE	22.50	0.00	22.50	0.00	22.50
08/17/2010	09/02/2010	Pay	Electronic	0.00	0.00	0.00	(3.00)	19.50
08/17/2010	09/02/2010	Adj	Cont Allwd	0.00	0.00	0.00	(19.50)	0.00
08/17/2010	08/18/2010	Chg	85025 - CBC with Auto Diff	32.00	0.00	32.00	0.00	32.00
08/17/2010	09/02/2010	Pay	Electronic	0.00	0.00	0.00	(10.62)	21.38
08/17/2010	09/02/2010	Adj	Cont Allwd	0.00	0.00	0.00	(21.38)	0.00
09/14/2010	09/15/2010	Chg	36415 - LAB DRAW FEE	22.50	0.00	22.50	0.00	22.50
09/14/2010	10/05/2010	Pay	Electronic	0.00	0.00	0.00	(3.00)	19.50
09/14/2010	10/05/2010	Adj	Cont Allwd	0.00	0.00	0.00	(19.50)	0.00
09/14/2010	09/15/2010	Chg	85025 - CBC with Auto Diff	32.00	0.00	32.00	0.00	32.00
09/14/2010	10/05/2010	Pay	Electronic	0.00	0.00	0.00	(10.62)	21.38
09/14/2010	10/05/2010	Adj	Cont Allwd	0.00	0.00	0.00	(21.38)	0.00
11/02/2010	11/04/2010	Chg	85025 - CBC with Auto Diff	42.00	0.00	42.00	0.00	42.00
11/02/2010	11/24/2010	Pay	Electronic	0.00	0.00	0.00	(10.62)	31.38
11/02/2010	11/24/2010	Adj	Cont Allwd	0.00	0.00	0.00	(31.38)	0.00
11/02/2010	11/04/2010	Chg	36415 - LAB DRAW FEE	24.00	0.00	24.00	0.00	24.00
11/02/2010	11/24/2010	Pay	Electronic	0.00	0.00	0.00	(3.00)	21.00
11/02/2010	11/24/2010	Adj	Cont Allwd	0.00	0.00	0.00	(21.00)	0.00
11/02/2010	11/04/2010	Chg	99215 - Follow-up Visit: 5	273.00	0.00	273.00	0.00	273.00
11/02/2010	04/25/2012	Adj	COLLECTION	0.00	0.00	0.00	(26.09)	246.91
11/02/2010	11/24/2010	Adj	Reassign	0.00	0.00	26.09	0.00	273.00
11/02/2010	11/24/2010	Adj	Reassign	0.00	0.00	0.00	(26.09)	246.91
11/02/2010	11/24/2010	Pay	Electronic	0.00	0.00	0.00	(104.36)	142.55
11/02/2010	11/24/2010	Adj	Cont Allwd	0.00	0.00	0.00	(142.55)	0.00
11/08/2010	11/09/2010	Chg	85025 - CBC with Auto Diff	42.00	0.00	42.00	0.00	42.00
11/08/2010	11/30/2010	Pay	Electronic	0.00	0.00	0.00	(10.62)	31.38
11/08/2010	11/30/2010	Adj	Cont Allwd	0.00	0.00	0.00	(31.38)	0.00
11/08/2010	11/09/2010	Chg	80053 - CMP	60.00	0.00	60.00	0.00	60.00
11/08/2010	11/30/2010	Pay	Electronic	0.00	0.00	0.00	(13.69)	46.31
11/08/2010	11/30/2010	Adj	Cont Allwd	0.00	0.00	0.00	(46.31)	0.00
11/08/2010	11/09/2010	Chg	36415 - LAB DRAW FEE	24.00	0.00	24.00	0.00	24.00
11/08/2010	11/30/2010	Pay	Electronic	0.00	0.00	0.00	(3.00)	21.00

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MGC HEM ONC Splbg/ Palmetto Hem Onc - continued								
11/08/2010	11/30/2010	Adj	Cont Allwd	0.00	0.00	0.00	(21.00)	0.00
11/08/2010	11/09/2010	Chg	99205 - New Patient Visit: 5	390.00	0.00	390.00	0.00	390.00
11/08/2010	04/25/2012	Adj	COLLECTION	0.00	0.00	0.00	(37.47)	352.53
11/08/2010	11/30/2010	Adj	Reassign	0.00	0.00	37.47	0.00	390.00
11/08/2010	11/30/2010	Adj	Reassign	0.00	0.00	0.00	(37.47)	352.53
11/08/2010	11/30/2010	Pay	Electronic	0.00	0.00	0.00	(149.89)	202.64
11/08/2010	11/30/2010	Adj	Cont Allwd	0.00	0.00	0.00	(202.64)	0.00
01/17/2011	01/19/2011	Chg	99215 - Follow-up Visit: 5	284.00	0.00	284.00	0.00	284.00
01/17/2011	04/25/2012	Adj	COLLECTION	0.00	0.00	0.00	(132.20)	151.80
01/17/2011	01/31/2011	Adj	Deductible	0.00	0.00	132.20	0.00	284.00
01/17/2011	01/31/2011	Adj	Deductible	0.00	0.00	0.00	(132.20)	151.80
01/17/2011	01/31/2011	Pay	Electronic	0.00	0.00	0.00	0.00	151.80
01/17/2011	01/31/2011	Adj	Cont Allwd	0.00	0.00	0.00	(151.80)	0.00
01/17/2011	01/19/2011	Chg	3300F - Measure #194	0.01	0.00	0.01	0.00	0.01
01/17/2011	08/07/2012	Adj	PQRI ADJ	0.00	0.00	0.00	(0.01)	0.00
02/22/2011	02/24/2011	Chg	85025 - CBC with Auto Diff	42.00	0.00	42.00	0.00	42.00
02/22/2011	03/11/2011	Pay	Electronic	0.00	0.00	0.00	(10.43)	31.57
02/22/2011	03/11/2011	Adj	Cont Allwd	0.00	0.00	0.00	(31.57)	0.00
02/22/2011	02/24/2011	Chg	80053 - CMP	60.00	0.00	60.00	0.00	60.00
02/22/2011	03/11/2011	Pay	Electronic	0.00	0.00	0.00	(13.45)	46.55
02/22/2011	03/11/2011	Adj	Cont Allwd	0.00	0.00	0.00	(46.55)	0.00
02/22/2011	02/24/2011	Chg	36415 - LAB DRAW FEE	24.00	0.00	24.00	0.00	24.00
02/22/2011	03/11/2011	Pay	Electronic	0.00	0.00	0.00	(3.00)	21.00
02/22/2011	03/11/2011	Adj	Cont Allwd	0.00	0.00	0.00	(21.00)	0.00
02/22/2011	02/24/2011	Chg	99215 - Follow-up Visit: 5	284.00	0.00	284.00	0.00	284.00
02/22/2011	04/25/2012	Adj	COLLECTION	0.00	0.00	0.00	(26.44)	257.56
02/22/2011	03/11/2011	Adj	Reassign	0.00	0.00	26.44	0.00	284.00
02/22/2011	03/11/2011	Adj	Reassign	0.00	0.00	0.00	(26.44)	257.56
02/22/2011	03/11/2011	Pay	Electronic	0.00	0.00	0.00	(105.76)	151.80
02/22/2011	03/11/2011	Adj	Cont Allwd	0.00	0.00	0.00	(151.80)	0.00
02/22/2011	02/25/2011	Chg	3300F - Measure #194	0.01	0.00	0.01	0.00	0.01
02/22/2011	04/25/2012	Adj	WOFF DEB	0.00	0.00	0.00	(0.01)	0.00
02/22/2011	03/14/2011	Adj	Reassign	0.00	0.00	0.01	0.00	0.01
02/22/2011	03/14/2011	Adj	Reassign	0.00	0.00	0.00	(0.01)	0.00
02/22/2011	03/14/2011	Pay	Electronic	0.00	0.00	0.00	0.00	0.00
02/22/2011	02/25/2011	Chg	96372 - INJ SQ OR IM	25.00	0.00	25.00	0.00	25.00
02/22/2011	04/25/2012	Adj	COLLECTION	0.00	0.00	0.00	(25.00)	0.00
02/22/2011	03/14/2011	Adj	Reassign	0.00	0.00	25.00	0.00	25.00
02/22/2011	03/14/2011	Adj	Reassign	0.00	0.00	0.00	(25.00)	0.00
02/22/2011	03/14/2011	Pay	Electronic	0.00	0.00	0.00	0.00	0.00
02/22/2011	02/25/2011	Chg	J3420 - Cyanocobalamin	30.51	1.00	31.51	0.00	31.51
02/22/2011	04/25/2012	Adj	COLLECTION	0.00	0.00	0.00	(0.05)	31.46
02/22/2011	03/14/2011	Adj	Reassign	0.00	0.00	0.05	0.00	31.51
02/22/2011	03/14/2011	Adj	Reassign	0.00	0.00	0.00	(0.05)	31.46
02/22/2011	03/14/2011	Pay	Electronic	0.00	0.00	0.00	(0.22)	31.24
02/22/2011	03/14/2011	Adj	Cont Allwd	0.00	0.00	0.00	(31.24)	0.00
03/21/2011	03/23/2011	Chg	85025 - CBC with Auto Diff	42.00	0.00	42.00	0.00	42.00

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MGC HEM ONC Sptbg/ Palmetto Hem Onc - continued								
03/21/2011	04/11/2011	Pay	Electronic	0.00	0.00	0.00	(10.43)	31.57
03/21/2011	04/11/2011	Adj	Cont Allwd	0.00	0.00	0.00	(31.57)	0.00
03/21/2011	03/23/2011	Chg	80053 - CMP	60.00	0.00	60.00	0.00	60.00
03/21/2011	04/11/2011	Pay	Electronic	0.00	0.00	0.00	(13.45)	46.55
03/21/2011	04/11/2011	Adj	Cont Allwd	0.00	0.00	0.00	(46.55)	0.00
03/21/2011	03/23/2011	Chg	36415 - LAB DRAW FEE	24.00	0.00	24.00	0.00	24.00
03/21/2011	04/11/2011	Pay	Electronic	0.00	0.00	0.00	(3.00)	21.00
03/21/2011	04/11/2011	Adj	Cont Allwd	0.00	0.00	0.00	(21.00)	0.00
03/21/2011	03/23/2011	Chg	99214 - Follow-up Visit: 4	211.00	0.00	211.00	0.00	211.00
03/21/2011	04/11/2011	Adj	Reassign	0.00	0.00	19.64	0.00	230.64
03/21/2011	04/11/2011	Adj	Reassign	0.00	0.00	0.00	(19.64)	211.00
03/21/2011	04/11/2011	Pay	Electronic	0.00	0.00	0.00	(78.57)	132.43
03/21/2011	04/11/2011	Adj	Cont Allwd	0.00	0.00	0.00	(112.79)	19.64
03/21/2011	04/25/2012	Adj	COLLECTION	0.00	0.00	0.00	(19.64)	0.00
04/11/2011	04/13/2011	Chg	85025 - CBC with Auto Diff	44.00	0.00	44.00	0.00	44.00
04/11/2011	04/29/2011	Pay	Electronic	0.00	0.00	0.00	(10.43)	33.57
04/11/2011	04/29/2011	Adj	Cont Allwd	0.00	0.00	0.00	(33.57)	0.00
04/11/2011	04/13/2011	Chg	80053 - CMP	63.00	0.00	63.00	0.00	63.00
04/11/2011	04/29/2011	Pay	Electronic	0.00	0.00	0.00	(13.45)	49.55
04/11/2011	04/29/2011	Adj	Cont Allwd	0.00	0.00	0.00	(49.55)	0.00
04/11/2011	04/13/2011	Chg	36415 - LAB DRAW FEE	24.00	0.00	24.00	0.00	24.00
04/11/2011	04/29/2011	Pay	Electronic	0.00	0.00	0.00	(3.00)	21.00
04/11/2011	04/29/2011	Adj	Cont Allwd	0.00	0.00	0.00	(21.00)	0.00
04/11/2011	04/13/2011	Chg	G8427 - Measure 130	0.00	0.00	0.00	0.00	0.00
04/11/2011	04/29/2011	Pay	Electronic	0.00	0.00	0.00	0.00	0.00
04/11/2011	04/13/2011	Chg	3300F - Measure #194	0.00	0.00	0.00	0.00	0.00
04/11/2011	04/29/2011	Pay	Electronic	0.00	0.00	0.00	0.00	0.00
04/11/2011	04/13/2011	Chg	99215 - Follow-up Visit: 5	284.00	0.00	284.00	0.00	284.00
04/11/2011	04/29/2011	Adj	Reassign	0.00	0.00	284.00	0.00	568.00
04/11/2011	04/29/2011	Adj	Reassign	0.00	0.00	0.00	(284.00)	284.00
04/11/2011	04/29/2011	Pay	Electronic	0.00	0.00	0.00	0.00	284.00
04/11/2011	03/27/2012	Adj	Reassign	0.00	0.00	0.00	(284.00)	0.00
04/11/2011	03/27/2012	Adj	Reassign	0.00	0.00	284.00	0.00	284.00
04/11/2011	03/27/2012	Adj	TIME	0.00	0.00	0.00	(284.00)	0.00
04/11/2011	04/13/2011	Chg	99406 - SMOKING CESSATION	31.00	0.00	31.00	0.00	31.00
04/11/2011	04/29/2011	Adj	Reassign	0.00	0.00	2.63	0.00	33.63
04/11/2011	04/29/2011	Adj	Reassign	0.00	0.00	0.00	(2.63)	31.00
04/11/2011	04/29/2011	Pay	Electronic	0.00	0.00	0.00	(10.54)	20.46
04/11/2011	04/29/2011	Adj	Cont Allwd	0.00	0.00	0.00	(17.83)	2.63
04/11/2011	04/25/2012	Adj	COLLECTION	0.00	0.00	0.00	(2.63)	0.00
05/10/2011	05/12/2011	Chg	85025 - CBC with Auto Diff	44.00	0.00	44.00	0.00	44.00
05/10/2011	05/27/2011	Pay	Electronic	0.00	0.00	0.00	(10.43)	33.57
05/10/2011	05/27/2011	Adj	Cont Allwd	0.00	0.00	0.00	(33.57)	0.00
05/10/2011	05/12/2011	Chg	80053 - CMP	63.00	0.00	63.00	0.00	63.00
05/10/2011	05/27/2011	Pay	Electronic	0.00	0.00	0.00	(13.45)	49.55
05/10/2011	05/27/2011	Adj	Cont Allwd	0.00	0.00	0.00	(49.55)	0.00

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PROC DATE	TRAN DATE	TYPE	DESCRIPTION	PROF CHG	TECH CHG	DEBIT	CREDIT	BALANCE
MGC HEM ONC Spibg/ Palmetto Hem Onc - continued								
05/10/2011	05/12/2011	Chg	36415 - LAB DRAW FEE	24.00	0.00	24.00	0.00	24.00
05/10/2011	05/27/2011	Pay	Electronic	0.00	0.00	0.00	(3.00)	21.00
05/10/2011	05/27/2011	Adj	Cont Allwd	0.00	0.00	0.00	(21.00)	0.00
05/10/2011	05/12/2011	Chg	99214 - Follow-up Visit: 4	211.00	0.00	211.00	0.00	211.00
05/10/2011	05/27/2011	Adj	Reassign	0.00	0.00	19.64	0.00	230.64
05/10/2011	05/27/2011	Adj	Reassign	0.00	0.00	0.00	(19.64)	211.00
05/10/2011	05/27/2011	Pay	Electronic	0.00	0.00	0.00	(78.57)	132.43
05/10/2011	05/27/2011	Adj	Cont Allwd	0.00	0.00	0.00	(112.79)	19.64
05/10/2011	04/25/2012	Adj	COLLECTION	0.00	0.00	0.00	(19.64)	0.00
05/10/2011	05/12/2011	Chg	G8427 - Measure 130	0.00	0.00	0.00	0.00	0.00
05/10/2011	05/27/2011	Pay	Electronic	0.00	0.00	0.00	0.00	0.00
05/10/2011	05/12/2011	Chg	3300F - Measure #194	0.00	0.00	0.00	0.00	0.00
05/10/2011	05/27/2011	Pay	Electronic	0.00	0.00	0.00	0.00	0.00
08/10/2011	08/11/2011	Chg	85025 - CBC with Auto Diff	44.00	0.00	44.00	0.00	44.00
08/10/2011	08/26/2011	Pay	Electronic	0.00	0.00	0.00	(10.43)	33.57
08/10/2011	08/26/2011	Adj	Cont Allwd	0.00	0.00	0.00	(33.57)	0.00
08/10/2011	08/11/2011	Chg	80053 - CMP	63.00	0.00	63.00	0.00	63.00
08/10/2011	08/26/2011	Pay	Electronic	0.00	0.00	0.00	(13.45)	49.55
08/10/2011	08/26/2011	Adj	Cont Allwd	0.00	0.00	0.00	(49.55)	0.00
08/10/2011	08/11/2011	Chg	36415 - LAB DRAW FEE	24.00	0.00	24.00	0.00	24.00
08/10/2011	08/26/2011	Pay	Electronic	0.00	0.00	0.00	(3.00)	21.00
08/10/2011	08/26/2011	Adj	Cont Allwd	0.00	0.00	0.00	(21.00)	0.00
08/10/2011	08/11/2011	Chg	99214 - Follow-up Visit: 4	211.00	0.00	211.00	0.00	211.00
08/10/2011	04/25/2012	Adj	COLLECTION	0.00	0.00	0.00	(19.64)	191.36
08/10/2011	08/26/2011	Adj	Reassign	0.00	0.00	19.64	0.00	211.00
08/10/2011	08/26/2011	Adj	Reassign	0.00	0.00	0.00	(19.64)	191.36
08/10/2011	08/26/2011	Pay	Electronic	0.00	0.00	0.00	(78.57)	112.79
08/10/2011	08/26/2011	Adj	Cont Allwd	0.00	0.00	0.00	(112.79)	0.00
08/10/2011	08/11/2011	Chg	G8553 - E-Prescribing	0.00	0.00	0.00	0.00	0.00
08/10/2011	08/26/2011	Pay	Electronic	0.00	0.00	0.00	0.00	0.00
08/10/2011	08/11/2011	Chg	3300F - Measure #194	0.00	0.00	0.00	0.00	0.00
08/10/2011	08/26/2011	Pay	Electronic	0.00	0.00	0.00	0.00	0.00
08/10/2011	08/11/2011	Chg	G8427 - Measure 130	0.00	0.00	0.00	0.00	0.00
08/10/2011	08/26/2011	Pay	Electronic	0.00	0.00	0.00	0.00	0.00
08/30/2011	09/01/2011	Chg	99215 - Follow-up Visit: 5	284.00	0.00	284.00	0.00	284.00
08/30/2011	10/17/2011	Pay	Electronic	0.00	0.00	0.00	(26.44)	257.56
08/30/2011	09/16/2011	Adj	Reassign	0.00	0.00	26.44	0.00	284.00
08/30/2011	09/16/2011	Adj	Reassign	0.00	0.00	0.00	(26.44)	257.56
08/30/2011	09/16/2011	Pay	Electronic	0.00	0.00	0.00	(105.76)	151.80
09/30/2011	09/16/2011	Adj	Cont Allwd	0.00	0.00	0.00	(151.80)	0.00
09/08/2011	09/13/2011	Chg	85025 - CBC with Auto Diff	44.00	0.00	44.00	0.00	44.00
09/08/2011	09/28/2011	Pay	Electronic	0.00	0.00	0.00	(10.43)	33.57
09/08/2011	09/28/2011	Adj	Cont Allwd	0.00	0.00	0.00	(33.57)	0.00
09/08/2011	09/13/2011	Chg	80053 - CMP	63.00	0.00	63.00	0.00	63.00
09/08/2011	09/28/2011	Pay	Electronic	0.00	0.00	0.00	(13.45)	49.55
09/08/2011	09/28/2011	Adj	Cont Allwd	0.00	0.00	0.00	(49.55)	0.00

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PROC DATE	TRAN DATE	TYPE	DESCRIPTION	PROF CHG	TECH CHG	DEBIT	CREDIT	BALANCE
MGC HEM ONC Sptbg/ Palmetto Hem Onc - continued								
09/08/2011	09/13/2011	Chg	36415 - LAB DRAW FEE	24.00	0.00	24.00	0.00	24.00
09/08/2011	09/28/2011	Pay	Electronic	0.00	0.00	0.00	(3.00)	21.00
09/08/2011	09/28/2011	Adj	Cont Allwd	0.00	0.00	0.00	(21.00)	0.00
09/08/2011	09/13/2011	Chg	99213 - Follow-up Visit: 3	140.00	0.00	140.00	0.00	140.00
09/08/2011	10/28/2011	Pay	Electronic	0.00	0.00	0.00	(13.23)	126.77
09/08/2011	09/28/2011	Adj	Reassign	0.00	0.00	13.23	0.00	140.00
09/08/2011	09/28/2011	Adj	Reassign	0.00	0.00	0.00	(13.23)	126.77
09/08/2011	09/28/2011	Pay	Electronic	0.00	0.00	0.00	(52.90)	73.87
09/08/2011	09/28/2011	Adj	Cont Allwd	0.00	0.00	0.00	(73.87)	0.00
09/08/2011	09/13/2011	Chg	G8427 - Measure 130	0.00	0.00	0.00	0.00	0.00
09/08/2011	09/28/2011	Pay	Electronic	0.00	0.00	0.00	0.00	0.00
09/19/2011	09/21/2011	Chg	85025 - CBC with Auto Diff	44.00	0.00	44.00	0.00	44.00
09/19/2011	10/07/2011	Pay	Electronic	0.00	0.00	0.00	(10.43)	33.57
09/19/2011	10/07/2011	Adj	Cont Allwd	0.00	0.00	0.00	(33.57)	0.00
09/19/2011	09/21/2011	Chg	80053 - CMP	63.00	0.00	63.00	0.00	63.00
09/19/2011	10/07/2011	Pay	Electronic	0.00	0.00	0.00	(13.45)	49.55
09/19/2011	10/07/2011	Adj	Cont Allwd	0.00	0.00	0.00	(49.55)	0.00
09/19/2011	09/21/2011	Chg	36415 - LAB DRAW FEE	24.00	0.00	24.00	0.00	24.00
09/19/2011	10/07/2011	Pay	Electronic	0.00	0.00	0.00	(3.00)	21.00
09/19/2011	10/07/2011	Adj	Cont Allwd	0.00	0.00	0.00	(21.00)	0.00
09/27/2011	09/30/2011	Chg	85025 - CBC with Auto Diff	44.00	0.00	44.00	0.00	44.00
09/27/2011	10/17/2011	Pay	Electronic	0.00	0.00	0.00	(10.43)	33.57
09/27/2011	10/17/2011	Adj	Cont Allwd	0.00	0.00	0.00	(33.57)	0.00
09/27/2011	09/30/2011	Chg	36415 - LAB DRAW FEE	24.00	0.00	24.00	0.00	24.00
09/27/2011	10/17/2011	Pay	Electronic	0.00	0.00	0.00	(3.00)	21.00
09/27/2011	10/17/2011	Adj	Cont Allwd	0.00	0.00	0.00	(21.00)	0.00
09/28/2011	09/30/2011	Chg	G8427 - Measure 130	0.00	0.00	0.00	0.00	0.00
09/28/2011	10/17/2011	Pay	Electronic	0.00	0.00	0.00	0.00	0.00
09/28/2011	09/30/2011	Chg	99214 - Follow-up Visit: 4	211.00	0.00	211.00	0.00	211.00
09/28/2011	10/17/2011	Adj	Reassign	0.00	0.00	19.64	0.00	230.64
09/28/2011	10/17/2011	Adj	Reassign	0.00	0.00	0.00	(19.64)	211.00
09/28/2011	10/17/2011	Pay	Electronic	0.00	0.00	0.00	(78.57)	132.43
09/28/2011	10/17/2011	Adj	Cont Allwd	0.00	0.00	0.00	(112.79)	19.64
09/28/2011	10/30/2011	Pay	Electronic	0.00	0.00	0.00	(19.64)	0.00
10/04/2011	10/06/2011	Chg	85025 - CBC with Auto Diff	45.00	0.00	45.00	0.00	45.00
10/04/2011	10/21/2011	Pay	Electronic	0.00	0.00	0.00	(10.43)	34.57
10/04/2011	10/21/2011	Adj	Cont Allwd	0.00	0.00	0.00	(34.57)	0.00
10/04/2011	10/06/2011	Chg	36415 - LAB DRAW FEE	27.00	0.00	27.00	0.00	27.00
10/04/2011	10/21/2011	Pay	Electronic	0.00	0.00	0.00	(3.00)	24.00
10/04/2011	10/21/2011	Adj	Cont Allwd	0.00	0.00	0.00	(24.00)	0.00
10/11/2011	10/13/2011	Chg	85025 - CBC with Auto Diff	45.00	0.00	45.00	0.00	45.00
10/11/2011	10/28/2011	Pay	Electronic	0.00	0.00	0.00	(10.43)	34.57
10/11/2011	10/28/2011	Adj	Cont Allwd	0.00	0.00	0.00	(34.57)	0.00
10/11/2011	10/13/2011	Chg	36415 - LAB DRAW FEE	27.00	0.00	27.00	0.00	27.00

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PROC DATE	TRAN DATE	TYPE	DESCRIPTION	PROF CHG	TECH CHG	DEBIT	CREDIT	BALANCE
MGC HEM ONC Sptbg/ Palmetto Hem Onc - continued								
10/11/2011	10/28/2011	Pay	Electronic	0.00	0.00	0.00	(3.00)	24.00
10/11/2011	10/28/2011	Adj	Cont Allwd	0.00	0.00	0.00	(24.00)	0.00
10/18/2011	10/20/2011	Chg	85025 - CBC with Auto Diff	45.00	0.00	45.00	0.00	45.00
10/18/2011	11/04/2011	Adj	Cont Allwd	0.00	0.00	0.00	(34.57)	10.43
10/18/2011	11/04/2011	Pay	Electronic	0.00	0.00	0.00	(10.43)	0.00
10/18/2011	10/20/2011	Chg	80053 - CMP	65.00	0.00	65.00	0.00	65.00
10/18/2011	11/04/2011	Adj	Cont Allwd	0.00	0.00	0.00	(51.55)	13.45
10/18/2011	11/04/2011	Pay	Electronic	0.00	0.00	0.00	(13.45)	0.00
10/18/2011	10/20/2011	Chg	36415 - LAB DRAW FEE	27.00	0.00	27.00	0.00	27.00
10/18/2011	11/04/2011	Adj	Cont Allwd	0.00	0.00	0.00	(24.00)	3.00
10/18/2011	11/04/2011	Pay	Electronic	0.00	0.00	0.00	(3.00)	0.00
10/18/2011	10/26/2011	Chg	99222 - Init Hosp Admit 2	291.00	0.00	291.00	0.00	291.00
10/18/2011	11/10/2011	Adj	Cont Allwd	0.00	0.00	0.00	(164.43)	126.57
10/18/2011	11/10/2011	Pay	Electronic	0.00	0.00	0.00	(101.26)	25.31
10/18/2011	11/10/2011	Adj	Reassign	0.00	0.00	0.00	(25.31)	0.00
10/18/2011	11/10/2011	Adj	Reassign	0.00	0.00	25.31	0.00	25.31
10/18/2011	11/30/2011	Pay	Electronic	0.00	0.00	0.00	(25.31)	0.00
10/20/2011	10/26/2011	Chg	99232 - Subq Inpt level 2	159.00	0.00	159.00	0.00	159.00
10/20/2011	11/10/2011	Adj	Cont Allwd	0.00	0.00	0.00	(92.03)	66.97
10/20/2011	11/10/2011	Pay	Electronic	0.00	0.00	0.00	(53.58)	13.39
10/20/2011	11/10/2011	Adj	Reassign	0.00	0.00	0.00	(13.39)	0.00
10/20/2011	11/10/2011	Adj	Reassign	0.00	0.00	13.39	0.00	13.39
10/20/2011	11/30/2011	Pay	Electronic	0.00	0.00	0.00	(13.39)	0.00
10/21/2011	10/26/2011	Chg	99232 - Subq Inpt level 2	159.00	0.00	159.00	0.00	159.00
10/21/2011	11/10/2011	Adj	Cont Allwd	0.00	0.00	0.00	(92.03)	66.97
10/21/2011	11/10/2011	Pay	Electronic	0.00	0.00	0.00	(53.58)	13.39
10/21/2011	11/10/2011	Adj	Reassign	0.00	0.00	0.00	(13.39)	0.00
10/21/2011	11/10/2011	Adj	Reassign	0.00	0.00	13.39	0.00	13.39
10/21/2011	11/30/2011	Pay	Electronic	0.00	0.00	0.00	(13.39)	0.00
10/22/2011	10/26/2011	Chg	99232 - Subq Inpt level 2	159.00	0.00	159.00	0.00	159.00
10/22/2011	11/10/2011	Adj	Cont Allwd	0.00	0.00	0.00	(92.03)	66.97
10/22/2011	11/10/2011	Pay	Electronic	0.00	0.00	0.00	(53.58)	13.39
10/22/2011	11/10/2011	Adj	Reassign	0.00	0.00	0.00	(13.39)	0.00
10/22/2011	11/10/2011	Adj	Reassign	0.00	0.00	13.39	0.00	13.39
10/22/2011	11/30/2011	Pay	Electronic	0.00	0.00	0.00	(13.39)	0.00
10/23/2011	10/26/2011	Chg	99232 - Subq Inpt level 2	159.00	0.00	159.00	0.00	159.00
10/23/2011	11/10/2011	Adj	Cont Allwd	0.00	0.00	0.00	(92.03)	66.97
10/23/2011	11/10/2011	Pay	Electronic	0.00	0.00	0.00	(53.58)	13.39
10/23/2011	11/10/2011	Adj	Reassign	0.00	0.00	0.00	(13.39)	0.00
10/23/2011	11/10/2011	Adj	Reassign	0.00	0.00	13.39	0.00	13.39
10/23/2011	11/30/2011	Pay	Electronic	0.00	0.00	0.00	(13.39)	0.00
10/24/2011	10/31/2011	Chg	99239 - Hosp Disch >30min	229.00	0.00	229.00	0.00	229.00
10/24/2011	11/15/2011	Adj	Cont Allwd	0.00	0.00	0.00	(131.27)	97.73
10/24/2011	11/15/2011	Pay	Electronic	0.00	0.00	0.00	(78.18)	19.55
10/24/2011	11/15/2011	Adj	Reassign	0.00	0.00	0.00	(19.55)	0.00
10/24/2011	11/15/2011	Adj	Reassign	0.00	0.00	19.55	0.00	19.55
10/24/2011	11/30/2011	Pay	Electronic	0.00	0.00	0.00	(19.55)	0.00

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MGC HEM ONC Sp/bq/ Palmetto Hem Onc - continued								
11/02/2011	11/07/2011	Chg	36415 - LAB DRAW FEE	27.00	0.00	27.00	0.00	27.00
11/02/2011	11/22/2011	Adj	Cont Allwd	0.00	0.00	0.00	(24.00)	3.00
11/02/2011	11/22/2011	Pay	Electronic	0.00	0.00	0.00	(3.00)	0.00
11/02/2011	11/07/2011	Chg	85025 - CBC with Auto Diff	45.00	0.00	45.00	0.00	45.00
11/02/2011	11/22/2011	Adj	Cont Allwd	0.00	0.00	0.00	(34.57)	10.43
11/02/2011	11/22/2011	Pay	Electronic	0.00	0.00	0.00	(10.43)	0.00
11/02/2011	11/07/2011	Chg	80063 - CMP	65.00	0.00	65.00	0.00	65.00
11/02/2011	11/22/2011	Adj	Cont Allwd	0.00	0.00	0.00	(51.55)	13.45
11/02/2011	11/22/2011	Pay	Electronic	0.00	0.00	0.00	(13.45)	0.00
11/02/2011	11/14/2011	Chg	99223 - Init Hosp Admit 3	428.00	0.00	428.00	0.00	428.00
11/02/2011	11/27/2011	Adj	Cont Allwd	0.00	0.00	0.00	(241.64)	186.36
11/02/2011	11/27/2011	Pay	Electronic	0.00	0.00	0.00	(149.09)	37.27
11/02/2011	11/27/2011	Adj	Reassign	0.00	0.00	0.00	(37.27)	0.00
11/02/2011	11/27/2011	Adj	Reassign	0.00	0.00	37.27	0.00	37.27
11/02/2011	12/15/2011	Pay	Electronic	0.00	0.00	0.00	0.00	37.27
11/02/2011	02/09/2012	Pay	Electronic	0.00	0.00	0.00	(37.27)	0.00
11/03/2011	11/14/2011	Chg	99232 - Subq Inpt level 2	159.00	0.00	159.00	0.00	159.00
11/03/2011	11/27/2011	Adj	Reassign	0.00	0.00	13.39	0.00	172.39
11/03/2011	11/27/2011	Adj	Cont Allwd	0.00	0.00	0.00	(92.03)	80.36
11/03/2011	11/27/2011	Pay	Electronic	0.00	0.00	0.00	(53.58)	26.78
11/03/2011	11/27/2011	Adj	Reassign	0.00	0.00	0.00	(13.39)	13.39
11/03/2011	12/15/2011	Pay	Electronic	0.00	0.00	0.00	0.00	13.39
11/03/2011	02/09/2012	Pay	Electronic	0.00	0.00	0.00	(13.39)	0.00
11/04/2011	11/14/2011	Chg	99232 - Subq Inpt level 2	159.00	0.00	159.00	0.00	159.00
11/04/2011	11/27/2011	Adj	Cont Allwd	0.00	0.00	0.00	(92.03)	66.97
11/04/2011	11/27/2011	Pay	Electronic	0.00	0.00	0.00	(53.58)	13.39
11/04/2011	11/27/2011	Adj	Reassign	0.00	0.00	0.00	(13.39)	0.00
11/04/2011	11/27/2011	Adj	Reassign	0.00	0.00	13.39	0.00	13.39
11/04/2011	12/15/2011	Pay	Electronic	0.00	0.00	0.00	0.00	13.39
11/04/2011	02/09/2012	Pay	Electronic	0.00	0.00	0.00	(13.39)	0.00
11/05/2011	11/14/2011	Chg	99232 - Subq Inpt level 2	159.00	0.00	159.00	0.00	159.00
11/05/2011	11/27/2011	Adj	Cont Allwd	0.00	0.00	0.00	(92.03)	66.97
11/05/2011	11/27/2011	Pay	Electronic	0.00	0.00	0.00	(53.58)	13.39
11/05/2011	11/27/2011	Adj	Reassign	0.00	0.00	0.00	(13.39)	0.00
11/05/2011	11/27/2011	Adj	Reassign	0.00	0.00	13.39	0.00	13.39
11/05/2011	12/13/2011	Pay	Electronic	0.00	0.00	0.00	0.00	13.39
11/05/2011	02/09/2012	Pay	Electronic	0.00	0.00	0.00	(13.39)	0.00
11/06/2011	11/14/2011	Chg	99238 - Hosp Disch < 30min	157.00	0.00	157.00	0.00	157.00
11/06/2011	11/27/2011	Adj	Cont Allwd	0.00	0.00	0.00	(90.37)	66.63
11/06/2011	11/27/2011	Pay	Electronic	0.00	0.00	0.00	(53.30)	13.33
11/06/2011	11/27/2011	Adj	Reassign	0.00	0.00	0.00	(13.33)	0.00
11/06/2011	11/27/2011	Adj	Reassign	0.00	0.00	13.33	0.00	13.33
11/06/2011	12/15/2011	Pay	Electronic	0.00	0.00	0.00	0.00	13.33
11/06/2011	02/09/2012	Pay	Electronic	0.00	0.00	0.00	(13.33)	0.00
11/14/2011	11/16/2011	Chg	G8427 - Measure 130	0.00	0.00	0.00	0.00	0.00
11/14/2011	11/27/2011	Pay	Electronic	0.00	0.00	0.00	0.00	0.00
11/14/2011	11/16/2011	Chg	85025 - CBC with Auto Diff	45.00	0.00	45.00	0.00	45.00

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PROC DATE	TRAN DATE	TYPE	DESCRIPTION	PROF CHG	TECH CHG	DEBIT	CREDIT	BALANCE
MGC HEM ONC Sptbg/ Palmetto Hem Onc - continued								
11/14/2011	11/27/2011	Adj	Cont Allwd	0.00	0.00	0.00	(34.57)	10.43
11/14/2011	11/27/2011	Pay	Electronic	0.00	0.00	0.00	(10.43)	0.00
11/14/2011	11/16/2011	Chg	80053 - CMP	65.00	0.00	65.00	0.00	65.00
11/14/2011	11/27/2011	Adj	Cont Allwd	0.00	0.00	0.00	(51.55)	13.45
11/14/2011	11/27/2011	Pay	Electronic	0.00	0.00	0.00	(13.45)	0.00
11/14/2011	11/16/2011	Chg	36415 - LAB DRAW FEE	27.00	0.00	27.00	0.00	27.00
11/14/2011	11/27/2011	Adj	Cont Allwd	0.00	0.00	0.00	(24.00)	3.00
11/14/2011	11/27/2011	Pay	Electronic	0.00	0.00	0.00	(3.00)	0.00
11/14/2011	11/16/2011	Chg	99213 - Follow-up Visit: 3	144.00	0.00	144.00	0.00	144.00
11/14/2011	11/27/2011	Pay	Electronic	0.00	0.00	0.00	(52.90)	91.10
11/14/2011	11/27/2011	Adj	Reassign	0.00	0.00	0.00	(13.23)	77.87
11/14/2011	11/27/2011	Adj	Reassign	0.00	0.00	13.23	0.00	91.10
11/14/2011	11/27/2011	Adj	Cont Allwd	0.00	0.00	0.00	(77.87)	13.23
11/14/2011	12/12/2011	Pay	Electronic	0.00	0.00	0.00	0.00	13.23
11/14/2011	02/09/2012	Pay	Electronic	0.00	0.00	0.00	(13.23)	0.00
12/05/2011	12/06/2011	Chg	85025 - CBC with Auto Diff	45.00	0.00	45.00	0.00	45.00
12/05/2011	12/21/2011	Adj	Cont Allwd	0.00	0.00	0.00	(34.57)	10.43
12/05/2011	12/21/2011	Pay	Electronic	0.00	0.00	0.00	(10.43)	0.00
12/05/2011	12/06/2011	Chg	80053 - CMP	65.00	0.00	65.00	0.00	65.00
12/05/2011	12/21/2011	Adj	Cont Allwd	0.00	0.00	0.00	(51.55)	13.45
12/05/2011	12/21/2011	Pay	Electronic	0.00	0.00	0.00	(13.45)	0.00
12/05/2011	12/06/2011	Chg	36415 - LAB DRAW FEE	27.00	0.00	27.00	0.00	27.00
12/05/2011	12/21/2011	Adj	Cont Allwd	0.00	0.00	0.00	(24.00)	3.00
12/05/2011	12/21/2011	Pay	Electronic	0.00	0.00	0.00	(3.00)	0.00
12/05/2011	12/06/2011	Chg	G8427 - Measure 130	0.00	0.00	0.00	0.00	0.00
12/05/2011	12/21/2011	Pay	Electronic	0.00	0.00	0.00	0.00	0.00
12/05/2011	12/06/2011	Chg	99214 - Follow-up Visit: 4	217.00	0.00	217.00	0.00	217.00
12/05/2011	12/21/2011	Adj	Cont Allwd	0.00	0.00	0.00	(118.79)	98.21
12/05/2011	12/21/2011	Pay	Electronic	0.00	0.00	0.00	(78.57)	19.64
12/05/2011	12/21/2011	Adj	Reassign	0.00	0.00	0.00	(19.64)	0.00
12/05/2011	12/21/2011	Adj	Reassign	0.00	0.00	19.64	0.00	19.64
12/05/2011	12/31/2011	Pay	Electronic	0.00	0.00	0.00	0.00	19.64
12/05/2011	02/09/2012	Pay	Electronic	0.00	0.00	0.00	(19.64)	0.00
01/16/2012	01/18/2012	Chg	G8427 - Measure 130	0.00	0.00	0.00	0.00	0.00
01/16/2012	01/18/2012	Chg	85025 - CBC with Auto Diff	45.00	0.00	45.00	0.00	45.00
01/16/2012	08/29/2012	Adj	Cont Allwd	0.00	0.00	0.00	(34.50)	10.50
01/16/2012	08/29/2012	Pay	Electronic	0.00	0.00	0.00	(10.50)	0.00
01/16/2012	01/18/2012	Chg	80053 - CMP	65.00	0.00	65.00	0.00	65.00
01/16/2012	08/29/2012	Adj	Cont Allwd	0.00	0.00	0.00	(51.46)	13.54
01/16/2012	08/29/2012	Pay	Electronic	0.00	0.00	0.00	(13.54)	0.00
01/16/2012	01/18/2012	Chg	36415 - LAB DRAW FEE	27.00	0.00	27.00	0.00	27.00
01/16/2012	08/29/2012	Adj	Cont Allwd	0.00	0.00	0.00	(24.00)	3.00
01/16/2012	08/29/2012	Pay	Electronic	0.00	0.00	0.00	(3.00)	0.00
01/16/2012	01/18/2012	Chg	99214 - Follow-up Visit: 4	217.00	0.00	217.00	0.00	217.00
01/16/2012	08/29/2012	Adj	Cont Allwd	0.00	0.00	0.00	(119.00)	98.00
01/16/2012	08/29/2012	Pay	Electronic	0.00	0.00	0.00	(78.40)	19.60

Patient Ledger Report

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PROC DATE	TRAN DATE	TYPE	DESCRIPTION	PROF CHG	TECH CHG	DEBIT	CREDIT	BALANCE
MGC HEM ONC Spthg/ Palmetto Hem Onc - continued								
01/16/2012	08/29/2012	Adj	Reassign	0.00	0.00	0.00	(19.60)	0.00
01/16/2012	08/29/2012	Adj	Reassign	0.00	0.00	19.60	0.00	19.60
01/16/2012	09/04/2012	Adj	Reassign	0.00	0.00	0.00	(19.60)	0.00
01/16/2012	09/04/2012	Adj	Reassign	0.00	0.00	19.60	0.00	19.60
01/16/2012	08/26/2012	Pay	Electronic	0.00	0.00	0.00	(19.60)	0.00
03/27/2012	03/30/2012	Chg	G8427 - Measure 130	0.00	0.00	0.00	0.00	0.00
03/27/2012	04/18/2012	Pay	Electronic	0.00	0.00	0.00	0.00	0.00
03/27/2012	03/30/2012	Chg	85025 - CBC with Auto Diff	45.00	0.00	45.00	0.00	45.00
03/27/2012	04/18/2012	Adj	Cont Allwd	0.00	0.00	0.00	(34.50)	10.50
03/27/2012	04/18/2012	Pay	Electronic	0.00	0.00	0.00	(10.50)	0.00
03/27/2012	03/30/2012	Chg	80053 - CMP	65.00	0.00	65.00	0.00	65.00
03/27/2012	04/18/2012	Adj	Cont Allwd	0.00	0.00	0.00	(55.33)	9.67
03/27/2012	04/18/2012	Pay	Electronic	0.00	0.00	0.00	(9.67)	0.00
03/27/2012	03/30/2012	Chg	83615 - LDH	26.00	0.00	26.00	0.00	26.00
03/27/2012	04/18/2012	Adj	Cont Allwd	0.00	0.00	0.00	(22.13)	3.87
03/27/2012	04/18/2012	Pay	Electronic	0.00	0.00	0.00	(3.87)	0.00
03/27/2012	03/30/2012	Chg	36415 - LAB DRAW FEE	27.00	0.00	27.00	0.00	27.00
03/27/2012	04/18/2012	Adj	Cont Allwd	0.00	0.00	0.00	(24.00)	3.00
03/27/2012	04/18/2012	Pay	Electronic	0.00	0.00	0.00	(3.00)	0.00
03/27/2012	03/30/2012	Chg	99214 - Follow-up Visit: 4	217.00	0.00	217.00	0.00	217.00
03/27/2012	04/25/2012	Adj	COLLECTION	0.00	0.00	0.00	(19.60)	197.40
03/27/2012	04/18/2012	Adj	Cont Allwd	0.00	0.00	0.00	(119.00)	78.40
03/27/2012	04/18/2012	Pay	Electronic	0.00	0.00	0.00	(78.40)	0.00
03/27/2012	04/18/2012	Adj	Reassign	0.00	0.00	0.00	(19.60)	(19.60)
03/27/2012	04/18/2012	Adj	Reassign	0.00	0.00	19.60	0.00	0.00
03/27/2012	05/04/2012	Adj	MOVE \$ DEB	0.00	0.00	19.60	0.00	19.60
03/27/2012	05/04/2012	Adj	Reassign	0.00	0.00	0.00	(19.60)	0.00
03/27/2012	05/04/2012	Adj	Reassign	0.00	0.00	19.60	0.00	19.60
03/27/2012	05/04/2012	Pay	Electronic	0.00	0.00	0.00	(19.60)	0.00
05/01/2012	05/08/2012	Chg	99357 - ProlongSvc Inpt+30mn	216.00	0.00	216.00	0.00	216.00
05/01/2012	06/26/2012	Adj	ES10C	0.00	0.00	0.00	(216.00)	0.00
05/01/2012	05/24/2012	Pay	Electronic	0.00	0.00	0.00	0.00	0.00
05/01/2012	05/24/2012	Adj	Reassign	0.00	0.00	0.00	(216.00)	(216.00)
05/01/2012	05/24/2012	Adj	Reassign	0.00	0.00	216.00	0.00	0.00
05/01/2012	05/08/2012	Chg	99233 - Subq Inpt level 3	228.00	0.00	228.00	0.00	228.00
05/01/2012	06/26/2012	Adj	ES10C	0.00	0.00	0.00	(19.11)	208.89
05/01/2012	06/14/2012	Pay	Electronic	0.00	0.00	0.00	(19.11)	189.78
05/01/2012	05/24/2012	Adj	Cont Allwd	0.00	0.00	0.00	(132.43)	57.35
05/01/2012	05/24/2012	Pay	Electronic	0.00	0.00	0.00	(76.46)	(19.11)
05/01/2012	05/24/2012	Adj	Reassign	0.00	0.00	0.00	(19.11)	(38.22)
05/01/2012	05/24/2012	Adj	Reassign	0.00	0.00	19.11	0.00	(19.11)
05/01/2012	07/06/2012	Adj	MOVE \$ DEB	0.00	0.00	19.11	0.00	0.00
06/01/2012	06/07/2012	Chg	99233 - Subq Inpt level 3	228.00	0.00	228.00	0.00	228.00
06/01/2012	06/25/2012	Adj	Cont Allwd	0.00	0.00	0.00	(132.43)	95.57
06/01/2012	06/25/2012	Pay	Electronic	0.00	0.00	0.00	(76.46)	19.11
06/01/2012	06/25/2012	Adj	Reassign	0.00	0.00	0.00	(19.11)	0.00
06/01/2012	06/25/2012	Adj	Reassign	0.00	0.00	19.11	0.00	19.11
06/01/2012	06/26/2012	Adj	ES10C	0.00	0.00	0.00	(19.11)	0.00
06/01/2012	07/06/2012	Pay	Electronic	0.00	0.00	0.00	(19.11)	(19.11)

Patient Ledger Report

(Filtered by Transaction Date)

PROC DATE	TRAN DATE	TYPE	DESCRIPTION	PROF CHG	TECH CHG	DEBIT	CREDIT	BALANCE
MGC HEM ONC Sptba/ Palmetto Hem Onc - continued								
06/01/2012	07/06/2012	Adj	MOVE \$ DEB	0.00	0.00	19.11	0.00	0.00
06/04/2012	06/07/2012	Chg	99233 - Subq Inpt level 3	228.00	0.00	228.00	0.00	228.00
06/04/2012	06/25/2012	Adj	Cont Allwd	0.00	0.00	0.00	(132.43)	95.57
06/04/2012	06/25/2012	Pay	Electronic	0.00	0.00	0.00	(76.46)	19.11
06/04/2012	06/25/2012	Adj	Reassign	0.00	0.00	0.00	(19.11)	0.00
06/04/2012	06/25/2012	Adj	Reassign	0.00	0.00	19.11	0.00	19.11
06/04/2012	06/26/2012	Adj	ES10C	0.00	0.00	0.00	(19.11)	0.00
06/04/2012	07/06/2012	Adj	MOVE \$ DEB	0.00	0.00	19.11	0.00	19.11
06/04/2012	07/06/2012	Pay	Electronic	0.00	0.00	0.00	(19.11)	0.00
06/05/2012	06/15/2012	Chg	99232 - Subq Inpt level 2	159.00	0.00	159.00	0.00	159.00
06/05/2012	07/16/2012	Adj	Reassign	0.00	0.00	0.00	(13.33)	145.67
06/05/2012	07/16/2012	Adj	Reassign	0.00	0.00	13.33	0.00	159.00
06/05/2012	07/16/2012	Pay	Electronic	0.00	0.00	0.00	(13.33)	145.67
06/05/2012	06/30/2012	Adj	Cont Allwd	0.00	0.00	0.00	(92.33)	53.34
06/05/2012	06/30/2012	Pay	Electronic	0.00	0.00	0.00	(53.34)	0.00
06/05/2012	06/30/2012	Adj	Reassign	0.00	0.00	0.00	(13.33)	(13.33)
06/05/2012	06/30/2012	Adj	Reassign	0.00	0.00	13.33	0.00	0.00
06/11/2012	08/09/2012	Chg	G0182 - Hospice Super >30 mi	335.00	0.00	335.00	0.00	335.00
06/11/2012	08/29/2012	Adj	Cont Allwd	0.00	0.00	0.00	(234.43)	100.57
06/11/2012	08/29/2012	Pay	Electronic	0.00	0.00	0.00	(80.46)	20.11
06/11/2012	08/29/2012	Adj	Reassign	0.00	0.00	0.00	(20.11)	0.00
06/11/2012	08/29/2012	Adj	Reassign	0.00	0.00	20.11	0.00	20.11
06/11/2012	09/14/2012	Pay	Electronic	0.00	0.00	0.00	(20.11)	0.00
06/11/2012	10/08/2012	Adj	ES10C	0.00	0.00	0.00	(20.11)	(20.11)
				9,835.03	1.00	11,597.75	(11,694.92)	(97.17)
Supportive Care								
01/26/2009	07/11/2011	Adj	MOVE \$ DEB	0.00	0.00	0.40	0.00	0.40
total: PHOA/SRMC				9,835.03	1.00	11,598.15	(11,694.92)	(96.77)
GRAND TOTALS:				9,835.03	1.00	11,598.15	(11,694.92)	(96.77)

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P00249 Patient
RONALD H LITTLEFIELD MD LLC
USER - JHAYES

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new/est 2 ESTABLISHED

10 T #	115798 U WILLIAM	FARR	Total:	165.00
1/11/10	LITTLEFIELD M NGUYEN		RONALD H LITTLE	
11010	99216 -	-COMPREHENSIVE 496	-COPD 01	165.00
11010	ADX -	-ADDITIONAL DX 272.4	-HYPERLIPIDEMIA 01	0.00
11010	ADX -	-ADDITIONAL DX 401.1	-ESSENTIAL HYPER 01	0.00
11010	ADX -	-ADDITIONAL DX 424.0	-MITRAL VALVE DI 01	0.00
111210	-	-MEDICARE	-1157981-Y-N-P cleared	
	165.00 /	99.14 /	.00 /	.00 / 41.07

new/est 2 ESTABLISHED

10 T #	116234 U WILLIAM	FARR	Total:	70.00
1/19/11	LITTLEFIELD M LITTLEFIELD		RONALD H LITTLE	
111811	99213 -	-EXPANDED 401.0	-ESSENTIAL HYPER 01	70.00
111811	ADX -	-ADDITIONAL DX 272.4	-HYPERLIPIDEMIA 01	0.00
111811	ADX -	-ADDITIONAL DX 496	-COPD 01	0.00
111811	ADX -	-ADDITIONAL DX 424.0	-MITRAL VALVE DI 01	0.00
011211	-	-MEDICARE	-1162341-Y-N-P cleared	
	70.00 /	26.42 /	.00 /	.00 / 7.18

new/est 2 ESTABLISHED

10 T #	121760 U WILLIAM	FARR	Total:	140.00
1/12/11	LITTLEFIELD M LITTLEFIELD		RONALD H LITTLE	
041111	99213 -	-EXPANDED 700.2	-SYNCOPE 01	70.00
041111	ADX -	-ADDITIONAL DX 496	-COPD 01	0.00
041111	ADX -	-ADDITIONAL DX 272.4	-HYPERLIPIDEMIA 01	0.00
041111	03000 -	-EKG 427.0	-PAROXYSMAL SUPR 01	70.00
041211	-	-MEDICARE	-1217601-Y-N-P cleared	
	140.00 /	64.48 /	.00 /	.00 / 59.40

new/est 2 ESTABLISHED

11 T #	135090 U WILLIAM	FARR	Total:	330.00
1/30/11	LITTLEFIELD M LITTLEFIELD	12/29/11	SRMS IP	
22911	99223 -	-INITIAL HOSPITA 496	-COPD 01	330.00
22911	ADX -	-ADDITIONAL DX 466.0	-ACUTE BRONCHITIS 01	0.00
123011	-	-MEDICARE	-1350901-Y-N-P cleared	
020812	-	-AARP	-1350902-Y-N-P cleared	
	330.00 /	141.63 /	35.41 /	.00 / 152.96

new/est 2 ESTABLISHED

11 T #	135091 U WILLIAM	FARR	Total:	310.00
2/30/11	LITTLEFIELD M LITTLEFIELD	12/29/11	SRMS IP	
123011	99233 -	-FOLLOWUP HOSPIT 496	-COPD 01	110.00
23011	ADX -	-ADDITIONAL DX 466.0	-ACUTE BRONCHITIS 01	0.00
123011	-	-MEDICARE	-1350911-Y-N-P cleared	
020812	-	-AARP	-1350912-Y-N-P cleared	
	310.00 /	70.05 /	10.26 /	.00 / 210.63

new/est 2 ESTABLISHED

10 T #	135045 U WILLIAM	FARR	Total:	70.00
1/30/11	LITTLEFIELD M LITTLEFIELD		RONALD H LITTLE	
22911	93000 -	-59-EKG 706.05	-SOD 01	70.00
123011	-	-MEDICARE	-1350451-Y-N-P cleared	
020812	-	-AARP	-1350452-Y-N-P cleared	
	70.00 /	14.22 /	3.56 /	.00 / 52.22

new/est 2 ESTABLISHED

10 T #	135994 U WILLIAM	FARR	Total:	250.00
1/10/12	LITTLEFIELD M LITTLEFIELD		RONALD H LITTLE	
110912	08438 -	-ANNUAL WELLNESS 466.0	-ACUTE BRONCHITIS 01	250.00
110912	ADX -	-ADDITIONAL DX 461.9	-SINUSITIS 01	0.00
110912	ADX -	-ADDITIONAL DX 496	-COPD 01	0.00
110912	ADX -	-ADDITIONAL DX 709.00	-ABDOMINAL PAIN 01	0.00
110912	08553 -	-PRESCRIPTIONS E 466.0	-ACUTE BRONCHITIS 01	0.00
011112	-	-MEDICARE	-1359941-Y-N-P cleared	
011112	-	-AARP	-1359942-Y-N-P rejected	
	250.00 /	157.24 /	.00 /	.00 / 92.76

new/est 2 ESTABLISHED

11 T #	142015 U WILLIAM	FARR	Total:	230.00
1/04/12	LITTLEFIELD M LITTLEFIELD	06/01/12	SRMS IP	
160112	99232 -	-FOLLOWUP HOSPIT 466.0	-ACUTE BRONCHITIS 01	230.00
060512	-	-MEDICARE	-1420151-Y-N-P cleared	
061912	-	-AARP	-1420152-Y-N-P cleared	
	230.00 /	53.34 /	13.33 /	.00 / 163.33

new/est 2 ESTABLISHED

11 T #	142017 U WILLIAM	FARR	Total:	230.00
1/04/12	LITTLEFIELD M LITTLEFIELD	06/01/12	SRMS IP	
160412	99232 -	-FOLLOWUP HOSPIT 466.0	-ACUTE BRONCHITIS 01	230.00
060512	-	-MEDICARE	-1420171-Y-N-P cleared	
061912	-	-AARP	-1420172-Y-N-P cleared	
	230.00 /	53.34 /	13.33 /	.00 / 163.33

new/est 2 ESTABLISHED

11 T #	142160 U WILLIAM	FARR	Total:	310.00
1/06/12	LITTLEFIELD M LITTLEFIELD	06/01/12	SRMS IP	
160512	99233 -	-FOLLOWUP HOSPIT 466.0	-ACUTE BRONCHITIS 01	310.00
160512	ADX -	-ADDITIONAL DX 272.4	-HYPERLIPIDEMIA 01	0.00

0001001 Patient
RONALD H LITTLEFIELD MD LLC
PMA - JAYES

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060712- -MEDICARE -1421601-Y-N-P cleared
062112- -AARP -1421602-Y-N-P cleared
310.00 / 76.46 / 19.11 / .00 / 214.43
new/est 2 ESTABLISHED

11 T W	142171 U WILLIAM	PARR	Total: 210.00
6/06/12	LITTLEFIELD M LITTLEFIELD	06/01/12 06/06/12 SRHS IP	
060612	99239 - -HOSPITAL DISCHARGE	496 -COPD	01 210.00
060612	ADK - -ADDITIONAL DX	466.0 -ACUTE BRONCHITIS	01 0.00
060612	ADK - -ADDITIONAL DX	272.4 -HYPERLIPIDEMIA	01 0.00
060712-	-MEDICARE	-1421711-Y-N-P cleared	
062112-	-AARP	-1421712-Y-N-P cleared	
210.00 /	76.46 /	19.11 /	.00 / 214.43
new/est	2 ESTABLISHED		
0/25/10	0001--PMT MEDICARE	CH 1141701 R# 2498780999	30 203.16-
0008	283.16-	114170	
0101-- Co-ins	70.72	CH 1141701 R# 2498780999	30 0.00
0008	0.00	114170	
0/25/10	0001--W/O MEDICARE	CH 1141701 R# 2498800999	30 909.05-
0000	309.05-	114170	
0/25/10	0001--PMT MEDICARE	CH 1141701 R# 2501300999	30 23.99-
0000	23.99-	114170	
0/25/10	0101-- Co-ins	CH 1141701 R# 2501300999	30 0.00
0000	0.00	114170	
0/25/10	0001--W/O MEDICARE	CH 1141701 R# 2501400999	30 95.01-
0000	95.01-	114170	
0/25/10	0001--PMT MEDICARE	CH 1126511 R# 2501410999	30 157.03-
0001	157.03-	112651	
0/25/10	0101-- Co-ins	CH 1126511 R# 2501420999	30 0.00
0001	0.00	112651	
0/25/10	0001--W/O MEDICARE	CH 1126511 R# 2501430999	30 103.71-
0001	103.71-	112651	
0/25/10	0001--PMT MEDICARE	CH 1141691 R# 2501440999	30 530.08-
0009	530.08-	114169	
0/25/10	0101-- Co-ins	CH 1141691 R# 2501450999	30 0.00
0000	0.00	114169	
0/25/10	0001--W/O MEDICARE	CH 1141691 R# 2501460999	30 1,501.40-
0000	1,501.40-	114169	
0/25/10	0001--PMT MEDICARE	CH 1142111 R# 2501470999	30 32.23-
0001	32.23-	114211	
0/25/10	0001--W/O MEDICARE	CH 1142111 R# 2501480999	30 12.77-
0001	12.77-	114211	
0/25/10	0001--PMT MEDICARE	CH 1142461 R# 2501490999	30 29.06-
0001	29.06-	114246	
0/25/10	0101-- Co-ins	CH 1142461 R# 2501500999	30 0.00
0001	0.00	114246	
0/25/10	0001--W/O MEDICARE	CH 1142461 R# 2501510999	30 12.67-
0001	12.67-	114246	
0/25/10	0001--PMT MEDICARE	CH 1142471 R# 2501520999	30 158.90-
0009	158.90-	114247	
0/25/10	0101-- Co-ins	CH 1142471 R# 2501530999	30 0.00
0009	0.00	114247	
0/25/10	0001--W/O MEDICARE	CH 1142471 R# 2501540999	30 305.12-
0009	305.12-	114247	
0/27/10	0001--PMT MEDICARE	CH 1144911 R# 2508330999	30 14.26-
0001	14.26-	114491	
0/27/10	0101-- Co-ins	CH 1144911 R# 2508340999	30 0.00
0001	0.00	114491	
0/27/10	0001--W/O MEDICARE	CH 1144911 R# 2508350999	30 17.18-
0001	17.18-	114491	
1/11/10	0001--CASH PAYMENT, THANK YOU	CH 2524880999	10 228.58-
0001	32.26-	112651	
0009	132.72-	114169	
0001	7.27-	114246	
0000	30.90-	114247	
0006	0.00-	114170	
0000	70.72-	114170	
0001	3.56-	114491	
1/23/10	0001--PMT MEDICARE	CH 1141711 R# 2537590999	30 177.02-
0010	177.02-	114171	
1/23/10	0101-- Co-ins	CH 1141711 R# 2537600999	30 0.00
0010	0.00	114171	
1/23/10	0001--W/O MEDICARE	CH 1141711 R# 2537610999	30 1,328.73-
0010	1,328.73-	114171	
1/23/10	0001--PMT MEDICARE	CH 1157901 R# 2542750999	30 99.14-
0001	99.14-	115790	
1/23/10	0101-- Co-ins	CH 1157901 R# 2542760999	30 0.00
0001	0.00	115790	
1/23/10	0001--W/O MEDICARE	CH 1157901 R# 2542770999	30 41.07-
0001	41.07-	115790	
1/19/11	0001--CASH PAYMENT, THANK YOU	CH 2606720999	10 69.04-
0010	44.25-	114171	
0001	24.79-	115790	
2/04/11	0001--PMT MEDICARE	CH 1162341 R# 2622640999	30 26.42-
0001	26.42-	116234	
2/04/11	0100-- Deduct	CH 1162341 R# 2622650999	30 0.00
0001	0.00	116234	
2/04/11	0101-- Co-ins	CH 1162341 R# 2622660999	30 0.00
0001	0.00	116234	
2/04/11	0001--W/O MEDICARE	CH 1162341 R# 2622670999	30 7.18-

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Total Charges:	4,407.00
Total Receipts:	7,427.00

Include All
N
N

Ronald Littlefield, MD 004

F/C:CI P/T:IPH

FARR, WILLIAM G

1216401412

06/12/12 06/16/12 1

GARRETT E SNIPES

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

870610 HOSPICE HOUSE ONLY

999 [REDACTED] 05/12/15

	CODE	DESCRIPTION	QTY	
	***115	HOSPICE/PVT		
06/12	030640	ROOM HH09 RE	1	0.00
06/13	030640	ROOM HH09 RE	1	0.00
06/14	030640	ROOM HH09 RE	1	0.00
06/15	030640	ROOM HH09 RE	1	0.00
		AREA TOTAL ***		0.00
	***250	PHARMACY		
06/13	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	1	1.00
06/13	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	1	1.00
06/13	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	1	1.00
06/13	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	1	1.00
06/14	005723	PULMICORT RESPULES 0.5MG/2ML BX30	1	64.56
		AREA TOTAL ***		68.56
	***636	DRUGS/DETAIL CODE		
06/12	000987	DEXAMETHASONE PHOSPHATE 1MG INJ	4	225.00
06/13	000987	DEXAMETHASONE PHOSPHATE 1MG INJ	4	225.00
06/13	000987	DEXAMETHASONE PHOSPHATE 1MG INJ	4	225.00
06/13	001481	LORAZEPAM 2MG INJ	1	250.00
06/13	001481	LORAZEPAM 2MG INJ	1	250.00
06/13	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/13	002713	MORPHINE SULFATE 10MG INJ	1	250.00
06/13	002713	MORPHINE SULFATE 10MG INJ	1	250.00
06/13	002713	MORPHINE SULFATE 10MG INJ	1	250.00
06/13	002713	MORPHINE SULFATE 10MG INJ	1	250.00
06/14	000987	DEXAMETHASONE PHOSPHATE 1MG INJ	4	225.00
06/14	000987	DEXAMETHASONE PHOSPHATE 1MG INJ	8	225.00
06/14	001481	LORAZEPAM 2MG INJ	1	250.00
06/14	001481	LORAZEPAM 2MG INJ	1	250.00
06/14	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/14	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/14	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/15	000987	DEXAMETHASONE PHOSPHATE 1MG INJ	8	225.00

Continued

F/C:CI P/T:IPH

FARR, WILLIAM G

1216401412

06/12/12 06/16/12 2

GARRETT E SNIPES

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

870610 HOSPICE HOUSE ONLY

999 [REDACTED] 05/12/15

	CODE	DESCRIPTION	QTY	
06/15	000987	DEXAMETHASONE PHOSPHATE 1MG INJ	4	112.50
06/15	000987	DEXAMETHASONE PHOSPHATE 1MG INJ	4	112.50
06/15	000987	DEXAMETHASONE PHOSPHATE 1MG INJ	4	112.50
06/15	001481	LORAZEPAM 2MG INJ	1	250.00
06/15	001481	LORAZEPAM 2MG INJ	1	250.00
06/15	001481	LORAZEPAM 2MG INJ	1	250.00
06/15	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/15	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/15	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/15	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/16	000987	DEXAMETHASONE PHOSPHATE 1MG INJ	4	112.50
06/16	000987	DEXAMETHASONE PHOSPHATE 1MG INJ	4	112.50
06/16	001481	LORAZEPAM 2MG INJ	1	250.00
06/16	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/16	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/16	002581	MORPHINE SULFATE 10MG INJ	1	250.00
		AREA TOTAL ***		7,662.50
	***637	PHARMACY-SELF ADMINS DRUGS		
06/12	000155	SENNA S TABLET	2	3.00
06/12	002628	NICOTINE PATCH 21MG	1	4.13
06/12	004487	OXYIR 5MG CAPSULE	1	2.78
06/12	004647	SINGULAIR 10MG TAB	1	20.40
06/13	000155	SENNA S TABLET	2	3.00
06/13	000155	SENNA S TABLET	-1	1.50CR
06/13	002628	NICOTINE PATCH 21MG	1	4.13
06/13	004782	CELEXA 20MG TAB	1	1.50
06/13	005252	AVELOX 400MG TAB	1	49.57
06/13	005314	THEO-24 300MG CR CAPSULE	1	15.00
06/13	005492	PROTONIX EC 40MG TAB	1	1.50
06/13	005492	PROTONIX EC 40MG TAB	1	1.50
06/13	007657	OXYCODONE IR 5MG TAB	1	2.00
06/14	000155	SENNA S TABLET	2	3.00
06/14	000294	DIAZEPAM 5MG TABLET	1	2.00

Continued

F/C:CI P/T:IPH

FARR, WILLIAM G

1216401412

06/12/12 06/16/12 3

GARRETT E SNIPES

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

870610 HOSPICE HOUSE ONLY

999

05/12/15

	CODE	DESCRIPTION	QTY	
06/14	001102	GUAIFENESIN 600MG TABLET	1	1.50
06/14	002628	NICOTINE PATCH 21MG	1	4.13
06/14	003791	OXYCONTIN CR 10MG TAB	1	6.48
06/14	004647	SINGULAIR 10MG TAB	1	20.40
06/14	004782	CELEXA 20MG TAB	1	1.50
06/14	005252	AVELOX 400MG TAB	1	49.57
06/14	005314	THEO-24 300MG CR CAPSULE	1	15.00
06/14	005492	PROTONIX EC 40MG TAB	1	1.50
06/14	005994	ALBUTEROL SULF. INHL. 5MG/ML SOLN	1	1.13
06/14	007657	OXYCODONE IR 5MG TAB	1	2.00
06/15	000155	SENNA S TABLET	2	3.00
06/15	000294	DIAZEPAM 5MG TABLET	1	2.00
06/15	000294	DIAZEPAM 5MG TABLET	1	2.00
06/15	001102	GUAIFENESIN 600MG TABLET	1	1.50
06/15	001102	GUAIFENESIN 600MG TABLET	1	1.50
06/15	002628	NICOTINE PATCH 21MG	1	4.13
06/15	003791	OXYCONTIN CR 10MG TAB	1	6.48
06/15	003791	OXYCONTIN CR 10MG TAB	1	6.48
06/15	004647	SINGULAIR 10MG TAB	1	20.40
06/15	004782	CELEXA 20MG TAB	1	1.50
06/15	005252	AVELOX 400MG TAB	1	49.57
06/15	005314	THEO-24 300MG CR CAPSULE	1	15.00
06/15	005492	PROTONIX EC 40MG TAB	1	1.50
06/16	000294	DIAZEPAM 5MG TABLET	1	2.00
06/16	001102	GUAIFENESIN 600MG TABLET	1	1.50
06/16	002628	NICOTINE PATCH 21MG	1	4.13
06/16	003791	OXYCONTIN CR 10MG TAB	1	6.48
06/16	004782	CELEXA 20MG TAB	1	1.50
06/16	005252	AVELOX 400MG TAB	1	49.57
06/16	005314	THEO-24 300MG CR CAPSULE	1	15.00
AREA TOTAL ***				410.46

Continued

F/C:CI P/T:IPH

FARR, WILLIAM G

1216401412

06/12/12 06/16/12 4

GARRETT E SNIPES

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

870610 HOSPICE HOUSE ONLY

999 [REDACTED] 05/12/15

CODE	DESCRIPTION	QTY

	TOTAL CHARGES	8,141.52

06/23	A3070 873 HOSPICE HOUSE - ADJ	870 8,141.52CR

	TOTAL PAYMENTS/ADJUSTMENTS	8,141.52CR

0.00

0.00

0.00

F/C:MG P/T:TRS

FARR, WILLIAM G

1216500677

06/12/12 06/12/12 1

RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

870598 HOSPICE SRMC

999 05/12/15

	CODE	DESCRIPTION	QTY	
	***540	AMBULANCE		
06/12	010435	MILEAGE	2	18.20
06/12	010436	FRACTIONAL MILEAGE	3	2.73
06/12	010450	AMB SRVC, BLS, NON-EMERGENCY	1	264.40
AREA TOTAL ***				285.33

TOTAL CHARGES

285.33

12/20	I6112	839 COMMERCIAL INSURANCE PAYMENT	870	195.86CR
06/19	A5041	614 MEDICARE OUTPATIENT- ADJ	316	84.76CR
06/20	A5999	681 NONCONTRACTED- ADJ	870	0.00
06/20	A5041	648 MEDICARE OUTPATIENT- ADJ	316	84.76
08/20	A9403	917 NONCAS ELIG ELIGIBILITY ISSUE	870	0.00
09/10	A5041	86 MEDICARE OUTPATIENT- ADJ	316	84.76CR
09/15	A5999	311 NONCONTRACTED- ADJ	870	0.00
09/14	A5041	240 MEDICARE OUTPATIENT- ADJ	316	84.76
12/20	A5065	839 HOSPICE CONTRACTUAL ADJUSTMENT	870	89.47CR

TOTAL PAYMENTS/ADJUSTMENTS

285.33CR

0.00

0.00

0.00

F/C:MG P/T:IP

FARR, WILLIAM G

1216200102

06/10/12 06/12/12 1

RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

870598 HOSPICE SRMC

999 05/12/15

	CODE	DESCRIPTION	QTY	
	***010	ORDER COMMUNICATION MESSAGE		
06/10	010836	OXYGEN	1	0.00
06/10	002000	CARE PLAN	1	0.00
06/10	020201	POINT OF CARE TESTING	1	0.00
06/10	020202	POINT OF CARE BLD GAS ANALYSIS	1	0.00
06/11	010836	OXYGEN	1	0.00
06/11	010836	OXYGEN	1	0.00
06/11	010836	OXYGEN	1	0.00
06/11	011028	PT TRANSPORT/STANDBY	1	0.00
06/11	020125	BIPAP INITIATION	1	0.00
06/11	020125	BIPAP INITIATION	1	0.00
06/11	020128	BIPAP SETTING/DEVICE ADJ 1	1	0.00
06/11	020201	POINT OF CARE TESTING	1	0.00
06/11	020202	POINT OF CARE BLD GAS ANALYSIS	1	0.00
06/11	020848	OXYGEN ADJUST 1	1	0.00
06/11	099022	POC GLUCOSE	1	0.00
06/12	002000	CARE PLAN	1	0.00
		AREA TOTAL ***		0.00
	***214	CCU/INTERMEDIATE		
06/10	015535	ROOM 8528 T	1	1,716.00
06/11	015535	ROOM 8528 T	1	1,716.00
		AREA TOTAL ***		3,432.00
	***250	PHARMACY		
06/10	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	1	1.00
06/10	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	1	1.00
06/10	006209	AVELOX IV 400MG/250ML	1	100.00
06/12	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	1	1.00
		AREA TOTAL ***		103.00
	***258	IV SOLUTIONS		
06/10	000333	NORMAL SALINE SOL 500ML INFUSION	1	100.00
06/11	000326	NORMAL SALINE SOL 250ML INFUSION	1	100.00

Continued

F/C:MG P/T:IP

FARR, WILLIAM G 1216200102
WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

06/10/12 06/12/12 2
RONALD H LITTLEFIELD
870598 HOSPICE SRMC
999 05/12/15

	CODE	DESCRIPTION	QTY	
06/11	000326	NORMAL SALINE SOL 250ML INFUSION	1	100.00
06/11	001549	NDC 00338055318	1	100.00
06/11	001549	NDC 00338055318	1	100.00
06/12	001549	NDC 00338055318	1	100.00
AREA TOTAL ***				600.00
***270 MED/SUR SUPPLY				
06/10	010855	OXYGEN/SHIFT	1	100.00
06/12	010855	OXYGEN/SHIFT	1	100.00
AREA TOTAL ***				200.00
***300 LABORATORY				
06/10	010930	CPK	1	65.00
06/10	010930	CPK	1	65.00
06/10	010948	RESPIRATORY ABG PUNCTURE	1	131.00
06/10	011840	CK-MB	1	122.00
06/10	011840	CK-MB	1	122.00
06/10	013281	TROPONIN, QUANT	1	104.00
06/10	013281	TROPONIN, QUANT	1	104.00
06/10	013500	BMP	1	89.00
06/10	013550	IMMUNOASSAY CHF-BNP	1	288.00
06/10	020080	CBC W/DIFF	1	78.00
06/10	031110	BLOOD GAS	1	204.00
06/10	040690	BLOOD CULTURE	1	109.00
06/10	040690	BLOOD CULTURE	1	109.00
06/10	099000	EC CK-MB FRACTION ONLY	1	122.00
06/10	099004	EC TROPONIN	1	104.00
06/11	010948	RESPIRATORY ABG PUNCTURE	1	131.00
06/11	013500	BMP	1	89.00
06/11	020050	CBC	1	63.00
06/11	031110	BLOOD GAS	1	204.00
AREA TOTAL ***				2,303.00
***320 DX X-RAY				

Continued

F/C:MG P/T:IP

FARR, WILLIAM G

1216200102

06/10/12 06/12/12 3

RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

870598 HOSPICE SRMC

999

05/12/15

	CODE	DESCRIPTION	QTY	
06/10	010052	CHEST X-RAY	1	234.00
		AREA TOTAL ***		234.00
06/10	***343 060381	Diagnostic Radiopharmaceutical NDC 00270131635	100	733.00
		AREA TOTAL ***		733.00
06/10	***350 060221	CT SCAN CT THORAX W/CONTRAST	1	2,147.00
		AREA TOTAL ***		2,147.00
06/10	***410 010483	RESPIRATORY SVC HHN	1	128.00
06/11	010113	BIPAP MANAGEMENT, INITIAL	1	895.00
06/11	010483	HHN	1	128.00
06/12	010483	HHN	1	128.00
		AREA TOTAL ***		1,279.00
06/10	***450 002005	EMERGENCY ROOM ED VISIT LEVEL 5	1	1,207.00
06/10	041195	INSERT CATHETER VN OVER AGE 5 YRS	1	2,869.00
06/10	041505	THER/PROPH/DIAG INJ, SC/IM	1	100.00
		AREA TOTAL ***		4,176.00
06/10	***636 001800	DRUGS/DETAIL CODE VANCOMYCIN HCL 500MG INJ	3	225.00
06/10	002716	METHYLPREDNISOLONE SUCC 40MG INJ	2	225.00
06/10	002716	METHYLPREDNISOLONE SUCC 40MG INJ	1	225.00
06/10	002717	METHYLPREDNISOLONE SUCC 125MG INJ	1	225.00
06/10	002717	METHYLPREDNISOLONE SUCC 125MG INJ	1	225.00
06/10	002717	METHYLPREDNISOLONE SUCC 125MG INJ	3	675.00
06/10	004679	ENOXAPARIN SODIUM 10MG INJ	6	225.00
06/10	004679	ENOXAPARIN SODIUM 10MG INJ	12	450.00
06/10	004681	ENOXAPARIN SODIUM 10MG INJ	10	225.00

Continued

F/C:MG P/T:IP

FARR, WILLIAM G

1216200102

06/10/12 06/12/12 4

RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

870598 HOSPICE SRMC

999 [REDACTED] 05/12/15

	CODE	DESCRIPTION	QTY	
06/10	005615	PIPERCILLIN 1G/TAZOBAC 125MG,1.12	8	450.00
06/10	005615	PIPERCILLIN 1G/TAZOBAC 125MG,1.12	12	675.00
06/10	006584	HEPARIN SODIUM 10U INJ	50	100.00
06/11	001187	FUROSEMIDE 20MG INJ	2	225.00
06/11	001481	LORAZEPAM 2MG INJ	1	250.00
06/11	001800	VANCOMYCIN HCL 500MG INJ	3	225.00
06/11	001800	VANCOMYCIN HCL 500MG INJ	3	225.00
06/11	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/11	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/11	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/11	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/11	002716	METHYLPREDNISOLONE SUCC 40MG INJ	2	450.00
06/11	002716	METHYLPREDNISOLONE SUCC 40MG INJ	2	450.00
06/11	004679	ENOXAPARIN SODIUM 10MG INJ	12	450.00
06/11	005615	PIPERCILLIN 1G/TAZOBAC 125MG,1.12	12	675.00
06/11	006584	HEPARIN SODIUM 10U INJ	50	100.00
06/12	001481	LORAZEPAM 2MG INJ	1	250.00
06/12	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/12	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/12	006584	HEPARIN SODIUM 10U INJ	50	100.00
		AREA TOTAL ***		8,825.00
	***637	PHARMACY-SELF ADMIN DRUGS		
06/10	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
06/10	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
06/10	005492	PROTONIX EC 40MG TAB	1	1.50
06/10	005492	PROTONIX EC 40MG TAB	1	1.50
06/10	007023	SIMVASTATIN 40MG TAB	1	1.50
06/10	007023	SIMVASTATIN 40MG TAB	1	1.50
06/11	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
06/11	005492	PROTONIX EC 40MG TAB	1	1.50
06/11	007023	SIMVASTATIN 40MG TAB	1	1.50
06/12	002628	NICOTINE PATCH 21MG	1	4.13

Continued

F/C:MG P/T:IP

FARR, WILLIAM G 1216200102

06/10/12 06/12/12 5

RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

870598 HOSPICE SRMC
999 [REDACTED] 05/12/15

CODE	DESCRIPTION	AREA TOTAL ***	QTY	
				17.63
06/10	***730 EKG/ECG 010000 ELECTROCARDIOGRAM, TRACING		1	227.00
	AREA TOTAL ***			227.00
TOTAL CHARGES				24,276.63
11/28	I6112 702 COMMERCIAL INSURANCE PAYMENT	870		1,319.06CR
06/23	A5040 873 MEDICARE INPATIENT- ADJ	316		14,607.92CR
07/11	A5999 683 NONCONTRACTED- ADJ	870		0.00
07/10	A5040 625 MEDICARE INPATIENT- ADJ	316		14,607.92
11/28	A5065 702 HOSPICE CONTRACTUAL ADJUSTMENT	870		22,957.57CR
TOTAL PAYMENTS/ADJUSTMENTS				24,276.63CR

0.00

0.00

0.00

F/C:MS P/T:TRS

FARR, WILLIAM G

1215901341

06/06/12 06/06/12 1

RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
	***540	AMBULANCE		
06/06	010435	MILEAGE	23	209.30
06/06	010436	FRACTIONAL MILEAGE	2	1.82
06/06	010450	AMB SRVC, BLS, NON-EMERGENCY	1	264.40
AREA TOTAL ***				475.52

TOTAL CHARGES

475.52

08/10	I5200	MC1 MEDICARE - ERA	316	304.46CR
08/23	I5212	151 UHC-AARP - ERA	850	76.11CR
06/14	A5041	374 MEDICARE OUTPATIENT- ADJ	316	442.23CR
08/10	A5041	MC1 MEDICARE OUTPATIENT- ADJ	316	94.95CR
08/10	A5041	MC1 MEDICARE OUTPATIENT- ADJ	316	442.23

TOTAL PAYMENTS/ADJUSTMENTS

475.52CR

0.00

0.00

0.00

F/C:SM

P/T:IP

FARR, WILLIAM G

1215200150

05/31/12 06/06/12 1

RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
	***010	ORDER COMMUNICATION MESSAGE		
05/31	002000	CARE PLAN	1	0.00
06/02	002000	CARE PLAN	1	0.00
06/04	010836	OXYGEN	1	0.00
06/04	010836	OXYGEN	1	0.00
06/04	002000	CARE PLAN	1	0.00
06/04	020848	OXYGEN ADJUST 1	1	0.00
06/04	020852	OXYGEN EQUIPMENT CHG	1	0.00
06/05	010836	OXYGEN	1	0.00
06/05	010836	OXYGEN	1	0.00
06/06	010836	OXYGEN	1	0.00
06/06	002000	CARE PLAN	1	0.00
		AREA TOTAL ***		0.00
	***214	CCU/INTERMEDIATE		
05/31	015535	ROOM 8527 T	1	1,716.00
06/01	015535	ROOM 8527 T	1	1,716.00
06/02	015535	ROOM 8527 T	1	1,716.00
06/03	015535	ROOM 8527 T	1	1,716.00
06/04	015535	ROOM 8527 T	1	1,716.00
06/05	015535	ROOM 8527 T	1	1,716.00
		AREA TOTAL ***		10,296.00
	***250	PHARMACY		
05/31	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	1	1.00
05/31	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	6	6.00
05/31	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	1	1.00
05/31	006209	AVELOX IV 400MG/250ML	1	100.00
06/01	005723	PULMICORT RESPULES 0.5MG/2ML BX30	1	64.56
06/01	005723	PULMICORT RESPULES 0.5MG/2ML BX30	1	64.56
06/02	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	1	1.00
		AREA TOTAL ***		238.12
	***258	IV SOLUTIONS		

Continued

F/C:SM P/T:IP

FARR, WILLIAM G

1215200150

05/31/12 06/06/12 2

RONALD H LITTLEFIELD

316501 MEDICARE

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
05/31	000407	SODIUM CHLORIDE 0.9% 100ML IV	1	100.00
06/01	001549	NDC 00338055318	1	100.00
06/03	001549	NDC 00338055318	1	100.00
06/04	001549	NDC 00338055318	1	100.00
06/04	001549	NDC 00338055318	1	100.00
AREA TOTAL ***				500.00

	CODE	DESCRIPTION	QTY	
05/31	***270	MED/SUR SUPPLY		
05/31	010855	OXYGEN/SHIFT	1	100.00
06/03	010855	OXYGEN/SHIFT	1	100.00
06/04	010855	OXYGEN/SHIFT	1	100.00
06/04	010855	OXYGEN/SHIFT	1	100.00
06/05	010855	OXYGEN/SHIFT	1	100.00
06/05	010855	OXYGEN/SHIFT	1	100.00
06/06	010855	OXYGEN/SHIFT	1	100.00
AREA TOTAL ***				700.00

	CODE	DESCRIPTION	QTY	
05/31	***300	LABORATORY		
05/31	010930	CPK	1	65.00
05/31	010930	CPK	1	65.00
05/31	011840	CK-MB	1	122.00
05/31	013281	TROPONIN, QUANT	1	104.00
05/31	013505	CMP	1	101.00
05/31	013550	IMMUNOASSAY CHF-BNP	1	288.00
05/31	018043	LEGIONELLA AG URINE NOW	1	127.00
05/31	018193	STREP PNEUMO URINE ANTIGEN	1	127.00
05/31	020050	CBC	1	63.00
05/31	040080	RESPIRATORY CULTURE W/GRAM STAIN	1	91.00
05/31	040165	GRAM STAIN	1	45.00
05/31	040255	MYCOPLASMA PNEUMONIAE EIA	1	140.00
05/31	040570	URINE CULTURE	1	85.00
05/31	040690	BLOOD CULTURE	1	109.00
05/31	040690	BLOOD CULTURE	1	109.00
05/31	099000	EC CK-MB FRACTION ONLY	1	122.00

Continued

F/C:SM P/T:IP

FARR, WILLIAM G

1215200150

05/31/12 06/06/12 3

RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
05/31	099004	EC TROPONIN	1	104.00
06/01	010930	CPK	1	65.00
06/01	010930	CPK	1	65.00
06/01	010930	CPK	1	65.00
06/01	010930	CPK	1	65.00
06/01	011770	MAGNESIUM SERUM	1	71.00
06/01	011840	CK-MB	1	122.00
06/01	011840	CK-MB	1	122.00
06/01	011840	CK-MB	1	122.00
06/01	011840	CK-MB	1	122.00
06/01	012221	LIPID PROFILE	1	103.00
06/01	013281	TROPONIN, QUANT	1	104.00
06/01	013281	TROPONIN, QUANT	1	104.00
06/01	013281	TROPONIN, QUANT	1	104.00
06/01	013281	TROPONIN, QUANT	1	104.00
06/01	013500	BMP	1	89.00
06/01	020050	CBC	1	63.00
06/01	040960	PROCALCITONIN	1	285.00
06/01	040960	PROCALCITONIN	1	285.00
06/01	050295	THYROID STIM HORMONE TSH	1	177.00
06/02	013500	BMP	1	89.00
06/04	013500	BMP	1	89.00
06/04	020080	CBC W/DIFF	1	78.00
		AREA TOTAL ***		4,360.00
	***320	DX X-RAY		
05/31	010052	CHEST X-RAY	1	234.00
06/04	050342	CHEST X-RAY	1	234.00
		AREA TOTAL ***		468.00
	***343	Diagnostic Radiopharmaceutical		
05/31	060381	NDC 00270131635	100	733.00
		AREA TOTAL ***		733.00

Continued

F/C:SM P/T:IP

FARR, WILLIAM G

1215200150

05/31/12 06/06/12 4

RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
05/31	***350	CT SCAN		
	060221	CT THORAX W/CONTRAST	1	2,147.00
		AREA TOTAL ***		2,147.00
	***410	RESPIRATORY SVC		
05/31	010483	HHN	1	128.00
05/31	010483	HHN	1	128.00
05/31	010483	HHN	1	128.00
05/31	010483	HHN	1	128.00
06/01	010483	HHN	1	128.00
06/01	010483	HHN	1	128.00
06/01	010483	HHN	1	128.00
06/01	010483	HHN	1	128.00
06/02	010483	HHN	1	128.00
06/02	010483	HHN	1	128.00
06/02	010483	HHN	1	128.00
06/02	010483	HHN	1	128.00
06/03	010483	HHN	1	128.00
06/03	010483	HHN	1	128.00
06/03	010483	HHN	1	128.00
06/03	010483	HHN	1	128.00
06/03	010483	HHN	1	128.00
06/03	010483	HHN	1	128.00
06/03	010483	HHN	1	128.00
06/04	010483	HHN	1	128.00
06/04	010483	HHN	1	128.00
06/04	010483	HHN	1	128.00
06/04	010483	HHN	1	128.00
06/04	010483	HHN	1	128.00
06/04	010483	HHN	1	128.00
06/04	010483	HHN	1	128.00
06/05	010483	HHN	1	128.00
06/05	010483	HHN	1	128.00
06/05	010483	HHN	1	128.00
06/05	010483	HHN	1	128.00

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FARR, WILLIAM G

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05/31/12 06/06/12 5

RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
06/05	010483	HHN	1	128.00
06/06	010483	HHN	1	128.00
06/06	010483	HHN	1	128.00
AREA TOTAL ***				4,096.00
***450 EMERGENCY ROOM				
05/31	002005	ED VISIT LEVEL 5	1	1,207.00
AREA TOTAL ***				1,207.00
***480 CARDIOLOGY				
06/02	070055	TTE W/DOPPLER, COMPLETE	1	1,589.00
AREA TOTAL ***				1,589.00
***636 DRUGS/DETAIL CODE				
05/31	000124	PREDNISONE 5MG ORAL	4	1.50
05/31	002717	METHYLPREDNISOLONE SUCC 125MG INJ	1	225.00
05/31	004461	CEFEPIME HCL 500MG INJ	8	450.00
05/31	004461	CEFEPIME HCL 500MG INJ	8	450.00
05/31	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
05/31	004679	ENOXAPARIN SODIUM 10MG INJ	6	225.00
06/01	000124	PREDNISONE 5MG ORAL	4	1.50
06/01	004461	CEFEPIME HCL 500MG INJ	8	450.00
06/01	004679	ENOXAPARIN SODIUM 10MG INJ	12	450.00
06/01	004679	ENOXAPARIN SODIUM 10MG INJ	12	450.00
06/02	000124	PREDNISONE 5MG ORAL	4	1.50
06/02	004461	CEFEPIME HCL 500MG INJ	8	450.00
06/02	004679	ENOXAPARIN SODIUM 10MG INJ	12	450.00
06/03	000121	PREDNISONE 5MG ORAL	2	1.50
06/03	004461	CEFEPIME HCL 500MG INJ	8	450.00
06/03	004679	ENOXAPARIN SODIUM 10MG INJ	12	450.00
06/03	006584	HEPARIN SODIUM 10U INJ	50	100.00
06/04	000121	PREDNISONE 5MG ORAL	2	1.50
06/04	004679	ENOXAPARIN SODIUM 10MG INJ	12	450.00
06/05	000121	PREDNISONE 5MG ORAL	2	1.50

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FARR, WILLIAM G

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RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
06/05	004679	ENOXAPARIN SODIUM 10MG INJ	12	450.00
06/05	006584	HEPARIN SODIUM 10U INJ	50	100.00
06/06	006584	HEPARIN SODIUM 10U INJ	50	100.00
			AREA TOTAL ***	
				5,934.00
***637 PHARMACY-SELF ADMIN DRUGS				
05/31	000033	KLOR-CON ER 200MEQ TABLET	1	1.50
05/31	000033	KLOR-CON ER 200MEQ TABLET	2	3.00
05/31	000053	ASPIRIN 325MG TABLET EC	1	1.50
05/31	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
05/31	002591	FENTANYL PATCH 25 MCG/HR	1	10.90
05/31	002632	NICOTINE PATCH 14MG	1	4.88
05/31	003326	ASPIRIN 325MG TABLET	1	1.50
05/31	004378	COREG 3.125MG TAB	1	1.50
05/31	005492	PROTONIX EC 40MG TAB	1	1.50
05/31	005492	PROTONIX EC 40MG TAB	2	3.00
05/31	006955	ARFORMOTEROL 15MCG/2ML INH	1	20.53
05/31	007023	SIMVASTATIN 40MG TAB	1	1.50
05/31	007023	SIMVASTATIN 40MG TAB	1	1.50
06/01	000032	POTASSIUM CHLORIDE 10MEQ CAP CR	3	4.50
06/01	000032	POTASSIUM CHLORIDE 10MEQ CAP CR	3	4.50
06/01	000033	KLOR-CON ER 200MEQ TABLET	2	3.00
06/01	000053	ASPIRIN 325MG TABLET EC	1	1.50
06/01	002632	NICOTINE PATCH 14MG	1	4.88
06/01	004378	COREG 3.125MG TAB	2	3.00
06/01	004378	COREG 3.125MG TAB	2	3.00
06/01	005492	PROTONIX EC 40MG TAB	2	3.00
06/01	006955	ARFORMOTEROL 15MCG/2ML INH	6	123.18
06/01	006955	ARFORMOTEROL 15MCG/2ML INH	-1	20.53CR
06/01	007023	SIMVASTATIN 40MG TAB	1	1.50
06/02	000033	KLOR-CON ER 200MEQ TABLET	2	3.00
06/02	000053	ASPIRIN 325MG TABLET EC	1	1.50
06/02	002632	NICOTINE PATCH 14MG	1	4.88
06/02	004378	COREG 3.125MG TAB	2	3.00

Continued

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FARR, WILLIAM G

1215200150

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RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
06/02	005492	PROTONIX EC 40MG TAB	2	3.00
06/02	007023	SIMVASTATIN 40MG TAB	1	1.50
06/03	000033	KLOR-CON ER 200MEQ TABLET	2	3.00
06/03	000053	ASPIRIN 325MG TABLET EC	1	1.50
06/03	002591	FENTANYL PATCH 25 MCG/HR	1	10.90
06/03	002632	NICOTINE PATCH 14MG	1	4.88
06/03	004378	COREG 3.125MG TAB	2	3.00
06/03	005492	PROTONIX EC 40MG TAB	2	3.00
06/03	006707	PROVENTIL HFA 6.7GM INHALER	1	30.64
06/03	007023	SIMVASTATIN 40MG TAB	1	1.50
06/04	000033	KLOR-CON ER 200MEQ TABLET	2	3.00
06/04	000053	ASPIRIN 325MG TABLET EC	1	1.50
06/04	002632	NICOTINE PATCH 14MG	1	4.88
06/04	004378	COREG 3.125MG TAB	2	3.00
06/04	005492	PROTONIX EC 40MG TAB	2	3.00
06/04	007023	SIMVASTATIN 40MG TAB	1	1.50
06/05	000033	KLOR-CON ER 200MEQ TABLET	2	3.00
06/05	000053	ASPIRIN 325MG TABLET EC	1	1.50
06/05	002632	NICOTINE PATCH 14MG	1	4.88
06/05	004378	COREG 3.125MG TAB	2	3.00
06/05	005252	AVELOX 400MG TAB	1	49.57
06/05	005252	AVELOX 400MG TAB	1	49.57
06/05	005492	PROTONIX EC 40MG TAB	2	3.00
06/05	006955	ARFORMOTEROL 15MCG/2ML INH	4	82.12
06/05	006955	ARFORMOTEROL 15MCG/2ML INH	-1	20.53CR
06/05	006955	ARFORMOTEROL 15MCG/2ML INH	-2	41.06CR
06/05	006955	ARFORMOTEROL 15MCG/2ML INH	-1	20.53CR
06/05	007023	SIMVASTATIN 40MG TAB	1	1.50
06/05	007349	HYDROCODONE BIT/APAP 7.5-3.25MG T	1	2.00
06/05	007349	HYDROCODONE BIT/APAP 7.5-3.25MG T	1	2.00
06/06	007349	HYDROCODONE BIT/APAP 7.5-3.25MG T	1	2.00
AREA TOTAL ***				400.04

***730 EKG/ECG

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FARR, WILLIAM G

1215200150

05/31/12 06/06/12 8

RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
05/31	010000	ELECTROCARDIOGRAM, TRACING	1	227.00
06/01	010000	ELECTROCARDIOGRAM, TRACING	1	227.00
		AREA TOTAL ***		454.00
	***960	PRO FEE		
06/01	010010	ELECTROCARDIOGRAM REPORT	1	76.00
		AREA TOTAL ***		76.00

TOTAL CHARGES

33,198.16

06/28	I5200	MC1 MEDICARE - ERA	316	9,339.10CR
07/17	I5205	M51 MEDICARE PART B - ERA	316	6.44CR
08/29	I6112	417 COMMERCIAL INSURANCE PAYMENT	850	1.61CR
05/14	I5205	M51 MEDICARE PART B - ERA	316	6.50CR
05/14	I5205	M51 MEDICARE PART B - ERA	316	6.44
06/14	A5040	367 MEDICARE INPATIENT- ADJ	316	23,453.45CR
06/28	A5040	MC1 MEDICARE INPATIENT- ADJ	316	23,783.06CR
06/28	A5040	MC1 MEDICARE INPATIENT- ADJ	316	23,453.45
07/16	A3080	11 Adjustment ePrescribe Penalty	316	0.08CR
07/17	A5002	M51 MEDICARE PRO FEE- ADJ	316	67.87CR
05/15	A5002	M51 MEDICARE PRO FEE- ADJ	316	67.87CR
05/15	A5002	M51 MEDICARE PRO FEE- ADJ	316	67.87
05/14	A3080	816 Adjustment ePrescribe Penalty	316	0.08
05/17	A3007	146 SMALL BALANCE INSURANCE	316	0.02CR

TOTAL PAYMENTS/ADJUSTMENTS

33,198.16CR

0.00

0.00

0.00

F/C:SM P/T:GIC

FARR, WILLIAM G

1213000807

05/10/12 05/10/12 1

SHARMILA MEHTA

316501 MEDICARE

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
05/10	***335	CHEMOTHERP-IV		
	080461	IRRIG CV ACCESS DEVICE-CHEMO	1	225.00
		AREA TOTAL ***		225.00
05/10	***636	DRUGS/DETAIL CODE		
	006584	HEPARIN SODIUM 10U INJ	50	100.00
		AREA TOTAL ***		100.00

TOTAL CHARGES

325.00

06/04	I5200	MC1 MEDICARE - ERA	316	34.62CR
05/21	A5041	951 MEDICARE OUTPATIENT- ADJ	316	276.68CR
06/04	A5041	MC1 MEDICARE OUTPATIENT- ADJ	316	277.18CR
06/04	A5041	MC1 MEDICARE OUTPATIENT- ADJ	316	276.68

TOTAL PAYMENTS/ADJUSTMENTS

311.80CR

13.20

0.00

13.20

F/C:MC P/T:IP

FARR, WILLIAM G

1211401433

04/23/12 05/07/12 1

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
	***010	ORDER COMMUNICATION MESSAGE		
04/24	010931	PEP THERAPY	1	0.00
04/24	002000	CARE PLAN	1	0.00
04/26	010280	EKG	1	0.00
04/26	010280	EKG	1	0.00
04/26	010836	OXYGEN	1	0.00
04/26	010836	OXYGEN	1	0.00
04/26	002000	CARE PLAN	1	0.00
04/27	010836	OXYGEN	1	0.00
04/27	010836	OXYGEN	1	0.00
04/27	010836	OXYGEN	1	0.00
04/27	020848	OXYGEN ADJUST 1	1	0.00
04/27	020852	OXYGEN EQUIPMENT CHG	1	0.00
04/28	010836	OXYGEN	1	0.00
04/28	010836	OXYGEN	1	0.00
04/28	002000	CARE PLAN	1	0.00
04/29	006342	IN A PREMIXED MINIBAG	1	0.00
04/29	010836	OXYGEN	1	0.00
04/29	010836	OXYGEN	1	0.00
04/30	010836	OXYGEN	1	0.00
04/30	010836	OXYGEN	1	0.00
04/30	002000	CARE PLAN	1	0.00
05/01	010836	OXYGEN	1	0.00
05/01	010836	OXYGEN	1	0.00
05/02	010836	OXYGEN	1	0.00
05/02	010836	OXYGEN	1	0.00
05/02	002000	CARE PLAN	1	0.00
05/02	002000	CARE PLAN	1	0.00
05/02	020201	POINT OF CARE TESTING	1	0.00
05/02	020202	POINT OF CARE BLD GAS ANALYSIS	1	0.00
05/02	099022	POC GLUCOSE	1	0.00
05/02	099022	POC GLUCOSE	1	0.00
05/03	003895	KEY TO REFRIGERATOR/NARC. CAB	1	0.00
05/03	003895	KEY TO REFRIGERATOR/NARC. CAB	1	0.00

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F/C:MC P/T:IP

FARR, WILLIAM G

1211401433

04/23/12 05/07/12 2

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
05/03	003895	KEY TO REFRIGERATOR/NARC. CAB	1	0.00
05/03	003895	KEY TO REFRIGERATOR/NARC. CAB	1	0.00
05/03	010836	OXYGEN	1	0.00
05/03	010836	OXYGEN	1	0.00
05/03	012040	BRONCHOSCOPY ASSIST	1	0.00
05/03	002000	CARE PLAN	1	0.00
05/03	002000	CARE PLAN	1	0.00
05/03	060851	CYTOLOGY NON-GENITAL SPECIMEN	1	0.00
05/03	099022	POC GLUCOSE	1	0.00
05/03	099022	POC GLUCOSE	1	0.00
05/04	010836	OXYGEN	1	0.00
05/04	010836	OXYGEN	1	0.00
05/04	002000	CARE PLAN	1	0.00
05/05	010836	OXYGEN	1	0.00
05/05	010836	OXYGEN	1	0.00
05/05	002000	CARE PLAN	1	0.00
05/06	010836	OXYGEN	1	0.00
05/06	010836	OXYGEN	1	0.00
05/06	002000	CARE PLAN	1	0.00
05/07	010836	OXYGEN	1	0.00
AREA TOTAL ***				0.00

	***110	ROOM-BOARD/PVT		
04/23	010800	ROOM 822 P	1	1,183.00
04/24	010800	ROOM 822 P	1	1,183.00
04/25	010800	ROOM 822 P	1	1,183.00
04/26	010800	ROOM 822 P	1	1,183.00
04/27	010800	ROOM 822 P	1	1,183.00
04/28	010800	ROOM 822 P	1	1,183.00
04/29	010800	ROOM 822 P	1	1,183.00
04/30	010800	ROOM 822 P	1	1,183.00
05/01	010800	ROOM 822 P	1	1,183.00
05/03	010400	ROOM 410 P	1	1,183.00
05/04	010400	ROOM 410 P	1	1,183.00

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F/C:MC P/T:IP

FARR, WILLIAM G

1211401433

04/23/12 05/07/12 3

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
05/05	010400	ROOM 410 P	1	1,183.00
05/06	010400	ROOM 410 P	1	1,183.00
AREA TOTAL ***				15,379.00
***200 INTENSIVE CARE				
05/02	016120	ROOM ICU C	1	3,795.00
AREA TOTAL ***				3,795.00
***250 PHARMACY				
04/23	007121	LIDOCAINE W/EPI 1% 20ML INJ	1	225.00
04/25	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	6	6.00
04/26	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	1	1.00
04/28	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	8	8.00
04/29	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	1	1.00
04/30	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	10	10.00
05/02	005723	PULMICORT RESPULES 0.5MG/2ML BX30	1	64.56
05/04	005723	PULMICORT RESPULES 0.5MG/2ML BX30	1	64.56
05/04	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	8	8.00
05/06	005723	PULMICORT RESPULES 0.5MG/2ML BX30	1	64.56
05/06	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	8	8.00
05/06	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	-3	3.00CR
AREA TOTAL ***				457.68
***258 IV SOLUTIONS				
04/29	007213	MAGNESIUM SULFATE 4GM/100ML WATER	1	100.00
AREA TOTAL ***				100.00
***270 MED/SUR SUPPLY				
04/23	010855	OXYGEN/SHIFT	1	100.00
04/24	010855	OXYGEN/SHIFT	1	100.00
04/24	010855	OXYGEN/SHIFT	1	100.00
04/25	010855	OXYGEN/SHIFT	1	100.00
04/26	010855	OXYGEN/SHIFT	1	100.00
04/27	010855	OXYGEN/SHIFT	1	100.00

Continued

F/C:MC P/T:IP

FARR, WILLIAM G

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CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
04/27	010855	OXYGEN/SHIFT	1	100.00
04/29	010855	OXYGEN/SHIFT	1	100.00
04/30	010855	OXYGEN/SHIFT	1	100.00
05/01	010855	OXYGEN/SHIFT	1	100.00
05/01	010855	OXYGEN/SHIFT	1	100.00
05/02	010855	OXYGEN/SHIFT	1	100.00
05/02	010855	OXYGEN/SHIFT	1	100.00
05/03	010855	OXYGEN/SHIFT	1	100.00
05/03	010855	OXYGEN/SHIFT	1	100.00
05/04	010855	OXYGEN/SHIFT	1	100.00
05/04	010855	OXYGEN/SHIFT	1	100.00
05/05	010855	OXYGEN/SHIFT	1	100.00
05/05	010855	OXYGEN/SHIFT	1	100.00
05/06	010855	OXYGEN/SHIFT	1	100.00
05/06	010855	OXYGEN/SHIFT	1	100.00
05/07	010855	OXYGEN/SHIFT	1	100.00
AREA TOTAL ***				2,200.00

	***300	LABORATORY		
04/23	013500	BMP	1	89.00
04/23	020050	CBC	1	63.00
04/23	020480	PARTIAL THROMBOPLASTIN TIME	1	63.00
04/23	020590	PROTHROMBIN TIME	1	41.00
04/24	013500	BMP	1	89.00
04/24	020050	CBC	1	63.00
04/24	040520	SPUTUM SCREEN	1	45.00
04/24	040960	PROCALCITONIN	1	285.00
04/24	050062	C-REACTIVE PROTEIN	1	55.00
04/25	013500	BMP	1	89.00
04/25	020050	CBC	1	63.00
04/27	013500	BMP	1	89.00
04/28	020050	CBC	1	63.00
04/29	011770	MAGNESIUM SERUM	1	71.00
04/29	013500	BMP	1	89.00

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FARR, WILLIAM G

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CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
04/29	013550	IMMUNOASSAY CHF-BNP	1	288.00
04/29	020050	CBC	1	63.00
04/29	040960	PROCALCITONIN	1	285.00
05/02	010948	RESPIRATORY ABG PUNCTURE	1	131.00
05/02	031110	BLOOD GAS	1	204.00
05/03	020310	BODY FLUID CELL COUNT AND DIFF	1	58.00
05/03	040060	FUNGUS CULTURE W/FUNGAL SMEAR	1	89.00
05/03	040070	AEROBIC IDENTIFICATION	1	85.00
05/03	040080	RESPIRATORY CULTURE W/GRAM STAIN	1	91.00
05/03	040080	RESPIRATORY CULTURE W/GRAM STAIN	1	91.00
05/03	040165	GRAM STAIN	1	45.00
05/03	040165	GRAM STAIN	1	45.00
05/03	040630	FUNGAL SMEAR	1	57.00
05/03	040635	ACID FAST BACILLI-TB-CULT W/SMEAR	1	114.00
05/03	040645	ACID FAST SMEAR	1	57.00
05/03	040960	PROCALCITONIN	1	285.00
05/06	013500	BMP	1	89.00
05/06	020080	CBC W/DIFF	1	78.00
05/06	050062	C-REACTIVE PROTEIN	1	55.00
05/07	020050	CBC	1	63.00
AREA TOTAL ***				3,530.00
05/03	***310	PATHOLOGY LAB		
05/03	060750	CYTOPATH CELL ENHANCE TECH	1	260.00
AREA TOTAL ***				260.00
	***320	DX X-RAY		
04/23	010052	CHEST X-RAY	1	234.00
04/23	050354	CHEST X-RAY	1	234.00
04/23	050354	CHEST X-RAY	1	234.00
04/25	050354	CHEST X-RAY	1	234.00
04/26	050354	CHEST X-RAY	1	234.00
04/27	050354	CHEST X-RAY	1	234.00
04/28	050338	CHEST X-RAY	1	234.00

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FARR, WILLIAM G

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CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
04/28	050354	CHEST X-RAY	1	234.00
04/29	050354	CHEST X-RAY	1	234.00
04/30	050354	CHEST X-RAY	1	234.00
05/01	050342	CHEST X-RAY	1	234.00
05/01	050354	CHEST X-RAY	1	234.00
05/02	050338	CHEST X-RAY	1	234.00
05/03	050354	CHEST X-RAY	1	234.00
05/04	050354	CHEST X-RAY	1	234.00
05/05	050338	CHEST X-RAY	1	234.00
05/06	050338	CHEST X-RAY	1	234.00
05/07	050342	CHEST X-RAY	1	234.00
AREA TOTAL ***				4,212.00

05/02	***343	Diagnostic Radiopharmaceutical		
	060381	NDC 00270131635	100	733.00
AREA TOTAL ***				733.00

04/27	***350	CT SCAN		
05/02	060220	CT THORAX W/O DYE	1	1,245.00
	060221	CT THORAX W/CONTRAST	1	2,147.00
AREA TOTAL ***				3,392.00

04/24	***410	RESPIRATORY SVC		
04/25	010932	PEP THERAPY INITIAL	1	128.00
04/26	020214	MDI (METER-DOSE INHALER) TX	1	128.00
04/26	010483	HHN	1	128.00
04/26	010483	HHN	1	128.00
04/28	010483	HHN	1	128.00
04/28	010483	HHN	1	128.00
04/28	010483	HHN	1	128.00
04/28	010483	HHN	1	128.00
04/29	010483	HHN	1	128.00
04/29	010483	HHN	1	128.00
04/29	010483	HHN	1	128.00
04/29	010483	HHN	1	128.00

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FARR, WILLIAM G

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CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
04/29	020214	MDI (METER-DOSE INHALER) TX	1	128.00
04/29	020214	MDI (METER-DOSE INHALER) TX	1	128.00
04/30	010483	HHN	1	128.00
04/30	010483	HHN	1	128.00
04/30	010483	HHN	1	128.00
04/30	010483	HHN	1	128.00
04/30	010483	HHN	1	128.00
05/01	010483	HHN	1	128.00
05/01	010483	HHN	1	128.00
05/01	010483	HHN	1	128.00
05/01	010483	HHN	1	128.00
05/02	010483	HHN	1	128.00
05/02	010483	HHN	1	128.00
05/02	010483	HHN	1	128.00
05/02	010483	HHN	1	128.00
05/02	010483	HHN	1	128.00
05/02	010483	HHN	1	128.00
05/02	010483	HHN	1	128.00
05/03	010483	HHN	1	128.00
05/03	010483	HHN	1	128.00
05/03	010483	HHN	1	128.00
05/03	010483	HHN	1	128.00
05/03	010483	HHN	1	128.00
05/03	010483	HHN	1	128.00
05/03	010483	HHN	1	128.00
05/03	010483	HHN	1	128.00
05/03	010483	HHN	1	128.00
05/04	010483	HHN	1	128.00
05/04	010483	HHN	1	128.00
05/04	010483	HHN	1	128.00
05/04	010483	HHN	1	128.00
05/04	010483	HHN	1	128.00
05/04	010483	HHN	1	128.00
05/04	010483	HHN	1	128.00

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FARR, WILLIAM G

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CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
05/05	010483	HHN	1	128.00
05/05	010483	HHN	1	128.00
05/05	010483	HHN	1	128.00
05/05	010483	HHN	1	128.00
05/05	010483	HHN	1	128.00
05/05	010483	HHN	1	128.00
05/05	010483	HHN	1	128.00
05/05	010483	HHN	1	128.00
05/06	010483	HHN	1	128.00
05/06	010483	HHN	1	128.00
05/06	010483	HHN	1	128.00
05/06	010483	HHN	1	128.00
05/06	010483	HHN	1	128.00
05/06	010483	HHN	1	128.00
05/06	010483	HHN	1	128.00
05/06	020214	MDI (METER-DOSE INHALER) TX	1	128.00
05/07	010483	HHN	1	128.00
05/07	010483	HHN	1	128.00
05/07	010483	HHN	1	128.00
05/07	010483	HHN	1	128.00
05/07	010483	HHN	1	128.00
05/07	020214	MDI (METER-DOSE INHALER) TX	1	128.00
		AREA TOTAL ***		8,704.00
05/04	***424	PHYS THERP/EVAL		
	010500	INITIAL EVALUATION	1	343.00
		AREA TOTAL ***		343.00
	***450	EMERGENCY ROOM		
04/23	002008	ED CRITICAL CARE-1ST 30-74 MIN	1	1,703.00
04/23	041005	INSERTION OF CHEST TUBE	1	1,404.00
		AREA TOTAL ***		3,107.00

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CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
	***636	DRUGS/DETAIL CODE		
04/23	002581	MORPHINE SULFATE 10MG INJ	1	250.00
04/23	002581	MORPHINE SULFATE 10MG INJ	1	250.00
04/23	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/24	000121	PREDNISONE 5MG ORAL	2	1.50
04/24	000121	PREDNISONE 5MG ORAL	2	1.50
04/24	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00
04/24	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00
04/24	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/24	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/24	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/24	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
04/25	000121	PREDNISONE 5MG ORAL	2	1.50
04/25	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00
04/26	000121	PREDNISONE 5MG ORAL	2	1.50
04/26	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00
04/26	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/26	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/26	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/27	000121	PREDNISONE 5MG ORAL	2	1.50
04/27	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00
04/27	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/27	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/28	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00
04/28	001187	FUROSEMIDE 20MG INJ	1	225.00
04/28	001187	FUROSEMIDE 20MG INJ	1	225.00
04/28	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/28	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/28	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/28	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/28	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/28	002716	METHYLPREDNISOLONE SUCC 40MG INJ	2	450.00
04/28	002716	METHYLPREDNISOLONE SUCC 40MG INJ	2	450.00
04/29	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00

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FARR, WILLIAM G

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CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
04/29	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/29	002716	METHYLPREDNISOLONE SUCC 40MG INJ	2	450.00
04/30	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00
04/30	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/30	002716	METHYLPREDNISOLONE SUCC 40MG INJ	2	450.00
05/01	000124	PREDNISONE 5MG ORAL	16	6.00
05/01	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00
05/02	000124	PREDNISONE 5MG ORAL	16	6.00
05/03	000124	PREDNISONE 5MG ORAL	6	3.00
05/03	001170	ENOXAPARIN SODIUM 10MG INJ	3	225.00
05/03	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00
05/03	002799	FENTANYL CITRATE 0.1MG INJ	3	250.00
05/03	002811	MIDAZOLAM HCL 1MG INJ	2	250.00
05/03	002811	MIDAZOLAM HCL 1MG INJ	2	250.00
05/03	006584	HEPARIN SODIUM 10U INJ	50	100.00
05/04	000124	PREDNISONE 5MG ORAL	6	3.00
05/04	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00
05/04	006584	HEPARIN SODIUM 10U INJ	50	100.00
05/05	000124	PREDNISONE 5MG ORAL	4	1.50
05/05	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00
05/05	001355	FUROSEMIDE 20MG INJ	2	225.00
05/05	006584	HEPARIN SODIUM 10U INJ	50	100.00
05/06	000124	PREDNISONE 5MG ORAL	4	1.50
05/06	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00
		AREA TOTAL ***		14,353.50
	***637	PHARMACY-SELF ADMIN DRUGS		
04/23	000033	KLOR-CON ER 200MEQ TABLET	2	3.00
04/23	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
04/23	002632	NICOTINE PATCH 14MG	1	4.88
04/23	005492	PROTONIX EC 40MG TAB	1	1.50
04/23	006941	SYMBICORT MDI 160-4.5MCG INHALER	1	134.34
04/23	007023	SIMVASTATIN 40MG TAB	1	1.50
04/23	007246	ALBUTEROL SULFATE 90MCG INHAL	1	73.98

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FARR, WILLIAM G

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CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
04/23	007349	HYDROCODONE BIT/APAP 7.5-3.25MG T	1	2.00
04/24	000033	KLOR-CON ER 200MEQ TABLET	2	3.00
04/24	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
04/24	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
04/24	000063	SENNA LAXATIVE 8.6MG TABLET	2	3.00
04/24	000063	SENNA LAXATIVE 8.6MG TABLET	2	3.00
04/24	001983	TRIAMTERENE W/HCTZ-37.5-25MG TABL	1	1.50
04/24	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
04/24	002632	NICOTINE PATCH 14MG	1	4.88
04/24	002632	NICOTINE PATCH 14MG	1	4.88
04/24	003892	HYDROMET SYRUP 473ML	2	23.62
04/24	005289	NORCO 10 325MG TAB	1	2.00
04/24	005289	NORCO 10 325MG TAB	1	2.00
04/24	005492	PROTONIX EC 40MG TAB	2	3.00
04/24	005492	PROTONIX EC 40MG TAB	2	3.00
04/24	007023	SIMVASTATIN 40MG TAB	1	1.50
04/24	007023	SIMVASTATIN 40MG TAB	1	1.50
04/24	007023	SIMVASTATIN 40MG TAB	1	1.50
04/24	007349	HYDROCODONE BIT/APAP 7.5-3.25MG T	1	2.00
04/25	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
04/25	000063	SENNA LAXATIVE 8.6MG TABLET	2	3.00
04/25	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
04/25	002632	NICOTINE PATCH 14MG	1	4.88
04/25	003892	HYDROMET SYRUP 473ML	2	23.62
04/25	005289	NORCO 10 325MG TAB	1	2.00
04/25	005289	NORCO 10 325MG TAB	1	2.00
04/25	005289	NORCO 10 325MG TAB	1	2.00
04/25	005289	NORCO 10 325MG TAB	1	2.00
04/25	005492	PROTONIX EC 40MG TAB	2	3.00
04/25	006941	SYMBICORT MDI 160-4.5MCG INHALER	1	134.34
04/25	007023	SIMVASTATIN 40MG TAB	1	1.50
04/26	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
04/26	000063	SENNA LAXATIVE 8.6MG TABLET	2	3.00
04/26	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50

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FARR, WILLIAM G

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CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
04/26	002632	NICOTINE PATCH 14MG	1	4.88
04/26	003892	HYDROMET SYRUP 473ML	2	23.62
04/26	003892	HYDROMET SYRUP 473ML	2	23.62
04/26	005289	NORCO 10 325MG TAB	1	2.00
04/26	005289	NORCO 10 325MG TAB	1	2.00
04/26	005492	PROTONIX EC 40MG TAB	2	3.00
04/26	007023	SIMVASTATIN 40MG TAB	1	1.50
04/27	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
04/27	000063	SENNALAXATIVE 8.6MG TABLET	2	3.00
04/27	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
04/27	002632	NICOTINE PATCH 14MG	1	4.88
04/27	003892	HYDROMET SYRUP 473ML	2	23.62
04/27	003892	HYDROMET SYRUP 473ML	2	23.62
04/27	005289	NORCO 10 325MG TAB	1	2.00
04/27	005289	NORCO 10 325MG TAB	2	4.00
04/27	005289	NORCO 10 325MG TAB	2	4.00
04/27	005492	PROTONIX EC 40MG TAB	2	3.00
04/27	007023	SIMVASTATIN 40MG TAB	1	1.50
04/28	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
04/28	000063	SENNALAXATIVE 8.6MG TABLET	2	3.00
04/28	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
04/28	002632	NICOTINE PATCH 14MG	1	4.88
04/28	003892	HYDROMET SYRUP 473ML	2	23.62
04/28	003892	HYDROMET SYRUP 473ML	2	23.62
04/28	005492	PROTONIX EC 40MG TAB	2	3.00
04/28	007023	SIMVASTATIN 40MG TAB	1	1.50
04/29	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
04/29	000063	SENNALAXATIVE 8.6MG TABLET	2	3.00
04/29	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
04/29	002632	NICOTINE PATCH 14MG	1	4.88
04/29	003892	HYDROMET SYRUP 473ML	2	23.62
04/29	005289	NORCO 10 325MG TAB	2	4.00
04/29	005289	NORCO 10 325MG TAB	2	4.00
04/29	005492	PROTONIX EC 40MG TAB	2	3.00

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FARR, WILLIAM G

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CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY.
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
04/29	007023	SIMVASTATIN 40MG TAB	1	1.50
04/30	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
04/30	000063	SENNA LAXATIVE 8.6MG TABLET	2	3.00
04/30	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
04/30	002632	NICOTINE PATCH 14MG	1	4.88
04/30	003892	HYDROMET SYRUP 473ML	2	23.62
04/30	003892	HYDROMET SYRUP 473ML	2	23.62
04/30	005289	NORCO 10 325MG TAB	1	2.00
04/30	005289	NORCO 10 325MG TAB	2	4.00
04/30	005492	PROTONIX EC 40MG TAB	2	3.00
04/30	007023	SIMVASTATIN 40MG TAB	1	1.50
05/01	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
05/01	000063	SENNA LAXATIVE 8.6MG TABLET	2	3.00
05/01	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
05/01	002632	NICOTINE PATCH 14MG	1	4.88
05/01	003892	HYDROMET SYRUP 473ML	2	23.62
05/01	003892	HYDROMET SYRUP 473ML	2	23.62
05/01	005252	AVELOX 400MG TAB	1	49.57
05/01	005252	AVELOX 400MG TAB	1	49.57
05/01	005289	NORCO 10 325MG TAB	2	4.00
05/01	005289	NORCO 10 325MG TAB	2	4.00
05/01	005289	NORCO 10 325MG TAB	2	4.00
05/01	005492	PROTONIX EC 40MG TAB	2	3.00
05/01	007023	SIMVASTATIN 40MG TAB	1	1.50
05/02	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
05/02	000063	SENNA LAXATIVE 8.6MG TABLET	2	3.00
05/02	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
05/02	002632	NICOTINE PATCH 14MG	1	4.88
05/02	003711	LORAZEPAM 1MG TABLET	1	2.00
05/02	003892	HYDROMET SYRUP 473ML	2	23.62
05/02	005252	AVELOX 400MG TAB	1	49.57
05/02	005289	NORCO 10 325MG TAB	2	4.00
05/02	005289	NORCO 10 325MG TAB	1	2.00
05/02	005492	PROTONIX EC 40MG TAB	2	3.00

Continued

F/C:MC P/T:IP

FARR, WILLIAM G

1211401433

04/23/12 05/07/12 14

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC

29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
05/02	006955	ARFORMOTEROL 15MCG/2ML INH	4	82.12
05/02	006955	ARFORMOTEROL 15MCG/2ML INH	6	123.18
05/02	007023	SIMVASTATIN 40MG TAB	1	1.50
05/03	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
05/03	000063	SENNA LAXATIVE 8.6MG TABLET	2	3.00
05/03	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
05/03	002632	NICOTINE PATCH 14MG	1	4.88
05/03	003892	HYDROMET SYRUP 473ML	2	23.62
05/03	003892	HYDROMET SYRUP 473ML	2	23.62
05/03	005252	AVELOX 400MG TAB	1	49.57
05/03	005289	NORCO 10 325MG TAB	1	2.00
05/03	005289	NORCO 10 325MG TAB	2	4.00
05/03	005492	PROTONIX EC 40MG TAB	2	3.00
05/03	007023	SIMVASTATIN 40MG TAB	1	1.50
05/04	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
05/04	000063	SENNA LAXATIVE 8.6MG TABLET	2	3.00
05/04	000208	BENZONATATE LF 100MG CAPSULE	1	1.50
05/04	000208	BENZONATATE LF 100MG CAPSULE	3	4.50
05/04	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
05/04	002632	NICOTINE PATCH 14MG	1	4.88
05/04	003892	HYDROMET SYRUP 473ML	2	23.62
05/04	003892	HYDROMET SYRUP 473ML	2	23.62
05/04	003892	HYDROMET SYRUP 473ML	2	23.62
05/04	003892	HYDROMET SYRUP 473ML	2	23.62
05/04	005252	AVELOX 400MG TAB	1	49.57
05/04	005289	NORCO 10 325MG TAB	2	4.00
05/04	005289	NORCO 10 325MG TAB	2	4.00
05/04	005492	PROTONIX EC 40MG TAB	2	3.00
05/04	006955	ARFORMOTEROL 15MCG/2ML INH	5	102.65
05/04	006955	ARFORMOTEROL 15MCG/2ML INH	-4	82.12CR
05/04	007023	SIMVASTATIN 40MG TAB	1	1.50
05/05	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
05/05	000063	SENNA LAXATIVE 8.6MG TABLET	2	3.00
05/05	000208	BENZONATATE LF 100MG CAPSULE	3	4.50

Continued

F/C:MC P/T:IP

FARR, WILLIAM G

1211401433

04/23/12 05/07/12 15

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
05/05	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
05/05	002632	NICOTINE PATCH 14MG	1	4.88
05/05	003892	HYDROMET SYRUP 473ML	2	23.62
05/05	005252	AVELOX 400MG TAB	1	49.57
05/05	005289	NORCO 10 325MG TAB	2	4.00
05/05	005289	NORCO 10 325MG TAB	2	4.00
05/05	005289	NORCO 10 325MG TAB	2	4.00
05/05	005492	PROTONIX EC 40MG TAB	2	3.00
05/05	006340	SPIRIVA 18MCG CAP-HANDIHALER	1	131.48
05/05	007023	SIMVASTATIN 40MG TAB	1	1.50
05/05	007246	ALBUTEROL SULFATE 90MCG INHAL	1	73.98
05/06	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
05/06	000063	SENNA LAXATIVE 8.6MG TABLET	2	3.00
05/06	000208	BENZONATATE LF 100MG CAPSULE	3	4.50
05/06	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
05/06	002632	NICOTINE PATCH 14MG	1	4.88
05/06	005252	AVELOX 400MG TAB	1	49.57
05/06	005289	NORCO 10 325MG TAB	2	4.00
05/06	005289	NORCO 10 325MG TAB	2	4.00
05/06	005492	PROTONIX EC 40MG TAB	2	3.00
05/06	006955	ARFORMOTEROL 15MCG/2ML INH	6	123.18
05/06	006955	ARFORMOTEROL 15MCG/2ML INH	-2	41.06CR
05/06	006955	ARFORMOTEROL 15MCG/2ML INH	-4	82.12CR
05/06	007023	SIMVASTATIN 40MG TAB	1	1.50
05/07	003892	HYDROMET SYRUP 473ML	1	11.81
05/07	003892	HYDROMET SYRUP 473ML	1	11.81
05/07	005289	NORCO 10 325MG TAB	1	2.00
05/07	005289	NORCO 10 325MG TAB	2	4.00
		AREA TOTAL ***		2,054.78
	***730	EKG/ECG		
04/23	010000	ELECTROCARDIOGRAM, TRACING	1	227.00
04/26	010000	ELECTROCARDIOGRAM, TRACING	1	227.00
04/26	010000	ELECTROCARDIOGRAM, TRACING	1	227.00

Continued

F/C:MC P/T:IP

FARR, WILLIAM G

1211401433

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CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

CODE	DESCRIPTION	AREA TOTAL ***	QTY	
				681.00
05/03	***750 GASTR-INST SVS			
	060215 BRONCHOSCOPY, CLEAR AIRWAYS		1	1,769.00
		AREA TOTAL ***		1,769.00

TOTAL CHARGES 65,070.96

05/28	I5200	MC1 MEDICARE - ERA	316	11,270.93CR
05/14	A5040	587 MEDICARE INPATIENT- ADJ	316	53,334.36CR
05/28	A5040	MC1 MEDICARE INPATIENT- ADJ	316	53,800.03CR
05/28	A5040	MC1 MEDICARE INPATIENT- ADJ	316	53,334.36

TOTAL PAYMENTS/ADJUSTMENTS 65,070.96CR

0.00

0.00

0.00

F/C:SI P/T:IP

FARR, WILLIAM G

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04/17/12 04/20/12 1

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
	***010	ORDER COMMUNICATION MESSAGE		
04/18	002000	CARE PLAN	1	0.00
04/19	002000	CARE PLAN	1	0.00
AREA TOTAL ***				0.00
	***214	CCU/INTERMEDIATE		
04/17	014435	ROOM 8405 T	1	1,716.00
04/18	014435	ROOM 8405 T	1	1,716.00
04/19	014435	ROOM 8405 T	1	1,716.00
AREA TOTAL ***				5,148.00
	***250	PHARMACY		
04/17	005450	SENSORCAINE MPF 0.25% 10ML INJECT	3	225.00
04/17	005876	ZEMURON 10MG/ML INJ	1	225.00
04/18	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	8	8.00
04/19	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	12	12.00
04/19	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	9	9.00
AREA TOTAL ***				479.00
	***258	IV SOLUTIONS		
04/17	000340	NORMAL SALINE SOLUTION 1000 ML IN	1	100.00
04/17	000340	NORMAL SALINE SOLUTION 1000 ML IN	1	100.00
04/17	000340	NORMAL SALINE SOLUTION 1000 ML IN	1	100.00
04/18	000333	NORMAL SALINE SOL 500ML INFUSION	1	100.00
04/19	000340	NORMAL SALINE SOLUTION 1000 ML IN	1	100.00
AREA TOTAL ***				500.00
	***270	MED/SUR SUPPLY		
04/17	010855	OXYGEN/SHIFT	1	100.00
04/17	010855	OXYGEN/SHIFT	1	100.00
04/17	030190	RT DOUBLE LUMEN ENDOTRACHEAL TUBE	1	546.00
04/18	010855	OXYGEN/SHIFT	1	100.00
04/18	010855	OXYGEN/SHIFT	1	100.00
04/19	010855	OXYGEN/SHIFT	1	100.00

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FARR, WILLIAM G

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04/17/12 04/20/12 2

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
04/19	010855	OXYGEN/SHIFT	1	100.00
04/20	010855	OXYGEN/SHIFT	1	100.00
AREA TOTAL ***				1,246.00

04/17	***272 032550	STERILE SUP CATH, DRAINAGE	1	208.00
AREA TOTAL ***				208.00

***300 LABORATORY				
04/13	013500	BMP	1	89.00
04/13	020050	CBC	1	63.00
04/13	020480	PARTIAL THROMBOPLASTIN TIME	1	63.00
04/13	020590	PROTHROMBIN TIME	1	41.00
04/17	040060	FUNGUS CULTURE W/FUNGAL SMEAR	1	89.00
04/17	040165	GRAM STAIN	1	45.00
04/17	040630	FUNGAL SMEAR	1	57.00
04/17	040635	ACID FAST BACILLI-TB-CULT W/SMEAR	1	114.00
04/17	040645	ACID FAST SMEAR	1	57.00
04/17	040655	ANAEROBIC CULT W/GRAM STAIN	1	100.00
04/18	020050	CBC	1	63.00
04/19	013500	BMP	1	89.00
04/19	020050	CBC	1	63.00
04/20	020050	CBC	1	63.00
AREA TOTAL ***				996.00

***310 PATHOLOGY LAB				
04/17	061190	PATH CONSULT INTROP 1 BLOCK	1	260.00
04/17	062030	TISSUE EXAM BY PATHOLOGIST	1	260.00
04/17	062040	TISSUE EXAM BY PATHOLOGIST	1	403.00
AREA TOTAL ***				923.00

***320 DX X-RAY				
04/17	050354	CHEST X-RAY	1	234.00
04/18	050354	CHEST X-RAY	1	234.00

Continued

F/C:SI P/T:IP

FARR, WILLIAM G

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CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
04/18	050354	CHEST X-RAY	1	234.00
04/19	050354	CHEST X-RAY	1	234.00
04/20	050354	CHEST X-RAY	1	234.00
AREA TOTAL ***				1,170.00
***360 OR SERVICES				
04/17	020505	CV THORACIC ROBOT SURG 91-120 M	1	11,902.00
AREA TOTAL ***				11,902.00
***370 ANESTHESIA				
04/17	010000	ANESTHESIA SERVICES (T) PER MINUTE	116	1,276.00
AREA TOTAL ***				1,276.00
***410 RESPIRATORY SVC				
04/18	010538	IPPB	1	128.00
04/18	010538	IPPB	1	128.00
04/18	010942	POSITIVE PRESSURE THERAPY	1	128.00
04/19	010942	POSITIVE PRESSURE THERAPY	1	128.00
04/19	010942	POSITIVE PRESSURE THERAPY	1	128.00
04/19	010942	POSITIVE PRESSURE THERAPY	1	128.00
04/19	010942	POSITIVE PRESSURE THERAPY	1	128.00
04/19	010942	POSITIVE PRESSURE THERAPY	1	128.00
04/19	010942	POSITIVE PRESSURE THERAPY	1	128.00
04/19	020214	MDI (METER-DOSE INHALER) TX	1	128.00
04/19	020214	MDI (METER-DOSE INHALER) TX	1	128.00
04/20	010942	POSITIVE PRESSURE THERAPY	1	128.00
04/20	010942	POSITIVE PRESSURE THERAPY	1	128.00
04/20	010942	POSITIVE PRESSURE THERAPY	1	128.00
04/20	020214	MDI (METER-DOSE INHALER) TX	1	128.00
AREA TOTAL ***				2,048.00
***636 DRUGS/DETAIL CODE				
04/17	000998	LIDOCAINE HCL 10MG IV INFUSION	10	225.00

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F/C:SI P/T:IP

FARR, WILLIAM G

1210301383

04/17/12 04/20/12 4

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
04/17	001032	NEOSTIGMINE METHYLSUFATE 0.5MG IN	20	225.00
04/17	001459	HYDROMORPHONE 4MG INJ	1	250.00
04/17	001459	HYDROMORPHONE 4MG INJ	1	250.00
04/17	001459	HYDROMORPHONE 4MG INJ	1	250.00
04/17	002799	FENTANYL CITRATE 0.1MG INJ	3	250.00
04/17	002808	FENTANYL CITRATE 0.1MG INJ	1	250.00
04/17	002811	MIDAZOLAM HCL 1MG INJ	2	250.00
04/17	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
04/17	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
04/17	005245	PROPOFOL 10MG INJ	1	225.00
04/17	007616	GLYCOPYRROLATE 0.2MG INJ	1	225.00
04/17	000375	NDC 00338011704	1	100.00
04/18	000124	PREDNISONE 5MG ORAL	8	3.00
04/18	000124	PREDNISONE 5MG ORAL	4	1.50
04/18	001072	ONDANSETRON HCL 1MG INJ	16	900.00
04/18	001072	ONDANSETRON HCL 1MG INJ	4	225.00
04/18	001072	ONDANSETRON HCL 1MG INJ	16	900.00
04/18	001459	HYDROMORPHONE 4MG INJ	1	250.00
04/18	001459	HYDROMORPHONE 4MG INJ	1	250.00
04/18	001459	HYDROMORPHONE 4MG INJ	1	250.00
04/18	001459	HYDROMORPHONE 4MG INJ	1	250.00
04/18	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
04/18	005613	PANTOPRAZOLE SOD 40MG INJ	2	450.00
04/18	005613	PANTOPRAZOLE SOD 40MG INJ	2	450.00
04/19	000124	PREDNISONE 5MG ORAL	4	1.50
04/19	001072	ONDANSETRON HCL 1MG INJ	16	900.00
04/19	001459	HYDROMORPHONE 4MG INJ	1	250.00
04/19	001459	HYDROMORPHONE 4MG INJ	1	250.00
04/19	001459	HYDROMORPHONE 4MG INJ	1	250.00
04/19	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
04/20	001459	HYDROMORPHONE 4MG INJ	1	250.00
04/20	001459	HYDROMORPHONE 4MG INJ	1	250.00
AREA TOTAL ***				9,481.00

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F/C:SI P/T:IP

FARR, WILLIAM G

1210301383

04/17/12 04/20/12 5

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
	***637	PHARMACY-SELF ADMIN DRUGS		
04/17	000033	KLOR-CON ER 200MEQ TABLET	2	3.00
04/17	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
04/17	000155	SENNA S TABLET	2	3.00
04/17	000155	SENNA S TABLET	2	3.00
04/17	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
04/17	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
04/17	002632	NICOTINE PATCH 14MG	1	4.88
04/17	004403	COMBIVENT AERSOL 14.7GM INHAL	1	389.96
04/17	005289	NORCO 10 325MG TAB	2	4.00
04/17	005492	PROTONIX EC 40MG TAB	1	1.50
04/17	005492	PROTONIX EC 40MG TAB	1	1.50
04/17	005994	ALBUTEROL SULF. INHL. 5MG/ML SOLN	12	13.56
04/17	007023	SIMVASTATIN 40MG TAB	1	1.50
04/17	007023	SIMVASTATIN 40MG TAB	1	1.50
04/18	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
04/18	000155	SENNA S TABLET	2	3.00
04/18	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
04/18	002632	NICOTINE PATCH 14MG	1	4.88
04/18	002632	NICOTINE PATCH 14MG	1	4.88
04/18	003113	ZOLPIDEM 5MG TAB	1	2.00
04/18	003724	CALCIUM CARB 500MG TAB	1	3.00
04/18	005289	NORCO 10 325MG TAB	2	4.00
04/18	005289	NORCO 10 325MG TAB	1	2.00
04/18	007023	SIMVASTATIN 40MG TAB	1	1.50
04/19	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
04/19	000155	SENNA S TABLET	2	3.00
04/19	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
04/19	002632	NICOTINE PATCH 14MG	1	4.88
04/19	005492	PROTONIX EC 40MG TAB	2	3.00
04/19	005492	PROTONIX EC 40MG TAB	2	3.00
04/19	006941	SYMBICORT MDI 160-4.5MCG INHALER	1	134.34
04/19	007023	SIMVASTATIN 40MG TAB	1	1.50
04/20	005289	NORCO 10 325MG TAB	2	4.00

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F/C:SI P/T:IP

FARR, WILLIAM G

1210301383

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CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

CODE	DESCRIPTION	QTY	AREA TOTAL ***
			630.38
04/17	***710 RECOVERY ROOM		
	030040 RECOVERY ROOM 061-120 MINUTES	1	1,632.00
	AREA TOTAL ***		1,632.00
04/17	***960 PRO FEE		
	030755 THORACOSCOPY W/DX BX, UNILAT	1	1,095.00
	AREA TOTAL ***		1,095.00
04/17	***964 PRO FEE/ANES CRNA		
	020000 ANESTHESIA SERVICES (P) PER MINUTE	116	1,276.00
	AREA TOTAL ***		1,276.00
TOTAL CHARGES			40,010.38
05/11	I5205 M51 MEDICARE PART B - ERA	316	184.60CR
05/11	I5205 M51 MEDICARE PART B - ERA	316	230.02CR
05/11	I5200 MC1 MEDICARE - ERA	316	9,934.17CR
05/31	I5212 935 UHC-AARP - ERA	850	1,156.00CR
06/13	I6112 606 COMMERCIAL INSURANCE PAYMENT	850	46.15CR
06/13	I6112 606 COMMERCIAL INSURANCE PAYMENT	850	57.50CR
04/27	A5040 764 MEDICARE INPATIENT- ADJ	316	26,091.00CR
05/11	A5002 M51 MEDICARE PRO FEE- ADJ	316	1,045.25CR
05/11	A5002 M51 MEDICARE PRO FEE- ADJ	316	807.48CR
05/11	A5040 MC1 MEDICARE INPATIENT- ADJ	316	26,549.21CR
05/11	A5040 MC1 MEDICARE INPATIENT- ADJ	316	26,091.00
TOTAL PAYMENTS/ADJUSTMENTS			40,010.38CR

0.00

0.00

0.00

F/C:MS P/T:FAC

FARR, WILLIAM G

1210200319

04/11/12 04/11/12 1

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
04/11	***510	CLINIC		
	040035	EST PATIENT EXPANDED	1	129.00
		AREA TOTAL ***		129.00
04/11	***960	PRO FEE		
	020035	OFFICE/OUTPATIENT VISIT, EST	1	76.00
		AREA TOTAL ***		76.00

TOTAL CHARGES

205.00

05/03	I5205	M52 MEDICARE PART B - ERA	316	37.80CR
05/04	I5200	MC1 MEDICARE - ERA	316	54.52CR
05/17	I5212	276 UHC-AARP - ERA	850	13.64CR
06/11	I6112	523 COMMERCIAL INSURANCE PAYMENT	850	9.45CR
04/19	A5041	360 MEDICARE OUTPATIENT- ADJ	316	60.84CR
05/03	A5002	M52 MEDICARE PRO FEE- ADJ	316	28.75CR
05/04	A5041	MC1 MEDICARE OUTPATIENT- ADJ	316	60.84CR
05/04	A5041	MC1 MEDICARE OUTPATIENT- ADJ	316	60.84

TOTAL PAYMENTS/ADJUSTMENTS

205.00CR

0.00

0.00

0.00

F/C:MS P/T:OPT

FARR, WILLIAM G

1208800890

03/29/12 03/29/12 1

RAUL MANUEL B CRUZ

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
03/29	***343	Diagnostic Radiopharmaceutical		
	070205	F18 FDG	1	826.50
		AREA TOTAL ***		826.50
03/29	***404	PET SCAN		
	070030	PET IMAGE W/CT, SKULL-THIGH	1	3,768.00
		AREA TOTAL ***		3,768.00

TOTAL CHARGES

4,594.50

04/23	I5200	MC3 MEDICARE - ERA	316	784.06CR
05/03	I5212	560 UHC-AARP - ERA	850	196.02CR
04/06	A5041	685 MEDICARE OUTPATIENT- ADJ	316	3,614.42CR
04/23	A5041	MC3 MEDICARE OUTPATIENT- ADJ	316	3,614.42CR
04/23	A5041	MC3 MEDICARE OUTPATIENT- ADJ	316	3,614.42

TOTAL PAYMENTS/ADJUSTMENTS

4,594.50CR

0.00

0.00

0.00

F/C:MC

P/T:IP

FARR, WILLIAM G

1215200150

05/31/12 06/06/12

1

RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

06/13/12

316507 MEDICARE 1500 F/C MC

06/13/12

	CODE	DESCRIPTION	QTY	
	***010	ORDER COMMUNICATION MESSAGE		
05/31	002000	CARE PLAN	1	0.00
06/02	002000	CARE PLAN	1	0.00
06/04	010836	OXYGEN	1	0.00
06/04	010836	OXYGEN	1	0.00
06/04	002000	CARE PLAN	1	0.00
06/04	020848	OXYGEN ADJUST 1	1	0.00
06/04	020852	OXYGEN EQUIPMENT CHG	1	0.00
06/05	010836	OXYGEN	1	0.00
06/05	010836	OXYGEN	1	0.00
06/06	010836	OXYGEN	1	0.00
06/06	002000	CARE PLAN	1	0.00
		AREA TOTAL ***		0.00
	***214	CCU/INTERMEDIATE		
05/31	015535	ROOM 8527 T	1	1,716.00
06/01	015535	ROOM 8527 T	1	1,716.00
06/02	015535	ROOM 8527 T	1	1,716.00
06/03	015535	ROOM 8527 T	1	1,716.00
06/04	015535	ROOM 8527 T	1	1,716.00
06/05	015535	ROOM 8527 T	1	1,716.00
		AREA TOTAL ***		10,296.00
	***250	PHARMACY		
05/31	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	1	1.00
05/31	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	6	6.00
05/31	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	1	1.00
05/31	006209	AVELOX IV 400MG/250ML	1	100.00
06/01	005723	PULMICORT RESPULES 0.5MG/2ML BX30	1	64.56
06/01	005723	PULMICORT RESPULES 0.5MG/2ML BX30	1	64.56
06/02	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	1	1.00
		AREA TOTAL ***		238.12
	***258	IV SOLUTIONS		

Continued

FINAL

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F/C:MC

P/T:IP

FARR, WILLIAM G

1215200150

05/31/12

06/06/12

2

RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

06/13/12

316507 MEDICARE 1500 F/C MC

06/13/12

	CODE	DESCRIPTION	QTY	
05/31	000407	SODIUM CHLORIDE 0.9% 100ML IV	1	100.00
06/01	001549	NDC 00338055318	1	100.00
06/03	001549	NDC 00338055318	1	100.00
06/04	001549	NDC 00338055318	1	100.00
06/04	001549	NDC 00338055318	1	100.00
AREA TOTAL ***				500.00

	CODE	DESCRIPTION	QTY	
***270 MED/SUR SUPPLY				
05/31	010855	OXYGEN/SHIFT	1	100.00
06/03	010855	OXYGEN/SHIFT	1	100.00
06/04	010855	OXYGEN/SHIFT	1	100.00
06/04	010855	OXYGEN/SHIFT	1	100.00
06/05	010855	OXYGEN/SHIFT	1	100.00
06/05	010855	OXYGEN/SHIFT	1	100.00
06/06	010855	OXYGEN/SHIFT	1	100.00
AREA TOTAL ***				700.00

	CODE	DESCRIPTION	QTY	
***300 LABORATORY				
05/31	010930	CPK	1	65.00
05/31	010930	CPK	1	65.00
05/31	011840	CK-MB	1	122.00
05/31	013281	TROPONIN, QUANT	1	104.00
05/31	013505	CMP	1	101.00
05/31	013550	IMMUNOASSAY CHF-BNP	1	288.00
05/31	018043	LEGIONELLA AG URINE NOW	1	127.00
05/31	018193	STREP PNEUMO URINE ANTIGEN	1	127.00
05/31	020050	CBC	1	63.00
05/31	040080	RESPIRATORY CULTURE W/GRAM STAIN	1	91.00
05/31	040165	GRAM STAIN	1	45.00
05/31	040255	MYCOPLASMA PNEUMONIAE EIA	1	140.00
05/31	040570	URINE CULTURE	1	85.00
05/31	040690	BLOOD CULTURE	1	109.00
05/31	040690	BLOOD CULTURE	1	109.00
05/31	099000	EC CK-MB FRACTION ONLY	1	122.00

Continued

FINAL

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F/C:MC

P/T:IP

FARR, WILLIAM G

1215200150

05/31/12 06/06/12 3

RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

06/13/12

316507 MEDICARE 1500 F/C MC

06/13/12

	CODE	DESCRIPTION	QTY	
05/31	099004	EC TROPONIN	1	104.00
06/01	010930	CPK	1	65.00
06/01	010930	CPK	1	65.00
06/01	010930	CPK	1	65.00
06/01	010930	CPK	1	65.00
06/01	011770	MAGNESIUM SERUM	1	71.00
06/01	011840	CK-MB	1	122.00
06/01	011840	CK-MB	1	122.00
06/01	011840	CK-MB	1	122.00
06/01	011840	CK-MB	1	122.00
06/01	012221	LIPID PROFILE	1	103.00
06/01	013281	TROPONIN, QUANT	1	104.00
06/01	013281	TROPONIN, QUANT	1	104.00
06/01	013281	TROPONIN, QUANT	1	104.00
06/01	013281	TROPONIN, QUANT	1	104.00
06/01	013500	BMP	1	89.00
06/01	020050	CBC	1	63.00
06/01	040960	PROCALCITONIN	1	285.00
06/01	040960	PROCALCITONIN	1	285.00
06/01	050295	THYROID STIM HORMONE TSH	1	177.00
06/02	013500	BMP	1	89.00
06/04	013500	BMP	1	89.00
06/04	020080	CBC W/DIFF	1	78.00
		AREA TOTAL ***		4,360.00
	***320	DX X-RAY		
05/31	010052	CHEST X-RAY	1	234.00
06/04	050342	CHEST X-RAY	1	234.00
		AREA TOTAL ***		468.00
	***343	Diagnostic Radiopharmaceutical		
05/31	060381	NDC 00270131635	100	733.00
		AREA TOTAL ***		733.00

Continued

F/C:MC

P/T:IP

FARR, WILLIAM G

1215200150

05/31/12 06/06/12 4

RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

06/13/12

316507 MEDICARE 1500 F/C MC

06/13/12

	CODE	DESCRIPTION	QTY	
05/31	***350	CT SCAN		
	060221	CT THORAX W/O & W/DYE	1	2,147.00
		AREA TOTAL ***		2,147.00
	***410	RESPIRATORY SVC		
05/31	010483	HHN	1	128.00
05/31	010483	HHN	1	128.00
05/31	010483	HHN	1	128.00
05/31	010483	HHN	1	128.00
06/01	010483	HHN	1	128.00
06/01	010483	HHN	1	128.00
06/01	010483	HHN	1	128.00
06/01	010483	HHN	1	128.00
06/02	010483	HHN	1	128.00
06/02	010483	HHN	1	128.00
06/02	010483	HHN	1	128.00
06/02	010483	HHN	1	128.00
06/03	010483	HHN	1	128.00
06/03	010483	HHN	1	128.00
06/03	010483	HHN	1	128.00
06/03	010483	HHN	1	128.00
06/03	010483	HHN	1	128.00
06/03	010483	HHN	1	128.00
06/03	010483	HHN	1	128.00
06/04	010483	HHN	1	128.00
06/04	010483	HHN	1	128.00
06/04	010483	HHN	1	128.00
06/04	010483	HHN	1	128.00
06/04	010483	HHN	1	128.00
06/04	010483	HHN	1	128.00
06/05	010483	HHN	1	128.00
06/05	010483	HHN	1	128.00
06/05	010483	HHN	1	128.00
06/05	010483	HHN	1	128.00
06/05	010483	HHN	1	128.00

Continued

F/C:MC

P/T:IP

FARR, WILLIAM G

1215200150

05/31/12

06/06/12

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RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

06/13/12

316507 MEDICARE 1500 F/C MC

06/13/12

	CODE	DESCRIPTION	QTY	
06/05	010483	HHN	1	128.00
06/06	010483	HHN	1	128.00
06/06	010483	HHN	1	128.00
AREA TOTAL ***				4,096.00

05/31	***450	EMERGENCY ROOM		
	002005	ED VISIT LEVEL 5	1	1,207.00
AREA TOTAL ***				1,207.00

06/02	***480	CARDIOLOGY		
	070055	TTE W/DOPPLER, COMPLETE	1	1,589.00
AREA TOTAL ***				1,589.00

05/31	***636	DRUGS/DETAIL CODE		
05/31	000124	PREDNISONE 5MG ORAL	4	1.50
05/31	002717	METHYLPREDNISOLONE SUCC 125MG INJ	1	225.00
05/31	004461	CEFEPIME HCL 500MG INJ	8	450.00
05/31	004461	CEFEPIME HCL 500MG INJ	8	450.00
05/31	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
05/31	004679	ENOXAPARIN SODIUM 10MG INJ	6	225.00
06/01	000124	PREDNISONE 5MG ORAL	4	1.50
06/01	004461	CEFEPIME HCL 500MG INJ	8	450.00
06/01	004679	ENOXAPARIN SODIUM 10MG INJ	12	450.00
06/01	004679	ENOXAPARIN SODIUM 10MG INJ	12	450.00
06/02	000124	PREDNISONE 5MG ORAL	4	1.50
06/02	004461	CEFEPIME HCL 500MG INJ	8	450.00
06/02	004679	ENOXAPARIN SODIUM 10MG INJ	12	450.00
06/03	000121	PREDNISONE 5MG ORAL	2	1.50
06/03	004461	CEFEPIME HCL 500MG INJ	8	450.00
06/03	004679	ENOXAPARIN SODIUM 10MG INJ	12	450.00
06/03	006584	HEPARIN SODIUM 10U INJ	50	100.00
06/04	000121	PREDNISONE 5MG ORAL	2	1.50
06/04	004679	ENOXAPARIN SODIUM 10MG INJ	12	450.00
06/05	000121	PREDNISONE 5MG ORAL	2	1.50

Continued

F/C:MC

P/T:IP

FARR, WILLIAM G

1215200150

05/31/12

06/06/12

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RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

06/13/12

316507 MEDICARE 1500 F/C MC

06/13/12

	CODE	DESCRIPTION	QTY	
06/05	004679	ENOXAPARIN SODIUM 10MG INJ	12	450.00
06/05	006584	HEPARIN SODIUM 10U INJ	50	100.00
06/06	006584	HEPARIN SODIUM 10U INJ	50	100.00
AREA TOTAL ***				5,934.00
***637 PHARMACY-SELF ADMIN DRUGS				
05/31	000033	KLOR-CON ER 200MEQ TABLET	1	1.50
05/31	000033	KLOR-CON ER 200MEQ TABLET	2	3.00
05/31	000053	ASPIRIN 325MG TABLET EC	1	1.50
05/31	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
05/31	002591	FENTANYL PATCH 25 MCG/HR	1	10.90
05/31	002632	NICOTINE PATCH 14MG	1	4.88
05/31	003326	ASPIRIN 325MG TABLET	1	1.50
05/31	004378	COREG 3.125MG TAB	1	1.50
05/31	005492	PROTONIX EC 40MG TAB	1	1.50
05/31	005492	PROTONIX EC 40MG TAB	2	3.00
05/31	006955	ARFORMOTEROL 15MCG/2ML INH	1	20.53
05/31	007023	SIMVASTATIN 40MG TAB	1	1.50
05/31	007023	SIMVASTATIN 40MG TAB	1	1.50
06/01	000032	POTASSIUM CHLORIDE 10MEQ CAP CR	3	4.50
06/01	000032	POTASSIUM CHLORIDE 10MEQ CAP CR	3	4.50
06/01	000033	KLOR-CON ER 200MEQ TABLET	2	3.00
06/01	000053	ASPIRIN 325MG TABLET EC	1	1.50
06/01	002632	NICOTINE PATCH 14MG	1	4.88
06/01	004378	COREG 3.125MG TAB	2	3.00
06/01	004378	COREG 3.125MG TAB	2	3.00
06/01	005492	PROTONIX EC 40MG TAB	2	3.00
06/01	006955	ARFORMOTEROL 15MCG/2ML INH	6	123.18
06/01	006955	ARFORMOTEROL 15MCG/2ML INH	-1	20.53CR
06/01	007023	SIMVASTATIN 40MG TAB	1	1.50
06/02	000033	KLOR-CON ER 200MEQ TABLET	2	3.00
06/02	000053	ASPIRIN 325MG TABLET EC	1	1.50
06/02	002632	NICOTINE PATCH 14MG	1	4.88
06/02	004378	COREG 3.125MG TAB	2	3.00

Continued

F/C:MC

P/T:IP

FARR, WILLIAM G

1215200150

05/31/12 06/06/12

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RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

06/13/12

316507 MEDICARE 1500 F/C MC

06/13/12

	CODE	DESCRIPTION	QTY	
06/02	005492	PROTONIX EC 40MG TAB	2	3.00
06/02	007023	SIMVASTATIN 40MG TAB	1	1.50
06/03	000033	KLOR-CON ER 200MEQ TABLET	2	3.00
06/03	000053	ASPIRIN 325MG TABLET EC	1	1.50
06/03	002591	FENTANYL PATCH 25 MCG/HR	1	10.90
06/03	002632	NICOTINE PATCH 14MG	1	4.88
06/03	004378	COREG 3.125MG TAB	2	3.00
06/03	005492	PROTONIX EC 40MG TAB	2	3.00
06/03	006707	PROVENTIL HFA 6.7GM INHALER	1	30.64
06/03	007023	SIMVASTATIN 40MG TAB	1	1.50
06/04	000033	KLOR-CON ER 200MEQ TABLET	2	3.00
06/04	000053	ASPIRIN 325MG TABLET EC	1	1.50
06/04	002632	NICOTINE PATCH 14MG	1	4.88
06/04	004378	COREG 3.125MG TAB	2	3.00
06/04	005492	PROTONIX EC 40MG TAB	2	3.00
06/04	007023	SIMVASTATIN 40MG TAB	1	1.50
06/05	000033	KLOR-CON ER 200MEQ TABLET	2	3.00
06/05	000053	ASPIRIN 325MG TABLET EC	1	1.50
06/05	002632	NICOTINE PATCH 14MG	1	4.88
06/05	004378	COREG 3.125MG TAB	2	3.00
06/05	005252	AVELOX 400MG TAB	1	49.57
06/05	005252	AVELOX 400MG TAB	1	49.57
06/05	005492	PROTONIX EC 40MG TAB	2	3.00
06/05	006955	ARFORMOTEROL 15MCG/2ML INH	4	82.12
06/05	006955	ARFORMOTEROL 15MCG/2ML INH	-1	20.53CR
06/05	006955	ARFORMOTEROL 15MCG/2ML INH	-2	41.06CR
06/05	006955	ARFORMOTEROL 15MCG/2ML INH	-1	20.53CR
06/05	007023	SIMVASTATIN 40MG TAB	1	1.50
06/05	007349	HYDROCODONE BIT/APAP 7.5-3.25MG T	1	2.00
06/05	007349	HYDROCODONE BIT/APAP 7.5-3.25MG T	1	2.00
06/06	007349	HYDROCODONE BIT/APAP 7.5-3.25MG T	1	2.00
AREA TOTAL ***				400.04

***730 EKG/ECG

Continued

FINAL

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F/C:MC P/T:IP

FARR, WILLIAM G 1215200150 05/31/12 06/06/12 8

RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

06/13/12

316507 MEDICARE 1500 F/C MC

06/13/12

	CODE	DESCRIPTION	QTY	
05/31	010000	ELECTROCARDIOGRAM, TRACING	1	227.00
06/01	010000	ELECTROCARDIOGRAM, TRACING	1	227.00
		AREA TOTAL ***		454.00

	***960	PRO FEE		
06/01	010010	ELECTROCARDIOGRAM REPORT	1	76.00
		AREA TOTAL ***		76.00

TOTAL CHARGES 33,198.16

TOTAL PAYMENTS/ADJUSTMENTS 0.00

33,198.16

33,198.16

33,198.16

Spartanburg Regional Medical Center & Spartanburg Home Hospice 0056

PRINTED BY: JH24657

DATE

05/12/2015

FINAL

-719-

F/C:MC

P/T:TRS

FARR, WILLIAM G

1215901341

06/06/12 06/06/12 1

RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

06/13/12

316507 MEDICARE 1500 F/C MC

06/13/12

	CODE	DESCRIPTION	QTY	
	***540	AMBULANCE		
06/06	010435	MILEAGE	23	209.30
06/06	010436	FRACTIONAL MILEAGE	2	1.82
06/06	010450	AMB SRVC, BLS, NON-EMERGENCY	1	264.40
AREA TOTAL ***				475.52

TOTAL CHARGES 475.52

TOTAL PAYMENTS/ADJUSTMENTS 0.00

475.52

475.52

475.52

Spartanburg Regional Medical Center & Spartanburg Home Hospice 0057

PRINTED BY: JH24657

DATE 05/12/2015

FINAL

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F/C:MC

P/T:TRS

FARR, WILLIAM G

1216500677

06/12/12 06/12/12 1

RONALD H LITTLEFIELD

316501 MEDICARE

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

06/18/12

316507 MEDICARE 1500 F/C MC

06/18/12

	CODE	DESCRIPTION	QTY	
	***540	AMBULANCE		
06/12	010435	MILEAGE	2	18.20
06/12	010436	FRACTIONAL MILEAGE	3	2.73
06/12	010450	AMB SRVC, BLS, NON-EMERGENCY	1	264.40
		AREA TOTAL ***		285.33

TOTAL CHARGES

285.33

TOTAL PAYMENTS/ADJUSTMENTS

0.00

285.33

285.33

285.33

F/C:MC

P/T:IP

FARR, WILLIAM G

1216200102

06/10/12 06/12/12 1

RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

06/22/12

316507 MEDICARE 1500 F/C MC

06/22/12

	CODE	DESCRIPTION	QTY	
	***010	ORDER COMMUNICATION MESSAGE		
06/10	010836	OXYGEN	1	0.00
06/10	002000	CARE PLAN	1	0.00
06/10	020201	POINT OF CARE TESTING	1	0.00
06/10	020202	POINT OF CARE BLD GAS ANALYSIS	1	0.00
06/11	010836	OXYGEN	1	0.00
06/11	010836	OXYGEN	1	0.00
06/11	010836	OXYGEN	1	0.00
06/11	011028	PT TRANSPORT/STANDBY	1	0.00
06/11	020125	BIPAP INITIATION	1	0.00
06/11	020125	BIPAP INITIATION	1	0.00
06/11	020128	BIPAP SETTING/DEVICE ADJ 1	1	0.00
06/11	020201	POINT OF CARE TESTING	1	0.00
06/11	020202	POINT OF CARE BLD GAS ANALYSIS	1	0.00
06/11	020848	OXYGEN ADJUST 1	1	0.00
06/11	099022	POC GLUCOSE	1	0.00
06/12	002000	CARE PLAN	1	0.00
		AREA TOTAL ***		0.00
	***214	CCU/INTERMEDIATE		
06/10	015535	ROOM 8528 T	1	1,716.00
06/11	015535	ROOM 8528 T	1	1,716.00
		AREA TOTAL ***		3,432.00
	***250	PHARMACY		
06/10	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	1	1.00
06/10	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	1	1.00
06/10	006209	AVELOX IV 400MG/250ML	1	100.00
06/12	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	1	1.00
		AREA TOTAL ***		103.00
	***258	IV SOLUTIONS		
06/10	000333	NORMAL SALINE SOL 500ML INFUSION	1	100.00
06/11	000326	NORMAL SALINE SOL 250ML INFUSION	1	100.00

Continued

F/C:MC

P/T:IP

FARR, WILLIAM G

1216200102

06/10/12 06/12/12 2

RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

06/22/12

316507 MEDICARE 1500 F/C MC

06/22/12

	CODE	DESCRIPTION	QTY	
06/11	000326	NORMAL SALINE SOL 250ML INFUSION	1	100.00
06/11	001549	NDC 00338055318	1	100.00
06/11	001549	NDC 00338055318	1	100.00
06/12	001549	NDC 00338055318	1	100.00
AREA TOTAL ***				600.00

	CODE	DESCRIPTION	QTY	
***270 MED/SUR SUPPLY				
06/10	010855	OXYGEN/SHIFT	1	100.00
06/12	010855	OXYGEN/SHIFT	1	100.00
AREA TOTAL ***				200.00

	CODE	DESCRIPTION	QTY	
***300 LABORATORY				
06/10	010930	CPK	1	65.00
06/10	010930	CPK	1	65.00
06/10	010948	RESPIRATORY ABG PUNCTURE	1	131.00
06/10	011840	CK-MB	1	122.00
06/10	011840	CK-MB	1	122.00
06/10	013281	TROPONIN, QUANT	1	104.00
06/10	013281	TROPONIN, QUANT	1	104.00
06/10	013500	BMP	1	89.00
06/10	013550	IMMUNOASSAY CHF-BNP	1	288.00
06/10	020080	CBC W/DIFF	1	78.00
06/10	031110	BLOOD GAS	1	204.00
06/10	040690	BLOOD CULTURE	1	109.00
06/10	040690	BLOOD CULTURE	1	109.00
06/10	099000	EC CK-MB FRACTION ONLY	1	122.00
06/10	099004	EC TROPONIN	1	104.00
06/11	010948	RESPIRATORY ABG PUNCTURE	1	131.00
06/11	013500	BMP	1	89.00
06/11	020050	CBC	1	63.00
06/11	031110	BLOOD GAS	1	204.00
AREA TOTAL ***				2,303.00

***320 DX X-RAY

Continued

FINAL

-723-

F/C:MC

P/T:IP

FARR, WILLIAM G

1216200102

06/10/12 06/12/12 3

RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

06/22/12

316507 MEDICARE 1500 F/C MC

06/22/12

	CODE	DESCRIPTION	QTY	
06/10	010052	CHEST X-RAY	1	234.00
		AREA TOTAL ***		234.00
06/10	***343	Diagnostic Radiopharmaceutical		
	060381	NDC 00270131635	100	733.00
		AREA TOTAL ***		733.00
06/10	***350	CT SCAN		
	060221	CT THORAX W/O & W/DYE	1	2,147.00
		AREA TOTAL ***		2,147.00
06/10	***410	RESPIRATORY SVC		
	010483	HHN	1	128.00
06/11	010113	BIPAP MANAGEMENT, INITIAL	1	895.00
06/11	010483	HHN	1	128.00
06/12	010483	HHN	1	128.00
		AREA TOTAL ***		1,279.00
06/10	***450	EMERGENCY ROOM		
	002005	ED VISIT LEVEL 5	1	1,207.00
06/10	041195	INSERT CATHETER VN OVER AGE 5 YRS	1	2,869.00
06/10	041505	THER/PROPH/DIAG INJ, SC/IM	1	100.00
		AREA TOTAL ***		4,176.00
06/10	***636	DRUGS/DETAIL CODE		
	001800	VANCOMYCIN HCL 500MG INJ	3	225.00
06/10	002716	METHYLPREDNISOLONE SUCC 40MG INJ	2	225.00
06/10	002716	METHYLPREDNISOLONE SUCC 40MG INJ	1	225.00
06/10	002717	METHYLPREDNISOLONE SUCC 125MG INJ	1	225.00
06/10	002717	METHYLPREDNISOLONE SUCC 125MG INJ	1	225.00
06/10	002717	METHYLPREDNISOLONE SUCC 125MG INJ	3	675.00
06/10	004679	ENOXAPARIN SODIUM 10MG INJ	6	225.00
06/10	004679	ENOXAPARIN SODIUM 10MG INJ	12	450.00
06/10	004681	ENOXAPARIN SODIUM 10MG INJ	10	225.00

Continued

F/C:MC P/T:IP

FARR, WILLIAM G

1216200102

06/10/12 06/12/12

4

RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

06/22/12

316507 MEDICARE 1500 F/C MC

06/22/12

	CODE	DESCRIPTION	QTY	
06/10	005615	PIPERCILLIN 1G/TAZOBAC 125MG, 1.12	8	450.00
06/10	005615	PIPERCILLIN 1G/TAZOBAC 125MG, 1.12	12	675.00
06/10	006584	HEPARIN SODIUM 10U INJ	50	100.00
06/11	001187	FUROSEMIDE 20MG INJ	2	225.00
06/11	001481	LORAZEPAM 2MG INJ	1	250.00
06/11	001800	VANCOMYCIN HCL 500MG INJ	3	225.00
06/11	001800	VANCOMYCIN HCL 500MG INJ	3	225.00
06/11	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/11	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/11	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/11	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/11	002716	METHYLPREDNISOLONE SUCC 40MG INJ	2	450.00
06/11	002716	METHYLPREDNISOLONE SUCC 40MG INJ	2	450.00
06/11	004679	ENOXAPARIN SODIUM 10MG INJ	12	450.00
06/11	005615	PIPERCILLIN 1G/TAZOBAC 125MG, 1.12	12	675.00
06/11	006584	HEPARIN SODIUM 10U INJ	50	100.00
06/12	001481	LORAZEPAM 2MG INJ	1	250.00
06/12	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/12	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/12	006584	HEPARIN SODIUM 10U INJ	50	100.00
AREA TOTAL ***				8,825.00

	CODE	DESCRIPTION	QTY	
***637 PHARMACY-SELF ADMIN DRUGS				
06/10	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
06/10	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
06/10	005492	PROTONIX EC 40MG TAB	1	1.50
06/10	005492	PROTONIX EC 40MG TAB	1	1.50
06/10	007023	SIMVASTATIN 40MG TAB	1	1.50
06/10	007023	SIMVASTATIN 40MG TAB	1	1.50
06/11	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
06/11	005492	PROTONIX EC 40MG TAB	1	1.50
06/11	007023	SIMVASTATIN 40MG TAB	1	1.50
06/12	002628	NICOTINE PATCH 21MG	1	4.13

Continued

FINAL

-725-

F/C:MC

P/T:IP

FARR, WILLIAM G

1216200102

06/10/12 06/12/12 5

RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

06/22/12

316507 MEDICARE 1500 F/C MC

06/22/12

CODE	DESCRIPTION	QTY	
	AREA TOTAL ***		17.63
06/10 ***730	EKG/ECG		
010000	ELECTROCARDIOGRAM, TRACING	1	227.00
	AREA TOTAL ***		227.00

TOTAL CHARGES 24,276.63

TOTAL PAYMENTS/ADJUSTMENTS 0.00

24,276.63

24,276.63

24,276.63

Spartanburg Regional Medical Center & Spartanburg Home Hospice 0063

PRINTED BY: JH24657

DATE 05/12/2015

F/C:CI

P/T:IPH

FARR, WILLIAM G

1216401412

06/12/12 06/16/12 1

GARRETT E SNIPES

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

870610 HOSPICE HOUSE ONLY

999

06/22/12

	CODE	DESCRIPTION	QTY.	
	***115	HOSPICE/PVT		
06/12	030640	ROOM HH09 RE	1	0.00
06/13	030640	ROOM HH09 RE	1	0.00
06/14	030640	ROOM HH09 RE	1	0.00
06/15	030640	ROOM HH09 RE	1	0.00
AREA TOTAL ***				0.00
	***250	PHARMACY		
06/13	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	1	1.00
06/13	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	1	1.00
06/13	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	1	1.00
06/13	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	1	1.00
06/14	005723	PULMICORT RESPULES 0.5MG/2ML BX30	1	64.56
AREA TOTAL ***				68.56
	***636	DRUGS/DETAIL CODE		
06/12	000987	DEXAMETHASONE PHOSPHATE 1MG INJ	4	225.00
06/13	000987	DEXAMETHASONE PHOSPHATE 1MG INJ	4	225.00
06/13	000987	DEXAMETHASONE PHOSPHATE 1MG INJ	4	225.00
06/13	001481	LORAZEPAM 2MG INJ	1	250.00
06/13	001481	LORAZEPAM 2MG INJ	1	250.00
06/13	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/13	002713	MORPHINE SULFATE 10MG INJ	1	250.00
06/13	002713	MORPHINE SULFATE 10MG INJ	1	250.00
06/13	002713	MORPHINE SULFATE 10MG INJ	1	250.00
06/13	002713	MORPHINE SULFATE 10MG INJ	1	250.00
06/14	000987	DEXAMETHASONE PHOSPHATE 1MG INJ	4	225.00
06/14	000987	DEXAMETHASONE PHOSPHATE 1MG INJ	8	225.00
06/14	001481	LORAZEPAM 2MG INJ	1	250.00
06/14	001481	LORAZEPAM 2MG INJ	1	250.00
06/14	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/14	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/14	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/15	000987	DEXAMETHASONE PHOSPHATE 1MG INJ	8	225.00

Continued

F/C:CI

P/T:IPH

FARR, WILLIAM G

1216401412

06/12/12 06/16/12 2

GARRETT E SNIPES

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

870610 HOSPICE HOUSE ONLY

999

06/22/12

	CODE	DESCRIPTION	QTY	
06/15	000987	DEXAMETHASONE PHOSPHATE 1MG INJ	4	112.50
06/15	000987	DEXAMETHASONE PHOSPHATE 1MG INJ	4	112.50
06/15	000987	DEXAMETHASONE PHOSPHATE 1MG INJ	4	112.50
06/15	001481	LORAZEPAM 2MG INJ	1	250.00
06/15	001481	LORAZEPAM 2MG INJ	1	250.00
06/15	001481	LORAZEPAM 2MG INJ	1	250.00
06/15	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/15	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/15	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/15	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/16	000987	DEXAMETHASONE PHOSPHATE 1MG INJ	4	112.50
06/16	000987	DEXAMETHASONE PHOSPHATE 1MG INJ	4	112.50
06/16	001481	LORAZEPAM 2MG INJ	1	250.00
06/16	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/16	002581	MORPHINE SULFATE 10MG INJ	1	250.00
06/16	002581	MORPHINE SULFATE 10MG INJ	1	250.00
		AREA TOTAL ***		7,662.50
	***637	PHARMACY-SELF ADMINIS DRUGS		
06/12	000155	SENNA S TABLET	2	3.00
06/12	002628	NICOTINE PATCH 21MG	1	4.13
06/12	004487	OXYIR 5MG CAPSULE	1	2.78
06/12	004647	SINGULAIR 10MG TAB	1	20.40
06/13	000155	SENNA S TABLET	2	3.00
06/13	000155	SENNA S TABLET	-1	1.50CR
06/13	002628	NICOTINE PATCH 21MG	1	4.13
06/13	004782	CELEXA 20MG TAB	1	1.50
06/13	005252	AVELOX 400MG TAB	1	49.57
06/13	005314	THEO-24 300MG CR CAPSULE	1	15.00
06/13	005492	PROTONIX EC 40MG TAB	1	1.50
06/13	005492	PROTONIX EC 40MG TAB	1	1.50
06/13	007657	OXYCODONE IR 5MG TAB	1	2.00
06/14	000155	SENNA S TABLET	2	3.00
06/14	000294	DIAZEPAM 5MG TABLET	1	2.00

Continued

F/C:CI

P/T:IPH

FARR, WILLIAM G

1216401412

06/12/12 06/16/12

3

GARRETT E SNIPES

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

870610 HOSPICE HOUSE ONLY

999

06/22/12

	CODE	DESCRIPTION	QTY	
06/14	001102	GUAIFENESIN 600MG TABLET	1	1.50
06/14	002628	NICOTINE PATCH 21MG	1	4.13
06/14	003791	OXYCONTIN CR 10MG TAB	1	6.48
06/14	004647	SINGULAIR 10MG TAB	1	20.40
06/14	004782	CELEXA 20MG TAB	1	1.50
06/14	005252	AVELOX 400MG TAB	1	49.57
06/14	005314	THEO-24 300MG CR CAPSULE	1	15.00
06/14	005492	PROTONIX EC 40MG TAB	1	1.50
06/14	005994	ALBUTEROL SULF. INHL. 5MG/ML SOLN	1	1.13
06/14	007657	OXYCODONE IR 5MG TAB	1	2.00
06/15	000155	SENNA S TABLET	2	3.00
06/15	000294	DIAZEPAM 5MG TABLET	1	2.00
06/15	000294	DIAZEPAM 5MG TABLET	1	2.00
06/15	001102	GUAIFENESIN 600MG TABLET	1	1.50
06/15	001102	GUAIFENESIN 600MG TABLET	1	1.50
06/15	002628	NICOTINE PATCH 21MG	1	4.13
06/15	003791	OXYCONTIN CR 10MG TAB	1	6.48
06/15	003791	OXYCONTIN CR 10MG TAB	1	6.48
06/15	004647	SINGULAIR 10MG TAB	1	20.40
06/15	004782	CELEXA 20MG TAB	1	1.50
06/15	005252	AVELOX 400MG TAB	1	49.57
06/15	005314	THEO-24 300MG CR CAPSULE	1	15.00
06/15	005492	PROTONIX EC 40MG TAB	1	1.50
06/16	000294	DIAZEPAM 5MG TABLET	1	2.00
06/16	001102	GUAIFENESIN 600MG TABLET	1	1.50
06/16	002628	NICOTINE PATCH 21MG	1	4.13
06/16	003791	OXYCONTIN CR 10MG TAB	1	6.48
06/16	004782	CELEXA 20MG TAB	1	1.50
06/16	005252	AVELOX 400MG TAB	1	49.57
06/16	005314	THEO-24 300MG CR CAPSULE	1	15.00
AREA TOTAL ***				410.46

Continued

FINAL

-729-

F/C:CI

P/T:IPH

FARR, WILLIAM G

1216401412

06/12/12 06/16/12

4

GARRETT E SNIPES

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC

870610 HOSPICE HOUSE ONLY

999

06/22/12

29379

CODE

DESCRIPTION

QTY

TOTAL CHARGES

8,141.52

TOTAL PAYMENTS/ADJUSTMENTS

0.00

8,141.52

8,141.52

8,141.52

Spartanburg Regional Medical Center & Spartanburg Home Hospice 0067

PRINTED BY: JH24657

DATE 05/12/2015

FINAL

-730-

F/C:MC

P/T:GIC

FARR, WILLIAM G

1213000807

05/10/12

05/10/12

1

SHARMILA MEHTA

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/19/12

316507 MEDICARE 1500 F/C MC

05/19/12

	CODE	DESCRIPTION	QTY	
05/10	***335	CHEMOTHERP-IV		
	080461	IRRIG CV ACCESS DEVICE-CHEMO	1	225.00
		AREA TOTAL ***		225.00
05/10	***636	DRUGS/DETAIL CODE		
	006584	HEPARIN SODIUM 10U INJ	50	100.00
		AREA TOTAL ***		100.00

TOTAL CHARGES

325.00

TOTAL PAYMENTS/ADJUSTMENTS

0.00

325.00

325.00

325.00

Spartanburg Regional Medical Center & Spartanburg Home Hospice 0068

PRINTED BY: JH24657

DATE

05/12/2015

FINAL

-731-

F/C:MC

P/T:FAC

FARR, WILLIAM G

1210200319

04/11/12 04/11/12 1

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHT HW
UNION SC 29379

316501 MEDICARE

04/18/12

316507 MEDICARE 1500 F/C MC

04/18/12

	CODE	DESCRIPTION	QTY	
04/11	***510	CLINIC		
	040035	EST PATIENT EXPANDED	1	129.00
		AREA TOTAL ***		129.00
	***960	PRO. FEE		
04/11	020035	OFFICE/OUTPATIENT VISIT, EST	1	76.00
		AREA TOTAL ***		76.00

TOTAL CHARGES

205.00

TOTAL PAYMENTS/ADJUSTMENTS

0.00

205.00

205.00

205.00

Spartanburg Regional Medical Center & Spartanburg Home Hospice 0069

PRINTED BY: JH24657

DATE 05/12/2015

F/C:MC

P/T:IP

FARR, WILLIAM G

1210301383

04/17/12 04/20/12 1

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

04/26/12

316507 MEDICARE 1500 F/C MC

04/26/12

	CODE	DESCRIPTION	QTY	
	***010	ORDER COMMUNICATION MESSAGE		
04/18	002000	CARE PLAN	1	0.00
04/19	002000	CARE PLAN	1	0.00
AREA TOTAL ***				0.00
	***214	CCU/INTERMEDIATE		
04/17	014435	ROOM 8405 T	1	1,716.00
04/18	014435	ROOM 8405 T	1	1,716.00
04/19	014435	ROOM 8405 T	1	1,716.00
AREA TOTAL ***				5,148.00
	***250	PHARMACY		
04/17	005450	SENSORCAINE MPF 0.25% 10ML INJECT	3	225.00
04/17	005876	ZEMURON 10MG/ML INJ	1	225.00
04/18	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	8	8.00
04/19	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	12	12.00
04/19	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	9	9.00
AREA TOTAL ***				479.00
	***258	IV SOLUTIONS		
04/17	000340	NORMAL SALINE SOLUTION 1000 ML IN	1	100.00
04/17	000340	NORMAL SALINE SOLUTION 1000 ML IN	1	100.00
04/17	000340	NORMAL SALINE SOLUTION 1000 ML IN	1	100.00
04/18	000333	NORMAL SALINE SOL 500ML INFUSION	1	100.00
04/19	000340	NORMAL SALINE SOLUTION 1000 ML IN	1	100.00
AREA TOTAL ***				500.00
	***270	MED/SUR SUPPLY		
04/17	010855	OXYGEN/SHIFT	1	100.00
04/17	010855	OXYGEN/SHIFT	1	100.00
04/17	030190	RT DOUBLE LUMEN ENDOTRACHEAL TUBE	1	546.00
04/18	010855	OXYGEN/SHIFT	1	100.00
04/18	010855	OXYGEN/SHIFT	1	100.00
04/19	010855	OXYGEN/SHIFT	1	100.00

Continued

F/C:MC

P/T:IP

FARR, WILLIAM G

1210301383

04/17/12 04/20/12 2

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

04/26/12

316507 MEDICARE 1500 F/C MC

04/26/12

	CODE	DESCRIPTION	QTY	
04/19	010855	OXYGEN/SHIFT	1	100.00
04/20	010855	OXYGEN/SHIFT	1	100.00
		AREA TOTAL ***		1,246.00
	***272	STERILE SUP		
04/17	032550	CATH, DRAINAGE	1	208.00
		AREA TOTAL ***		208.00
	***300	LABORATORY		
04/13	013500	BMP	1	89.00
04/13	020050	CBC	1	63.00
04/13	020480	PARTIAL THROMBOPLASTIN TIME	1	63.00
04/13	020590	PROTHROMBIN TIME	1	41.00
04/17	040060	FUNGUS CULTURE W/FUNGAL SMEAR	1	89.00
04/17	040165	GRAM STAIN	1	45.00
04/17	040630	FUNGAL SMEAR	1	57.00
04/17	040635	ACID FAST BACILLI-TB-CULT W/SMEAR	1	114.00
04/17	040645	ACID FAST SMEAR	1	57.00
04/17	040655	ANAEROBIC CULT W/GRAM STAIN	1	100.00
04/18	020050	CBC	1	63.00
04/19	013500	BMP	1	89.00
04/19	020050	CBC	1	63.00
04/20	020050	CBC	1	63.00
		AREA TOTAL ***		996.00
	***310	PATHOLOGY LAB		
04/17	061190	PATH CONSULT INTROP 1 BLOCK	1	260.00
04/17	062030	TISSUE EXAM BY PATHOLOGIST	1	260.00
04/17	062040	TISSUE EXAM BY PATHOLOGIST	1	403.00
		AREA TOTAL ***		923.00
	***320	DX X-RAY		
04/17	050354	CHEST X-RAY	1	234.00
04/18	050354	CHEST X-RAY	1	234.00

Continued

F/C:MC

P/T:IP

FARR, WILLIAM G

1210301383

04/17/12 04/20/12 3

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

04/26/12

316507 MEDICARE 1500 F/C MC

04/26/12

	CODE	DESCRIPTION	QTY	
04/18	050354	CHEST X-RAY	1	234.00
04/19	050354	CHEST X-RAY	1	234.00
04/20	050354	CHEST X-RAY	1	234.00
AREA TOTAL ***				1,170.00
	***360	OR SERVICES		
04/17	020505	CV THORACIC ROBOT SURG 91-120 M	1	11,902.00
AREA TOTAL ***				11,902.00
	***370	ANESTHESIA		
04/17	010000	ANESTHESIA SERVICES (T) PER MINUTE	116	1,276.00
AREA TOTAL ***				1,276.00
	***410	RESPIRATORY SVC		
04/18	010538	IPPB	1	128.00
04/18	010538	IPPB	1	128.00
04/18	010942	POSITIVE PRESSURE THERAPY	1	128.00
04/19	010942	POSITIVE PRESSURE THERAPY	1	128.00
04/19	010942	POSITIVE PRESSURE THERAPY	1	128.00
04/19	010942	POSITIVE PRESSURE THERAPY	1	128.00
04/19	010942	POSITIVE PRESSURE THERAPY	1	128.00
04/19	010942	POSITIVE PRESSURE THERAPY	1	128.00
04/19	010942	POSITIVE PRESSURE THERAPY	1	128.00
04/19	020214	MDI (METER-DOSE INHALER) TX	1	128.00
04/19	020214	MDI (METER-DOSE INHALER) TX	1	128.00
04/20	010942	POSITIVE PRESSURE THERAPY	1	128.00
04/20	010942	POSITIVE PRESSURE THERAPY	1	128.00
04/20	010942	POSITIVE PRESSURE THERAPY	1	128.00
04/20	010942	POSITIVE PRESSURE THERAPY	1	128.00
04/20	020214	MDI (METER-DOSE INHALER) TX	1	128.00
AREA TOTAL ***				2,048.00
	***636	DRUGS/DETAIL CODE		
04/17	000998	LIDOCAINE HCL 10MG IV INFUSION	10	225.00

Continued

F/C:MC

P/T:IP

FARR, WILLIAM G

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04/17/12 04/20/12 4

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

04/26/12

316507 MEDICARE 1500 F/C MC

04/26/12

	CODE	DESCRIPTION	QTY	
04/17	001032	NEOSTIGMINE METHYLSUFATE 0.5MG IN	20	225.00
04/17	001459	HYDROMORPHONE 4MG INJ	1	250.00
04/17	001459	HYDROMORPHONE 4MG INJ	1	250.00
04/17	001459	HYDROMORPHONE 4MG INJ	1	250.00
04/17	002799	FENTANYL CITRATE 0.1MG INJ	3	250.00
04/17	002808	FENTANYL CITRATE 0.1MG INJ	1	250.00
04/17	002811	MIDAZOLAM HCL 1MG INJ	2	250.00
04/17	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
04/17	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
04/17	005245	PROPOFOL 10MG INJ	1	225.00
04/17	007616	GLYCOPYRROLATE 0.2MG INJ	1	225.00
04/17	000375	LR INJ 1000ML IV BAG	1	100.00
04/18	000124	PREDNISONE 5MG ORAL	8	3.00
04/18	000124	PREDNISONE 5MG ORAL	4	1.50
04/18	001072	ONDANSETRON HCL 1MG INJ	16	900.00
04/18	001072	ONDANSETRON HCL 1MG INJ	4	225.00
04/18	001072	ONDANSETRON HCL 1MG INJ	16	900.00
04/18	001459	HYDROMORPHONE 4MG INJ	1	250.00
04/18	001459	HYDROMORPHONE 4MG INJ	1	250.00
04/18	001459	HYDROMORPHONE 4MG INJ	1	250.00
04/18	001459	HYDROMORPHONE 4MG INJ	1	250.00
04/18	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
04/18	005613	PANTOPRAZOLE SOD 40MG INJ	2	450.00
04/18	005613	PANTOPRAZOLE SOD 40MG INJ	2	450.00
04/19	000124	PREDNISONE 5MG ORAL	4	1.50
04/19	001072	ONDANSETRON HCL 1MG INJ	16	900.00
04/19	001459	HYDROMORPHONE 4MG INJ	1	250.00
04/19	001459	HYDROMORPHONE 4MG INJ	1	250.00
04/19	001459	HYDROMORPHONE 4MG INJ	1	250.00
04/19	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
04/20	001459	HYDROMORPHONE 4MG INJ	1	250.00
04/20	001459	HYDROMORPHONE 4MG INJ	1	250.00
AREA TOTAL ***				9,481.00

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F/C:MC

P/T:IP

FARR, WILLIAM G

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CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

04/26/12

316507 MEDICARE 1500 F/C MC

04/26/12

	CODE	DESCRIPTION	QTY	
	***637	PHARMACY-SELF ADMIN DRUGS		
04/17	000033	KLOR-CON ER 200MEQ TABLET	2	3.00
04/17	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
04/17	000155	SENNA S TABLET	2	3.00
04/17	000155	SENNA S TABLET	2	3.00
04/17	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
04/17	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
04/17	002632	NICOTINE PATCH 14MG	1	4.88
04/17	004403	COMBIVENT AERSOL 14.7GM INHAL.	1	389.96
04/17	005289	NORCO 10 325MG TAB	2	4.00
04/17	005492	PROTONIX EC 40MG TAB	1	1.50
04/17	005492	PROTONIX EC 40MG TAB	1	1.50
04/17	005994	ALBUTEROL SULF. INHL. 5MG/ML SOLN	12	13.56
04/17	007023	SIMVASTATIN 40MG TAB	1	1.50
04/17	007023	SIMVASTATIN 40MG TAB	1	1.50
04/18	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
04/18	000155	SENNA S TABLET	2	3.00
04/18	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
04/18	002632	NICOTINE PATCH 14MG	1	4.88
04/18	002632	NICOTINE PATCH 14MG	1	4.88
04/18	003113	ZOLPIDEM 5MG TAB	1	2.00
04/18	003724	CALCIUM CARB 500MG TAB	1	3.00
04/18	005289	NORCO 10 325MG TAB	2	4.00
04/18	005289	NORCO 10 325MG TAB	1	2.00
04/18	007023	SIMVASTATIN 40MG TAB	1	1.50
04/19	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
04/19	000155	SENNA S TABLET	2	3.00
04/19	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
04/19	002632	NICOTINE PATCH 14MG	1	4.88
04/19	005492	PROTONIX EC 40MG TAB	2	3.00
04/19	005492	PROTONIX EC 40MG TAB	2	3.00
04/19	006941	SYMBICORT MDI 160-4.5MCG INHALER	1	134.34
04/19	007023	SIMVASTATIN 40MG TAB	1	1.50
04/20	005289	NORCO 10 325MG TAB	2	4.00

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FINAL

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F/C:MC

P/T:IP

FARR, WILLIAM G

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CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

04/26/12

316507 MEDICARE 1500 F/C MC

04/26/12

	CODE	DESCRIPTION	QTY	
		AREA TOTAL ***		630.38
04/17	***710	RECOVERY ROOM		
	030040	RECOVERY ROOM 061-120 MINUTES	1	1,632.00
		AREA TOTAL ***		1,632.00
	***960	PRO FEE		
04/17	030755	THORACOSCOPY W/DX BX, UNILAT	1	1,095.00
		AREA TOTAL ***		1,095.00
	***964	PRO FEE/ANES CRNA		
04/17	020000	ANESTHESIA SERVICES (P) PER MINUTE	116	1,276.00
		AREA TOTAL ***		1,276.00
		TOTAL CHARGES		40,010.38
		TOTAL PAYMENTS/ADJUSTMENTS		0.00

40,010.38

40,010.38

40,010.38

F/C:MC P/T:IP

FARR, WILLIAM G

1211401433

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CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/13/12

316507 MEDICARE 1500 F/C MC

05/13/12

	CODE	DESCRIPTION	QTY	
	***010	ORDER COMMUNICATION MESSAGE		
04/24	010931	PEP THERAPY	1	0.00
04/24	002000	CARE PLAN	1	0.00
04/26	010280	EKG	1	0.00
04/26	010280	EKG	1	0.00
04/26	010836	OXYGEN	1	0.00
04/26	010836	OXYGEN	1	0.00
04/26	002000	CARE PLAN	1	0.00
04/27	010836	OXYGEN	1	0.00
04/27	010836	OXYGEN	1	0.00
04/27	010836	OXYGEN	1	0.00
04/27	020848	OXYGEN ADJUST 1	1	0.00
04/27	020852	OXYGEN EQUIPMENT CHG	1	0.00
04/28	010836	OXYGEN	1	0.00
04/28	010836	OXYGEN	1	0.00
04/28	002000	CARE PLAN	1	0.00
04/29	006342	IN A PREMIXED MINIBAG	1	0.00
04/29	010836	OXYGEN	1	0.00
04/29	010836	OXYGEN	1	0.00
04/30	010836	OXYGEN	1	0.00
04/30	010836	OXYGEN	1	0.00
04/30	002000	CARE PLAN	1	0.00
05/01	010836	OXYGEN	1	0.00
05/01	010836	OXYGEN	1	0.00
05/02	010836	OXYGEN	1	0.00
05/02	010836	OXYGEN	1	0.00
05/02	002000	CARE PLAN	1	0.00
05/02	002000	CARE PLAN	1	0.00
05/02	020201	POINT OF CARE TESTING	1	0.00
05/02	020202	POINT OF CARE BLD GAS ANALYSIS	1	0.00
05/02	099022	POC GLUCOSE	1	0.00
05/02	099022	POC GLUCOSE	1	0.00
05/03	003895	KEY TO REFRIGERATOR/NARC. CAB	1	0.00
05/03	003895	KEY TO REFRIGERATOR/NARC. CAB	1	0.00

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FARR, WILLIAM G

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CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/13/12

316507 MEDICARE 1500 F/C MC

05/13/12

	CODE	DESCRIPTION	QTY	
05/03	003895	KEY TO REFRIGERATOR/NARC. CAB	1	0.00
05/03	003895	KEY TO REFRIGERATOR/NARC. CAB	1	0.00
05/03	010836	OXYGEN	1	0.00
05/03	010836	OXYGEN	1	0.00
05/03	012040	BRONCHOSCOPY ASSIST	1	0.00
05/03	002000	CARE PLAN	1	0.00
05/03	002000	CARE PLAN	1	0.00
05/03	060851	CYTOLOGY NON-GENITAL SPECIMEN	1	0.00
05/03	099022	POC GLUCOSE	1	0.00
05/03	099022	POC GLUCOSE	1	0.00
05/04	010836	OXYGEN	1	0.00
05/04	010836	OXYGEN	1	0.00
05/04	002000	CARE PLAN	1	0.00
05/05	010836	OXYGEN	1	0.00
05/05	010836	OXYGEN	1	0.00
05/05	002000	CARE PLAN	1	0.00
05/06	010836	OXYGEN	1	0.00
05/06	010836	OXYGEN	1	0.00
05/06	002000	CARE PLAN	1	0.00
05/07	010836	OXYGEN	1	0.00

AREA TOTAL ***

0.00

	***110	ROOM-BOARD/PVT		
04/23	010800	ROOM 822 P	1	1,183.00
04/24	010800	ROOM 822 P	1	1,183.00
04/25	010800	ROOM 822 P	1	1,183.00
04/26	010800	ROOM 822 P	1	1,183.00
04/27	010800	ROOM 822 P	1	1,183.00
04/28	010800	ROOM 822 P	1	1,183.00
04/29	010800	ROOM 822 P	1	1,183.00
04/30	010800	ROOM 822 P	1	1,183.00
05/01	010800	ROOM 822 P	1	1,183.00
05/03	010400	ROOM 410 P	1	1,183.00
05/04	010400	ROOM 410 P	1	1,183.00

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FARR, WILLIAM G

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CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/13/12

316507 MEDICARE 1500 F/C MC

05/13/12

	CODE	DESCRIPTION	QTY	
05/05	010400	ROOM 410 P	1	1,183.00
05/06	010400	ROOM 410 P	1	1,183.00
AREA TOTAL ***				15,379.00
***200 INTENSIVE CARE				
05/02	016120	ROOM ICU C	1	3,795.00
AREA TOTAL ***				3,795.00
***250 PHARMACY				
04/23	007121	LIDOCAINE W/EPI 1% 20ML INJ	1	225.00
04/25	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	6	6.00
04/26	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	1	1.00
04/28	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	8	8.00
04/29	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	1	1.00
04/30	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	10	10.00
05/02	005723	PULMICORT RESPULES 0.5MG/2ML BX30	1	64.56
05/04	005723	PULMICORT RESPULES 0.5MG/2ML BX30	1	64.56
05/04	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	8	8.00
05/06	005723	PULMICORT RESPULES 0.5MG/2ML BX30	1	64.56
05/06	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	8	8.00
05/06	005866	DUONEB 2.5-0.5MG/3ML SOLUTION	-3	3.00CR
AREA TOTAL ***				457.68
***258 IV SOLUTIONS				
04/29	007213	MAGNESIUM SULFATE 4GM/100ML WATER	1	100.00
AREA TOTAL ***				100.00
***270 MED/SUR SUPPLY				
04/23	010855	OXYGEN/SHIFT	1	100.00
04/24	010855	OXYGEN/SHIFT	1	100.00
04/24	010855	OXYGEN/SHIFT	1	100.00
04/25	010855	OXYGEN/SHIFT	1	100.00
04/26	010855	OXYGEN/SHIFT	1	100.00
04/27	010855	OXYGEN/SHIFT	1	100.00

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F/C:MC

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FARR, WILLIAM G

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CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/13/12

316507 MEDICARE 1500 F/C MC

05/13/12

	CODE	DESCRIPTION	QTY	
04/27	010855	OXYGEN/SHIFT	1	100.00
04/29	010855	OXYGEN/SHIFT	1	100.00
04/30	010855	OXYGEN/SHIFT	1	100.00
05/01	010855	OXYGEN/SHIFT	1	100.00
05/01	010855	OXYGEN/SHIFT	1	100.00
05/02	010855	OXYGEN/SHIFT	1	100.00
05/02	010855	OXYGEN/SHIFT	1	100.00
05/03	010855	OXYGEN/SHIFT	1	100.00
05/03	010855	OXYGEN/SHIFT	1	100.00
05/04	010855	OXYGEN/SHIFT	1	100.00
05/04	010855	OXYGEN/SHIFT	1	100.00
05/05	010855	OXYGEN/SHIFT	1	100.00
05/05	010855	OXYGEN/SHIFT	1	100.00
05/06	010855	OXYGEN/SHIFT	1	100.00
05/06	010855	OXYGEN/SHIFT	1	100.00
05/07	010855	OXYGEN/SHIFT	1	100.00
AREA TOTAL ***				2,200.00

	CODE	DESCRIPTION	QTY	
***300 LABORATORY				
04/23	013500	BMP	1	89.00
04/23	020050	CBC	1	63.00
04/23	020480	PARTIAL THROMBOPLASTIN TIME	1	63.00
04/23	020590	PROTHROMBIN TIME	1	41.00
04/24	013500	BMP	1	89.00
04/24	020050	CBC	1	63.00
04/24	040520	SPUTUM SCREEN	1	45.00
04/24	040960	PROCALCITONIN	1	285.00
04/24	050062	C-REACTIVE PROTEIN	1	55.00
04/25	013500	BMP	1	89.00
04/25	020050	CBC	1	63.00
04/27	013500	BMP	1	89.00
04/28	020050	CBC	1	63.00
04/29	011770	MAGNESIUM SERUM	1	71.00
04/29	013500	BMP	1	89.00

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FARR, WILLIAM G

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CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/13/12

316507 MEDICARE 1500 F/C MC

05/13/12

	CODE	DESCRIPTION	QTY	
04/29	013550	IMMUNOASSAY CHF-BNP	1	288.00
04/29	020050	CBC	1	63.00
04/29	040960	PROCALCITONIN	1	285.00
05/02	010948	RESPIRATORY ABG PUNCTURE	1	131.00
05/02	031110	BLOOD GAS	1	204.00
05/03	020310	BODY FLUID CELL COUNT AND DIFF	1	58.00
05/03	040060	FUNGUS CULTURE W/FUNGAL SMEAR	1	89.00
05/03	040070	AEROBIC IDENTIFICATION	1	85.00
05/03	040080	RESPIRATORY CULTURE W/GRAM STAIN	1	91.00
05/03	040080	RESPIRATORY CULTURE W/GRAM STAIN	1	91.00
05/03	040165	GRAM STAIN	1	45.00
05/03	040165	GRAM STAIN	1	45.00
05/03	040630	FUNGAL SMEAR	1	57.00
05/03	040635	ACID FAST BACILLI-TB-CULT W/SMEAR	1	114.00
05/03	040645	ACID FAST SMEAR	1	57.00
05/03	040960	PROCALCITONIN	1	285.00
05/06	013500	BMP	1	89.00
05/06	020080	CBC W/DIFF	1	78.00
05/06	050062	C-REACTIVE PROTEIN	1	55.00
05/07	020050	CBC	1	63.00
		AREA TOTAL ***		3,530.00

	***310	PATHOLOGY LAB		
05/03	060750	CYTOPATH CELL ENHANCE TECH	1	260.00
		AREA TOTAL ***		260.00

	***320	DX X-RAY		
04/23	010052	CHEST X-RAY	1	234.00
04/23	050354	CHEST X-RAY	1	234.00
04/23	050354	CHEST X-RAY	1	234.00
04/25	050354	CHEST X-RAY	1	234.00
04/26	050354	CHEST X-RAY	1	234.00
04/27	050354	CHEST X-RAY	1	234.00
04/28	050338	CHEST X-RAY	1	234.00

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FARR, WILLIAM G

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CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/13/12

316507 MEDICARE 1500 F/C MC

05/13/12

	CODE	DESCRIPTION	QTY	
04/28	050354	CHEST X-RAY	1	234.00
04/29	050354	CHEST X-RAY	1	234.00
04/30	050354	CHEST X-RAY	1	234.00
05/01	050342	CHEST X-RAY	1	234.00
05/01	050354	CHEST X-RAY	1	234.00
05/02	050338	CHEST X-RAY	1	234.00
05/03	050354	CHEST X-RAY	1	234.00
05/04	050354	CHEST X-RAY	1	234.00
05/05	050338	CHEST X-RAY	1	234.00
05/06	050338	CHEST X-RAY	1	234.00
05/07	050342	CHEST X-RAY	1	234.00

AREA TOTAL *** 4,212.00

05/02	***343	Diagnostic Radiopharmaceutical		
	060381	NDC 00270131635	100	733.00
		AREA TOTAL ***		733.00

	***350	CT SCAN		
04/27	060220	CT THORAX W/O DYE	1	1,245.00
05/02	060221	CT THORAX W/O & W/DYE	1	2,147.00
		AREA TOTAL ***		3,392.00

	***410	RESPIRATORY SVC		
04/24	010932	PEP THERAPY INITIAL	1	128.00
04/25	020214	MDI (METER-DOSE INHALER) TX	1	128.00
04/26	010483	HHN	1	128.00
04/26	010483	HHN	1	128.00
04/28	010483	HHN	1	128.00
04/28	010483	HHN	1	128.00
04/28	010483	HHN	1	128.00
04/29	010483	HHN	1	128.00
04/29	010483	HHN	1	128.00
04/29	010483	HHN	1	128.00
04/29	010483	HHN	1	128.00

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F/C:MC

P/T:IP

FARR, WILLIAM G

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CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/13/12

316507 MEDICARE 1500 F/C MC

05/13/12

	CODE	DESCRIPTION	QTY	
04/29	020214	MDI (METER-DOSE INHALER) TX	1	128.00
04/29	020214	MDI (METER-DOSE INHALER) TX	1	128.00
04/30	010483	HHN	1	128.00
04/30	010483	HHN	1	128.00
04/30	010483	HHN	1	128.00
04/30	010483	HHN	1	128.00
04/30	010483	HHN	1	128.00
05/01	010483	HHN	1	128.00
05/01	010483	HHN	1	128.00
05/01	010483	HHN	1	128.00
05/01	010483	HHN	1	128.00
05/02	010483	HHN	1	128.00
05/02	010483	HHN	1	128.00
05/02	010483	HHN	1	128.00
05/02	010483	HHN	1	128.00
05/02	010483	HHN	1	128.00
05/02	010483	HHN	1	128.00
05/02	010483	HHN	1	128.00
05/03	010483	HHN	1	128.00
05/03	010483	HHN	1	128.00
05/03	010483	HHN	1	128.00
05/03	010483	HHN	1	128.00
05/03	010483	HHN	1	128.00
05/03	010483	HHN	1	128.00
05/03	010483	HHN	1	128.00
05/03	010483	HHN	1	128.00
05/03	010483	HHN	1	128.00
05/04	010483	HHN	1	128.00
05/04	010483	HHN	1	128.00
05/04	010483	HHN	1	128.00
05/04	010483	HHN	1	128.00
05/04	010483	HHN	1	128.00
05/04	010483	HHN	1	128.00
05/04	010483	HHN	1	128.00
05/04	010483	HHN	1	128.00

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F/C:MC

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FARR, WILLIAM G

1211401433

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CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/13/12

316507 MEDICARE 1500 F/C MC

05/13/12

	CODE	DESCRIPTION	QTY	
05/05	010483	HHN	1	128.00
05/05	010483	HHN	1	128.00
05/05	010483	HHN	1	128.00
05/05	010483	HHN	1	128.00
05/05	010483	HHN	1	128.00
05/05	010483	HHN	1	128.00
05/05	010483	HHN	1	128.00
05/05	010483	HHN	1	128.00
05/06	010483	HHN	1	128.00
05/06	010483	HHN	1	128.00
05/06	010483	HHN	1	128.00
05/06	010483	HHN	1	128.00
05/06	010483	HHN	1	128.00
05/06	010483	HHN	1	128.00
05/06	010483	HHN	1	128.00
05/06	020214	MDI (METER-DOSE INHALER) TX	1	128.00
05/07	010483	HHN	1	128.00
05/07	010483	HHN	1	128.00
05/07	010483	HHN	1	128.00
05/07	010483	HHN	1	128.00
05/07	010483	HHN	1	128.00
05/07	010483	HHN	1	128.00
05/07	020214	MDI (METER-DOSE INHALER) TX	1	128.00
		AREA TOTAL ***		8,704.00
05/04	***424	PHYS THERP/EVAL		
	010500	INITIAL EVALUATION	1	343.00
		AREA TOTAL ***		343.00
	***450	EMERGENCY ROOM		
04/23	002008	ED CRITICAL CARE-1ST 30-74 MIN	1	1,703.00
04/23	041005	INSERTION OF CHEST TUBE	1	1,404.00
		AREA TOTAL ***		3,107.00

Continued

F/C:MC

P/T:IP

FARR, WILLIAM G

1211401433

04/23/12 05/07/12 9

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/13/12

316507 MEDICARE 1500 F/C MC

05/13/12

	CODE	DESCRIPTION	QTY	
	***636	DRUGS/DETAIL CODE		
04/23	002581	MORPHINE SULFATE 10MG INJ	1	250.00
04/23	002581	MORPHINE SULFATE 10MG INJ	1	250.00
04/23	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/24	000121	PREDNISONE 5MG ORAL	2	1.50
04/24	000121	PREDNISONE 5MG ORAL	2	1.50
04/24	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00
04/24	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00
04/24	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/24	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/24	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/24	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
04/25	000121	PREDNISONE 5MG ORAL	2	1.50
04/25	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00
04/26	000121	PREDNISONE 5MG ORAL	2	1.50
04/26	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00
04/26	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/26	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/26	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/27	000121	PREDNISONE 5MG ORAL	2	1.50
04/27	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00
04/27	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/27	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/28	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00
04/28	001187	FUROSEMIDE 20MG INJ	1	225.00
04/28	001187	FUROSEMIDE 20MG INJ	1	225.00
04/28	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/28	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/28	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/28	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/28	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/28	002716	METHYLPREDNISOLONE SUCC 40MG INJ	2	450.00
04/28	002716	METHYLPREDNISOLONE SUCC 40MG INJ	2	450.00
04/29	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00

Continued

F/C:MC

P/T:IP

FARR, WILLIAM G

1211401433

04/23/12 05/07/12 10

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/13/12

316507 MEDICARE 1500 F/C MC

05/13/12

	CODE	DESCRIPTION	QTY	
04/29	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/29	002716	METHYLPREDNISOLONE SUCC 40MG INJ	2	450.00
04/30	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00
04/30	002713	MORPHINE SULFATE 10MG INJ	1	250.00
04/30	002716	METHYLPREDNISOLONE SUCC 40MG INJ	2	450.00
05/01	000124	PREDNISONE 5MG ORAL	16	6.00
05/01	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00
05/02	000124	PREDNISONE 5MG ORAL	16	6.00
05/03	000124	PREDNISONE 5MG ORAL	6	3.00
05/03	001170	ENOXAPARIN SODIUM 10MG INJ	3	225.00
05/03	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00
05/03	002799	FENTANYL CITRATE 0.1MG INJ	3	250.00
05/03	002811	MIDAZOLAM HCL 1MG INJ	2	250.00
05/03	002811	MIDAZOLAM HCL 1MG INJ	2	250.00
05/03	006584	HEPARIN SODIUM 10U INJ	50	100.00
05/04	000124	PREDNISONE 5MG ORAL	6	3.00
05/04	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00
05/04	006584	HEPARIN SODIUM 10U INJ	50	100.00
05/05	000124	PREDNISONE 5MG ORAL	4	1.50
05/05	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00
05/05	001355	FUROSEMIDE 20MG INJ	2	225.00
05/05	006584	HEPARIN SODIUM 10U INJ	50	100.00
05/06	000124	PREDNISONE 5MG ORAL	4	1.50
05/06	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00
		AREA TOTAL ***		14,353.50

	***637	PHARMACY-SELF ADMIN DRUGS		
04/23	000033	KLOR-CON ER 200MEQ TABLET	2	3.00
04/23	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
04/23	002632	NICOTINE PATCH 14MG	1	4.88
04/23	005492	PROTONIX EC 40MG TAB	1	1.50
04/23	006941	SYMBICORT MDI 160-4.5MCG INHALER	1	134.34
04/23	007023	SIMVASTATIN 40MG TAB	1	1.50
04/23	007246	ALBUTEROL SULFATE 90MCG INHAL	1	73.98

Continued

F/C:MC P/T:IP

FARR, WILLIAM G

1211401433

04/23/12 05/07/12 11

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/13/12

316507 MEDICARE 1500 F/C MC

05/13/12

	CODE	DESCRIPTION	QTY	
04/23	007349	HYDROCODONE BIT/APAP 7.5-3.25MG T	1	2.00
04/24	000033	KLOR-CON ER 200MEQ TABLET	2	3.00
04/24	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
04/24	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
04/24	000063	SENNALAXATIVE 8.6MG TABLET	2	3.00
04/24	000063	SENNALAXATIVE 8.6MG TABLET	2	3.00
04/24	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
04/24	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
04/24	002632	NICOTINE PATCH 14MG	1	4.88
04/24	002632	NICOTINE PATCH 14MG	1	4.88
04/24	003892	HYDROMET SYRUP 473ML	2	23.62
04/24	005289	NORCO 10 325MG TAB	1	2.00
04/24	005289	NORCO 10 325MG TAB	1	2.00
04/24	005492	PROTONIX EC 40MG TAB	2	3.00
04/24	005492	PROTONIX EC 40MG TAB	2	3.00
04/24	007023	SIMVASTATIN 40MG TAB	1	1.50
04/24	007023	SIMVASTATIN 40MG TAB	1	1.50
04/24	007023	SIMVASTATIN 40MG TAB	1	1.50
04/24	007349	HYDROCODONE BIT/APAP 7.5-3.25MG T	1	2.00
04/25	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
04/25	000063	SENNALAXATIVE 8.6MG TABLET	2	3.00
04/25	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
04/25	002632	NICOTINE PATCH 14MG	1	4.88
04/25	003892	HYDROMET SYRUP 473ML	2	23.62
04/25	005289	NORCO 10 325MG TAB	1	2.00
04/25	005289	NORCO 10 325MG TAB	1	2.00
04/25	005289	NORCO 10 325MG TAB	1	2.00
04/25	005289	NORCO 10 325MG TAB	1	2.00
04/25	005492	PROTONIX EC 40MG TAB	2	3.00
04/25	006941	SYMBICORT MDI 160-4.5MCG INHALER	1	134.34
04/25	007023	SIMVASTATIN 40MG TAB	1	1.50
04/26	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
04/26	000063	SENNALAXATIVE 8.6MG TABLET	2	3.00
04/26	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50

Continued

F/C:MC P/T:IP

FARR, WILLIAM G

1211401433

04/23/12 05/07/12 12

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/13/12

316507 MEDICARE 1500 F/C MC

05/13/12

	CODE	DESCRIPTION	QTY	
04/26	002632	NICOTINE PATCH 14MG	1	4.88
04/26	003892	HYDROMET SYRUP 473ML	2	23.62
04/26	003892	HYDROMET SYRUP 473ML	2	23.62
04/26	005289	NORCO 10 325MG TAB	1	2.00
04/26	005289	NORCO 10 325MG TAB	1	2.00
04/26	005492	PROTONIX EC 40MG TAB	2	3.00
04/26	007023	SIMVASTATIN 40MG TAB	1	1.50
04/27	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
04/27	000063	SENNA LAXATIVE 8.6MG TABLET	2	3.00
04/27	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
04/27	002632	NICOTINE PATCH 14MG	1	4.88
04/27	003892	HYDROMET SYRUP 473ML	2	23.62
04/27	003892	HYDROMET SYRUP 473ML	2	23.62
04/27	005289	NORCO 10 325MG TAB	1	2.00
04/27	005289	NORCO 10 325MG TAB	2	4.00
04/27	005289	NORCO 10 325MG TAB	2	4.00
04/27	005492	PROTONIX EC 40MG TAB	2	3.00
04/27	007023	SIMVASTATIN 40MG TAB	1	1.50
04/28	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
04/28	000063	SENNA LAXATIVE 8.6MG TABLET	2	3.00
04/28	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
04/28	002632	NICOTINE PATCH 14MG	1	4.88
04/28	003892	HYDROMET SYRUP 473ML	2	23.62
04/28	003892	HYDROMET SYRUP 473ML	2	23.62
04/28	005492	PROTONIX EC 40MG TAB	2	3.00
04/28	007023	SIMVASTATIN 40MG TAB	1	1.50
04/29	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
04/29	000063	SENNA LAXATIVE 8.6MG TABLET	2	3.00
04/29	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
04/29	002632	NICOTINE PATCH 14MG	1	4.88
04/29	003892	HYDROMET SYRUP 473ML	2	23.62
04/29	005289	NORCO 10 325MG TAB	2	4.00
04/29	005289	NORCO 10 325MG TAB	2	4.00
04/29	005492	PROTONIX EC 40MG TAB	2	3.00

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F/C:MC P/T:IP

FARR, WILLIAM G

1211401433

04/23/12 05/07/12 13

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/13/12

316507 MEDICARE 1500 F/C MC

05/13/12

	CODE	DESCRIPTION	QTY	
04/29	007023	SIMVASTATIN 40MG TAB	1	1.50
04/30	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
04/30	000063	SENNA LAXATIVE 8.6MG TABLET	2	3.00
04/30	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
04/30	002632	NICOTINE PATCH 14MG	1	4.88
04/30	003892	HYDROMET SYRUP 473ML	2	23.62
04/30	003892	HYDROMET SYRUP 473ML	2	23.62
04/30	005289	NORCO 10 325MG TAB	1	2.00
04/30	005289	NORCO 10 325MG TAB	2	4.00
04/30	005492	PROTONIX EC 40MG TAB	2	3.00
04/30	007023	SIMVASTATIN 40MG TAB	1	1.50
05/01	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
05/01	000063	SENNA LAXATIVE 8.6MG TABLET	2	3.00
05/01	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
05/01	002632	NICOTINE PATCH 14MG	1	4.88
05/01	003892	HYDROMET SYRUP 473ML	2	23.62
05/01	003892	HYDROMET SYRUP 473ML	2	23.62
05/01	005252	AVELOX 400MG TAB	1	49.57
05/01	005252	AVELOX 400MG TAB	1	49.57
05/01	005289	NORCO 10 325MG TAB	2	4.00
05/01	005289	NORCO 10 325MG TAB	2	4.00
05/01	005289	NORCO 10 325MG TAB	2	4.00
05/01	005492	PROTONIX EC 40MG TAB	2	3.00
05/01	007023	SIMVASTATIN 40MG TAB	1	1.50
05/02	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
05/02	000063	SENNA LAXATIVE 8.6MG TABLET	2	3.00
05/02	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
05/02	002632	NICOTINE PATCH 14MG	1	4.88
05/02	003711	LORAZEPAM 1MG TABLET	1	2.00
05/02	003892	HYDROMET SYRUP 473ML	2	23.62
05/02	005252	AVELOX 400MG TAB	1	49.57
05/02	005289	NORCO 10 325MG TAB	2	4.00
05/02	005289	NORCO 10 325MG TAB	1	2.00
05/02	005492	PROTONIX EC 40MG TAB	2	3.00

Continued

F/C:MC

P/T:IP

FARR, WILLIAM G

1211401433

04/23/12 05/07/12 14

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/13/12

316507 MEDICARE 1500 F/C MC

05/13/12

	CODE	DESCRIPTION	QTY	
05/02	006955	ARFORMOTEROL 15MCG/2ML INH	4	82.12
05/02	006955	ARFORMOTEROL 15MCG/2ML INH	6	123.18
05/02	007023	SIMVASTATIN 40MG TAB	1	1.50
05/03	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
05/03	000063	SENNA LAXATIVE 8.6MG TABLET	2	3.00
05/03	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
05/03	002632	NICOTINE PATCH 14MG	1	4.88
05/03	003892	HYDROMET SYRUP 473ML	2	23.62
05/03	003892	HYDROMET SYRUP 473ML	2	23.62
05/03	005252	AVELOX 400MG TAB	1	49.57
05/03	005289	NORCO 10 325MG TAB	1	2.00
05/03	005289	NORCO 10 325MG TAB	2	4.00
05/03	005492	PROTONIX EC 40MG TAB	2	3.00
05/03	007023	SIMVASTATIN 40MG TAB	1	1.50
05/04	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
05/04	000063	SENNA LAXATIVE 8.6MG TABLET	2	3.00
05/04	000208	BENZONATATE LF 100MG CAPSULE	1	1.50
05/04	000208	BENZONATATE LF 100MG CAPSULE	3	4.50
05/04	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
05/04	002632	NICOTINE PATCH 14MG	1	4.88
05/04	003892	HYDROMET SYRUP 473ML	2	23.62
05/04	003892	HYDROMET SYRUP 473ML	2	23.62
05/04	003892	HYDROMET SYRUP 473ML	2	23.62
05/04	003892	HYDROMET SYRUP 473ML	2	23.62
05/04	005252	AVELOX 400MG TAB	1	49.57
05/04	005289	NORCO 10 325MG TAB	2	4.00
05/04	005289	NORCO 10 325MG TAB	2	4.00
05/04	005492	PROTONIX EC 40MG TAB	2	3.00
05/04	006955	ARFORMOTEROL 15MCG/2ML INH	5	102.65
05/04	006955	ARFORMOTEROL 15MCG/2ML INH	-4	82.12CR
05/04	007023	SIMVASTATIN 40MG TAB	1	1.50
05/05	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
05/05	000063	SENNA LAXATIVE 8.6MG TABLET	2	3.00
05/05	000208	BENZONATATE LF 100MG CAPSULE	3	4.50

Continued

F/C:MC

P/T:IP

FARR, WILLIAM G

1211401433

04/23/12 05/07/12 15

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/13/12

316507 MEDICARE 1500 F/C MC

05/13/12

	CODE	DESCRIPTION	QTY	
05/05	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
05/05	002632	NICOTINE PATCH 14MG	1	4.88
05/05	003892	HYDROMET SYRUP 473ML	2	23.62
05/05	005252	AVELOX 400MG TAB	1	49.57
05/05	005289	NORCO 10 325MG TAB	2	4.00
05/05	005289	NORCO 10 325MG TAB	2	4.00
05/05	005289	NORCO 10 325MG TAB	2	4.00
05/05	005492	PROTONIX EC 40MG TAB	2	3.00
05/05	006340	SPIRIVA 18MCG CAP-HANDIHALER	1	131.48
05/05	007023	SIMVASTATIN 40MG TAB	1	1.50
05/05	007246	ALBUTEROL SULFATE 90MCG INHAL	1	73.98
05/06	000033	KLOR-CON ER 200MEQ TABLET	4	6.00
05/06	000063	SENNA LAXATIVE 8.6MG TABLET	2	3.00
05/06	000208	BENZONATATE LF 100MG CAPSULE	3	4.50
05/06	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
05/06	002632	NICOTINE PATCH 14MG	1	4.88
05/06	005252	AVELOX 400MG TAB	1	49.57
05/06	005289	NORCO 10 325MG TAB	2	4.00
05/06	005289	NORCO 10 325MG TAB	2	4.00
05/06	005492	PROTONIX EC 40MG TAB	2	3.00
05/06	006955	ARFORMOTEROL 15MCG/2ML INH	6	123.18
05/06	006955	ARFORMOTEROL 15MCG/2ML INH	-2	41.06CR
05/06	006955	ARFORMOTEROL 15MCG/2ML INH	-4	82.12CR
05/06	007023	SIMVASTATIN 40MG TAB	1	1.50
05/07	003892	HYDROMET SYRUP 473ML	1	11.81
05/07	003892	HYDROMET SYRUP 473ML	1	11.81
05/07	005289	NORCO 10 325MG TAB	1	2.00
05/07	005289	NORCO 10 325MG TAB	2	4.00
		AREA TOTAL ***		2,054.78
	***730	EKG/ECG		
04/23	010000	ELECTROCARDIOGRAM, TRACING	1	227.00
04/26	010000	ELECTROCARDIOGRAM, TRACING	1	227.00
04/26	010000	ELECTROCARDIOGRAM, TRACING	1	227.00

Continued

FINAL

-753-

F/C:MC

P/T:IP

FARR, WILLIAM G

1211401433

04/23/12 05/07/12 16

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/13/12

316507 MEDICARE 1500 F/C MC

05/13/12

CODE	DESCRIPTION	AREA TOTAL ***	QTY	
				681.00
05/03	***750 GASTR-INST SVS			
	060215 BRONCHOSCOPY, CLEAR AIRWAYS		1	1,769.00
		AREA TOTAL ***		1,769.00
	TOTAL CHARGES			65,070.96
	TOTAL PAYMENTS/ADJUSTMENTS			0.00

65,070.96

65,070.96

65,070.96

Spartanburg Regional Medical Center & Spartanburg Home Hospice 0091

PRINTED BY: JH24657

DATE 05/12/2015

FINAL

-754-

F/C:MC

P/T:OPT

FARR, WILLIAM G

1208800890

03/29/12 03/29/12 1

RAUL MANUEL B CRUZ

WILLIAM G FARR
1032 JONESVILLE LOCKHT H
UNION SC 29379

316501 MEDICARE

04/05/12

316507 MEDICARE 1500 F/C MC

04/05/12

	CODE	DESCRIPTION	QTY	
03/29	***343	Diagnostic Radiopharmaceutical		
	070205	F18 FDG	1	826.50
		AREA TOTAL ***		826.50
03/29	***404	PET SCAN		
	070030	PET IMAGE W/CT, SKULL-THIGH	1	3,768.00
		AREA TOTAL ***		3,768.00

TOTAL CHARGES

4,594.50

TOTAL PAYMENTS/ADJUSTMENTS

0.00

4,594.50

4,594.50

4,594.50

FINAL

-755-

F/C:MC

P/T:OPT

FARR, WILLIAM G

1208800890

03/29/12 03/29/12 1

RAUL MANUEL B CRUZ

316501 MEDICARE

WILLIAM G FARR
1032 JONESVILLE LOCKHT H
UNION SC 29379

04/05/12

316507 MEDICARE 1500 F/C MC

04/05/12

	CODE	DESCRIPTION	QTY	
03/29	***343	Diagnostic Radiopharmaceutical		
	070205	F18 FDG	1	826.50
		AREA TOTAL ***		826.50
03/29	***404	PET SCAN		
	070030	PET IMAGE W/CT, SKULL-THIGH	1	3,768.00
		AREA TOTAL ***		3,768.00

TOTAL CHARGES 4,594.50

TOTAL PAYMENTS/ADJUSTMENTS 0.00

4,594.50

4,594.50

4,594.50

Spartanburg Regional Medical Center & Spartanburg Home Hospice 0093

PRINTED BY: JH24657

DATE 05/12/2015

F/C:MC P/T:OPT

FARR, WILLIAM G

1208800890

03/29/12 03/29/12 1

RAUL MANUEL B CRUZ

WILLIAM G FARR
1032 JONESVILLE LOCKHT H.
UNION SC 29379

316501 MEDICARE

04/05/12

316507 MEDICARE 1500 F/C MC

04/05/12

	CODE	DESCRIPTION	QTY	
03/29	***343	Diagnostic Radiopharmaceutical		
	070205	F18 FDG	1	826.50
		AREA TOTAL ***		826.50
03/29	***404	PET SCAN		
	070030	PET IMAGE W/CT, SKULL-THIGH	1	3,768.00
		AREA TOTAL ***		3,768.00

TOTAL CHARGES

4,594.50

TOTAL PAYMENTS/ADJUSTMENTS

0.00

4,594.50

4,594.50

4,594.50

FINAL

-757-

F/C:MC

P/T:OPT

FARR, WILLIAM G

1208800890

03/29/12 03/29/12

1

RAUL MANUEL B CRUZ

WILLIAM G FARR
1032 JONESVILLE LOCKHT H
UNION SC 29379

316501 MEDICARE

04/05/12

316507 MEDICARE 1500 F/C MC

04/05/12

	CODE	DESCRIPTION	QTY	
03/29	***343	Diagnostic Radiopharmaceutical		
	070205	F18 FDG	1	826.50
		AREA TOTAL ***		826.50
03/29	***404	PET SCAN		
	070030	PET IMAGE W/CT, SKULL-THIGH	1	3,768.00
		AREA TOTAL ***		3,768.00
		TOTAL CHARGES		4,594.50
		TOTAL PAYMENTS/ADJUSTMENTS		0.00

4,594.50

4,594.50

4,594.50

Spartanburg Regional Medical Center & Spartanburg Home Hospice 0095

PRINTED BY: JH24657

DATE

05/12/2015

FINAL

-758-

F/C:MC

P/T:OPT

FARR, WILLIAM G

1135400712

12/19/11 12/19/11 1

SHARMILA MEHTA

316501 MEDICARE

WILLIAM G FARR
1032 JONESVILLE LOCKHT H
UNION SC 29379

12/25/11

316507 MEDICARE 1500 F/C MC

12/25/11

CODE

DESCRIPTION

QTY

TOTAL CHARGES

0.00

TOTAL PAYMENTS/ADJUSTMENTS

0.00

0.00

0.00

0.00

Spartanburg Regional Medical Center & Spartanburg Home Hospice 0096

PRINTED BY: JH24657

DATE 05/12/2015

F/C:MC

P/T:RON

FARR, WILLIAM G

1127400641

10/01/11 10/31/11 1

DREW MONITTO

WILLIAM G FARR
1032 JONESVILLE LOCKHT H
UNION SC 29379

316501 MEDICARE

11/06/11

316507 MEDICARE 1500 F/C MC

11/06/11

	CODE	DESCRIPTION	QTY	
	***010	ORDER COMMUNICATION MESSAGE		
10/03	077427	WEEKLY TX MANAGEMENT	1	0.00
10/10	077427	WEEKLY TX MANAGEMENT	1	0.00
10/10	077427	WEEKLY TX MANAGEMENT	1	0.00
		AREA TOTAL ***		0.00
	***333	RADIATION RX		
10/03	077336	CONTINUING RAD PHYSICS WEEK	1	557.00
10/03	077413	INTERMED TX 6-10 PHOTON/ELECTRON	1	856.00
10/04	077413	INTERMED TX 6-10 PHOTON/ELECTRON	1	856.00
10/05	077413	INTERMED TX 6-10 PHOTON/ELECTRON	1	856.00
10/06	077413	INTERMED TX 6-10 PHOTON/ELECTRON	1	856.00
10/07	077413	INTERMED TX 6-10 PHOTON/ELECTRON	1	856.00
10/07	077417	PORT FILM	1	856.00
10/10	077336	CONTINUING RAD PHYSICS WEEK	1	1,031.00
10/10	077413	INTERMED TX 6-10 PHOTON/ELECTRON	1	557.00
10/11	077413	INTERMED TX 6-10 PHOTON/ELECTRON	1	856.00
10/12	077413	INTERMED TX 6-10 PHOTON/ELECTRON	1	856.00
10/13	077413	INTERMED TX 6-10 PHOTON/ELECTRON	1	856.00
10/14	077413	INTERMED TX 6-10 PHOTON/ELECTRON	1	856.00
10/14	077417	PORT FILM	1	856.00
		AREA TOTAL ***		1,031.00
				11,736.00

TOTAL CHARGES

11,736.00

TOTAL PAYMENTS/ADJUSTMENTS

0.00

11,736.00

11,736.00

11,736.00

F/C:MC P/T:IP

FARR, WILLIAM G

1136301165

12/29/11 12/31/11 1

RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHT H
UNION SC 29379

316501 MEDICARE

01/06/12

316507 MEDICARE 1500 F/C MC

01/06/12

	CODE	DESCRIPTION	QTY	
	***010	ORDER COMMUNICATION MESSAGE		
12/29	010280	EKG	1	0.00
12/29	002000	CARE PLAN	1	0.00
12/29	099022	POC GLUCOSE	1	0.00
12/29	099022	POC GLUCOSE	1	0.00
12/30	099022	POC GLUCOSE	1	0.00
12/30	099022	POC GLUCOSE	1	0.00
12/30	099022	POC GLUCOSE	1	0.00
12/30	099022	POC GLUCOSE	1	0.00
12/31	099022	POC GLUCOSE	1	0.00
12/31	099022	POC GLUCOSE	1	0.00
12/31	099022	POC GLUCOSE	1	0.00
		AREA TOTAL ***		0.00
	***110	ROOM-BOARD/PVT		
12/29	010400	ROOM 411 P	1	1,183.00
12/30	010400	ROOM 411 P	1	1,183.00
		AREA TOTAL ***		2,366.00
	***250	PHARMACY		
12/29	005723	PULMICORT RESPULES 0.5MG/2ML BX30	1	64.56
		AREA TOTAL ***		64.56
	***258	IV SOLUTIONS		
12/29	000292	NACL 0.45% INJ 1000ML IV BAG	1	100.00
12/29	000292	NACL 0.45% INJ 1000ML IV BAG	1	100.00
12/29	000326	NORMAL SALINE SOL 250ML INFUSION	1	100.00
12/29	001535	SODIUM CHLORIDE 0.9% 50ML MB INJ	1	100.00
12/29	001549	SODIUM CHLORIDE 0.9% 100ML MBPLUS	2	200.00
12/30	000292	NACL 0.45% INJ 1000ML IV BAG	1	100.00
12/30	000292	NACL 0.45% INJ 1000ML IV BAG	1	100.00
12/30	000333	NORMAL SALINE SOL 500ML INFUSION	1	100.00
12/30	001535	SODIUM CHLORIDE 0.9% 50ML MB INJ	2	200.00
12/31	000292	NACL 0.45% INJ 1000ML IV BAG	1	100.00

Continued

F/C:MC P/T:IP

FARR, WILLIAM G

1136301165

12/29/11 12/31/11 2

RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHT H
UNION SC 29379

316501 MEDICARE

01/06/12

316507 MEDICARE 1500 F/C MC

01/06/12

	CODE	DESCRIPTION	QTY	
12/31	001549	SODIUM CHLORIDE 0.9% 100ML MBPLUS	2	200.00
		AREA TOTAL ***		1,400.00
	***270	MED/SUR SUPPLY		
12/29	010855	OXYGEN/SHIFT	1	100.00
12/29	010855	OXYGEN/SHIFT	1	100.00
		AREA TOTAL ***		200.00
	***300	LABORATORY		
12/29	012221	LIPID PROFILE	1	103.00
12/29	013505	CMP	1	101.00
12/29	018043	LEGIONELLA AG URINE NOW	1	127.00
12/29	018193	STREP PNEUMO URINE ANTIGEN	1	127.00
12/29	020050	CBC	1	63.00
12/29	020721	URINALYSIS W/MICRO	1	33.00
12/29	040080	RESPIRATORY CULTURE W/GRAM STAIN	1	91.00
12/29	040165	GRAM STAIN	1	45.00
12/29	040255	MYCOPLASMA PNEUMONIAE EIA	1	140.00
12/29	040570	URINE CULTURE	1	85.00
12/29	040690	BLOOD CULTURE	1	109.00
12/29	040690	BLOOD CULTURE	1	109.00
12/29	050295	THYROID STIM HORMONE TSH	1	177.00
		AREA TOTAL ***		1,310.00
	***320	DX X-RAY		
12/29	050342	CHEST X-RAY	1	234.00
		AREA TOTAL ***		234.00
	***410	RESPIRATORY SVC		
12/30	010483	HHN	1	128.00
12/30	010483	HHN	1	128.00
12/30	010483	HHN	1	128.00
12/30	010483	HHN	1	128.00
12/30	010483	HHN	1	128.00

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F/C:MC

P/T:IP

FARR, WILLIAM G

1136301165

12/29/11 12/31/11 3

RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHT H
UNION SC 29379

316501 MEDICARE

01/06/12

316507 MEDICARE 1500 F/C MC

01/06/12

	CODE	DESCRIPTION	QTY	
12/30	010483	HHN	1	128.00
		AREA TOTAL ***		768.00
	***636	DRUGS/DETAIL CODE		
12/29	002716	METHYLPREDNISOLONE SUCC 40MG INJ	2	450.00
12/29	002716	METHYLPREDNISOLONE SUCC 40MG INJ	4	900.00
12/29	002717	METHYLPREDNISOLONE SUCC 125MG INJ	1	225.00
12/29	002939	CEFTRIAXONE SODIUM 250MG INJ	4	225.00
12/29	002939	CEFTRIAXONE SODIUM 250MG INJ	4	225.00
12/29	004383	AZITHROMYCIN 500MG INJ	1	225.00
12/29	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
12/29	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
12/30	000124	PREDNISONE 5MG ORAL	4	1.50
12/30	001800	VANCOMYCIN HCL 500MG INJ	3	225.00
12/30	002939	CEFTRIAXONE SODIUM 250MG INJ	4	225.00
12/30	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
12/31	006584	HEPARIN SODIUM 10U INJ	50	100.00
		AREA TOTAL ***		3,476.50
	***637	PHARMACY-SELF ADMINIS DRUGS		
12/29	001059	INSULIN 5U INJ	1	12.50
12/29	005492	PROTONIX EC 40MG TAB	2	3.00
12/29	005492	PROTONIX EC 40MG TAB	1	1.50
12/29	005492	PROTONIX EC 40MG TAB	1	1.50
12/29	006955	ARFORMOTEROL 15MCG/2ML INH	1	21.03
12/29	007023	SIMVASTATIN 40MG TAB	1	1.50
12/29	007023	SIMVASTATIN 40MG TAB	1	1.50
12/30	005492	PROTONIX EC 40MG TAB	1	1.50
12/30	007023	SIMVASTATIN 40MG TAB	1	1.50
12/31	000362	ALPRAZOLAM 1MG TABLET	1	2.00
		AREA TOTAL ***		47.53
	***730	EKG/ECG		
12/29	010000	ELECTROCARDIOGRAM, TRACING	1	227.00

Continued

FINAL

-763-

F/C:MC P/T:IP

FARR, WILLIAM G

1136301165

12/29/11 12/31/11 4

RONALD H LITTLEFIELD

WILLIAM G FARR
1032 JONESVILLE LOCKHT H
UNION SC 29379

316501 MEDICARE

01/06/12

316507 MEDICARE 1500 F/C MC

01/06/12

CODE	DESCRIPTION	QTY	AREA TOTAL ***
12/29	***960 PRO FEE		227.00
010010	ELECTROCARDIOGRAM REPORT	1	76.00
	AREA TOTAL ***		76.00
	TOTAL CHARGES		10,169.59
	TOTAL PAYMENTS/ADJUSTMENTS		0.00

10,169.59

10,169.59

10,169.59

Spartanburg Regional Medical Center & Spartanburg Home Hospice 00101

PRINTED BY: JH24657

DATE 05/12/2015

FINAL

-764-

F/C:MC

P/T:OPT

FARR, WILLIAM G

1133501465

12/01/11 12/01/11 1

SHARMILA MEHTA

WILLIAM G FARR
1032 JONESVILLE LOCKHT H
UNION SC 29379

316501 MEDICARE

12/07/11

316507 MEDICARE 1500 F/C MC

12/07/11

	CODE	DESCRIPTION	QTY	
12/01	***343	Diagnostic Radiopharmaceutical		
	065240	LOCM 300-399MG/ML IODINE, PER 1ML	100	100.00
		AREA TOTAL ***		100.00
	***350	CT SCAN		
12/01	065095	CT THORAX W/DYE	1	1,926.00
12/01	065248	CT ABD/PELVIS W/CONTRAST	1	1,926.00
		AREA TOTAL ***		3,852.00

TOTAL CHARGES 3,952.00

TOTAL PAYMENTS/ADJUSTMENTS 0.00

3,952.00

3,952.00

3,952.00

FINAL

-765-

F/C:MC

P/T:GIC

FARR, WILLIAM G

1133901723

12/05/11 12/05/11 1

SHARMILA MEHTA

WILLIAM G FARR
1032 JONESVILLE LOCKHT H
UNION SC 29379

316501 MEDICARE

12/15/11

316507 MEDICARE 1500 F/C MC

12/15/11

	CODE	DESCRIPTION	QTY	
12/05	***636	DRUGS/DETAIL CODE		
	006584	HEPARIN SODIUM 10U INJ	50	100.00
		AREA TOTAL ***		100.00
12/05	***940	OTHER RX SVS		
	080280	IRRIG CV ACCESS DEVICE	1	225.00
		AREA TOTAL ***		225.00

TOTAL CHARGES 325.00

TOTAL PAYMENTS/ADJUSTMENTS 0.00

325.00

325.00

325.00

Spartanburg Regional Medical Center & Spartanburg Home Hospice 00103

PRINTED BY: JH24657

DATE 05/12/2015

F/C:MC P/T:IP

FARR, WILLIAM G

1130601593

11/02/11 11/06/11 1

SHARMILA MEHTA

WILLIAM G FARR
1032 JONESVILLE LOCKHT H
UNION SC 29379

316501 MEDICARE

11/12/11

316507 MEDICARE 1500 F/C MC

11/12/11

	CODE	DESCRIPTION	QTY	
	***010	ORDER COMMUNICATION MESSAGE		
11/03	006342	IN A PREMIXED MINIBAG	1	0.00
11/03	006342	IN A PREMIXED MINIBAG	1	0.00
11/03	050000	FOOD PREFERENCES	1	0.00
11/03	050000	FOOD PREFERENCES	1	0.00
11/03	050002	SUPPLEMENTS	1	0.00
11/03	050002	SUPPLEMENTS	1	0.00
11/03	050002	SUPPLEMENTS	1	0.00
11/03	050002	SUPPLEMENTS	1	0.00
11/04	050000	FOOD PREFERENCES	1	0.00
11/04	050002	SUPPLEMENTS	1	0.00
11/04	050002	SUPPLEMENTS	1	0.00
11/05	006342	IN A PREMIXED MINIBAG	1	0.00
11/05	050000	FOOD PREFERENCES	1	0.00
11/05	050002	SUPPLEMENTS	1	0.00
11/05	050002	SUPPLEMENTS	1	0.00
11/06	003895	KEY TO REFRIGERATOR/NARC. CAB	1	0.00
11/06	006342	IN A PREMIXED MINIBAG	1	0.00
		AREA TOTAL ***		0.00
	***110	ROOM-BOARD/PVT		
11/02	010620	ROOM 2008 P	1	1,183.00
11/03	010620	ROOM 2008 P	1	1,183.00
11/04	010620	ROOM 2008 P	1	1,183.00
11/05	010620	ROOM 2008 P	1	1,183.00
		AREA TOTAL ***		4,732.00
	***258	IV SOLUTIONS		
11/02	000340	NORMAL SALINE SOLUTION 1000 ML IN	1	100.00
11/02	000340	NORMAL SALINE SOLUTION 1000 ML IN	1	100.00
11/04	000340	NORMAL SALINE SOLUTION 1000 ML IN	1	100.00
11/04	000340	NORMAL SALINE SOLUTION 1000 ML IN	1	100.00
11/05	000333	NORMAL SALINE SOL 500ML INFUSION	1	100.00
11/05	000340	NORMAL SALINE SOLUTION 1000 ML IN	1	100.00

Continued

F/C:MC P/T:IP

FARR, WILLIAM G

1130601593

11/02/11 11/06/11 2

SHARMILA MEHTA

WILLIAM G FARR
1032 JONESVILLE LOCKHT H
UNION SC 29379

316501 MEDICARE

11/12/11

316507 MEDICARE 1500 F/C MC

11/12/11

	CODE	DESCRIPTION	QTY	
11/05	000340	NORMAL SALINE SOLUTION 1000 ML IN	1	100.00
11/05	000340	NORMAL SALINE SOLUTION 1000 ML IN	1	100.00
11/05	007214	MAGNESIUM SULFATE 2GMS/50ML WATER	4	100.00
11/06	007214	MAGNESIUM SULFATE 2GMS/50ML WATER	4	100.00
		AREA TOTAL ***		1,000.00
	***300	LABORATORY		
11/03	011770	MAGNESIUM SERUM	1	71.00
11/03	013505	CMP	1	101.00
11/03	020080	CBC W/DIFF	1	78.00
11/04	013505	CMP	1	101.00
11/04	020080	CBC W/DIFF	1	78.00
11/05	011770	MAGNESIUM SERUM	1	71.00
11/05	013505	CMP	1	101.00
11/05	020080	CBC W/DIFF	1	78.00
11/06	011770	MAGNESIUM SERUM	1	71.00
11/06	013505	CMP	1	101.00
11/06	020080	CBC W/DIFF	1	78.00
		AREA TOTAL ***		929.00
	***350	CT SCAN		
11/02	060220	CT THORAX W/O DYE	1	839.00
		AREA TOTAL ***		839.00
	***410	RESPIRATORY SVC		
11/03	010483	HHN	1	128.00
11/04	010483	HHN	1	128.00
		AREA TOTAL ***		256.00
	***636	DRUGS/DETAIL CODE		
11/02	000761	HEPARIN SODIUM 10U INJ	3	100.00
11/02	001072	ONDANSETRON HCL 1MG INJ	8	225.00
11/02	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
11/02	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00

Continued

F/C:MC

P/T:IP

FARR, WILLIAM G

1130601593

11/02/11 11/06/11 3

SHARMILA MEHTA

WILLIAM G FARR
1032 JONESVILLE LOCKHT H
UNION SC 29379

316501 MEDICARE

11/12/11

316507 MEDICARE 1500 F/C MC

11/12/11

	CODE	DESCRIPTION	QTY	
11/03	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
11/03	004706	POTASSIUM CHLORIDE 2 MEQ INJ	10	200.00
11/03	007669	MAGNESIUM SULFATE 500MG INJ	4	100.00
11/03	007669	MAGNESIUM SULFATE 500MG INJ	4	100.00
11/04	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
11/04	004706	POTASSIUM CHLORIDE 2 MEQ INJ	15	300.00
11/05	004255	POTASSIUM CHLORIDE 2MEQ INJ	20	0.72
11/05	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
11/06	006584	HEPARIN SODIUM 10U INJ	50	100.00
AREA TOTAL ***				2,250.72
***637 PHARMACY-SELF ADMINIS DRUGS				
11/02	000063	SENNA LAXATIVE 8.6MG TABLET	1	1.50
11/02	000063	SENNA LAXATIVE 8.6MG TABLET	2	3.00
11/02	000070	SUCRALFATE 1GM TABLET	3	4.50
11/02	000070	SUCRALFATE 1GM TABLET	4	6.00
11/02	000087	VERAPAMIL HCL 240MG CR TABLET	1	1.50
11/02	000087	VERAPAMIL HCL 240MG CR TABLET	1	1.50
11/02	000087	VERAPAMIL HCL 240MG CR TABLET	1	1.50
11/02	001504	POTASSIUM CHLORIDE 10% LIQ.15/U/D	1	18.00
11/02	001504	POTASSIUM CHLORIDE 10% LIQ.15/U/D	1	18.00
11/02	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
11/02	002632	NICOTINE PATCH 14MG	1	4.85
11/02	002632	NICOTINE PATCH 14MG	1	4.85
11/02	003326	ASPIRIN 325MG TABLET	1	1.50
11/02	005381	HYDROCODONE/APAP 15ML ELIXIR	1	7.00
11/02	005492	PROTONIX EC 40MG TAB	1	1.50
11/02	005492	PROTONIX EC 40MG TAB	2	3.00
11/02	007274	FIRST MOUTHWASH BLM SUSP 237ML	2	36.00
11/02	007274	FIRST MOUTHWASH BLM SUSP 237ML	-1	18.00CR
11/03	000063	SENNA LAXATIVE 8.6MG TABLET	2	3.00
11/03	000070	SUCRALFATE 1GM TABLET	4	6.00
11/03	000087	VERAPAMIL HCL 240MG CR TABLET	1	1.50
11/03	000087	VERAPAMIL HCL 240MG CR TABLET	1	1.50

Continued

F/C:MC

P/T:IP

FARR, WILLIAM G

1130601593

11/02/11 11/06/11

4

SHARMILA MEHTA

WILLIAM G FARR
1032 JONESVILLE LOCKHT H
UNION SC 29379

316501 MEDICARE

11/12/11

316507 MEDICARE 1500 F/C MC

11/12/11

	CODE	DESCRIPTION	QTY	
11/03	000087	VERAPAMIL HCL 240MG CR TABLET	1	1.50
11/03	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
11/03	002632	NICOTINE PATCH 14MG	1	4.85
11/03	003326	ASPIRIN 325MG TABLET	1	1.50
11/03	005381	HYDROCODONE/APAP 15ML ELIXIR	1	7.00
11/03	005492	PROTONIX EC 40MG TAB	2	3.00
11/04	000055	CHEWABLE CHILDREN'S ASPIRIN 81MG	1	1.50
11/04	000055	CHEWABLE CHILDREN'S ASPIRIN 81MG	1	1.50
11/04	000055	CHEWABLE CHILDREN'S ASPIRIN 81MG	1	1.50
11/04	000063	SENNALAXATIVE 8.6MG TABLET	2	3.00
11/04	000070	SUCRALFATE 1GM TABLET	4	6.00
11/04	000087	VERAPAMIL HCL 240MG CR TABLET	1	1.50
11/04	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
11/04	002632	NICOTINE PATCH 14MG	1	4.85
11/04	005381	HYDROCODONE/APAP 15ML ELIXIR	1	7.00
11/04	005381	HYDROCODONE/APAP 15ML ELIXIR	1	7.00
11/04	005381	HYDROCODONE/APAP 15ML ELIXIR	1	7.00
11/04	005492	PROTONIX EC 40MG TAB	2	3.00
11/05	000055	CHEWABLE CHILDREN'S ASPIRIN 81MG	1	1.50
11/05	000063	SENNALAXATIVE 8.6MG TABLET	2	3.00
11/05	000070	SUCRALFATE 1GM TABLET	4	6.00
11/05	000087	VERAPAMIL HCL 240MG CR TABLET	1	1.50
11/05	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
11/05	002632	NICOTINE PATCH 14MG	1	4.85
11/05	005381	HYDROCODONE/APAP 15ML ELIXIR	1	7.00
11/05	005381	HYDROCODONE/APAP 15ML ELIXIR	1	7.00
11/05	005492	PROTONIX EC 40MG TAB	2	3.00
AREA TOTAL ***				209.75

TOTAL CHARGES

10,216.47

Continued

FINAL

-770-

F/C:MC

P/T:IP

FARR, WILLIAM G

1130601593

11/02/11 11/06/11 5

SHARMILA MEHTA

316501 MEDICARE

WILLIAM G FARR
1032 JONESVILLE LOCKHT H
UNION SC 29379

11/12/11

316507 MEDICARE 1500 F/C MC

11/12/11

CODE

DESCRIPTION

QTY

TOTAL PAYMENTS/ADJUSTMENTS

0.00

10,216.47

10,216.47

10,216.47

F/C:MC

P/T:IP

FARR, WILLIAM G

1129101546

10/18/11 10/24/11

1

SARAH I VIDITO

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

10/30/11

316507 MEDICARE 1500 F/C MC

10/30/11

	CODE	DESCRIPTION	QTY	
	***010	ORDER COMMUNICATION MESSAGE		
10/19	006342	IN A PREMIXED MINIBAG	1	0.00
10/19	002000	CARE PLAN	1	0.00
10/19	050002	SUPPLEMENTS	1	0.00
10/19	050002	SUPPLEMENTS	1	0.00
10/19	050002	SUPPLEMENTS	1	0.00
10/19	050002	SUPPLEMENTS	1	0.00
10/20	003895	KEY TO REFRIGERATOR/NARC. CAB	1	0.00
10/20	006342	IN A PREMIXED MINIBAG	1	0.00
10/20	006342	IN A PREMIXED MINIBAG	1	0.00
10/20	050002	SUPPLEMENTS	1	0.00
10/20	050002	SUPPLEMENTS	1	0.00
10/21	006342	IN A PREMIXED MINIBAG	1	0.00
10/21	006342	IN A PREMIXED MINIBAG	1	0.00
10/21	002000	CARE PLAN	1	0.00
10/21	050002	SUPPLEMENTS	1	0.00
10/21	050002	SUPPLEMENTS	1	0.00
10/22	006342	IN A PREMIXED MINIBAG	1	0.00
10/22	006342	IN A PREMIXED MINIBAG	1	0.00
10/22	050002	SUPPLEMENTS	1	0.00
10/22	050002	SUPPLEMENTS	1	0.00
10/23	050002	SUPPLEMENTS	1	0.00
10/23	050002	SUPPLEMENTS	1	0.00
		AREA TOTAL ***		0.00
	***110	ROOM-BOARD/PVT		
10/18	010620	ROOM 2006 P	1	1,183.00
10/19	010620	ROOM 2006 P	1	1,183.00
10/20	010620	ROOM 2006 P	1	1,183.00
10/21	010620	ROOM 2006 P	1	1,183.00
10/22	010620	ROOM 2006 P	1	1,183.00
10/23	010620	ROOM 2006 P	1	1,183.00
		AREA TOTAL ***		7,098.00

Continued

F/C:MC

P/T:IP

FARR, WILLIAM G

1129101546

10/18/11 10/24/11 2

SARAH I VIDITO

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

10/30/11

316507 MEDICARE 1500 F/C MC

10/30/11

	CODE	DESCRIPTION	QTY	
	***258	IV SOLUTIONS		
10/18	000340	NORMAL SALINE SOLUTION 1000 ML IN	1	100.00
10/18	000340	NORMAL SALINE SOLUTION 1000 ML IN	1	100.00
10/18	000402	SODIUM CHLORIDE 0.9% 50ML IV	1	100.00
10/19	000340	NORMAL SALINE SOLUTION 1000 ML IN	1	100.00
10/20	000340	NORMAL SALINE SOLUTION 1000 ML IN	1	100.00
10/20	000340	NORMAL SALINE SOLUTION 1000 ML IN	1	100.00
10/20	000340	NORMAL SALINE SOLUTION 1000 ML IN	1	100.00
10/20	007029	NS W/20MEQ KCL 1000ML SOL	1	100.00
10/20	001535	SODIUM CHLORIDE 0.9% 50ML MB INJ	1	100.00
10/20	001549	SODIUM CHLORIDE 0.9% 100ML INJ MB	1	100.00
10/21	007214	MAGNESIUM SULFATE 2GMS/50ML WATER	4	100.00
10/21	001549	SODIUM CHLORIDE 0.9% 100ML INJ MB	1	100.00
10/21	001549	SODIUM CHLORIDE 0.9% 100ML INJ MB	1	100.00
10/22	007029	NS W/20MEQ KCL 1000ML SOL	1	100.00
10/22	007029	NS W/20MEQ KCL 1000ML SOL	1	100.00
10/22	007213	MAGNESIUM SULFATE 4GM/100ML WATER	1	100.00
10/22	001549	SODIUM CHLORIDE 0.9% 100ML INJ MB	1	100.00
10/22	001549	SODIUM CHLORIDE 0.9% 100ML INJ MB	1	100.00
10/23	000405	SODIUM CHLORIDE 0.9% 100ML IV	1	100.00
10/23	001549	SODIUM CHLORIDE 0.9% 100ML INJ MB	1	100.00
10/23	001549	SODIUM CHLORIDE 0.9% 100ML INJ MB	1	100.00
10/24	001549	SODIUM CHLORIDE 0.9% 100ML INJ MB	-1	100.00CR
		AREA TOTAL ***		2,000.00
	***270	MED/SUR SUPPLY		
10/18	010855	OXYGEN/SHIFT	1	100.00
10/18	010855	OXYGEN/SHIFT	1	100.00
10/19	010855	OXYGEN/SHIFT	1	100.00
10/21	010855	OXYGEN/SHIFT	1	100.00
		AREA TOTAL ***		400.00
	***300	LABORATORY		
10/19	012090	POTASSIUM SERUM	1	49.00

Continued

F/C:MC

P/T:IP

FARR, WILLIAM G

1129101546

10/18/11 10/24/11 3

SARAH I VIDITO

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

10/30/11

316507 MEDICARE 1500 F/C MC

10/30/11

	CODE	DESCRIPTION	QTY	
10/19	013500	BMP	1	89.00
10/19	020050	CBC	1	63.00
10/19	020060	MANUAL DIFF	1	36.00
10/20	011770	MAGNESIUM SERUM	1	71.00
10/20	012050	PHOSPHORUS SERUM	1	50.00
10/20	012090	POTASSIUM SERUM	1	49.00
10/20	013500	BMP	1	89.00
10/20	020050	CBC	1	63.00
10/20	020060	MANUAL DIFF	1	36.00
10/21	011770	MAGNESIUM SERUM	1	71.00
10/21	012050	PHOSPHORUS SERUM	1	50.00
10/21	013505	CMP	1	101.00
10/21	020050	CBC	1	63.00
10/21	020060	MANUAL DIFF	1	36.00
10/22	011770	MAGNESIUM SERUM	1	71.00
10/22	012050	PHOSPHORUS SERUM	1	50.00
10/22	013505	CMP	1	101.00
10/22	020050	CBC	1	63.00
10/22	020060	MANUAL DIFF	1	36.00
10/23	011770	MAGNESIUM SERUM	1	71.00
10/23	012050	PHOSPHORUS SERUM	1	50.00
10/23	013505	CMP	1	101.00
10/23	020080	CBC W/DIFF	1	78.00
10/24	011770	MAGNESIUM SERUM	1	71.00
10/24	012050	PHOSPHORUS SERUM	1	50.00
10/24	013500	BMP	1	89.00
10/24	013505	CMP	1	101.00
10/24	020080	CBC W/DIFF	1	78.00

AREA TOTAL *** 1,926.00

	***320	DX X-RAY		
10/20	050342	CHEST X-RAY	1	234.00
		AREA TOTAL ***		234.00

Continued

F/C:MC

P/T:IP

FARR, WILLIAM G

1129101546

10/18/11 10/24/11 4

SARAH I VIDITO

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

10/30/11

316507 MEDICARE 1500 F/C MC

10/30/11

	CODE	DESCRIPTION	QTY	
	***444	SPEECH PATH/EVAL		
10/19	031260	ASSESSMENT OF SWALLOWING	1	201.00
		AREA TOTAL ***		201.00
	***636	DRUGS/DETAIL CODE		
10/18	003341	PROMETHAZINE 50MG INJ	1	225.00
10/18	007253	MORPHINE SULFATE 10MG INJ	1	250.00
10/19	001072	ONDANSETRON HCL 1MG INJ	16	450.00
10/19	002261	PROMETHAZINE HCL 12.5MG ORAL	2	3.00
10/19	002939	CEFTRIAXONE SODIUM 250MG INJ	4	225.00
10/19	002939	CEFTRIAXONE SODIUM 250MG INJ	4	225.00
10/19	002955	FLUCONAZOLE 200MG INJ	1	100.00
10/19	003160	ONDANSETRON 8MG ORAL	2	3.00
10/19	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
10/19	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
10/19	004706	POTASSIUM CHLORIDE 2 MEQ INJ	10	200.00
10/19	004706	POTASSIUM CHLORIDE 2 MEQ INJ	10	200.00
10/19	004706	POTASSIUM CHLORIDE 2 MEQ INJ	10	200.00
10/19	004706	POTASSIUM CHLORIDE 2 MEQ INJ	10	200.00
10/19	005613	PANTOPRAZOLE SOD 40MG INJ	3	675.00
10/19	005613	PANTOPRAZOLE SOD 40MG INJ	2	450.00
10/19	007253	MORPHINE SULFATE 10MG INJ	1	250.00
10/19	007253	MORPHINE SULFATE 10MG INJ	1	250.00
10/19	007253	MORPHINE SULFATE 10MG INJ	1	250.00
10/20	001481	LORAZEPAM 2MG INJ	1	250.00
10/20	002955	FLUCONAZOLE 200MG INJ	1	100.00
10/20	004255	POTASSIUM CHLORIDE 2MEQ INJ	10	0.36
10/20	004255	POTASSIUM CHLORIDE 2MEQ INJ	10	0.36
10/20	004461	CEFEPIME HCL 500MG INJ	8	450.00
10/20	004461	CEFEPIME HCL 500MG INJ	12	675.00
10/20	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
10/20	004706	POTASSIUM CHLORIDE 2 MEQ INJ	5	100.00
10/20	004706	POTASSIUM CHLORIDE 2 MEQ INJ	20	400.00
10/20	004706	POTASSIUM CHLORIDE 2 MEQ INJ	5	100.00

Continued

F/C:MC

P/T:IP

FARR, WILLIAM G

1129101546

10/18/11 10/24/11 5

SARAH I VIDITO

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

10/30/11

316507 MEDICARE 1500 F/C MC

10/30/11

	CODE	DESCRIPTION	QTY	
10/20	005613	PANTOPRAZOLE SOD 40MG INJ	2	450.00
10/20	007253	MORPHINE SULFATE 10MG INJ	1	250.00
10/20	007669	MAGNESIUM SULFATE 500MG INJ	4	100.00
10/21	001072	ONDANSETRON HCL 1MG INJ	8	225.00
10/21	001072	ONDANSETRON HCL 1MG INJ	8	225.00
10/21	002261	PROMETHAZINE HCL 12.5MG ORAL	1	1.50
10/21	002955	FLUCONAZOLE 200MG INJ	1	100.00
10/21	004461	CEFEPIME HCL 500MG INJ	12	675.00
10/21	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
10/21	004706	POTASSIUM CHLORIDE 2 MEQ INJ	5	100.00
10/21	004706	POTASSIUM CHLORIDE 2 MEQ INJ	15	300.00
10/21	005613	PANTOPRAZOLE SOD 40MG INJ	2	450.00
10/21	007253	MORPHINE SULFATE 10MG INJ	1	250.00
10/21	007253	MORPHINE SULFATE 10MG INJ	1	250.00
10/21	007253	MORPHINE SULFATE 10MG INJ	1	250.00
10/22	001072	ONDANSETRON HCL 1MG INJ	8	225.00
10/22	001072	ONDANSETRON HCL 1MG INJ	8	225.00
10/22	002955	FLUCONAZOLE 200MG INJ	1	100.00
10/22	004461	CEFEPIME HCL 500MG INJ	12	675.00
10/22	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
10/22	005613	PANTOPRAZOLE SOD 40MG INJ	2	450.00
10/22	007253	MORPHINE SULFATE 10MG INJ	1	250.00
10/22	007253	MORPHINE SULFATE 10MG INJ	1	250.00
10/23	001010	MAGNESIUM SULFATE 500MG INJ	4	0.70
10/23	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
10/23	004706	POTASSIUM CHLORIDE 2 MEQ INJ	10	200.00
10/23	004706	POTASSIUM CHLORIDE 2 MEQ INJ	10	200.00
10/23	005613	PANTOPRAZOLE SOD 40MG INJ	2	450.00
10/23	006584	HEPARIN SODIUM 10U INJ	50	100.00
10/23	007253	MORPHINE SULFATE 10MG INJ	1	250.00
10/24	006584	HEPARIN SODIUM 10U INJ	50	100.00
10/24	007253	MORPHINE SULFATE 10MG INJ	1	250.00
		AREA TOTAL ***		14,933.92

Continued

F/C:MC P/T:IP

FARR, WILLIAM G

1129101546

10/18/11 10/24/11 6

SARAH I VIDITO

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY.
UNION SC 29379

316501 MEDICARE

10/30/11

316507 MEDICARE 1500 F/C MC

10/30/11

	CODE	DESCRIPTION	QTY	
	***637	PHARMACY-SELF ADMIN DRUGS		
10/18	003808	AQUAPHOR & ALOVERA 1-1 GEL 120GM	1	4.20
10/18	006875	FENTORA 100MCG TABLET	6	497.16
10/18	006875	FENTORA 100MCG TABLET	2	165.72
10/18	006875	FENTORA 100MCG TABLET	1	82.86
10/19	000033	KLOR-CON ER 200MEQ TABLET	1	1.81
10/19	000063	SENNA LAXATIVE 8.6MG TABLET	4	6.00
10/19	000070	SUCRALFATE 1GM TABLET	3	4.50
10/19	000070	SUCRALFATE 1GM TABLET	4	6.00
10/19	000812	VERAPAMIL ER 240MG CAP	1	1.50
10/19	000812	VERAPAMIL ER 240MG CAP	1	1.50
10/19	001961	NYSTATIN 5000KU/5ML SUSP	4	72.00
10/19	001961	NYSTATIN 5000KU/5ML SUSP	3	54.00
10/19	001961	NYSTATIN 5000KU/5ML SUSP	4	72.00
10/19	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
10/19	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
10/19	002409	FLUCONAZOLE 100MG TAB	2	3.00
10/19	002632	NICOTINE PATCH 14MG	1	4.85
10/19	002632	NICOTINE PATCH 14MG	1	4.85
10/19	002969	ALBUTEROL INH 90 MCG AEROSOL 17GM	1	27.56
10/19	006707	PROVENTIL HFA 6.7GM INHALER	1	30.48
10/19	007274	FIRST MOUTHWASH BLM SUSP 237ML	2	36.00
10/20	000033	KLOR-CON ER 200MEQ TABLET	4	7.24
10/20	000070	SUCRALFATE 1GM TABLET	4	6.00
10/20	000812	VERAPAMIL ER 240MG CAP	1	1.50
10/20	001504	POTASSIUM CHLORIDE 10% LIQ.15/U/D	5	90.00
10/20	001504	POTASSIUM CHLORIDE 10% LIQ.15/U/D	-4	72.00CR
10/20	001961	NYSTATIN 5000KU/5ML SUSP	4	72.00
10/20	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
10/20	002632	NICOTINE PATCH 14MG	1	4.85
10/21	000070	SUCRALFATE 1GM TABLET	4	6.00
10/21	000812	VERAPAMIL ER 240MG CAP	1	1.50
10/21	001961	NYSTATIN 5000KU/5ML SUSP	4	72.00
10/21	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50

Continued

F/C:MC

P/T:IP

FARR, WILLIAM G

1129101546

10/18/11 10/24/11

7

SARAH I VIDITO

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

10/30/11

316507 MEDICARE 1500 F/C MC

10/30/11

	CODE	DESCRIPTION	QTY	
10/21	002632	NICOTINE PATCH 14MG	1	4.85
10/22	000070	SUCRALFATE 1GM TABLET	4	6.00
10/22	000812	VERAPAMIL ER 240MG CAP	1	1.50
10/22	000812	VERAPAMIL ER 240MG CAP	1	1.50
10/22	001961	NYSTATIN 5000KU/5ML SUSP	1	18.00
10/22	001961	NYSTATIN 5000KU/5ML SUSP	4	72.00
10/22	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
10/22	002632	NICOTINE PATCH 14MG	1	4.85
10/23	000033	KLOR-CON ER 200MEQ TABLET	2	3.62
10/23	000070	SUCRALFATE 1GM TABLET	4	6.00
10/23	000208	BENZONATATE LF 100MG CAPSULE	2	3.00
10/23	000208	BENZONATATE LF 100MG CAPSULE	3	4.50
10/23	000812	VERAPAMIL ER 240MG CAP	1	1.50
10/23	001961	NYSTATIN 5000KU/5ML SUSP	4	72.00
10/23	001983	TRIAMTERENE W/HCTZ 37.5-25MG TABL	1	1.50
10/23	002632	NICOTINE PATCH 14MG	1	4.85
10/23	005252	AVELOX 400MG TAB	1	49.32
10/23	005252	AVELOX 400MG TAB	1	49.32
10/24	005492	PROTONIX EC 40MG TAB	1	1.50
		AREA TOTAL ***		1,578.39

TOTAL CHARGES

28,371.31

TOTAL PAYMENTS/ADJUSTMENTS

0.00

28,371.31

28,371.31

28,371.31

F/C:MC

P/T:GIS

FARR,WILLIAM G

1127200325

10/04/11 10/11/11 1

SHARMILA MEHTA

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

10/26/11

316507 MEDICARE 1500 F/C MC

10/26/11

	CODE	DESCRIPTION	QTY	
	***258	IV SOLUTIONS		
10/04	000333	NORMAL SALINE SOL 500ML INFUSION	1	100.00
10/04	000402	SODIUM CHLORIDE 0.9% 50ML IV	1	100.00
10/04	004441	DEXTROSE 5% 250ML INJ EXCEL BAG	1	100.00
10/04	004774	NORMAL SALINE SOL 250ML INFUSION	1	100.00
10/11	000333	NORMAL SALINE SOL 500ML INFUSION	1	100.00
10/11	000402	SODIUM CHLORIDE 0.9% 50ML IV	1	100.00
10/11	004441	DEXTROSE 5% 250ML INJ EXCEL BAG	1	100.00
10/11	004774	NORMAL SALINE SOL 250ML INFUSION	1	100.00
		AREA TOTAL ***		800.00
	***260	IV THERAPY		
10/04	080400	IV INFUSION, HYDRATION, EA ADD HR	1	100.00
10/04	080435	THERAP/DX INJ, IV PUSH, EA ADD SEQ	3	420.00
10/11	080400	IV INFUSION, HYDRATION, EA ADD HR	1	100.00
10/11	080435	THERAP/DX INJ, IV PUSH, EA ADD SEQ	3	420.00
		AREA TOTAL ***		1,040.00
	***335	CHEMOTHERP-IV		
10/04	080385	CHEMO INFUSION, INITIAL HR	1	631.00
10/04	080495	CHEMO IV INFUSION, SEQUENTIAL	1	288.00
10/11	080385	CHEMO INFUSION, INITIAL HR	1	631.00
10/11	080495	CHEMO IV INFUSION, SEQUENTIAL	1	288.00
		AREA TOTAL ***		1,838.00
	***636	DRUGS/DETAIL CODE		
10/04	000330	DEXAMETHASONE PHOSPHATE 1MG INJ	20	20.00
10/04	001967	CARBOPLATIN 50MG INJ	3	268.68
10/04	002057	FAMOTIDINE 10MG INJ	1	225.00
10/04	005808	PACLITAXEL 30MG INJ	3	452.79
10/04	006263	PALONOSETRON HCL 25MCG INJ	10	1,083.51
10/04	006584	HEPARIN SODIUM 10U INJ	50	100.00
10/11	000330	DEXAMETHASONE PHOSPHATE 1MG INJ	20	20.00
10/11	001967	CARBOPLATIN 50MG INJ	3	268.68

Continued

FINAL

-779-

F/C:MC

P/T:GIS

FARR, WILLIAM G

1127200325

10/04/11 10/11/11 2

SHARMILA MEHTA

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

10/26/11

316507 MEDICARE 1500 F/C MC

10/26/11

	CODE	DESCRIPTION	QTY	
10/11	002057	FAMOTIDINE 10MG INJ	1	225.00
10/11	005808	PACLITAXEL 30MG INJ	3	452.79
10/11	006263	PALONOSETRON HCL 25MCG INJ	10	1,083.51
10/11	006584	HEPARIN SODIUM 10U INJ	50	100.00
		AREA TOTAL ***		4,299.96

TOTAL CHARGES 7,977.96

TOTAL PAYMENTS/ADJUSTMENTS 0.00

7,977.96

7,977.96

7,977.96

E/C:MC

P/T:RON

FARR, WILLIAM G

1124401932

09/01/11 09/30/11 1

DREW MONITTO

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

10/06/11

316507 MEDICARE 1500 F/C MC

10/06/11

	CODE	DESCRIPTION	QTY	
	***010	ORDER COMMUNICATION MESSAGE		
09/01	077263	DR TX PLAN	1	0.00
09/16	077427	WEEKLY TX MANAGEMENT	1	0.00
09/23	077427	WEEKLY TX MANAGEMENT	1	0.00
09/30	077427	WEEKLY TX MANAGEMENT	1	0.00
		AREA TOTAL ***		0.00
	***333	RADIATION RX		
09/01	077290	SIMULATION COMPLEX	1	1,871.00
09/01	077334	TREATMENT DEVICE COMPLEX	1	1,339.00
09/01	077370	SPECIAL PHYSICS CONSULT	1	723.00
09/01	077470	SPECIAL TREATMENT PROCEDURE	1	2,674.00
09/07	077295	THREE DIMENSIONAL	1	6,515.00
09/07	077300	PHYSICS POINT CALCULATION	5	3,615.00
09/07	077334	TREATMENT DEVICE COMPLEX	3	4,017.00
09/08	077331	PATIENT DOSE MEASUREMENT	2	1,446.00
09/08	077370	SPECIAL PHYSICS CONSULT	1	723.00
09/12	077413	INTERMED TX 6-10 PHOTON/ELECTRON	1	1,091.00
09/13	077413	INTERMED TX 6-10 PHOTON/ELECTRON	1	1,091.00
09/14	077331	PATIENT DOSE MEASUREMENT	3	2,169.00
09/14	077413	INTERMED TX 6-10 PHOTON/ELECTRON	1	1,091.00
09/15	077413	INTERMED TX 6-10 PHOTON/ELECTRON	1	1,091.00
09/16	077336	CONTINUING RAD PHYSICS WEEK	1	723.00
09/16	077413	INTERMED TX 6-10 PHOTON/ELECTRON	1	1,091.00
09/16	077417	PORT FILM	1	982.00
09/19	077413	INTERMED TX 6-10 PHOTON/ELECTRON	1	1,091.00
09/20	077413	INTERMED TX 6-10 PHOTON/ELECTRON	1	1,091.00
09/21	077413	INTERMED TX 6-10 PHOTON/ELECTRON	1	1,091.00
09/22	077413	INTERMED TX 6-10 PHOTON/ELECTRON	1	1,091.00
09/23	077336	CONTINUING RAD PHYSICS WEEK	1	723.00
09/23	077413	INTERMED TX 6-10 PHOTON/ELECTRON	1	1,091.00
09/23	077417	PORT FILM	1	982.00
09/26	077413	INTERMED TX 6-10 PHOTON/ELECTRON	1	1,091.00
09/27	077413	INTERMED TX 6-10 PHOTON/ELECTRON	1	1,091.00

Continued

FINAL

-781-

F/C:MC

P/T:RON

FARR, WILLIAM G.

1124401932

09/01/11 09/30/11 2

DREW MONITTO

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

10/06/11

316507 MEDICARE 1500 F/C MC

10/06/11

	CODE	DESCRIPTION	QTY	
09/28	077413	INTERMED TX 6-10 PHOTON/ELECTRON	1	1,091.00
09/29	077413	INTERMED TX 6-10 PHOTON/ELECTRON	1	1,091.00
09/30	077336	CONTINUING RAD PHYSICS WEEK	1	723.00
09/30	077413	INTERMED TX 6-10 PHOTON/ELECTRON	1	1,091.00
09/30	077417	PORT FILM	1	982.00
		AREA TOTAL ***		46,572.00
	***350	CT SCAN		
09/01	077014	CT GUIDANCE RAD THERAPY FIELDS	1	472.00
		AREA TOTAL ***		472.00

TOTAL CHARGES 47,044.00

TOTAL PAYMENTS/ADJUSTMENTS 0.00

47,044.00

47,044.00

47,044.00

F/C:MC

P/T:GIS

FARR,WILLIAM G

1125000484

09/13/11 09/27/11 1

SHARMILA MEHTA

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

10/06/11

316507 MEDICARE 1500 F/C MC

10/06/11

	CODE	DESCRIPTION	QTY	
	***258	IV SOLUTIONS		
09/13	000333	NORMAL SALINE SOL 500ML INFUSION	1	100.00
09/13	000402	SODIUM CHLORIDE 0.9% 50ML IV	1	100.00
09/13	004441	DEXTROSE 5% 250ML INJ EXCEL BAG	1	100.00
09/13	004774	NORMAL SALINE SOL 250ML INFUSION	1	100.00
09/20	000333	NORMAL SALINE SOL 500ML INFUSION	1	100.00
09/20	000402	SODIUM CHLORIDE 0.9% 50ML IV	1	100.00
09/20	004441	DEXTROSE 5% 250ML INJ EXCEL BAG	1	100.00
09/20	004774	NORMAL SALINE SOL 250ML INFUSION	1	100.00
09/27	000333	NORMAL SALINE SOL 500ML INFUSION	1	100.00
09/27	000402	SODIUM CHLORIDE 0.9% 50ML IV	1	100.00
09/27	004441	DEXTROSE 5% 250ML INJ EXCEL BAG	1	100.00
09/27	004774	NORMAL SALINE SOL 250ML INFUSION	1	100.00
		AREA TOTAL ***		1,200.00
	***260	IV THERAPY		
09/13	080400	IV INFUSION, HYDRATION, EA ADD HR	1	82.00
09/13	080435	THERAP/DX INJ, IV PUSH, EA ADD SEQ	3	321.00
09/20	080400	IV INFUSION, HYDRATION, EA ADD HR	1	82.00
09/20	080435	THERAP/DX INJ, IV PUSH, EA ADD SEQ	3	321.00
09/27	080400	IV INFUSION, HYDRATION, EA ADD HR	1	82.00
09/27	080435	THERAP/DX INJ, IV PUSH, EA ADD SEQ	3	321.00
		AREA TOTAL ***		1,209.00
	***335	CHEMOTHERP-IV		
09/13	080385	CHEMO INFUSION, INITIAL HR	1	631.00
09/13	080495	CHEMO IV INFUSION, SEQUENTIAL	1	230.00
09/20	080385	CHEMO INFUSION, INITIAL HR	1	631.00
09/20	080495	CHEMO IV INFUSION, SEQUENTIAL	1	230.00
09/27	080385	CHEMO INFUSION, INITIAL HR	1	631.00
09/27	080495	CHEMO IV INFUSION, SEQUENTIAL	1	230.00
		AREA TOTAL ***		2,583.00
	***636	DRUGS/DETAIL CODE		

Continued

F/C:MC

P/T:GIS

FARR, WILLIAM G

1125000484

09/13/11 09/27/11 2

SHARMILA MEHTA

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

10/06/11

316507 MEDICARE 1500 F/C MC

10/06/11

	CODE	DESCRIPTION	QTY	
09/13	000330	DEXAMETHASONE PHOSPHATE 1MG INJ	20	20.00
09/13	001967	CARBOPLATIN 50MG INJ	3	268.68
09/13	002954	RANITIDINE HCL 50MG INJ	2	100.00
09/13	005808	PACLITAXEL 30MG INJ	3	452.79
09/13	006263	PALONOSETRON HCL 25MCG INJ	10	1,083.51
09/13	006584	HEPARIN SODIUM 10U INJ	50	100.00
09/20	000330	DEXAMETHASONE PHOSPHATE 1MG INJ	20	20.00
09/20	001967	CARBOPLATIN 50MG INJ	3	268.68
09/20	002954	RANITIDINE HCL 50MG INJ	2	100.00
09/20	002954	RANITIDINE HCL 50MG INJ	2	100.00
09/20	005808	PACLITAXEL 30MG INJ	3	452.79
09/20	006263	PALONOSETRON HCL 25MCG INJ	10	1,083.51
09/20	006584	HEPARIN SODIUM 10U INJ	50	100.00
09/27	000330	DEXAMETHASONE PHOSPHATE 1MG INJ	20	20.00
09/27	001967	CARBOPLATIN 50MG INJ	3	268.68
09/27	002954	RANITIDINE HCL 50MG INJ	2	100.00
09/27	005808	PACLITAXEL 30MG INJ	3	452.79
09/27	006263	PALONOSETRON HCL 25MCG INJ	10	1,083.51
09/27	006584	HEPARIN SODIUM 10U INJ	50	100.00
		AREA TOTAL ***		6,174.94

TOTAL CHARGES 11,166.94

TOTAL PAYMENTS/ADJUSTMENTS 0.00

11,166.94

11,166.94

11,166.94

FINAL

-784-

F/C:MC

P/T:OPT

FARR, WILLIAM G

1124401536

09/01/11 09/01/11 1

DREW MONITTO

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

09/07/11

316507 MEDICARE 1500 F/C MC

09/07/11

	CODE	DESCRIPTION	QTY	
	***460	PULMONARY FUNC		
09/01	030000	BRONCHOSPASM EVALUATION	1	319.00
09/01	030050	RESISTANCE TO AIRFLOW	1	135.00
09/01	030080	THORACIC GAS VOLUME	1	192.00
		AREA TOTAL ***		646.00

TOTAL CHARGES 646.00

TOTAL PAYMENTS/ADJUSTMENTS 0.00

646.00

646.00

646.00

FINAL

-785-

F/C:MC

P/T:OPT

FARR, WILLIAM G

1124300092

08/31/11 08/31/11 1

DREW MONITTO

316501 MEDICARE

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

09/06/11

316507 MEDICARE 1500 F/C MC

09/06/11

	CODE	DESCRIPTION	QTY	
08/31	***761	TREATMENT RM		
	099212	ESTABLISHED PT VISIT 2	1	120.00
		AREA TOTAL ***		120.00

TOTAL CHARGES 120.00

TOTAL PAYMENTS/ADJUSTMENTS 0.00

120.00

120.00

120.00

F/C:MC

P/T:END

FARR, WILLIAM G

1123400810

08/22/11 08/22/11 1

RAUL MANUEL B CRUZ

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

09/06/11

316507 MEDICARE 1500 F/C MC

09/06/11

	CODE	DESCRIPTION	QTY	
	***010	ORDER COMMUNICATION MESSAGE		
08/22	060851	CYTOLOGY SPECIMEN NON-GENITAL	1	0.00
08/22	060851	CYTOLOGY SPECIMEN NON-GENITAL	1	0.00
		AREA TOTAL ***		0.00
	***750	GASTR-INST SVS		
08/22	060135	DX BRONCHOSCOPE/BRUSH	1	1,670.00
08/22	060155	BRONCHOSCOPY/NEEDLE BX, EACH	1	1,670.00
		AREA TOTAL ***		3,340.00

TOTAL CHARGES 3,340.00

TOTAL PAYMENTS/ADJUSTMENTS 0.00

3,340.00

3,340.00

3,340.00

F/C:MC P/T:OPT

FARR, WILLIAM G

1122901284

08/17/11 08/17/11 1

RAUL MANUEL B CRUZ

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

08/24/11

316507 MEDICARE 1500 F/C MC

08/24/11

	CODE	DESCRIPTION	QTY	
	***300	LABORATORY		
08/17	020480	PARTIAL THROMBOPLASTIN TIME	1	60.00
08/17	020590	PROTHROMBIN TIME	1	39.00
		AREA TOTAL ***		99.00

TOTAL CHARGES 99.00

TOTAL PAYMENTS/ADJUSTMENTS 0.00

99.00

99.00

99.00

F/C:MC

P/T:GIC

FARR, WILLIAM G

1122200657

08/11/11 08/11/11 1

SHARMILA MEHTA

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

08/20/11

316507 MEDICARE 1500 F/C MC

08/20/11

	CODE	DESCRIPTION	QTY	
	***940	OTHER RX SVS		
08/11	080545	THERAPEUTIC PHLEBOTOMY	1	159.00
		AREA TOTAL ***		159.00

TOTAL CHARGES 159.00

TOTAL PAYMENTS/ADJUSTMENTS 0.00

159.00

159.00

159.00

FINAL

-789-

F/C:MC

P/T:OPT

FARR, WILLIAM G

1122301465

08/12/11 08/12/11 1

SHARMILA MEHTA

316501 MEDICARE

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

08/18/11

316507 MEDICARE 1500 F/C MC

08/18/11

	CODE	DESCRIPTION	QTY	
08/12	***343	Diagnostic Radiopharmaceutical		
	070205	F18 FDG	1	1,066.05
		AREA TOTAL ***		1,066.05
08/12	***404	PET SCAN		
	070030	PET IMAGE W/CT, SKULL-THIGH	1	3,470.00
		AREA TOTAL ***		3,470.00

TOTAL CHARGES 4,536.05

TOTAL PAYMENTS/ADJUSTMENTS 0.00

4,536.05

4,536.05

4,536.05

F/C:MC

P/T:OPT

FARR, WILLIAM G

1122100507

08/09/11 08/09/11 1

SHARMILA MEHTA

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

08/15/11

316507 MEDICARE 1500 F/C MC

08/15/11

	CODE	DESCRIPTION	QTY	
08/09	***343	Diagnostic Radiopharmaceutical		
	065240	LOCM 300-399MG/ML IODINE, PER 1ML	100	515.00
		AREA TOTAL ***		515.00

08/09	***350	CT SCAN		
	065095	CT THORAX W/DYE	1	1,987.00
		AREA TOTAL ***		1,987.00

TOTAL CHARGES

2,502.00

TOTAL PAYMENTS/ADJUSTMENTS

0.00

2,502.00

2,502.00

2,502.00

FINAL

-791-

F/C:MC

P/T:BHC

FARR, WILLIAM G

1113700126

05/17/11 05/17/11 1

SHARMILA MEHTA

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/23/11

316507 MEDICARE 1500 F/C MC

05/23/11

	CODE	DESCRIPTION	QTY	
	***320	DX X-RAY		
05/17	050342	CHEST X-RAY	1	236.00
		AREA TOTAL ***		236.00

TOTAL CHARGES 236.00

TOTAL PAYMENTS/ADJUSTMENTS 0.00

236.00

236.00

236.00

Spartanburg Regional Medical Center & Spartanburg Home Hospice 00129

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DATE 05/12/2015

FINAL

-792-

F/C:MC

P/T:OPT

FARR, WILLIAM G

1110101535

04/11/11

04/11/11

1

SHARMILA MEHTA

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

04/17/11

316507 MEDICARE 1500 F/C MC

04/17/11

	CODE	DESCRIPTION	QTY	
04/11	***343	Diagnostic Radiopharmaceutical		
	025345	GAD-BASE MR CONTRAST NOS,1ML	15	200.85
		AREA TOTAL ***		200.85
04/11	***611	MRI-BRAIN-		
	025260	MRI BRAIN W/O & W/DYE	1	2,329.00
		AREA TOTAL ***		2,329.00

TOTAL CHARGES 2,529.85

TOTAL PAYMENTS/ADJUSTMENTS 0.00

2,529.85

2,529.85

2,529.85

F/C:MC

P/T:GIS

FARR, WILLIAM G

1109800863

04/08/11 05/09/11 1

SHARMILA MEHTA

316501 MEDICARE

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

05/26/11

316507 MEDICARE 1500 F/C MC

05/26/11

CODE DESCRIPTION

QTY

TOTAL CHARGES

0.00

TOTAL PAYMENTS/ADJUSTMENTS

0.00

0.00

0.00

0.00

F/C:MC

P/T:GIS

FARR, WILLIAM G

1105501469

03/22/11 03/22/11 1

SHARMILA MEHTA

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

03/28/11

316507 MEDICARE 1500 F/C MC

03/28/11

	CODE	DESCRIPTION	QTY	
	***250	PHARMACY		
03/22	004732	SODIUM CHLORIDE 0.9% 2ML INJ	75	100.00
		AREA TOTAL ***		100.00
	***258	IV SOLUTIONS		
03/22	000333	NORMAL SALINE SOL 500ML INFUSION	1	100.00
03/22	000333	NORMAL SALINE SOL 500ML INFUSION	1	100.00
03/22	000340	NORMAL SALINE SOLUTION 1000 ML IN	1	100.00
03/22	000402	SODIUM CHLORIDE 0.9% 50ML IV	1	100.00
03/22	000405	SODIUM CHLORIDE 0.9% 100ML IV	1	100.00
		AREA TOTAL ***		500.00
	***260	IV THERAPY		
03/22	080400	IV INFUSION, HYDRATION, EA ADD HR	1	82.00
03/22	080415	THERAP/DX IV INFUSION EA ADD HR	3	246.00
03/22	080420	IV INFUSION, SEQUENTIAL	2	214.00
03/22	080435	THERAP/DX INJ, IV PUSH, EA ADD SEQ	2	214.00
		AREA TOTAL ***		756.00
	***331	CHEMOTHER/INJ		
03/22	080490	CHEMO ADMIN, IV PUSH, EA ADD MED	1	680.00
		AREA TOTAL ***		680.00
	***335	CHEMOTHERP-IV		
03/22	080385	CHEMO INFUSION, INITIAL HR	1	631.00
		AREA TOTAL ***		631.00
	***636	DRUGS/DETAIL CODE		
03/22	000330	DEXAMETHASONE PHOSPHATE 1MG INJ	10	20.00
03/22	001010	MAGNESIUM SULFATE 500MG INJ	4	0.70
03/22	004255	POTASSIUM CHLORIDE 2MEQ INJ	10	0.36
03/22	006263	PALONOSETRON HCL 25MCG INJ	10	403.20
03/22	006511	PEMETREXED 10MG INJ	50	6,841.54
03/22	006584	HEPARIN SODIUM 10U INJ	50	100.00

Continued

FINAL

-795-

F/C:MC

P/T:GIS

FARR, WILLIAM G

1105501469

03/22/11 03/22/11 2

SHARMILA MEHTA

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

03/28/11

316507 MEDICARE 1500 F/C MC

03/28/11

	CODE	DESCRIPTION	QTY	
03/22	007280	PEMETREXED 10MG INJ	30	4,104.96
03/22	007282	CISPLATIN 10MG INJ	13	175.67
03/22	007594	FOSAPREPITANT 1MG INJ	150	721.50
		AREA TOTAL ***		12,367.93

TOTAL CHARGES 15,034.93

TOTAL PAYMENTS/ADJUSTMENTS 0.00

15,034.93

15,034.93

15,034.93

Spartanburg Regional Medical Center & Spartanburg Home Hospice 00133

PRINTED BY: JH24657

DATE 05/12/2015

F/C:MC

P/T:END

FARR, WILLIAM G

1207900608

03/19/12 03/19/12 1

RAUL MANUEL B-CRUZ

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

04/24/12

316507 MEDICARE 1500 F/C MC

04/24/12

	CODE	DESCRIPTION	QTY	
	***010	ORDER COMMUNICATION MESSAGE		
03/19	034350	SU CHEST, POST-OP	1	0.00
03/19	034378	SU OPERATIVE PROCEDURE	1	0.00
03/19	060851	CYTOLOGY NON-GENITAL SPECIMEN	1	0.00
03/19	060851	CYTOLOGY NON-GENITAL SPECIMEN	1	0.00
		AREA TOTAL ***		0.00
	***300	LABORATORY		
03/19	020310	BODY FLUID CELL COUNT AND DIFF	1	58.00
03/19	040060	FUNGUS CULTURE W/FUNGAL SMEAR	1	89.00
03/19	040080	RESPIRATORY CULTURE W/GRAM STAIN	1	91.00
03/19	040080	RESPIRATORY CULTURE W/GRAM STAIN	1	91.00
03/19	040165	GRAM STAIN	1	45.00
03/19	040165	GRAM STAIN	1	45.00
03/19	040630	FUNGAL SMEAR	1	57.00
03/19	040635	ACID FAST BACILLI-TB-CULT W/SMEAR	1	114.00
03/19	040645	ACID FAST SMEAR	1	57.00
		AREA TOTAL ***		647.00
	***310	PATHOLOGY LAB		
03/19	062030	TISSUE EXAM BY PATHOLOGIST	1	260.00
03/19	062030	TISSUE EXAM BY PATHOLOGIST	1	260.00
		AREA TOTAL ***		520.00
	***750	GASTR-INST SVS		
03/19	060135	DX BRONCHOSCOPE/BRUSH	1	1,769.00
03/19	060140	DX BRONCHOSCOPE/LAVAGE	1	1,769.00
03/19	060150	BRONCHOSCOPY/LUNG BX, EACH	1	1,769.00
		AREA TOTAL ***		5,307.00
		TOTAL CHARGES		6,474.00

Continued

F/C:MC

P/T:END

FARR, WILLIAM G

1207900608

03/19/12 03/19/12 2

RAUL MANUEL B CRUZ

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

04/24/12

316507 MEDICARE 1500 F/C MC

04/24/12

CODE

DESCRIPTION

QTY

TOTAL PAYMENTS/ADJUSTMENTS

0.00

6,474.00

6,474.00

6,474.00

FINAL

-798-

F/C:MC P/T:OPT

FARR, WILLIAM G

1207301050

03/13/12 03/13/12 1

RAUL MANUEL B CRUZ

WILLIAM G FARR
1032 JONESVILLE LOCKHT H
UNION SC 29379

316501 MEDICARE

03/19/12

316507 MEDICARE 1500 F/C MC

03/19/12

	CODE	DESCRIPTION	QTY	
	***300	LABORATORY		
03/13	020480	PARTIAL THROMBOPLASTIN TIME	1	63.00
03/13	020590	PROTHROMBIN TIME	1	41.00
		AREA TOTAL ***		104.00

TOTAL CHARGES 104.00

TOTAL PAYMENTS/ADJUSTMENTS 0.00

104.00

104.00

104.00

F/C:MC

P/T:OPT

FARR, WILLIAM G

1207200450

03/12/12 03/12/12

1

SHARMILA MEHTA

WILLIAM G FARR
1032 JONESVILLE LOCKHT H
UNION SC 29379

316501 MEDICARE

03/18/12

316507 MEDICARE 1500 F/C MC

03/18/12

	CODE	DESCRIPTION	QTY	
	***343	Diagnostic Radiopharmaceutical		
03/12	065225	LOCM 300-399MG ML IODINE,1ML	75	549.75
03/12	065225	LOCM 300-399MG ML IODINE,1ML	25	183.25
		AREA TOTAL ***		733.00
	***350	CT SCAN		
03/12	065005	CT ABDOMEN W/DYE	1	1,926.00
03/12	065095	CT THORAX W/DYE	1	1,926.00
		AREA TOTAL ***		3,852.00

TOTAL CHARGES

4,585.00

TOTAL PAYMENTS/ADJUSTMENTS

0.00

4,585.00

4,585.00

4,585.00

F/C:MC P/T:OPS

FARR, WILLIAM G

1106200081

03/04/11 03/10/11 1

CHRISTOPHE L NGUYEN

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

03/16/11

316507 MEDICARE 1500 F/C MC

03/16/11

	CODE	DESCRIPTION	QTY	
03/10	***010	ORDER COMMUNICATION MESSAGE		
	034386	SU OPERATIVE VENOUS ACCESS	1	0.00
		AREA TOTAL ***		0.00
03/10	***250	PHARMACY		
	007121	LIDOCAINE W/EPI 1% 20ML INJ	1	225.00
		AREA TOTAL ***		225.00
03/10	***258	IV SOLUTIONS		
	000333	SODIUM CHLORIDE 0.9% INJ. 500 ML	1	100.00
		AREA TOTAL ***		100.00
03/10	***278	SUPPLY/IMPLANTS		
	053068	PORT, INDWELLING, IMP	1	749.70
		AREA TOTAL ***		749.70
03/04	***300	LABORATORY		
	013500	BMP	1	85.00
		AREA TOTAL ***		85.00
03/10	***320	DX X-RAY		
	034005	CHEST X-RAY	1	236.00
03/10	050564	FLUOROGUIDE FOR VEIN DEVICE	1	904.00
		AREA TOTAL ***		1,140.00
03/10	***360	OR SERVICES		
	020220	SURGERY 061-090 MIN	1	5,158.00
		AREA TOTAL ***		5,158.00
03/10	***370	ANESTHESIA		
	010000	ANESTHESIA SERVICES (T) PER MINUTE	74	740.00
		AREA TOTAL ***		740.00
	***410	RESPIRATORY SVC		

Continued

F/C:MC

P/T:OPS

FARR, WILLIAM G

1106200081

03/04/11 03/10/11 2

CHRISTOPHE L NGUYEN

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

03/16/11

316507 MEDICARE 1500 F/C MC

03/16/11

	CODE	DESCRIPTION	QTY	
03/10	010483	HHN	1	122.00
		AREA TOTAL ***		122.00
	***636	DRUGS/DETAIL CODE		
03/10	002876	MIDAZOLAM HCL 1MG INJ	10	250.00
03/10	002923	CEFZOLIN SODIUM 500MG INJ	2	225.00
03/10	000375	LR INJ 1000ML IV BAG	2	200.00
		AREA TOTAL ***		675.00
	***637	PHARMACY-SELF ADMIN DRUGS		
03/10	001602	FAMOTIDINE 20MG TAB	1	1.50
		AREA TOTAL ***		1.50
	***710	RECOVERY ROOM		
03/10	012000	RECOVERY 2ND STAGE 01-60 MINUTES	1	108.00
03/10	030030	RECOVERY ROOM 001-060 MINUTES	1	1,144.00
		AREA TOTAL ***		1,252.00
	***960	PRO FEE		
03/10	028315	P-INSERT TUNNELED CV CATH W/PORT	1	3,786.00
03/10	028780	US GUIDE, VASCULAR ACCESS	1	53.00
03/10	029115	P-INS/REM CV CATH W/FLUORO GUID	1	67.00
		AREA TOTAL ***		3,906.00
	***964	PRO FEE/ANES CRNA		
03/10	020000	ANESTHESIA SERVICES (P) PER MINUTE	74	740.00
		AREA TOTAL ***		740.00

TOTAL CHARGES 14,894.20

Continued

F/C:MC

P/T:OPS

FARR, WILLIAM G

1106200081

03/04/11 03/10/11 3

CHRISTOPHE L NGUYEN

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

03/16/11

316507 MEDICARE 1500 F/C MC

03/16/11

CODE DESCRIPTION

QTY

TOTAL PAYMENTS/ADJUSTMENTS

0.00

14,894.20

14,892.70

14,894.20

F/C:MC P/T:GIC

FARR, WILLIAM G

1109101084

03/01/11 03/01/11 1

SHARMILA MEHTA

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

04/12/11

316507 MEDICARE 1500 F/C MC

04/12/11

	CODE	DESCRIPTION	QTY	
	***258	IV SOLUTIONS		
03/01	000340	SODIUM CHLORIDE 0.9% INJ 1000 ML	1	100.00
03/01	000405	SODIUM CHLORIDE 0.9% 100 ML	1	100.00
		AREA TOTAL ***		200.00
	***260	IV THERAPY		
03/01	080400	IV INFUSION, HYDRATION, EA ADD HR	1	82.00
03/01	080415	THERAP/DX IV INFUSION EA ADD HR	3	246.00
03/01	080420	IV INFUSION, SEQUENTIAL	2	214.00
03/01	080435	THERAP/DX INJ, IV PUSH, EA ADD SEQ	2	214.00
		AREA TOTAL ***		756.00
	***331	CHEMOTHER/INJ		
03/01	080490	CHEMO ADMIN, IV PUSH, EA ADD MED	1	680.00
		AREA TOTAL ***		680.00
	***335	CHEMOTHERP-IV		
03/01	080385	CHEMO INFUSION, INITIAL HR	1	631.00
		AREA TOTAL ***		631.00
	***636	DRUGS/DETAIL CODE		
03/01	000019	POTASSIUM CHL. 2MEQ/ML INJ-20ML	10	0.29
03/01	000330	DEXAMETHASONE 10MG/ML 10ML MDV	10	20.00
03/01	001010	MAGNESIUM SULFATE 500MG INJ	10	0.35
03/01	006263	ALOXI SDV 0.25MG/5ML INJ	10	40.32
03/01	006511	PEMETREXED 10MG INJ	50	6,842.53
03/01	007280	PEMETREXED 10MG INJ	30	4,104.90
03/01	007282	CISPLATIN 10MG INJ	13	114.14
03/01	007594	FOSAPREPITANT 1MF INJ-PHO	150	721.50
		AREA TOTAL ***		11,844.03

Continued

F/C:MC

P/T:GIC

FARR, WILLIAM G

1109101084

03/01/11 03/01/11 2

SHARMILA MEHTA

316501 MEDICARE

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

04/12/11

316507 MEDICARE 1500 F/C MC

04/12/11

CODE	DESCRIPTION	QTY
	TOTAL CHARGES	14,111.03
	TOTAL PAYMENTS/ADJUSTMENTS	0.00

14,111.03

14,111.03

14,111.03

F/C:MC P/T:GIC

FARR, WILLIAM G

1205500712

02/29/12 02/29/12 1

SHARMILA MEHTA

WILLIAM G FARR
1032 JONESVILLE LOCKHT H
UNION SC 29379

316501 MEDICARE

03/13/12

316507 MEDICARE 1500 F/C MC

03/13/12

	CODE	DESCRIPTION	QTY	
	***636	DRUGS/DETAIL CODE		
02/29	006584	HEPARIN SODIUM 10U INJ	50	100.00
		AREA TOTAL ***		100.00
	***940	OTHER RX SVS		
02/29	080280	IRRIG CV ACCESS DEVICE	1	225.00
		AREA TOTAL ***		225.00

TOTAL CHARGES 325.00

TOTAL PAYMENTS/ADJUSTMENTS 0.00

325.00

325.00

325.00

F/C:MC

P/T:FAC

FARR, WILLIAM G

1103300411

02/02/11 02/02/11 1

CHRISTOPHE L NGUYEN

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

02/08/11

316507 MEDICARE 1500 F/C MC

02/08/11

	CODE	DESCRIPTION	QTY	
	***960	PRO FEE		
02/02	021460	P-POST OP CARE, GLOBAL	1	0.00
		AREA TOTAL ***		0.00

TOTAL CHARGES 0.00

TOTAL PAYMENTS/ADJUSTMENTS 0.00

0.00

0.00

0.00

F/C:MC P/T:OPT

FARR, WILLIAM G

1102100141

01/21/11 01/21/11 1

DREW MONITTO

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

01/27/11

316507 MEDICARE 1500 F/C MC

01/27/11

	CODE	DESCRIPTION	QTY	
	***761	TREATMENT RM		
01/21	099213	ESTABLISHED PT VISIT 3	1	120.00
		AREA TOTAL ***		120.00

TOTAL CHARGES 120.00

TOTAL PAYMENTS/ADJUSTMENTS 0.00

120.00

120.00

120.00

F/C:MC

P/T:FAC

FARR, WILLIAM G

1101900126

01/19/11 01/19/11 1

CHRISTOPHE L NGUYEN

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

01/25/11

316507 MEDICARE 1500 F/C MC

01/25/11

	CODE	DESCRIPTION	QTY	
	***960	PRO FEE		
01/19	021460	P-POST OP CARE, GLOBAL	1	0.00
		AREA TOTAL ***		0.00

TOTAL CHARGES 0.00

TOTAL PAYMENTS/ADJUSTMENTS 0.00

0.00

0.00

0.00

FINAL

-809-

F/C:MC

P/T:GIS

FARR, WILLIAM G

1020100858

07/20/10 07/20/10 1

SARAH I VIDITO

316501 MEDICARE

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

07/31/10

316507 MEDICARE 1500 F/C MC

07/31/10

	CODE	DESCRIPTION	QTY	
07/20	***940	OTHER RX SVS		
	080545	THERAPEUTIC PHLEBOTOMY	1	124.41
		AREA TOTAL ***		124.41

TOTAL CHARGES 124.41

TOTAL PAYMENTS/ADJUSTMENTS 0.00

124.41

124.41

124.41

F/C:MC P/T:GIC

FARR, WILLIAM G

1022900318

08/17/10 08/17/10 1

SARAH I VIDITO

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

08/27/10

316507 MEDICARE 1500 F/C MC

08/27/10

	CODE	DESCRIPTION	QTY	
	***940	OTHER RX SVS		
08/17	080545	THERAPEUTIC PHLEBOTOMY	1	124.41
		AREA TOTAL ***		124.41

TOTAL CHARGES 124.41

TOTAL PAYMENTS/ADJUSTMENTS 0.00

124.41

124.41

124.41

FINAL

-811-

F/C:MC P/T:GIC

FARR, WILLIAM G

1025301300

09/14/10 09/14/10 1

SARAH I VIDITO

316501 MEDICARE

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

09/28/10

316507 MEDICARE 1500 F/C MC

09/28/10

	CODE	DESCRIPTION	QTY	
	***940	OTHER RX SVS		
09/14	080545	THERAPEUTIC PHLEBOTOMY	1	124.41
		AREA TOTAL ***		124.41

TOTAL CHARGES 124.41

TOTAL PAYMENTS/ADJUSTMENTS 0.00

124.41

124.41

124.41

F/C:MC

P/T:OPT

FARR, WILLIAM G

1028400749

10/11/10 10/11/10 1

RONALD H LITTLEFIELD

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

10/17/10

316507 MEDICARE 1500 F/C MC

10/17/10

	CODE	DESCRIPTION	QTY	
10/11	***343	Diagnostic Radiopharmaceutical		
	065240	LOCM 300-399MG/ML IODINE, PER 1ML	100	515.00
		AREA TOTAL ***		515.00

10/11	***350	CT SCAN		
	065095	CT THORAX W/DYE	1	1,987.00
		AREA TOTAL ***		1,987.00

TOTAL CHARGES 2,502.00

TOTAL PAYMENTS/ADJUSTMENTS 0.00

2,502.00

2,502.00

2,502.00

F/C:MC P/T:GIC

FARR, WILLIAM G 1028800666

10/15/10 10/15/10 1

SARAH I VIDITO

316501 MEDICARE

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

11/05/10

316507 MEDICARE 1500 F/C MC

11/05/10

CODE	DESCRIPTION	QTY
	TOTAL CHARGES	0.00
	TOTAL PAYMENTS/ADJUSTMENTS	0.00

0.00

0.00

0.00

F/C:MC P/T:OPT

FARR, WILLIAM G

1028800355

10/18/10 10/18/10 1

RAUL MANUEL B CRUZ

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

10/24/10

316507 MEDICARE 1500 F/C MC

10/24/10

	CODE	DESCRIPTION	QTY	
10/18	***010	ORDER COMMUNICATION MESSAGE		
	099022	POC GLUCOSE	1	0.00
		AREA TOTAL ***		0.00
10/18	***343	Diagnostic Radiopharmaceutical		
	070205	F18 FDG	1	1,066.05
		AREA TOTAL ***		1,066.05
10/18	***404	PET SCAN		
	070030	PET IMAGE W/CT, SKULL-THIGH	1	3,470.00
		AREA TOTAL ***		3,470.00
		TOTAL CHARGES		4,536.05
		TOTAL PAYMENTS/ADJUSTMENTS		0.00

4,536.05

4,536.05

4,536.05

F/C:MC

P/T:END

FARR, WILLIAM G

1029200952

10/19/10 10/19/10 1

RAUL MANUEL B CRUZ

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

10/25/10

316507 MEDICARE 1500 F/C MC

10/25/10

	CODE	DESCRIPTION	QTY	
10/19	***010	ORDER COMMUNICATION MESSAGE		
10/19	034350	SU CHEST, POST-OP	1	0.00
10/19	034378	SU OPERATIVE PROCEDURE	1	0.00
		AREA TOTAL ***		0.00
	***300	LABORATORY		
10/19	040060	FUNGUS CULTURE W/FUNGAL SMEAR	1	84.00
10/19	040080	RESPIRATORY CULTURE W/GRAM STAIN	1	86.00
10/19	040165	GRAM STAIN	1	43.00
10/19	040630	FUNGAL SMEAR	1	54.00
10/19	040635	ACID FAST BACILLI-TB-CULT W/SMEAR	1	108.00
10/19	040645	ACID FAST SMEAR	1	54.00
		AREA TOTAL ***		429.00
	***310	PATHOLOGY LAB		
10/19	062030	PATH G AND M LEVEL IV	1	239.00
		AREA TOTAL ***		239.00
	***750	GASTR-INST SVS		
10/19	060135	DX BRONCHOSCOPE/BRUSH	1	1,670.00
10/19	060140	DX BRONCHOSCOPE/LAVAGE	1	1,670.00
10/19	060150	BRONCHOSCOPY/LUNG BX, EACH	1	1,670.00
		AREA TOTAL ***		5,010.00
		TOTAL CHARGES		5,678.00
		TOTAL PAYMENTS/ADJUSTMENTS		0.00

5,678.00

5,678.00

5,678.00

FINAL

-816-

F/C:MC P/T:GIC

FARR, WILLIAM G

1029800104

10/25/10 10/25/10 1

SARAH I VIDITO

316501 MEDICARE

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

11/11/10

316507 MEDICARE 1500 F/C MC

11/11/10

CODE DESCRIPTION

QTY

TOTAL CHARGES

0.00

TOTAL PAYMENTS/ADJUSTMENTS

0.00

0.00

0.00

0.00

F/C:MC P/T:OPS

FARR, WILLIAM G

1029400218

10/22/10 10/26/10 1

RAUL MANUEL B CRUZ

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

11/11/10

316507 MEDICARE 1500 F/C MC

11/11/10

	CODE	DESCRIPTION	QTY	
10/26	***010	ORDER COMMUNICATION MESSAGE		
	060379	CT GUIDANCE BX, ASP, INJ, LOCAL	1	0.00
		AREA TOTAL ***		0.00
10/26	***270	MED/SUR SUPPLY		
	031700	Z TRAY, BIOPSY DISPOSABLE	1	37.00
		AREA TOTAL ***		37.00
10/22	***300	LABORATORY		
	020050	CBC	1	60.00
10/22	020480	PARTIAL THROMBOPLASTIN TIME	1	60.00
10/22	020590	PROTHROMBIN TIME	1	39.00
10/26	040060	FUNGUS CULTURE W/FUNGAL SMEAR	1	84.00
10/26	040165	GRAM STAIN	1	43.00
10/26	040630	FUNGAL SMEAR	1	54.00
10/26	040635	ACID FAST BACILLI-TB-CULT W/SMEAR	1	108.00
10/26	040645	ACID FAST SMEAR	1	54.00
10/26	040655	ANAEROBIC CULT W/GRAM STAIN	1	95.00
		AREA TOTAL ***		597.00
10/26	***320	DX X-RAY		
	050338	CHEST X-RAY	1	236.00
		AREA TOTAL ***		236.00
10/26	***350	CT SCAN		
	060124	CT SCAN FOR NEEDLE BIOPSY	1	1,767.00
		AREA TOTAL ***		1,767.00
10/26	***369	OR/OTHER		
	060313	Z CT INVASIVE PROCED 031-060 MIN	1	266.00
		AREA TOTAL ***		266.00
10/26	***636	DRUGS/DETAIL CODE		
	001026	DIPHENHYDRAMINE HCL 50MG INJ	1	225.00

Continued

FINAL

-818-

F/C:MC

P/T:OPS

FARR, WILLIAM G

1029400218

10/22/10 10/26/10 2

RAUL MANUEL B CRUZ

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

11/11/10

316507 MEDICARE 1500 F/C MC

11/11/10

	CODE	DESCRIPTION	QTY	
10/26	002808	FENTANYL CITRATE 0.1MG INJ	2	250.00
10/26	002876	MIDAZOLAM HCL 1MG INJ	5	250.00
AREA TOTAL ***				725.00

TOTAL CHARGES 3,628.00

TOTAL PAYMENTS/ADJUSTMENTS 0.00

3,628.00

3,628.00

3,628.00

FINAL

-819-

F/C:MC P/T:GIC

FARR, WILLIAM G

1030200062

11/02/10 11/02/10 1

SARAH I VIDITO

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

11/17/10

316507 MEDICARE 1500 F/C MC

11/17/10

CODE DESCRIPTION

QTY

TOTAL CHARGES

0.00

TOTAL PAYMENTS/ADJUSTMENTS

0.00

0.00

0.00

0.00

Spartanburg Regional Medical Center & Spartanburg Home Hospice 00157

PRINTED BY: JH24657

DATE

05/12/2015

FINAL

-820-

F/C:MC

P/T:FAC

FARR, WILLIAM G

1031200979

11/08/10 11/08/10 1

CHRISTOPHE L NGUYEN

316501 MEDICARE

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

11/14/10

316507 MEDICARE 1500 F/C MC

11/14/10

	CODE	DESCRIPTION	QTY	
11/08	***510	CLINIC		
	040035	EST PATIENT EXPANDED	1	120.00
		AREA TOTAL ***		120.00
11/08	***960	PRO FEE		
	020020	OFFICE/OUTPATIENT VISIT, NEW	1	245.00
		AREA TOTAL ***		245.00
		TOTAL CHARGES		365.00
		TOTAL PAYMENTS/ADJUSTMENTS		0.00

365.00

365.00

365.00

F/C:MC

P/T:BHC

FARR, WILLIAM G

1031300817

11/10/10 11/10/10 1

CHRISTOPHE L NGUYEN

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

11/16/10

316507 MEDICARE 1500 F/C MC

11/16/10

	CODE	DESCRIPTION	QTY	
11/10	***300	LABORATORY		
	010961	ASSAY OF CREATININE	1	51.00
		AREA TOTAL ***		51.00
11/10	***343	Diagnostic Radiopharmaceutical		
	009106	GAD-BASE MR CONTRAST NOS, 1ML	15	200.85
		AREA TOTAL ***		200.85
11/10	***611	MRI-BRAIN		
	004094	MRI HEAD W/O AND W/CONTRAST	1	2,329.00
		AREA TOTAL ***		2,329.00

TOTAL CHARGES 2,580.85

TOTAL PAYMENTS/ADJUSTMENTS 0.00

2,580.85

2,580.85

2,580.85

F/C:MC

P/T:OPT

FARR, WILLIAM G

1031500330

11/11/10 11/11/10 1

CHRISTOPHE L NGUYEN

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

11/17/10

316507 MEDICARE 1500 F/C MC

11/17/10

	CODE	DESCRIPTION	QTY	
11/11	***341	NUC MED/DX		
	070117	LUNG DIFFERENTIAL FUNCTION	1	1,083.00
		AREA TOTAL ***		1,083.00
11/11	***343	Diagnostic Radiopharmaceutical		
	070269	TC99M MAA	1	72.10
		AREA TOTAL ***		72.10
11/11	***460	PULMONARY, FUNC		
	030000	BRONCHOSPASM EVALUATION	1	319.00
11/11	030005	CO DIFFUSING CAP	1	192.00
11/11	030050	RESISTANCE TO AIRFLOW	1	135.00
11/11	030080	THORACIC GAS VOLUME	1	192.00
		AREA TOTAL ***		838.00

TOTAL CHARGES 1,993.10

TOTAL PAYMENTS/ADJUSTMENTS 0.00

1,993.10

1,993.10

1,993.10

F/C:MC

P/T:OPT

FARR, WILLIAM G

1031500825

11/11/10 11/11/10

1

CHRISTOPHE L NGUYEN

316501 MEDICARE

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

11/17/10

316507 MEDICARE 1500 F/C MC

11/17/10

CODE DESCRIPTION

QTY

TOTAL CHARGES

0.00

TOTAL PAYMENTS/ADJUSTMENTS

0.00

0.00

0.00

0.00

F/C:MC P/T:FAC

FARR, WILLIAM G

1031900900

11/15/10 11/15/10 1

CHRISTOPHE L NGUYEN

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

11/21/10

316507 MEDICARE 1500 F/C MC

11/21/10

	CODE	DESCRIPTION	QTY	
	***510	CLINIC		
11/15	040035	EST PATIENT EXPANDED	1	120.00
		AREA TOTAL ***		120.00
	***960	PRO FEE		
11/15	020045	OFFICE/OUTPATIENT VISIT, EST	1	163.00
		AREA TOTAL ***		163.00

TOTAL CHARGES 283.00

TOTAL PAYMENTS/ADJUSTMENTS 0.00

283.00

283.00

283.00

F/C:MC P/T:IP

FARR, WILLIAM G

1032100540

12/02/10 12/15/10 1

CHRISTOPHE L NGUYEN

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

12/21/10

316507 MEDICARE 1500 F/C MC

12/21/10

	CODE	DESCRIPTION	QTY	
	***010	ORDER COMMUNICATION MESSAGE		
12/02	002856	SURGICEL STRIP 4X8 BOX 24'S	2	0.00
12/02	006342	IN A PREMIXED MINIBAG	1	0.00
12/02	010836	OXYGEN	1	0.00
12/02	010836	OXYGEN	1	0.00
12/02	010947	RESPIRATORY ABG LINE DRAW	1	0.00
12/02	002000	CARE PLAN	1	0.00
12/02	002000	CARE PLAN	1	0.00
12/02	020201	POINT OF CARE TESTING	1	0.00
12/02	020202	POINT OF CARE BLD GAS ANALYSIS	1	0.00
12/03	006342	IN A PREMIXED MINIBAG	1	0.00
12/03	010836	OXYGEN	1	0.00
12/03	002000	CARE PLAN	1	0.00
12/03	060440	W-5 CRITICAL CARE ROUNDS	2	0.00
12/04	010931	PEP THERAPY	1	0.00
12/04	010931	PEP THERAPY	1	0.00
12/04	010931	PEP THERAPY	1	0.00
12/05	010931	PEP THERAPY	1	0.00
12/05	010931	PEP THERAPY	1	0.00
12/05	011028	PT TRANSPORT/STANDBY	1	0.00
12/05	011029	PT TRANSPORT/STANDBY 15	1	0.00
12/08	010931	PEP THERAPY	1	0.00
12/11	002000	CARE PLAN	1	0.00
12/13	002000	CARE PLAN	1	0.00
12/15	002000	CARE PLAN	1	0.00
		AREA TOTAL ***		0.00
	***110	ROOM-BOARD/PVT		
12/11	010400	ROOM 407 P	1	1,075.00
12/12	010400	ROOM 407 P	1	1,075.00
12/13	010400	ROOM 407 P	1	1,075.00
12/14	010400	ROOM 407 P	1	1,075.00
		AREA TOTAL ***		4,300.00

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FARR, WILLIAM G

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CHRISTOPHE L NGUYEN

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

12/21/10

316507 MEDICARE 1500 F/C MC

12/21/10

	CODE	DESCRIPTION	QTY	
12/02	***210	CORONARY CARE		
	012220	ROOM CVR C	1	3,450.00
		AREA TOTAL ***		3,450.00
	***214	CCU/INTERMEDIATE		
12/03	014435	ROOM 8428 T	1	1,560.00
12/04	014435	ROOM 8428 T	1	1,560.00
12/05	014435	ROOM 8428 T	1	1,560.00
12/06	014435	ROOM 8428 T	1	1,560.00
12/07	014435	ROOM 8428 T	1	1,560.00
12/08	014435	ROOM 8428 T	1	1,560.00
12/09	014435	ROOM 8428 T	1	1,560.00
12/10	014435	ROOM 8428 T	1	1,560.00
		AREA TOTAL ***		12,480.00
	***250	PHARMACY		
12/02	000798	BUPIVACAINE MPF 0.25% INJ	60	225.00
12/02	000798	BUPIVACAINE MPF 0.25% INJ	30	225.00
12/02	001175	EPHEDRINE SULFATE 50MG/ML 1ML AMP	1	225.00
12/02	006149	THROMBIN-JMI 5000 UNIT VIAL	1	600.00
12/02	006209	AVELOX IV 400MG/250ML	1	100.00
		AREA TOTAL ***		1,375.00
	***258	IV SOLUTIONS		
12/02	000326	NORMAL SALINE SOL 250ML INFUSION	1	100.00
12/02	000340	NORMAL SALINE SOLUTION 1000 ML IN	1	100.00
12/02	000340	NDC 00338-0049-04	1	100.00
12/03	000326	NORMAL SALINE SOL 250ML INFUSION	1	100.00
12/03	000340	NORMAL SALINE SOLUTION 1000 ML IN	1	100.00
12/03	007497	MAGNESIUM SO4 1GM/D5W 100ML PREMI	1	100.00
12/04	000340	NORMAL SALINE SOLUTION 1000 ML IN	1	100.00
12/05	000326	NORMAL SALINE SOL 250ML INFUSION	1	100.00
12/06	000326	NORMAL SALINE SOL 250ML INFUSION	1	100.00
12/06	000333	NORMAL SALINE SOL 500ML INFUSION	1	100.00

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UNION SC 29379

316501 MEDICARE

12/21/10

316507 MEDICARE 1500 F/C MC

12/21/10

	CODE	DESCRIPTION	QTY	
12/06	000333	NORMAL SALINE SOL 500ML INFUSION	1	100.00
		AREA TOTAL ***		1,100.00
	***270	MED/SUR SUPPLY		
12/02	010855	OXYGEN/SHIFT	1	95.00
12/02	010855	OXYGEN/SHIFT	1	95.00
12/02	030190	RT DOUBLE LUMEN ENDOTRACHEAL TUBE	1	520.00
12/03	010855	OXYGEN/SHIFT	1	95.00
12/04	010855	OXYGEN/SHIFT	1	95.00
12/06	010855	OXYGEN/SHIFT	1	95.00
12/07	010855	OXYGEN/SHIFT	1	95.00
12/08	010855	OXYGEN/SHIFT	1	95.00
12/10	010855	OXYGEN/SHIFT	1	95.00
12/10	010855	OXYGEN/SHIFT	1	95.00
12/14	010855	OXYGEN/SHIFT	1	95.00
12/14	010855	OXYGEN/SHIFT	1	95.00
		AREA TOTAL ***		1,565.00
	***272	STERILE SUP		
12/02	020418	CATH, DRAINAGE	1	29.00
12/02	032550	CATH, DRAINAGE	1	198.00
12/02	042190	CATHETER, DRAINAG	1	105.00
12/06	032550	CATH, DRAINAGE	1	198.00
12/08	032550	CATH, DRAINAGE	1	198.00
		AREA TOTAL ***		728.00
	***300	LABORATORY		
11/24	013505	CMP	1	96.00
11/24	020050	CBC	1	60.00
11/24	020480	PARTIAL THROMBOPLASTIN TIME	1	60.00
11/24	020590	PROTHROMBIN TIME	1	39.00
11/24	080640	BLOOD TYPING, ABO	1	30.00
11/24	080645	BLOOD TYPING, RH	1	30.00
11/24	081343	ANTIBODY SCREENS	1	99.00

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1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

12/21/10

316507 MEDICARE 1500 F/C MC

12/21/10

	CODE	DESCRIPTION	QTY	
12/02	011770	MAGNESIUM SERUM	1	67.00
12/02	012050	PHOSPHORUS SERUM	1	48.00
12/02	012090	POTASSIUM SERUM	1	46.00
12/02	013500	BMP	1	85.00
12/02	020050	CBC	1	60.00
12/02	031110	BLOOD GAS	1	130.00
12/02	080515	CROSSMATCH, ELECTRONIC	1	99.00
12/02	080515	CROSSMATCH, ELECTRONIC	1	99.00
12/03	011770	MAGNESIUM SERUM	1	67.00
12/03	012050	PHOSPHORUS SERUM	1	48.00
12/03	013500	BMP	1	85.00
12/03	020050	CBC	1	60.00
12/04	013500	BMP	1	85.00
12/04	020050	CBC	1	60.00
12/04	020050	CBC	1	60.00
12/05	013500	BMP	1	85.00
12/05	020050	CBC	1	60.00
12/05	040080	RESPIRATORY CULTURE W/GRAM STAIN	1	86.00
12/05	040165	GRAM STAIN	1	43.00
12/06	013500	BMP	1	85.00
12/06	013500	BMP	1	85.00
12/06	020050	CBC	1	60.00
12/06	020050	CBC	1	60.00
12/07	013500	BMP	1	85.00
12/07	020050	CBC	1	60.00
12/08	013500	BMP	1	85.00
12/08	020050	CBC	1	60.00
12/09	013500	BMP	1	85.00
12/09	020050	CBC	1	60.00
12/10	013500	BMP	1	85.00
12/10	020050	CBC	1	60.00
12/11	013500	BMP	1	85.00
12/11	020050	CBC	1	60.00
12/12	013500	BMP	1	85.00

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1032 JONESVILLE LOCKHART
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UNION SC 29379

316501 MEDICARE

12/21/10

316507 MEDICARE 1500 F/C MC

12/21/10

	CODE	DESCRIPTION	QTY	
12/12	020050	CBC	1	60.00
12/13	013500	BMP	1	85.00
12/13	020050	CBC	1	60.00
AREA TOTAL ***				3,092.00
***310 PATHOLOGY LAB				
12/02	061190	FROZEN SECTION	1	239.00
12/02	061190	FROZEN SECTION	1	239.00
12/02	061190	FROZEN SECTION	1	239.00
12/02	061190	FROZEN SECTION	1	239.00
12/02	062030	PATH G AND M LEVEL IV	1	239.00
12/02	062030	PATH G AND M LEVEL IV	1	239.00
12/02	062030	PATH G AND M LEVEL IV	1	239.00
12/02	062030	PATH G AND M LEVEL IV	1	239.00
12/02	062030	PATH G AND M LEVEL IV	1	239.00
12/02	062050	PATH G AND M LEVEL VI	1	362.00
AREA TOTAL ***				2,513.00
***320 DX X-RAY				
12/02	034005	CHEST X-RAY	1	236.00
12/03	050354	CHEST X-RAY	1	236.00
12/04	050354	CHEST X-RAY	1	236.00
12/04	050354	CHEST X-RAY	1	236.00
12/05	050354	CHEST X-RAY	1	236.00
12/06	050354	CHEST X-RAY	1	236.00
12/07	050354	CHEST X-RAY	1	236.00
12/08	050354	CHEST X-RAY	1	236.00
12/09	050354	CHEST X-RAY	1	236.00
12/10	050354	CHEST X-RAY	1	236.00
12/11	050354	CHEST X-RAY	1	236.00
12/12	050354	CHEST X-RAY	1	236.00
12/13	050354	CHEST X-RAY	1	236.00
12/14	050354	CHEST X-RAY	1	236.00
12/14	050354	CHEST X-RAY	1	236.00

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HWY
UNION SC 29379

316501 MEDICARE

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316507 MEDICARE 1500 F/C MC

12/21/10

	CODE	DESCRIPTION	QTY	
12/15	050354	CHEST X-RAY	1	236.00
		AREA TOTAL ***		3,776.00
12/05	***350	CT SCAN	1	1,305.00
	060220	CT THORAX W/O DYE		1,305.00
		AREA TOTAL ***		
12/02	***360	OR SERVICES	1	19,497.00
	020250	SURGERY 241-300 MIN		19,497.00
		AREA TOTAL ***		
12/02	***370	ANESTHESIA	305	3,050.00
	010000	ANESTHESIA SERVICES (T) PER MINUTE		3,050.00
		AREA TOTAL ***		
12/02	***410	RESPIRATORY SVC	1	122.00
12/03	020214	MDI (METER-DOSE INHALER) TX	1	122.00
12/03	020214	MDI (METER-DOSE INHALER) TX	1	122.00
12/04	010483	HHN	1	122.00
12/04	010483	HHN	1	122.00
12/04	010932	PEP THERAPY INITIAL	1	122.00
12/04	010933	PEP THERAPY SUBSEQUENT	1	122.00
12/04	010933	PEP THERAPY SUBSEQUENT	1	122.00
12/04	020214	MDI (METER-DOSE INHALER) TX	1	122.00
12/04	020214	MDI (METER-DOSE INHALER) TX	1	122.00
12/04	020214	MDI (METER-DOSE INHALER) TX	1	122.00
12/05	010483	HHN	1	122.00
12/05	010483	HHN	1	122.00
12/05	010483	HHN	1	122.00
12/05	010483	HHN	1	122.00
12/05	010483	HHN	1	122.00
12/05	010933	PEP THERAPY SUBSEQUENT	1	122.00
12/05	010933	PEP THERAPY SUBSEQUENT	1	122.00

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WILLIAM GAULT FARR
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HWY
UNION SC 29379

316501 MEDICARE

12/21/10

316507 MEDICARE 1500 F/C MC

12/21/10

	CODE	DESCRIPTION	QTY	
12/05	020214	MDI (METER-DOSE INHALER) TX	1	122.00
12/05	020214	MDI (METER-DOSE INHALER) TX	1	122.00
12/06	010483	HHN	1	122.00
12/07	010483	HHN	1	122.00
12/07	010483	HHN	1	122.00
12/07	010483	HHN	1	122.00
12/07	020214	MDI (METER-DOSE INHALER) TX	1	122.00
12/08	010483	HHN	1	122.00
12/08	010933	PEP THERAPY SUBSEQUENT	1	122.00
AREA TOTAL ***				3,294.00

	CODE	DESCRIPTION	QTY	
***636 DRUGS/DETAIL CODE				
12/02	000802	CALCIUM CHLORIDE 100MG INJ	10	225.00
12/02	000835	GLYCOPYRROLATE 0.2MG INJ	3	225.00
12/02	000998	LIDOCAINE HCL 10MG IV INFUSION	10	225.00
12/02	001032	NEOSTIGMINE METHYLSUFATE 0.5MG IN	20	225.00
12/02	001925	VECURONIUM BROMIDE 1MG INJ	20	225.00
12/02	002808	FENTANYL CITRATE 0.1MG INJ	1	250.00
12/02	002808	FENTANYL CITRATE 0.1MG INJ	5	250.00
12/02	002811	MIDAZOLAM HCL 1MG INJ	2	250.00
12/02	004559	ROPIVACAINE HCL 1MG INJ	2	275.00
12/02	005245	PROPOFOL 10MG INJ	20	225.00
12/02	007376	PHENYLEPHRINE-NS UP TO 1ML INJ	10	225.00
12/02	000375	LR INJ 1000ML IV BAG	1	100.00
12/03	002581	MORPHINE SULFATE 10MG INJ	1	250.00
12/03	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
12/03	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
12/03	004559	ROPIVACAINE HCL 1MG INJ	2	275.00
12/03	004706	POTASSIUM CHLORIDE 2 MEQ INJ	10	200.00
12/03	004706	POTASSIUM CHLORIDE 2 MEQ INJ	10	200.00
12/04	002581	MORPHINE SULFATE 10MG INJ	1	250.00
12/04	002581	MORPHINE SULFATE 10MG INJ	1	250.00
12/04	002581	MORPHINE SULFATE 10MG INJ	1	250.00
12/04	002581	MORPHINE SULFATE 10MG INJ	1	250.00

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1032 JONESVILLE LOCKHART
HWY
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316501 MEDICARE

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316507 MEDICARE 1500 F/C MC

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	CODE	DESCRIPTION	QTY	
12/04	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
12/04	004706	POTASSIUM CHLORIDE 2 MEQ INJ	15	300.00
12/04	004706	POTASSIUM CHLORIDE 2 MEQ INJ	15	300.00
12/05	002581	MORPHINE SULFATE 10MG INJ	1	250.00
12/05	002581	MORPHINE SULFATE 10MG INJ	1	250.00
12/05	002581	MORPHINE SULFATE 10MG INJ	1	250.00
12/05	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
12/05	004559	ROPIVACAINE HCL 1MG INJ	2	275.00
12/06	001800	VACOMYCIN HCL 500MG INJ	4	225.00
12/06	001800	VACOMYCIN HCL 500MG INJ	4	225.00
12/06	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
12/06	004559	ROPIVACAINE HCL 1MG INJ	2	275.00
12/07	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
12/08	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
12/09	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
12/10	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
12/11	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
12/12	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
12/13	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
12/14	004498	ENOXAPARIN SODIUM 10MG INJ	4	225.00
		AREA TOTAL ***		9,900.00

	***637	PHARMACY-SELF ADMIN DRUGS		
12/02	001602	FAMOTIDINE 20MG TAB	1	1.50
12/02	006707	PROVENTIL HFA 6.7GM INHALER	1	28.76
12/02	006941	SYMBICORT MDI 160-4.5MCG INHALER	1	132.22
12/03	000033	KLOR-CON ER 200MEQ TABLET	1	1.81
12/03	000033	KLOR-CON ER 200MEQ TABLET	1	1.81
12/03	000055	CHEWABLE CHILDREN'S ASPIRIN 81MG	1	1.50
12/03	000055	CHEWABLE CHILDREN'S ASPIRIN 81MG	1	1.50
12/03	000474	NIFEDIPINE CC 30MG TAB	1	1.56
12/03	000474	NIFEDIPINE CC 30MG TAB	1	1.56
12/03	003113	ZOLPIDEM 5MG TAB	1	2.00
12/03	005492	PROTONIX EC 40MG TAB	2	3.00

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FARR, WILLIAM G

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CHRISTOPHE L NGUYEN

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1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

12/21/10

316507 MEDICARE 1500 F/C MC

12/21/10

	CODE	DESCRIPTION	QTY	
12/04	000033	KLOR-CON ER 200MEQ TABLET	1	1.81
12/04	000055	CHEWABLE CHILDREN'S ASPIRIN 81MG	1	1.50
12/04	000474	NIFEDIPINE CC 30MG TAB	1	1.56
12/04	000474	NIFEDIPINE CC 30MG TAB	1	1.56
12/04	001763	ALBUTEROL SULF. INH. SOLN. 2.5MG/3ML	1	1.62
12/04	003113	ZOLPIDEM 5MG TAB	1	2.00
12/04	005994	ALBUTEROL SULF. INHL. 5MG/ML SOLN	1	1.00
12/05	000033	KLOR-CON ER 200MEQ TABLET	1	1.81
12/05	000033	KLOR-CON ER 200MEQ TABLET	2	3.62
12/05	000055	CHEWABLE CHILDREN'S ASPIRIN 81MG	1	1.50
12/05	000474	NIFEDIPINE CC 30MG TAB	1	1.56
12/05	003113	ZOLPIDEM 5MG TAB	1	2.00
12/06	000033	KLOR-CON ER 200MEQ TABLET	2	3.62
12/06	000033	KLOR-CON ER 200MEQ TABLET	1	1.81
12/06	000055	CHEWABLE CHILDREN'S ASPIRIN 81MG	1	1.50
12/06	000155	SENNA S TABLET	2	3.00
12/06	000155	SENNA S TABLET	4	6.00
12/06	000474	NIFEDIPINE CC 30MG TAB	1	1.56
12/06	005994	ALBUTEROL SULF. INHL. 5MG/ML SOLN	1	1.00
12/06	005994	ALBUTEROL SULF. INHL. 5MG/ML SOLN	12	12.00
12/06	006622	OXYCODONE 7.5MG/APAP 325MG TABLET	1	2.05
12/06	006622	OXYCODONE 7.5MG/APAP 325MG TABLET	1	2.05
12/06	006622	OXYCODONE 7.5MG/APAP 325MG TABLET	2	4.10
12/07	000033	KLOR-CON ER 200MEQ TABLET	2	3.62
12/07	000033	KLOR-CON ER 200MEQ TABLET	2	3.62
12/07	000033	KLOR-CON ER 200MEQ TABLET	1	1.81
12/07	000055	CHEWABLE CHILDREN'S ASPIRIN 81MG	1	1.50
12/07	000155	SENNA S TABLET	4	6.00
12/07	000474	NIFEDIPINE CC 30MG TAB	1	1.56
12/07	005994	ALBUTEROL SULF. INHL. 5MG/ML SOLN	6	6.00
12/07	005994	ALBUTEROL SULF. INHL. 5MG/ML SOLN	-2	2.00CR
12/07	005994	ALBUTEROL SULF. INHL. 5MG/ML SOLN	-1	1.00CR
12/07	006622	OXYCODONE 7.5MG/APAP 325MG TABLET	2	4.10
12/07	006622	OXYCODONE 7.5MG/APAP 325MG TABLET	2	4.10

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FARR, WILLIAM G

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CHRISTOPHE L NGUYEN

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HWY
UNION SC 29379

316501 MEDICARE

12/21/10

316507 MEDICARE 1500 F/C MC

12/21/10

	CODE	DESCRIPTION	QTY	
12/07	006622	OXYCODONE 7.5MG/APAP 325MG TABLET	2	4.10
12/07	006622	OXYCODONE 7.5MG/APAP 325MG TABLET	2	4.10
12/08	000033	KLOR-CON ER 200MEQ TABLET	1	1.81
12/08	000055	CHEWABLE CHILDREN'S ASPIRIN 81MG	1	1.50
12/08	000155	SENNA S TABLET	4	6.00
12/08	000474	NIFEDIPINE CC 30MG TAB	1	1.56
12/08	006622	OXYCODONE 7.5MG/APAP 325MG TABLET	2	4.10
12/08	006622	OXYCODONE 7.5MG/APAP 325MG TABLET	2	4.10
12/09	000033	KLOR-CON ER 200MEQ TABLET	2	3.62
12/09	000033	KLOR-CON ER 200MEQ TABLET	1	1.81
12/09	000033	KLOR-CON ER 200MEQ TABLET	2	3.62
12/09	000055	CHEWABLE CHILDREN'S ASPIRIN 81MG	1	1.50
12/09	000155	SENNA S TABLET	4	6.00
12/09	000474	NIFEDIPINE CC 30MG TAB	1	1.56
12/09	003113	ZOLPIDEM 5MG TAB	1	2.00
12/09	006622	OXYCODONE 7.5MG/APAP 325MG TABLET	2	4.10
12/09	006622	OXYCODONE 7.5MG/APAP 325MG TABLET	2	4.10
12/09	006622	OXYCODONE 7.5MG/APAP 325MG TABLET	2	4.10
12/09	006622	OXYCODONE 7.5MG/APAP 325MG TABLET	2	4.10
12/09	006941	SYMBICORT MDI 160-4.5MCG INHALER	1	132.22
12/10	000033	KLOR-CON ER 200MEQ TABLET	1	1.81
12/10	000055	CHEWABLE CHILDREN'S ASPIRIN 81MG	1	1.50
12/10	000155	SENNA S TABLET	4	6.00
12/10	000474	NIFEDIPINE CC 30MG TAB	1	1.56
12/10	003113	ZOLPIDEM 5MG TAB	1	2.00
12/10	004635	PLAVIX 75MG TABLET BTL/90'S	1	21.06
12/10	006622	OXYCODONE 7.5MG/APAP 325MG TABLET	2	4.10
12/10	006622	OXYCODONE 7.5MG/APAP 325MG TABLET	2	4.10
12/10	006622	OXYCODONE 7.5MG/APAP 325MG TABLET	2	4.10
12/11	000033	KLOR-CON ER 200MEQ TABLET	1	1.81
12/11	000055	CHEWABLE CHILDREN'S ASPIRIN 81MG	1	1.50
12/11	000155	SENNA S TABLET	2	3.00
12/11	000155	SENNA S TABLET	4	6.00
12/11	000474	NIFEDIPINE CC 30MG TAB	1	1.56

Continued

F/C:MC

P/T:IP

FARR, WILLIAM G

1032100540

12/02/10 12/15/10 11

CHRISTOPHE L NGUYEN

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

12/21/10

316507 MEDICARE 1500 F/C MC

12/21/10

	CODE	DESCRIPTION	QTY	
12/11	000474	NIFEDIPINE CC 30MG TAB	1	1.56
12/11	002628	NICOTINE PATCH 21MG	1	4.11
12/11	002628	NICOTINE PATCH 21MG	1	4.11
12/11	002628	NICOTINE PATCH 21MG	1	4.11
12/11	006622	OXYCODONE 7.5MG/APAP 325MG TABLET	2	4.10
12/11	006622	OXYCODONE 7.5MG/APAP 325MG TABLET	2	4.10
12/12	000033	KLOR-CON ER 200MEQ TABLET	1	1.81
12/12	000055	CHEWABLE CHILDREN'S ASPIRIN 81MG	1	1.50
12/12	000155	SENNA S TABLET	4	6.00
12/12	000474	NIFEDIPINE CC 30MG TAB	1	1.56
12/12	002628	NICOTINE PATCH 21MG	1	4.11
12/12	006622	OXYCODONE 7.5MG/APAP 325MG TABLET	2	4.10
12/12	006622	OXYCODONE 7.5MG/APAP 325MG TABLET	2	4.10
12/12	006622	OXYCODONE 7.5MG/APAP 325MG TABLET	2	4.10
12/12	006622	OXYCODONE 7.5MG/APAP 325MG TABLET	2	4.10
12/13	000033	KLOR-CON ER 200MEQ TABLET	1	1.81
12/13	000055	CHEWABLE CHILDREN'S ASPIRIN 81MG	1	1.50
12/13	000155	SENNA S TABLET	4	6.00
12/13	000474	NIFEDIPINE CC 30MG TAB	1	1.56
12/13	001761	HYDROGEN PEROXIDE 3% SOLN 120ML	1	1.16
12/13	002628	NICOTINE PATCH 21MG	1	4.11
12/13	006622	OXYCODONE 7.5MG/APAP 325MG TABLET	2	4.10
12/13	006622	OXYCODONE 7.5MG/APAP 325MG TABLET	2	4.10
12/13	006707	PROVENTIL HFA 6.7GM INHALER	1	28.76
12/13	006941	SYMBICORT MDI 160-4.5MCG INHALER	1	132.22
12/13	007349	HYDROCODONE BIT/APAP 7.5-3.25MG T	2	4.00
12/14	000033	KLOR-CON ER 200MEQ TABLET	1	1.81
12/14	000055	CHEWABLE CHILDREN'S ASPIRIN 81MG	1	1.50
12/14	000155	SENNA S TABLET	4	6.00
12/14	000474	NIFEDIPINE CC 30MG TAB	1	1.56
12/14	002628	NICOTINE PATCH 21MG	1	4.11
12/14	003113	ZOLPIDEM 5MG TAB	1	2.00
12/14	006941	SYMBICORT MDI 160-4.5MCG INHALER	1	132.22
12/14	007349	HYDROCODONE BIT/APAP 7.5-3.25MG T	2	4.00

Continued

F/C:MC

P/T:IP

FARR, WILLIAM G

1032100540

12/02/10 12/15/10 12

CHRISTOPHE L NGUYEN

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

12/21/10

316507 MEDICARE 1500 F/C MC

12/21/10

	CODE	DESCRIPTION	QTY	
12/14	007349	HYDROCODONE BIT/APAP 7.5-3.25MG T	2	4.00
12/14	007349	HYDROCODONE BIT/APAP 7.5-3.25MG T	2	4.00
12/14	007349	HYDROCODONE BIT/APAP 7.5-3.25MG T	2	4.00
12/15	003251	AEROZOIN BENZOIN SPRAY 40% 120ML	1	47.60
12/15	007349	HYDROCODONE BIT/APAP 7.5-3.25MG T	2	4.00
		AREA TOTAL ***		982.45
	***710	RECOVERY ROOM		
12/02	030040	RECOVERY ROOM 061-120 MINUTES	1	1,518.00
		AREA TOTAL ***		1,518.00
	***750	GASTR-INST SVS		
12/05	060215	BRONCHOSCOPY, CLEAR AIRWAYS	1	1,670.00
12/06	060215	BRONCHOSCOPY, CLEAR AIRWAYS	1	1,670.00
		AREA TOTAL ***		3,340.00
	***960	PRO FEE		
12/02	022220	VISUALIZATION OF CHEST	1	1,680.00
12/02	024405	BILOBECTOMY	1	5,338.00
12/02	026475	REMOVE THORACIC LYMPH NODES	1	874.00
		AREA TOTAL ***		7,892.00
	***964	PRO FEE/ANES CRNA		
12/02	020000	ANESTHESIA SERVICES (P) PER MINUTE	305	3,050.00
		AREA TOTAL ***		3,050.00

TOTAL CHARGES

88,207.45

TOTAL PAYMENTS/ADJUSTMENTS

0.00

88,207.45

88,207.45

88,207.45

FINAL

-837-

F/C:MC

P/T:FAC

FARR, WILLIAM G

1035600131

12/22/10 12/22/10

1

CHRISTOPHE L NGUYEN

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

12/28/10

316507 MEDICARE 1500 F/C MC

12/28/10

	CODE	DESCRIPTION	QTY	
12/22	***960	PRO FEE		
	021460	P-POST OP CARE, GLOBAL	1	0.00
		AREA TOTAL ***		0.00
		TOTAL CHARGES		0.00
		TOTAL PAYMENTS/ADJUSTMENTS		0.00

0.00

0.00

0.00

Spartanburg Regional Medical Center & Spartanburg Home Hospice 00175

PRINTED BY: JH24657

DATE 05/12/2015

FINAL

-838-

F/C:MC

P/T:OPT

FARR, WILLIAM G

1035600774

12/22/10 12/22/10 1

CHRISTOPHE L NGUYEN

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

12/28/10

316507 MEDICARE 1500 F/C MC

12/28/10

	CODE	DESCRIPTION	QTY	
	***320	DX X-RAY		
12/22	050342	CHEST X-RAY	1	236.00

AREA TOTAL ***

236.00

TOTAL CHARGES

236.00

TOTAL PAYMENTS/ADJUSTMENTS

0.00

236.00

236.00

236.00

F/C:SM P/T:FAC

FARR, WILLIAM G 1031900900

11/15/10 11/15/10 1

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/12/15

316507 MEDICARE 1500 F/C MC

05/12/15

	CODE	DESCRIPTION	QTY	
11/15	***510 040035	CLINIC EST PATIENT EXPANDED	1	120.00
		AREA TOTAL ***		120.00
11/15	***960 020045	PRO FEE OFFICE/OUTPATIENT VISIT, EST	1	163.00
		AREA TOTAL ***		163.00
TOTAL CHARGES				283.00
12/06	I5205	M53 ERA MEDICARE PAYMENT PART B	316	83.26CR
12/08	I5200	MC5 ERA MEDICARE PAYMENT	316	53.27CR
12/06	A5002	M53 Adjustment - Medicare Pro Fee	316	58.93CR
12/08	A5041	MC5 Adjustment Medicare Outpatient	316	53.40CR
TOTAL PAYMENTS/ADJUSTMENTS				248.86CR

34.14

0.00

34.14



840-



UPSTATE LUNG & CRITICAL CARE
SPECIALISTS, P.C.
1891 BOILING SPRINGS RD., SPARTA, NJ 08591
NAME: [REDACTED]
DOB: [REDACTED]
DATE: [REDACTED]

UPSTATE LUNGO CRITICAL CARE
SPECIALISTS, P.C.
1001 BOUTWELL PARKWAY, SPARTANBURG, SC 29303
NAME: Mr. [illegible]
DOB: 05/15/50
DATE: 05/15/2011

FARR v. WAN
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Palmetto

Hematology Oncology, P.C.

380 Serpentine Drive, Suite #200
Spartanburg, SC 29303
(864) 560-7050 FAX: (864) 560-7057
Page: - 1 -

James D. Bearden, III, M.D. F.A.C.P.
Eric C. Nelson, M.D.
Asim R. Pati, M.D.
Steven W. Corso, M.D.
Colin P. Curran, M.D.
Sarah I. Vidito, D.O.
Sharmila P. Mehta, M.D.

PATIENT: FARR, WILLIAM G.

D.O.B.: [REDACTED]

OFFICE VISIT:

DATE: 01/05/2010

ACCT: 14160

DIAGNOSIS:

- Essential hypertension
- 09/12/97: Rectal cancer, T3N0M0 treated with 5-FU infusional treatment concomitant radiotherapy on Protocol 59304
- Erythrocytosis secondary to tobacco abuse.
- Life long tobacco abuse.

SUBJECTIVE: The patient is here for regular follow up. He is receiving periodic phlebotomy for his secondary erythrocytosis with goal for hematocrit below 45 volume percent. He is followed by Dr. Ric Orr for history of rectal cancer per NCCN guidelines. He is also followed by Dr. Devane for his medical management. During today's office visit patient elicits no significant complaints. There is no fever, chills or night sweats. He denies chest pain, palpitation or shortness of breath. There is no nausea, vomiting, diarrhea, constipation or abdominal pain. He denies melena, hematochezia or bright red blood per rectum. The remainder of review of systems has been obtained and is within normal limits and noncontributory to this presentation. Patient maintains good quality of life and functional independence.

ALLERGIES: NKA

TOBACCO: He is smoking one pack of cigarettes per day. He drinks about two beers per day. Patient received appropriate tobacco cessation education.

PAIN: 0/10

FAMILY HISTORY: Reviewed and unchanged since initial office visit.



Palmetto

Hematology Oncology, P.C.

380 Serpentine Drive, Suite #200
Spartanburg, SC 29303
(864) 560-7050 FAX: (864) 560-7057
Page: - 2 -

James D. Bearden, III, M.D. F.A.C.P.
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Sarah I. Vidito, D.O.
Sharmila P. Mehta, M.D.

PATIENT: FARR, WILLIAM G.

D.O.B.: [REDACTED]

SOCIAL HISTORY: Reviewed and unchanged since initial office visit.

REVIEW OF SYSTEMS: As above.

PHYSICAL EXAMINATION: ECOG PS: 0. Temp 98.3, BP 152/81, pulse 78, and weight 135.8 pounds. HEENT: oral mucosa moist without petechiae. Facial plethora is noted. Mucosal membranes with mild cyanosis. There is no cervical, supraclavicular, axillary or inguinal adenopathy. Lungs are clear to auscultation bilaterally. Heart is within normal rate and rhythm. Abdomen is soft, nontender and non-distended, no hepatosplenomegaly. Extremities are without edema, cyanosis and petechiae. Skin is without excessive ecchymosis, petechiae or purpura. Neurologic exam is without focal deficit.

LABORATORY: Hematocrit 46.6 volume percent.

PLAN:

- **Secondary erythrocytosis:** We will continue therapeutic phlebotomy to maintain hematocrit below 45 volume percent. Patient has been given referral for pulmonary evaluation due to his prior complaints of shortness of breath at rest and life long history of tobacco abuse.
- **Tobacco cessation:** I spent at least 5-10 minutes and discussed with patient appropriate tobacco cessation.
- **Rectal carcinoma:** follow up as per NCCN guidelines.
- **Patient will follow up** with his primary care physician regarding his hypertension and other chronic medical conditions.
- **Patient will follow up** in three months for physical exam and clinical reevaluation with lab data including CBC. I will monitor patient's hematocrit with CBC every two months.

Sarah Vidito, D.O.

SV/pag

Electronically Approved By: Sarah I. Vidito, D.O.

cc: Dr. George Bass

UPSTATE LUNG & CRITICAL CARE
SPECIALISTS, P.C.
1001 BOWLING SPRING RD. SPARTANBURG, SC 29302
NAME *WILLIAM FAYE*
NUMBER *21232* 698
DATE *11/11/00*

-851-

11/11/2000

UPSTATE MIND & CRITICAL CARE
SPECIALISTS P.C.
100 BOILING SPRINGS RD., SPARTANBURG, SC 29303
NAME *William Fair*
NUMBER *21215* DOB *12/15/11*
DATE *12/15/11* OR *12/15/11*

Upstate Lung & Critical Care Specialists, P.C.
1091 Boiling Springs Road
Spartanburg, SC 29303
(864)573- 6320
FAX (864)573- 6323

Patient: FARR, WILLIAM G, DOB: [REDACTED] Age: 67 years, Male
Acct #: 31219, Encounter Date: 01/11/2010

New Patient Encounter
01/11/2010

Referral from SARAH VIDITO

Chief Complaint(s): New Patient

History of Present Illness:

The patient currently describes their health status as good. Context: Patient is a smoker and "my cancer doctor (Dr Bearden/ Vidito) send me over to have my lung checked". The patient uses tobacco. Associated signs and symptoms: Patient denies shortness of breath, dyspnea on exertion, cough or chronic sputums production.. He has never been admitted to hospital for any breathing problems. He does not use any inhaler. As far as his cancer goes, he has been in remission after his colon resection 12 years ago. Review records from Dr Vidito, patient with secondary erythrocytosis.

Medical History

Cancer - colon in 1998.

Surgical History

Colon Resection.
nose bleeds.

Family History

Deceased - Mother old age 96, Father cancer age 89.

Cancer.

Diabetes - Mother.

Heart Disease - Mother.

Social History

Tobacco Use - Cigarettes - 1 packs per day, for 45 years.

Alcohol Use - Beer - Daily.

Caffeine Consumption - Coffee 1 cups per day.

Marital Status - Married.

Employment Type - Retired.

Allergies: No known drug allergies

Current Medications:

Aspirin 81 mg Tablet Take 1 tablet once a day

Klor-Con M20 (potassium chloride) 20 mEq Tab Sust.Rel. Particle/Crystal Take 1 tablet three times a day

Nifedipine 30 mg Tablet Extended Rel 24 hr Take 1 tablet once a day

Triamterene- Hydrochlorothiazid 37.5- 25 mg Capsule Take 1 capsule once a day

Vytorin 10- 40 (ezetimibe- simvastatin) 10- 40 mg Tablet Take 1 tablet twice a day

Review of Systems:

Constitutional Symptoms:

Complaints of fatigue.

Denies chills, dizziness, fainting, fever, forgetfulness, insomnia, loss of appetite, loss of sleep, malaise, nervousness, night sweats, numbness, weight gain, weight loss.

Printed by Diann Foster, RN on 01/30/2013, Page 1 of 4

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Upstate Lung & Critical Care Specialists, P.C.
1091 Boiling Springs Road
Spartanburg, SC 29303
(864)573- 6320
FAX (864)573- 6323

Patient: FARR, WILLIAM G, DOB: [REDACTED], Age: 67 years, Male
Acct #: 31219, Encounter Date: 01/11/2010

Eyes:

Denies blurring, discharge, double vision, excessive tearing, eye pain, irritation, photophobia, redness, spots, vision flashes, vision halos, vision loss.

Ears, nose, throat:

Complains of nosebleeds.

Denies bleeding gums, difficulty swallowing, ear discharge, earache, hay fever, hoarseness, loss of hearing, ringing in ears, sinus problems.

Cardiovascular:

Complains of high blood pressure, swelling of ankles.

Denies blood clots, chest pain, irregular heart beat, low blood pressure, poor circulation, rapid heart beat, varicose veins.

Pulmonary:

Denies cough, coughing up blood, excessive sleepiness, loud snoring, short of breath, wheezing.

Gastrointestinal:

Complains of gass.

Denies abdominal pain, acid indigestion, bloating, bowel changes, constipation, diarrhea, excessive hunger, excessive thirst, hemorrhoids, nausea, poor appetite, rectal bleeding, vomiting.

Genitourinary:

normal, no problems indicated

Musculoskeletal:

normal, no problems indicated

Neurological:

normal, no problems indicated

Endocrine:

normal, no problems indicated

Psychiatric:

normal, no problems indicated

Vitals:

Height 65 inches (165.1 cm) Weight 140 pounds (63.5 kg) BMI 23.29 Pulse 92 bpm, Sitting O2 Sat 95%, Room air Blood Pressure 136 / 82, Right arm sitting

Exam:

General appearance: well developed.
no acute distress.

Head: holds erect and midline, facial features symmetric.

Eyes: *conjunctivae and lids:* conjunctivae pink with clear sclerae.

pupils and irises: both pupils equal, round, reactive to light and accommodation.

ENMT: *appearance of soft palate:* normal.

appearance of the tongue: normal.

appearance of hard palate: normal shape.

lips, teeth, and gums: pink, distinct border between lips and facial skin, good dentition.

Neck: supple, no masses, trachea midline, thyroid non- palpable.

Respiratory: *auscultation:* no rales, rhonchi, or wheezes, diminished breath sounds.

palpation: Decreased chest expansion. Barrel chest.

respiratory effort: no intercostal retractions or use of accessory muscles.

percussion: no dullness.

Cardiovascular: *GI: liver and spleen:* no enlargement or nodularity.

Abdomen: soft, nontender, bowel sounds normal, no masses.

Lymphatic: *neck nodes:* no cervical adenopathy.

Musculoskeletal: *gait and station:* smooth gait and upright posture.

Upstate Lung & Critical Care Specialists, P.C.
1091 Boiling Springs Road
Spartanburg, SC 29303
(864)573- 6320
FAX (864)573- 6323

Patient: FARR, WILLIAM G, DOB: [REDACTED], Age: 67 years, Male
Acct #: 31219, Encounter Date: 01/11/2010

Skin: normal.

Neurologic: normal.

Psychiatric: *judgement and insight*: insight and judgement intact.

orientation: oriented to time, place and person.

memory: recent and remote memory intact.

mood and affect: appropriate mood and affect.

Studies:

Pulmonary Function Test: Date 1/11/10; *Interpretation* - obstruction - moderate; FEV1 2.75L (55% predicted); FVC 3.72L (59% predicted); Ratio 69.5.

CXR: Date 1/11/10; *Interpretation* - nodule (No), hyperinflation (Yes), pleural effusion (No), cardiomegaly (No).

Problems

DYSPNEA (RESP. INSUFFICIENCY) (786.09), Status: Active, onset: 01/11/2010 (added)

COPD (496), Status: Active, onset: 01/11/2010, Moderate (added)

NONDEPENDENT TOBACCO USE DISORDER (305.1), Status: Active, onset: 01/11/2010 (added)

HYPOXEMIA (799.02), Status: Active, onset: 01/11/2010; Mild, NON O2 dependent (added)

Orders

SPIROMETRY (94010), Ordered: 01/11/2010, Ordering Provider: Zullekha Mohammed, Status: Complete

X- RAY - CHEST, 2 VIEWS, FRONTAL AND LATERAL; (71020), Ordered: 01/11/2010, Ordering Provider: Sau Yin Wan, MD, Status: Complete

Plan Note

SMOKING CESSATION!

Chantix prescription given. Patient would like to try without pharmacologic method first.

Disposition

Return to clinic in 6 months

Instructions

side effects of Chanxtix includes but not limited to suicidal ideation, hallucination, mood changes, nausea and vomiting

Note Contributing Authors:

Sau Yin Wan, MD; Zullekha Mohammed

Note electronically signed by: Sau Yin Wan, MD on 01/11/2010 at 10:27 AM

I have read and concur with the above note

Cosigned by: Zullekha Mohammed on 01/12/2010 at 08:55 AM

E&M Code: 99204

Complexity: Moderate

CC:

Printed by Diann Foster, RN on 01/30/2013, Page 3 of 4

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Upstate Lung & Critical Care Specialists, P.C.
1091 Boiling Springs Road
Spartanburg, SC 29303
(864)573- 6320
FAX (864)573- 6323

Patient: FARR, WILLIAM G, DOB: [REDACTED], Age: 67 years, Male
Acct #: 31219, Encounter Date: 01/11/2010

SARAH VIDITO, 380 SERPENTINE DRIVE, SUITE 200, SPARTANBURG, SC, 29303

**Upstate Lung &
Critical Care Specialists, P.C.**

Dr. J. F. Foster, M.D.
Dr. J. A. Foster, M.D.
Dr. R. L. Lee, M.D.
Dr. L. C. LaVine, M.D.
Dr. Y. W. Wan, M.D.
Dr. C. A. Meyer, M.D.
Dr. F. S. Smith, M.D.
Dr. J. R. Foster, P.A.-C

1091 Boiling Springs Road
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Upstate Lung & Critical Care Specialists, P.C.
1091 Boiling Springs Road
Spartanburg, SC 29303
(864) 573- 6320
FAX (864) 573- 6323

Patient: FARR, WILLIAM G, DOB: [REDACTED] Age: 67 years, Male
Acct #: 31219, Encounter Date: 01/11/2010

Diagnostic
01/11/2010

Summary: CXR PA LATERAL

Provider: Sau Yin Wan, MD

Added File 1 (scan_1345644553623.jpg)

Stored to chart by: Nadine Anderson on 08/22/2012 at 10:10 AM



Palmetto

Hematology Oncology, P.C.

The Gibbs Cancer Center
380 Serpentine Drive, Suite #200
Spartanburg, South Carolina 29303
(864) 560-7050 FAX: (864) 560-7057

James D. Bearden, III, M.D., F.A.C.P.
Eric C. Nelson, M.D.
Asim R. Pati, M.D.
Steven W. Corso, M.D.
Colin P. Curran, M.D.
Sarah I. Vidito, D.O.
Sharmila Mehta, M.D.

Page: 1

PATIENT: FARR, WILLIAM GAULT
MRN: 14160

D.O.B.: [REDACTED]

OFFICE VISIT:

DATE: 07/19/10

DIAGNOSIS:

- 09/12/97: Rectal cancer, T3N0M0 treated with 5-FU infusional treatment concomitant radiotherapy on Protocol 59304
- Erythrocytosis secondary to tobacco abuse.
- Life long tobacco abuse.

SUBJECTIVE: The patient is here for regular follow up of secondary erythrocytosis. He is being treated with intermittent therapeutic phlebotomy with goal for level of hematocrit below 45 volume percent. He continues to follow with Dr. Wan as per her schedule. He continues tobacco abuse. He is followed by Dr. Ric Orr for history of rectal cancer per NCCN guidelines. He is also followed by Dr. Devane for his medical management. During today's office visit patient elicits no significant complaints. There is no fever, chills or night sweats. He denies chest pain, palpitation or shortness of breath. There is no nausea, vomiting, diarrhea, constipation or abdominal pain. He denies melena, hematochezia or bright red blood per rectum. The remainder of review of systems has been obtained and is within normal limits and noncontributory to this presentation. Patient maintains good quality of life and functional independence.

ALLERGIES: NKA



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Page: 2

PATIENT: FARR, WILLIAM GAULT
MRN: 14160

D.O.B.: [REDACTED]

TOBACCO: He is smoking one pack of cigarettes per day. He drinks about two beers per day. Patient received appropriate tobacco cessation education.

PAIN: 0/10

FAMILY HISTORY: Reviewed and unchanged since initial office visit.

SOCIAL HISTORY: Reviewed and unchanged since initial office visit.

REVIEW OF SYSTEMS: As above.

PHYSICAL EXAMINATION: ECOG PS: 0. Temp 98.8, BP 134/85, pulse 88, and weight 140 pounds. HEENT: oral mucosa moist without petechiae. Facial plethora is noted. Mucosal membranes reveals mild cyanosis. There is no cervical, supraclavicular, axillary or inguinal adenopathy. Lungs are clear to auscultation bilaterally. Heart is within normal rate and rhythm. Abdomen is soft, nontender and non-distended, no hepatosplenomegaly. Extremities are without edema, cyanosis and petechiae. Skin is without excessive ecchymosis, petechiae or purpura. Neurologic exam is without focal deficit.

LABORATORY: Hct: 50%

PLAN:

- **Secondary erythrocytosis:** We will continue therapeutic phlebotomy to maintain hematocrit below 45 volume percent.
- **Tobacco cessation:** I spent at least 5-10 minutes and discussed with patient appropriate tobacco cessation.
- **Rectal carcinoma:** follow up as per NCCN guidelines.
- **Patient will follow up** with his primary care physician regarding chronic medical conditions.



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Page: 3

PATIENT: FARR, WILLIAM GAULT
MRN: 14160

D.O.B.: [REDACTED]

- Patient will follow up in six months for physical exam and clinical reevaluation with lab data including CBC. I will monitor patient's hematocrit with CBC every two months.

ELECTRONICALLY APPROVED BY: SARAH VIDITO, DO

DATE/TIME APPROVED: 07/21/10/10:24 AM

TRANSCRIBED BY:

cc: Dr. George Bass

RONALD H. LITTLEFIELD, M.D., LLC
319 NORTH PINE STREET
SPARTANBURG, SOUTH CAROLINA 29302

PATIENT NAME: WILLIAM FARR
CHART NO.: 091065

DATE OF VISIT: 10/06/2010

PRESENT ILLNESS: This is a 68-year-old white male who has a history of multiple medical problems. He complains of increased shortness of breath. He smoked one pack of cigarettes for at least 50 pack years. He has some shortness of breath associated. He also complains of chest discomfort in the epigastric area. He has a heavy sensation sometimes associated with stress, considers this to be _____ exertional dyspnea. Also it is not associated with this and thought this may be related to his lung status.

CHRONIC ILLNESSES:

1. Hypertension.
2. Dyslipidemia.
3. COPD.
4. Secondary polycythemia.
5. Carcinoma of the colon, status post colectomy 12 years ago. The last colonoscopy was in 2007.

FAMILY HISTORY: Father died at 88 years of age; carcinoma of the bone, questionably metastatic. Mother died at 94 years of age with old age. Three brothers and three sisters; one is diabetic, one is hypertensive; others are in good health.

SOCIAL HISTORY: He smoked one pack per day for 50 pack years. He drinks six beers a day. He is married with two children in good health.

ALLERGIES: NO KNOWN ALLERGIES.

REVIEW OF SYSTEMS:

HEAD AND NECK: Denies sore throat or earache. Denies congestion, nasal drainage, and sinus pressure. Denies any problems with eyes. Has occasional headaches.

PULMONARY: Denies shortness of breath, PND (paroxysmal nocturnal dyspnea), or orthopnea. Denies cough, sputum production, or hemoptysis. Denies night sweats.

GASTROINTESTINAL: Denies abdominal pain, nausea, vomiting, hematemesis, constipation, diarrhea, or blood in the stools. Denies any change in bowel habits. Denies rectal pain.

GENTOURINARY: Denies frequency, urgency, or dysuria. Denies change in color of urine.

MUSCULOSKELETAL: Denies arthralgias. Denies swelling or edema. No leg or foot pain. No back pain.

SKIN: Denies recent or chronic rash or irritation. Denies pruritus. Denies easy bruisability.

NEUROLOGICAL: Denies seizure disorder. Denies syncope or pre-syncope. Denies headaches or trouble with speech or walking. No confusion.

WILLIAM FARR

PHYSICAL EXAMINATION:

VITAL SIGNS:

Blood Pressure: 124/80

Heart Rate: 93

Respirations: 18

Weight: 139

GENERAL: The patient is a well-developed male in no acute distress. Alert, responsive and oriented.

HEENT: ENT inspection is normal. Pupils are equal, round, and reactive to light. Sclerae are nonicteric. No nasal drainage present. Pharynx is without erythema and exudate.

NECK: Supple. No thyromegaly or lymphadenopathy. Bilateral carotid bruits.

LYMPH NODES: There is no evidence of lymphadenopathy in the axillary or inguinal areas.

PULMONARY: No respiratory distress is noted. AP diameter is increased. Breath sounds are normal.

BREASTS: Deferred.

CARDIOVASCULAR: There is a regular rate and rhythm present. No gallops, lifts or heaves noted. The patient has a 2/6 mitral murmur.

ABDOMEN: The abdomen is nontender. Bowel sounds are normoactive. No organomegaly or masses.

SKIN: Normal turgor. No evidence of rashes, ecchymoses, or petechiae. No cyanosis or pallor.

RECTAL EXAM: Deferred.

EXTREMITIES: Revealed full range of motion without pain or edema.

NEUROLOGICAL EXAM: Alert and oriented times three. Remote and recent memory is intact. Cranial nerves are grossly intact. No evidence of sensory or motor deficits. Mood and affect normal.

ASSESSMENT:

1. Chest pain.
2. Dyslipidemia.
3. Bilateral carotid bruits.
4. Mitral regurgitation.
5. COPD.
6. Hypertension.
7. Secondary polycythemia.
8. Carcinoma of the colon.
9. Vertigo.
10. History of recurrent epistaxis.

PLAN:

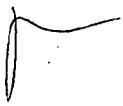
1. The patient's chest pain is certainly concerning. We will perform stress test to evaluate that.
2. Bilateral carotid bruits certainly need to be evaluated. B-mode scan will be obtained as well as transcranial Doppler.
3. Echocardiogram will be obtained to evaluate mitral regurgitation murmur.
4. PFTs need to be obtained to evaluate his pulmonary status.

WILLIAM FARR

5. Lipids need to be obtained. He is on Procardia. I do not like this medication for a lot of reasons. We will need to re-evaluate his lipids and creatinine and consider changing that. His lipids have not been well controlled. He has non-compliance. I am reinforcing taking his Vytarin on a regular basis.
6. Return to the office in two to three months or p.r.n.

RONALD H. LITTLEFIELD, M.D.

RHL/jm



RHL 003

RONALD H. LITTLEFIELD, MD., LLC
 319 NORTH PINE STREET
 SPARTANBURG, S.C. 29302
 (864) 582-8900 PHONE
 (864) 582-8555 FAX

CHART # 091065

PATIENT NAME: William Farr

DOB: [REDACTED]

NOTES: 6/8/07

DATE: 10-6-10

LBS: 139

TEMP:

BP: 124/80

PULSE: 93 RESP:

LAB TEST: YES OR NO

NEED NEW RX: YES OR NO

MEDICATIONS:

Triamterene 37.5/25mg qd
 Nifedipine 30mg qd
 Klor-Con 20mg tid
 Vytorin 10/40mg
 ASA 81mg

SMOKER: Y OR N PKGS 1 YRS 55+

LAST CXR: 2010

LAST GYN:

NAME GYN:

LAST MAMMOGRAM:

LAST BONE DENSITY:

LAST PSA:

DIABETIC EYE EXAM:

NAME OPTOMETRIST:

LAST COLONOSCOPY: 2007

LAST TETANUS: 2006

LAST PNEUMOVAC: 2007

RONALD H. LITTLEFIELD, M.D., LLC
319 NORTH PINE STREET
SPARTANBURG, SOUTH CAROLINA 29302

PATIENT NAME: WILLIAM FARR
CHART NO.:

DATE OF VISIT: 10/07/2010

Pulmonary function study revealed moderately severe COPD.

RONALD H. LITTLEFIELD, M.D.

RHL/jm



CRSC15982

Ex:

PA

Se: 1/2

Im: 1/1

Piedmont Imaging Inc

Farr William

M 08-729514

Acc: 08-1102087

2010 Oct 07

Acq Tm: 13:06:37.500

CHEST

LOSSY

L

Lin:DCM / Lin:DCM / Id:ID

W:4096 L:2048

IMAGE MAY NOT BE TO SCALE

Piedmont CXR 001

CRSC15982

Ex:

PA

Se: 2/2

Im: 1/1

CHEST

(L)

LOSSY

Piedmont Imaging Inc

Farr William

M 08-729514

Acc: 08-110208T

2010 Oct 07

Acq Tm: 13:07:37.625

Lin:DCM / Lin:DCM / Id:ID

W:4096 L:2048

IMAGE MAY NOT BE TO SCALE

Piedmont CXR 002



PIEDMONT IMAGING

Your Choice for MRI & CT Scans

PATIENT: Farr, William
DOB: [REDACTED]
MRN: 729514
PHYSICIAN: Ronald Littlefield, MD
EXAM DATE: 10/7/2010

CHEST X-RAY

HISTORY: 68-year-old male with trouble breathing. History of smoking for over fifty years.

TECHNIQUE: Two views (PA and lateral upright).

FINDINGS: Confluent patchy and streaky radiopacities are seen in the anterior segment of the right upper lobe extending anteriorly from the pulmonary hilum. There is slight prominence of the central bronchovascular markings. The left and remaining right lung fields are well aerated without pulmonary masses, consolidation, atelectasis, or pneumonitis apparent. No pleural effusion is seen. No evidence of pneumothorax. No hyperinflation noted. There is borderline cardiomegaly. There is subtle calcification of the aortic arch. No hilar or mediastinal adenopathy or mass lesions evident. The visualized skeleton appears grossly intact.

IMPRESSION: Confluent patchy and streaky radiopacities in the anterior segment of the right upper lobe. While this may be chronic in nature, early or evolving pneumonitis cannot be excluded. In addition, the possibility of an underlying occult pulmonary mass cannot be totally excluded. Short-term followup chest x-rays are highly recommended and if symptoms and/or radiographic findings persist and/or progress, a CT scan of the chest with and without contrast may be helpful in further evaluation.

Raul Ceballos Jr., M.D.
RC / cm

DD: 10/7/2010
DT: 10/7/2010
Job: 11476714

This report has been electronically reviewed and signed.



684 North Pine Street ♦ Spartanburg, SC 29303 ♦ Telephone (864) 542-0033 ♦ Fax (864) 542-0025



8-729514-1102087-005

Patient Chief Complaint Form - General

Name: Farr, WilliamAge: 68 yrsDate: 10/07/2010

Please list all of your symptoms relating to today's scan:

Breathing Problem

What caused this problem?

?

Did your doctor tell you what he/she thinks caused your problem?

No

If so, what?

Does anything make your symptoms worse?

walking

If so, what?

Does anything make your symptoms better?

Rest

If so, what?

For Women only:

Are you pregnant or possibly pregnant?

Have you had any of the following studies?

If yes, complete below:

Type	Approximate Date	Place of Service
X-ray	<u>?</u>	<u>Spokane Regional</u>
Bone scan	<u>?</u>	
Myelogram		
Cat scan		
MRI	<u>?</u>	<u>Spokane Regional</u>



PIEDMONT IMAGING

Your Choice for MRI & CT Scans

PATIENT: Farr, William
DOB: [REDACTED]
MRN: 729514
PHYSICIAN: Ronald Littlefield, MD
EXAM DATE: 10/7/2010

CHEST X-RAY

HISTORY: 68-year-old male with trouble breathing. History of smoking for over fifty years.

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IMPRESSION: Confluent patchy and streaky radiopacities in the anterior segment of the right upper lobe. While this may be chronic in nature, early or evolving pneumonitis cannot be excluded. In addition, the possibility of an underlying occult pulmonary mass cannot be totally excluded. Short-term followup chest x-rays are highly recommended and if symptoms and/or radiographic findings persist and/or progress, a CT scan of the chest with and without contrast may be helpful in further evaluation.

Raul Ceballos Jr., M.D.
RC/cm

DD: 10/7/2010
DT: 10/7/2010
Job: 11476714

This report has been electronically reviewed and signed.





8-729514-1102087-007

Patient Name: Farr, William

DOB:

DOS: 10/7/2010 1:00 PM

CPT Code: 71020 - XR-Chest 2 views.

DOCTOR'S ORDER

PIEDMONT IMAGING

Your Choice for MRIs & CT Scans

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Spartanburg, SC 29303
864.542.0033 Fax 864.542.0025

PIEDMONT IMAGING

at Westgate

Your Choice for Diagnostic Imaging
225 East Blackstock Road
Spartanburg, SC 29301
864.542.0033 Fax 864.542.0025

251-0531

NAME William Farr

DATE 10-6-10

MRI

Contrast: ☐ Both ☐ No
☐ At Radiologist Discretion

- ☐ Brain ☐ Knee: Rt/Lt
☐ Cervical sp ☐ Shoulder: Rt/Lt
☐ Thoracic ☐ Ankle: Rt/Lt
☐ Lumbar ☐ Elbow: Rt/Lt
☐ MRA
☐ Other: _____

NAME _____

DATE _____

OPEN MRI

Contrast: ☐ Both ☐ No
☐ At Radiologist Discretion

- ☐ Brain ☐ Knee: Rt/Lt
☐ Cervical ☐ Shoulder: Rt/Lt
☐ Thoracic ☐ Ankle: Rt/Lt
☐ Lumbar ☐ Elbow: Rt/Lt
☐ Other: _____

CT

Contrast: ☐ Both ☐ No
☐ At Radiologist Discretion

- ☐ Head ☐ Abd. & Pelvis
☐ Head & Orbits ☐ Chest
☐ Full Sinus ☐ Soft Tissue Neck
☐ Limited Sinus ☐ Lumbar
☐ CTA ☐ Calcium Scoring
☐ Other: _____

XRAY

- ☐ Chest ☐ L-Spine
☐ C-Spine ☐ Hip: Rt/Lt
☐ T-Spine ☐ Knee: Rt/Lt
☐ Other: _____

XRAY

- ☒ Chest ☐ L-Spine
☐ C-Spine ☐ Hip: Rt/Lt
☐ T-Spine ☐ Knee: Rt/Lt
☐ Other: DX: 466

Symptoms/Comments _____

Physician's Signature _____

Appt. Time _____

Please call office at 542-0033 before your appointment. Please bring this Physician's Order with you. Thank you.



8-729514-1102087-001

PATIENT DEMOGRAPHIC INFORMATION

Patient Name: <u>Farr, William</u>		Date of Birth: <u> </u>		SSN: <u> </u>	
Patient Address: <u>1032 JONESVILLE LOCKHANT HWY</u>					
Patient City: <u>UNION</u>		State: <u>SC</u>		Zip: <u>29379</u>	
Email: <u> </u>		Email2: <u> </u>			
Patient Phone: Primary <u>(864) 251-0531</u>		Secondary <u> </u>		Sex <u>M</u> Approx. Weight: <u>137</u>	
Marital Status: <u>MARRIED</u>		Employer: <u> </u>		Employer Phone: <u> </u>	
Referring Physician: <u>LITTLEFIELD MD, RONALD</u>		Next Appointment: <u> </u>			
Emergency Contact Name: <u>LISA FARR</u>		Emergency Contact Relationship: <u>DAUGHTER</u>			
Emergency Contact Address: <u>1032 JONESVILLE LOCKHANT HWY. UNION, SC</u>					
Phone: <u>216-2789</u>					

Responsible Party: <u>Farr, William</u>		Date of Birth: <u> </u>	
Resp. Party Address: <u> </u>			
Resp. Party City: <u> </u>		State: <u> </u> Zip: <u> </u>	
Resp. Party Phone: Primary <u>(864) 251-0531</u>		Secondary: <u> </u>	

Employment: ☒ Employed Full-Time ☐ Employed Part-Time ☐ Retired
 ☐ Student Full-Time ☐ Student Part-Time ☐ Currently Unemployed

Is this visit related to a car accident? ☐ Yes ☐ No Is this visit related to a work injury? ☐ Yes ☐ No

State where accident occurred: Date of Accident or Injury:

Primary Insurance Information

Primary Insurance Co: Palmetto GBA Member Name: Farr, William
 SSN: Date of Birth: Relation to Patient: SELF
 Sex: M Group Name:
 Group Number: Member ID#: Policy Effective Date:

Secondary Insurance Information

Secondary Insurance Co: Member Name:
 SSN: Date of Birth: Relation to Patient:
 Sex: Group Name:
 Group Number: Member ID#: Policy Effective Date:

CLINICAL ROUTER



8-729514-1102087-004

Piedmont SC

(864) 542-0033 Phone

(864) 542-0025 Fax

Date of Service: 10/7/2010



8-729514-1102087-004

Patient Name: Farr, William		Date of Birth: [REDACTED]	
Patient ID: 729514	Patient MRN:	CI#	Sex/Age: M / 68 yrs
Scheduled Exam: 71020 XR-Chest 2 views			
Exam Performed: same or _____			
Referring Physician: LITTLEFIELD MD, RONALD		Next Appt: <u>W/Results</u>	
Phone: (864) 582-8900	Fax: (864) 582-8555	☐ STAT ☐ CALL REPORT	
DIAGNOSIS FROM DOCTORS ORDER: _____			PT WT: _____
HISTORY: _____			
SURGICAL: ☐ No Surgery ☐ Appendectomy ☐ Renal ☐ Lung ☐ Cardiac ☐ Brain ☐ Spine ☐ Cholecystectomy ☐ Hysterectomy ☐ Joint/Extremity on present scan Other: _____			
Details: _____			
PRIOR FILMS: ☐ No ☐ Yes ☐ With Present Study ☐ Awaiting films from outside site			
CONTRAST ALLERGIES: ☐ None ☐ Iodinated ☐ Gad			
Details: _____			
Contrast: ☐ Yes ☐ No ☐ Oral Iodinated (Gastro) ☐ Oral Barium Based (Barocat) ☐ Intraarticular ☐ IV Type: _____ Dose: _____ ☐ Radiopharmaceutical Type: _____ Dose: _____			
Other Drugs Used: _____			
EXAM COMPLICATIONS: ☐ None ☐ Other ☐ Contrast Reaction ☐ IV Extravasation			
Details: _____			
Exam Series: _____	Images: _____	Images Right to Left ☐	Tech: _____
FILMS TO BE READ BY: _____		Images Left to Right ☐	
TELERAD STUDY TO: _____		FILM DELIVERY: None	
☐ CALL BACK ☐ DICTATED, CALL BACK DICTATED BY: 			
RADIOLOGIST NOTES: _____			

v3.0



8-729514-1102087-002

Release and Authorizations

Authorization for Treatment:

I present myself or child for whom I am guardian for diagnostic procedure(s) as may be ordered by the referring physician, his/her assistants, or his/her designee and authorize any emergency medical care. I am aware that practice of medicine is not an exact science and I acknowledge that no guarantees have been made as to the results of the examination by the center.

Authorization for Release of Information:

I authorize the center to disclose all or any parts of the patient's medical record to listed insurance companies, government agencies, the patient's employer or any agency conducting reviews concerning Worker's Compensation care and any review agency which conducts practice utilization review under an agreement with the patient's employer or other payment source. I also understand that I may revoke this authorization by providing written notice to this practice.

Medicare/Medicaid Patient's Certification:

I certify that the information given by me in applying for payment under Title XVIII and XIX of the Social Security Act is correct. I request payment be made directly to the provider of services on my behalf and I authorize said provider to release any and all information necessary regarding the treatment and services provided as started below.

Assignment of Benefits:

I hereby authorize payment directly to the center by my insurance company(s). In the event an overpayment is made from more than one insurance company, I understand the overpayment will be sent to the appropriate payer.

Insurance:

The center will file your insurance as a service to you. If our office does not hear from your insurance company within 30 days, we request your help in contacting your insurance company to resolve the payment delay. The insurance plan is a contract between you and your insurance company. We must hold you responsible for any balance due.

Payment of Services:

I understand I am financially responsible for all charges and fees related to the services rendered to me by the center. I further understand that the payment in full is expected upon receipt of the first statement which may include co-payments, deductibles and any services not covered by insurance.

Notice of Privacy Practices:

I hereby acknowledge that I have received a copy of the center's Notice of Privacy Practices.

Valuables:

I (we) understand that the center is not responsible for valuables and personal property brought to the facility.

Married or Dependent Patients:

I hereby consent to the release of any patient-related or financial information about me to my spouse (if married) or to my Parents (if a dependent child).

Patient/Guardian Name (please print) Farr, William

Signature

William Farr

Date 10/07/2010

Witness

Steph B. Fisher

Date 10/07/2010

Piedmont SC

Patient Information

Patient Name: Farr, William SSN: [REDACTED]
 Patient Phone: (864) 251-0531 DOB: [REDACTED] Sex/Age: M / 68 yrs MRN: 729514
 Last Appt. Date: [REDACTED] Resource: SC-CR Patient ID: 729514
 Insurance: Medicare SC Prim CoPay: 0.00 Coins: 0.00 DED: 0.00 PreCert#: [REDACTED] Total: 0.00
 Referring Physician: LITTLEFIELD MD, RONALD (864) 582-8900 Appt. Date/Time: 10/7/2010 1:00:00 PM

Appt Notes:

WALK IN

Films Delivery: None

CPTCodes: 1)71020 XR-Chest 2 views

☐ Archive☐ Discm☐ Copies☐ CD

Comments:

Technologist: CCContrast Dr.: [REDACTED]Creatinine Results: [REDACTED]

Archive #:

MOD #:

L or R Ext

Contrast Type:

Amount:

Reading Dr.: CeballosDate: 10-7-10

74000 XR-Abdomen, 1 AP view
 74010 XR-Abdomen, AP and addtl oblique and cone
 74020 XR-Abdomen, comp, inc decubitus and/or erect
 74022 XR-Abdomen, comp acute abd series, 1view chest
 73050 XR-AC joints, bilateral
 73600 XR-Ankle, 2 views
 73610 XR-Ankle, complete, min 3 views
 77072 XR-Bone age studies (single AP of hand & wrist)
 72040 XR-C-Spine, 2-3 views
 72050 XR-C-Spine, min 4 views
 72052 XR-C-Spine, complete, inc oblique, flex and/or ext
 71010 XR-Chest, 1 view
 71020 XR-Chest, 2 views, frontal and lateral
 71022 XR-Chest, 2 views, frontal and lateral, w obliques
 71030 XR-Chest, complete, min 4 views
 71035 XR-Chest, special views
 73000 XR-Clavicle, complete
 73070 XR-Elbow, 2 views
 73080 XR-Elbow, complete, min 3 views
 70140 XR-Facial bones, 1-2 views
 70150 XR-Facial bones, complete, min 3 views
 73550 XR-Femur, 2 views
 73140 XR-Finger(s), min 2 views
 73620 XR-Foot, 2 views
 73630 XR-Foot, complete, min 3 views
 73090 XR-Forearm, 2 views
 73120 XR-Hand, 2 views
 73130 XR-Hand, min 3 views
 73650 XR-Heel (calcaneus), min 2 views
 73500 XR-Hip, unilateral, 1 view
 73510 XR-Hips, unilateral, min 2 views
 73520 XR-Hips, bilateral, min 2 views; inc AP Pelvis
 73080 XR-Humerus, min 2 views
 77077 XR-Joint survey, single view, 2 or more joints
 73560 XR-Knee, 1-2 views
 73562 XR-Knee, 3 views
 73564 XR-Knee, complete, 4 or more views
 73565 XR-Knee, bilateral, standing, AP
 72100 XR-L-spine, 2-3 views
 72110 XR-L-spine, min 4 views
 72114 XR-L-spine, complete, inc bending views
 72120 XR-L-spine bending views only, min 4 views
 73592 XR-Lower extremity, infant, min 2 views
 70100 XR-Mandible, limited, 1-3 views
 70110 XR-Mandible, complete, min 4 views

70120 XR-Mastoids, 1-2 views, per side
 70130 XR-Mastoids, min 3 views, per side
 70160 XR-Nasal bones, complete, min 3 views
 70360 XR-Neck, soft tissue
 70200 XR-Orbits, complete, min 4 views
 77074 XR-Osseous Survey, limited
 77075 XR-Osseous Survey, complete
 77076 XR-Osseous Survey, Infant
 72170 XR-Pelvis, 1-2 views
 72180 XR-Pelvis, complete, min 3 views
 73540 XR-Pelvis and hips, Infant or child, min 2 views
 71100 XR-Ribs, unilateral, 2 views
 71101 XR-Ribs, unilateral, inc PA chest, min 3 views
 71110 XR-Ribs, bilateral, 3 views
 71111 XR-Ribs, bilateral, inc PA chest, min 4 views
 72220 XR-Sacrum and Coccyx, min 2 views
 73010 XR-Scapula, complete
 73020 XR-Shoulder, 1 view
 73030 XR-Shoulder, complete, min 2 views
 72200 XR-SI joints, 1-2 views
 72202 XR-SI joints, 3 or more views
 70210 XR-Sinuses, 1-2 views
 70220 XR-Sinuses, complete, min 3 views
 70250 XR-Skull, 1-3 views
 70260 XR-Skull, complete, min 4 views
 72069 XR-Spine, Scoliosis study, thoracolumbar, standing
 72090 XR-Spine, Scoliosis study, inc supine and erect views
 72010 XR-Spine, entire, survey study, AP and lat
 72020 XR-Spine, single view, any level
 71120 XR-Sternum, 1-2 views
 71130 XR-Sternoclavicular joint or joints, min 3 views
 76098 XR-Surgical specimen
 72070 XR-T-spine, 2 views
 72072 XR-T-spine, 3 views
 72074 XR-T-spine, min 4 views
 72080 XR-Thoracolumbar, 2 views
 73590 XR-Tibia and Fibula, 2 views
 70328 XR-TMJ, open and closed mouth, unilateral
 70330 XR-TMJ, open and closed mouth, bilateral
 73660 XR-Toes, min 2 views
 73092 XR-Upper extremity, infant, min 2 views
 73100 XR-Wrist, 2 views
 73110 XR-Wrist, complete, min 3 views
 AV991 XR-Metal Screening
 AV997 XR-Additional Views

Facility Name: Piedmont Imaging IncPatient Name: Farr, WilliamID: 729514 MRN: 729514DOS: 10/7/2010 12:00:00 AM

v2.2



8-729514-1 102087-003

Remit payment to:
Piedmont Imaging Inc
PO Box 933548
Atlanta, GA 31193-3548
(877) 527-9375

Patient Receipt -877-
Wednesday, June 12, 2013

Amount Due	Amount Paid
\$0.00	\$0.00

William Farr
1032 Jonesville Lockhart Hwy
Union, SC 29379

Date	Description	Check #	Fee	Units	Insurance	Patient
	William Farr(729514)/Raul Ceballos MD/PIE057086					
	Referring Physician: Ronald Littlefield MD					
10/07/2010	XR-Chest 2 views		\$110.00	1.0	\$110.00	\$0.00
10/26/2010	Transfer from Insurance	880961383			-\$5.91	\$5.91
10/26/2010	Payment from Insurance from Medicare SC Primary	880961383			-\$23.64	\$0.00
10/26/2010	Insurance Adjustment from Medicare SC Primary	880961383			-\$80.45	\$0.00
11/30/2010	Write Off-Small Balance Adjustment from Small Balance Write-Off				\$0.00	\$0.00
11/30/2010	Write Off-Small Balance Adjustment from Small Balance Write-Off				\$0.00	-\$5.91
	Balance:				\$0.00	\$0.00

Thank you for your payment. Have a nice day!

Deposit	0-30	31-60	61-90	91-120	Over 120	Total Balance	Ins. Balance	Pat. Balance
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Piedmont Imaging Inc * 684 N Pine St * Spartanburg, SC 29303-3745 * (864) 542-0033

Def. Prod. Piedmont Imaging - 0012

Piedmont 0012

SPARTANBURG REGIONAL MEDICAL CENTER
Radiology Report
North Grove

-878-

NAME: FARR, WILLIAM GAULT

ORDERING PHYSICIAN: LITTLEFIELD, RONALD H

LOC: OPT

Pt. Type: OPT

DOB: [REDACTED]

NORTH GROVE RADIOLOGY

UNIT #: 000478684

CI#: 2876972

AN#: S1028400749

FINAL

Exam

65095 NG CT LUNG W/CONTRAST
71260

Date: 10/11/10 1115

Ord Diag: 518.89-OTHER LUNG DISEASE NEC

History: Colon cancer. Evaluate for metastatic disease.

CT chest with contrast dated 10/11/10.

Spiral images were obtained through the chest during bolus IV contrast administration. 100 mL of Optiray-320 were administered intravenously without adverse patient reaction. Contrast was given for optimal opacification of vascular structures and solid organs.

Findings: There is no significant axillary, mediastinal, or hilar adenopathy. There is atelectasis in the anterior segment of the right upper lobe with adjacent patchy infiltrate. This is most confluent medially adjacent to the mediastinum. The lungs are otherwise clear. There is no pleural fluid. There is no significant axillary, mediastinal, or hilar adenopathy, but there is some soft tissue in the right hilum. An endobronchial lesion would be a possibility, and bronchoscopy may be the best study for further assessment. These findings would not be typical of metastatic disease from colon cancer but could be a primary lung cancer.

In the upper abdomen, there is a well defined 16mm lesion in the left lobe of the liver and another cyst is seen in the caudate lobe of the liver measuring 16 mm in maximal dimension as well. No other focal hepatic abnormalities are seen. The spleen, pancreas, and adrenal glands are unremarkable. Small nodules adjacent to the spleen are probably small accessory splenules. No adrenal or renal mass is evident, but the left kidney is incompletely seen on this study. Bowel

Page 1

SPARTANBURG REGIONAL HEALTHCARE SYSTEM
SPARTANBURG REGIONAL MEDICAL CENTER
Radiology Report
North Grove

-879-

NAME: FARR, WILLIAM GAULT

ORDERING PHYSICIAN: LITTLEFIELD, RONALD H

LOC: OPT

Pt. Type: OPT

DOB: [REDACTED]

NORTH GROVE RADIOLOGY

UNIT #: 000478684

CI#: 2876972

AN#: S1028400749

Checkin-Exam Code Summary
2876972-65095

is unremarkable.

Bone window images demonstrate no significant bony abnormality suggestive of metastatic disease.

Impression: Atelectasis with possibly adjacent infiltrate in the right upper lobe. This could all be inflammatory, but the collapse is worrisome for an endobronchial lesion, possibly a primary lung cancer. Bronchoscopy is recommended for further assessment. No significant abnormality is seen otherwise in the chest.

In the abdomen, there are 2 cysts in the liver, but no findings suggestive of hepatic metastases are seen. The remainder of the upper abdomen is normal.

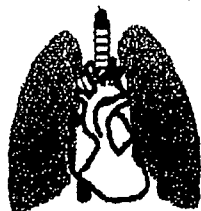
Transcriptionist- n/a

Reading Radiologist- LAWRENCE WARRENJR MD

Releasing Radiologist- LAWRENCE WARRENJR MD

Released Date Time- 10/11/10 1137

Page 2



Lung and Chest Medical Associates
 Lung and Chest Medical Associates
 2030 North Church Place
 Spartanburg, SC 29303
 864-582-6858

- Devane
- Littlejohn

New Patient Form

Date: 10-14-10

Last Name: FARR First Name: William

Middle Initial: B. How do you prefer to be addressed? _____

Date of Birth: _____

Street Address: 1032

City: 1032 Jonesville Lockhart Hwy State: SC Zip: 29379

Who referred you to our office? Littlefield

Who is your primary care doctor? _____

How did you hear about our office? _____

I. Why are you here today (Chief Complaint)? Check-up

1. How long have you had this health problem? _____

2. How did it start? _____

3. Has anything made it better or worse? _____

II. Current Medications (list all prescribed and over the counter medications including inhalers and vitamins):

Klot-Con- m20, Nifedipine ER- 30mg,
Triamterene-HCTZ 37.5-25
Vytorin 10-40 mg
Bayer 81 mg.

III. Medical History (Please circle all that apply):

Asthma
 Allergies
 Abnormal Chest X-Ray
☒ COPD
 Sinusitis
 Lung Cancer
 TB (Tuberculosis)
 Pneumonia
 Sleep Apnea
 Narcolepsy
 Chronic Bronchitis
 Cystic Fibrosis
☒ Cough
☒ Asbestosis
☒ Lung Injury
 Sarcoid
 Cataracts
 Other: _____

Heart Attack
☒ CHE (Heart Failure)
☒ High Blood Pressure
 Pulmonary Hypertension
 Pulmonary Embolus
 DVT (Blood Clot in leg)
 Atrial Fibrillation
 Mitral Valve disease
 Hole in Heart
 Heart murmur
 Aortic Valve disease
 AAA (Aortic aneurysm)
 Circulation Problems
 Stroke or TIA
 Clotting Problems
 Vascular Disease
 Glaucoma

Cancer of:
 Brain
 Breast
 Head and Neck
☒ Stomach
☒ Colon
 Kidney
 Prostate
 Uterus (Womb)
 Skin
 Lymphoma/Leukemia
 Ovary
 Other
 Diabetes
 Thyroid Problems
 Adrenal problems

Peptic Ulcer Disease
 Crohn's Disease
 Ulcerative Colitis
 Osteoporosis
 Pancreatitis
 Seizures
 Parkinson's Disease
 Osteoarthritis (DJD)
 Rheumatoid Arthritis
 Lupus (SLE)
 Scleroderma
 Vasculitis
 Scoliosis
 Muscular Dystrophy
 Kidney Failure
 MRSA

WAL
Off
lines
up
g
g
ob
OTB
OPPD
Quin
but

IV. Allergies to medications or foods (Please explain reaction):

V. Surgical History (Please circle all that apply and add month/year):

Lung Surgery _____	Hysterectomy _____	Spine surgery _____
Cardiac Stent _____	Mastectomy _____	Tonsillectomy (T&A) _____
Pacemaker _____	Breast Biopsy _____	Sinus surgery _____
AICD _____	Prostate Surgery _____	Snoring surgery _____
Heart By Pass _____	Gallbladder _____	Transplant _____
Abdominal Aortic Aneurysm _____	Knee Replacement _____	Thyroid _____
Vascular graft _____	Hip Replacement _____	Appendectomy _____
Gastric By-Pass _____	Hiatal Hernia Repair _____	(Hernia) _____
Implanted Defibrillator _____	Heart Valve replacement _____	
Other <u>Colonoscopy</u> _____		

VI. Other Hospitalizations (Give reason and month/year):

VII. Family History:

Mother <u>Alive/Deceased</u>	Age/Age at death _____	Health Conditions/Cause of death _____
Father <u>Alive/Deceased</u>	Age/Age at death _____	Health Conditions/Cause of death _____
Sisters Ages _____	Health Conditions _____	
Brothers Ages _____	Health Conditions _____	

Family Medical Conditions (Circle those that apply):

Asthma _____	Stroke _____	Kidney disease _____
Hay fever/Allergies _____	Diabetes _____	Mental Illness _____
Emphysema _____	TB (Tuberculosis) _____	Pulmonary Fibrosis (IPF) _____
Lung Cancer _____	Clotting problems _____	Other Cancer: _____
High Blood Pressure _____	Vascular Disease _____	
Heart Disease _____	Sleep Apnea _____	Other: _____

VIII. Social History:

- Smoking History:** Never Past: Year quit: _____ Current
Age started _____ Maximum packs/day _____ Current packs/day _____
How many years did you smoke? _____
Do you want help stopping? _____
Does anyone else in your home smoke? Yes No
- Marital Status (circle):** Married Single Divorced Separated Widowed
- Education Level (circle):** Grade School 8th grade High School Some College
College Degree Graduate Degree
- Occupation (circle):** Full-time Part-time Retired Disabled Unemployed Student
Types of work done: _____
Exposures: Dust Fumes Solvents Silica Paint Asbestos Dyes Chemicals
Military Service: No Yes: _____
- Alcohol use (circle):** Never Past Current Amount: _____
- Recreational Drug use (circle):** Never Past Current
Type (circle): cocaine crack marijuana heroin meth narcotics
- Regular Exercise:** _____
- Hobbies:** _____
- Travel outside Upstate:** _____

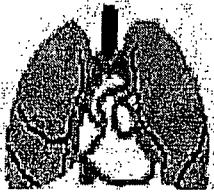
IX. Review of Systems (Circle all that apply):

1. **Sleep History:** Snores Day-time Sleepiness Fatigue on Waking
2. **Constitutional:** Fever/chills Weight gain: Amount: _____
Night sweats Weight loss: Amount: _____
3. **ENT:** Dentures Nasal discharge Hearing loss
Sore throat Sinus Pain
4. **Respiratory:** Shortness of breath Dry cough Productive cough
Wheezing Increased Wheezing Chest tightness
Blood Clots in Lungs Blood Clots in Legs Chest wall pain
TB exposure TB skin test: Positive Negative
Home nebulizer Home oxygen Home ventilator
5. **Cardiology:** Heart trouble High Blood Pressure Leg swelling
Palpitations
6. **GI:** Nausea Vomiting Heartburn Diarrhea
7. **Urology:** Kidney stones Kidney disease Chronic dialysis
8. **Neurology:** Memory Loss Tingling/Numbness
CVA/TIA Seizures
9. **Endocrinology:** Diabetes Hypothyroid Hyperthyroid
10. **Dermatology:** Rash Hives Bruises Skin Cancer
11. **Allergy:** Runny nose Scratchy throat Previous skin testing
12. **Musculoskeletal:** Leg cramps Disc disease
Cane Walker Crutch Wheelchair Scooter
13. **Ophthalmology:** Glasses/Contacts Glaucoma Cataracts Macular degeneration
14. **Psychology:** Depression Anxiety

X. **Vaccines:** Pneumovac Date: _____ Flu Date: 10-2-10
Tetanus Date: _____

XI. Do you have a living will? YES

XII. **Other Information** (Please write anything else that the doctor needs to know below):



FARR, WILLIAM G

68 Y old Male, DOB: [REDACTED]

1032 JONESVILLE LOCKHART HWY, UNION, SC-29379

Home: 864-251-0531

Guarantor: FARR, WILLIAM G Insurance: MEDICARE Payer

ID: SMSCo

PCP: RONALD LITTLEFIELD

Appointment Facility: Lung and Chest Medical Associates

10/14/2010

Progress Notes: RAUL B CRUZ, MD

Current Medications

nifedipine 30 mg tablet, extended release 1 tab(s) once a day
Aspir 81 81 mg enteric coated tablet 1 tab(s) once a day
Klor-Con 20 meq 2 cap bid
Triam/HCTZ 37.5/25 1 tab QD
Vytorin 10 mg-40 mg tablet 1 tab(s) once a day
Medication List reviewed and reconciled with the patient

Past Medical History

Copd
Cough
Hypertension
Colon cancer

Surgical History

hernia repair
colostomy for colon cancer radiation and chemo tx 1989
nasal surgery

Family History

Mother: deceased old age
Father: deceased cancer bone
Siblings: 3 brother, 3 sister
History positive for: hypertension, cancer.

Social History

Tobacco Use: yes, PPD: 1, years: 50.
Marital status: Married.
Education level: 11t.
Occupation: retired.
Anyone else in home smoke?: no.
Alcohol: reports, beer.
Other MDs: Primary care Dr Littlefield, Dr Vidito.

Allergies

NKDA

Review of Systems

SLEEP HISTORY:

Snoring c/o. no Day-Time Sleepiness.
no Fatigue on Wakening.

CONSTITUTIONAL:

no Fever/Chills. no Night sweats.

ENT:

Dentures yes. no Hearing loss.

RESPIRATORY:

c/o Shortness of breath, worse with exertion. c/o Cough, Productive, occasional, clear secretions. Wheezing c/o. no Chest Tightness. no Pleuritic Chest Pain. no History of Pulmonary Embolus. no History of DVT. no TB

Reason for Appointment

1. PUL EVAL Dr Littlefield referred for abnormal chest CT

History of Present Illness

Interim History:

Mr Farr is referred from Dr. Littlefield's office for evaluation of an abnormal ct scan. He is a quiet 68 year old male, chronic smoker, colon cancer survivor of 12 years, comes in after a change of physicians from Dr. Devane to Dr Littlefield a couple of months ago. A routine cxr was done (tobacco smoker, history of cancer and chronic cough) was done that showed an infiltrate in the RML prompting a ct scan that showed a mass like infiltrate in the RML touching the pericardium and possible partial RML atelectasis. He has no obvious weight loss, hemoptysis, fever, chills, pleurisy. Cough is chronic with scanty white sputum. No new hoarseness. He still has a colostomy. NO obvious wheezing. Has dyspnea on mild exertion. NO recent er visits, prednisone use, no previous inhaler use. PFT shows mixed moderately severe obstruction and restriction with a significant bronchodilator response.

Vital Signs

Wt 138.2, BP 120/70, HR 78, O2 sat 94%, FIO2 .21, FVC 1.96, FEV1 1.54, FEV1/FVC% 79%, Ht 64", BMI 23.72.

Physical Examination

GENERAL:

General Appearance: No acute distress, kyphotic. Build: average built.

HEENT:

Head: normocephalic. Pharynx: oropharynx clear. Pupils: symmetric. Sclera: anicteric. EOM: intact. Nose: normal. Nasal septum: midline. Oral cavity: normal.

NECK:

Neck: supple, no jugular venous distention, trachea midline. Cervical lymph nodes: normal. Thyroid: not enlarged.

CHEST:

Shape and expansion: symmetrical chest expansion. Wheezes: no. Rales: no. Rhonchi no.

HEART:

PMI: PMI not displaced. Rhythm: regular. Heart sounds: tones normal. Murmurs: no.

ABDOMEN:

Exam shows: no organomegaly. Tenderness: no. Guarding: no. Liver, Spleen: not palpable.

History- Colon cancer. Evaluate for metastatic disease.

CT chest with contrast dated 10/11/10.

Spiral images were obtained through the chest during bolus IV contrast administration. 100 mL of Optiray-320 were administered intravenously without adverse patient reaction. Contrast was given for optimal opacification of vascular structures and solid organs.

Patient: FARR, WILLIAM G DOB: [REDACTED] Progress Note: RAUL B CRUZ, MD 10/14/2010

Note generated by eClinicalWorks EMR/PM Software (www.eClinicalWorks.com)

skin test.

CARDIOLOGY:

no Heart Trouble. Hypertension reports.
no Leg edema.

GASTROENTEROLOGY:

no Nausea. no Vomiting. no Heartburn.
no Diarrhea. Positive for colostomy.

UROLOGY:

no Hx kidney stones. no Hx of kidney disease.

NEUROLOGY:

no CVA, TIA. no Seizures.

ENDOCRINOLOGY:

no Diabetes. no Hx of Hypothyroid.

DERMATOLOGY:

no Rash. no Hives. Skin cancer
reports, removed from arms and face.

ALLERGY:

no Runny nose. no Scratchy throat. no Itchy
eyes.

OPHTHALMOLOGY:

Glasses/contacts no. no Glaucoma.
no Macular degeneration.

PSYCHOLOGY:

no Depression. no Anxiety.
Reviewed by: Anne Purser.

Findings- There is no significant axillary, mediastinal, or hilar **884-**adenopathy. There is atelectasis in the anterior segment of the right upper lobe with adjacent patchy infiltrate. This is most confluent medially adjacent to the mediastinum. The lungs are otherwise clear. There is no pleural fluid. There is no significant axillary, mediastinal, or hilar adenopathy, but there is some soft tissue in the right hilum. An endobronchial lesion would be a possibility, and bronchoscopy may be the best study for further assessment. These findings would not be typical of metastatic disease from colon cancer but could be a primary lung cancer.

In the upper abdomen, there is a well defined 16mm lesion in the left lobe of the liver and another cyst is seen in the caudate lobe of the liver measuring 16 mm in maximal dimension as well. No other focal hepatic abnormalities are seen. The spleen, pancreas, and adrenal glands are unremarkable. Small nodules adjacent to the spleen are probably small accessory splenules. No adrenal or renal mass is evident, but the left kidney is incompletely seen on this study. Bowel is unremarkable.

Bone window images demonstrate no significant bony abnormality suggestive of metastatic disease.

Impression- Atelectasis with possibly adjacent infiltrate in the right upper lobe. This could all be inflammatory, but the collapse is worrisome for an endobronchial lesion, possibly a primary lung cancer. Bronchoscopy is recommended for further assessment. No significant abnormality is seen otherwise in the chest.

In the abdomen, there are 2 cysts in the liver, but no findings suggestive of hepatic metastases are seen. The remainder of the upper abdomen is normal.

Assessments

1. Mass in chest NOS - 786.6 (Primary)
2. COPD [Chronic obstructive pulmonary disease] - 496
3. Tobacco abuse - 305.1

Treatment

1. Mass in chest NOS

His lung mass is suspicious for lung cancer (DDX include infection and inflammatory conditions COP) . He will be taken off aspirin and a biopsy will be scheduled on Tuesday. I discussed the risks of the procedure with him and a consent form is signed.

2. COPD [Chronic obstructive pulmonary disease]

Start Proventil HFA aerosol with adapter, CFC free 90 mcg/inh, 2 puff(s), inhaled, 4 times a day, 30 day(s), 1, Refills 11
will start with albuterol and add an ICS spiriva next visit.

3. Tobacco abuse

not decided to quit yet, counselled and hand out given. will start cessation aids next visit once he makes up his mind.

Labs

Lab: PFT moderate to severe obstruction, possible restriction, recommend
LV, DLCO

PRE FVC	1.96/54%
PRE FEV1	1.54/54%
PRE % FEV1/FVC	79%
POST FVC	2.29/63%
POST FEV1	1.68/58%
POST % FEV1/FVC	73%

Gaffney, Jamie 10/14/2010 8:25:46 AM > CRUZ, MD, RAUL B, MD
10/14/2010 8:54:36 AM >

Preventive Medicine

Counseling: Pharmacy CVS Union.

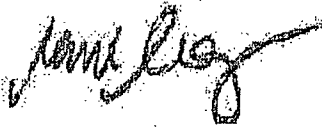
Immunizations: Pneumococcal 2006. Influenza 2010.

Procedure Codes

94060 BRONCHOSPASM

Follow Up

friday next week



Electronically signed by DR RAUL CRUZ, MD on 03/06/2013 at
10:02 AM EST

Sign off status: Pending

Lung and Chest Medical Associates
2030 North Church Place
Spartanburg, SC 293032799
Tel: 864-582-6858
Fax: 864-542-9043

Patient: FARR, WILLIAM G DOB: [REDACTED] Progress Note: RAUL B CRUZ, MD 10/14/2010

Note generated by eClinicalWorks EMR/PM Software (www.eClinicalWorks.com)

RONALD H. LITTLEFIELD, M.D., LLC
319 NORTH PINE STREET
SPARTANBURG, SOUTH CAROLINA 29302

PATIENT NAME: WILLIAM FARR
CHART NO.: 091065

DATE OF VISIT: 10/14/2010

The patient returns to the office today. He had an abnormal CT scan of the chest. We spent 30 minutes talking to family members and him about the abnormal CT scan. He needs endoscopy.

RONALD H. LITTLEFIELD, M.D.

RHL/jm



RONALD H. LITTLEFIELD, MD., LLC
319 NORTH PINE STREET
SPARTANBURG, S.C. 29302
(864) 582-8900 PHONE
(864) 582-8555 FAX

CHART # 091065

PATIENT NAME William Farr DOB: [REDACTED]

NOTES: _____

DATE: 10-14-10

LBS: 139

TEMP: _____

BP: 144/90

PULSE: 92 RESP: _____

LAB TEST: YES OR NO

NEED NEW RX: YES OR NO

MEDICATIONS:

Klor-Con M20
Vytorin 10/40mg
Nifedipine ER 30mg
Irinotecan 37.5mg
Asa 81mg

SMOKER: Y OR N PKS _____ YRS _____

LAST CXR: _____

LAST GYN: _____

NAME GYN: _____

LAST MAMMOGRAM: _____

LAST BONE DENSITY: _____

LAST PSA: _____

DIABETIC EYE EXAM: _____

NAME OPTOMETRIST: _____

LAST COLONOSCOPY: _____

LAST TETANUS: _____

LAST PNEUMOVAC: _____

SPARTANBURG REGIONAL MEDICAL CENTER
Radiology Report

-888-

NAME: FARR, WILLIAM GAULT
ORDERING PHYSICIAN: CRUZ, RAUL MANUEL B
LOC: OPT
Pt. Type: OPT

DOB: [REDACTED]
OPT REGISTRATION

UNIT #: 000478684
CI#: 2882885
AN#: S1028800355

FINAL

Exam

70030 NM PET CT SKULL BASE TO MID THIGH Date: 10/18/10 1344

78815PI

Ord Diag: 786.6-CHEST SWELLING/MASS/LUMP

Nuclear medicine PET/CT 10/18/2010

Indication: Remote history of colon cancer with right upper lobe lung mass

Comparison: CT chest 10/11/2010

Procedure: Approximately 90 minutes after the intravenous administration of 12 mCi of F-18 labeled FDG, images were obtained from the skullbase through the proximal thigh. Oral contrast was also administered. Unenhanced computerized tomography was performed for attenuation correction and anatomic correlation. The standardized uptake values were calculated using body weight. The blood glucose of the time of injection was 106 mg/dl.

Findings: Evaluation of the PET tomograms show moderate level nonfocal hypermetabolic activity in the enlarging right upper lobe reticulonodular and airspace consolidation respecting the minor fissure, SUV max 5. There is no hilar or mediastinal adenopathy or activity. The lungs are otherwise clear. There is no hypermetabolic activity at the head and neck. Below the hemidiaphragm, there is expected GI and GU tract activity. There is no abnormal liver or adrenal activity. CT images show few stable hepatic cysts with a calcified granuloma. The gallbladder is collapsed but otherwise normal. No abdominal aortic aneurysm. There is a left lower quadrant colostomy. Urinary bladder is collapsed and deviated to the left. There some presacral and perirectal scarring without significant

Page 1

SPARTANBURG REGIONAL HEALTHCARE SYSTEM
SPARTANBURG REGIONAL MEDICAL CENTER
Radiology Report

-889-

NAME: FARR, WILLIAM GAULT

ORDERING PHYSICIAN: CRUZ, RAUL MANUEL B

LOC: OPT

Pt. Type: OPT

DOB: [REDACTED]

OPT REGISTRATION

UNIT #: 000478684

CI#: 2882885

AN#: S1028800355

Checkin-Exam Code Summary
2882885-70030

activity.

Attention to the skeleton show no metastatic lesion.

Impression: Moderate level hypermetabolic activity corresponding to opacity in the right upper lobe. This does not have the typical appearance for metastatic disease and probably infectious or inflammatory pneumonic infiltrate. Primary bronchoalveolar cell carcinoma could however have this appearance. If bronchoscopy is not performed, recommend treatment for presumed pneumonia and short-term interval CT followup to ensure that this is improving. No additional abnormal hypermetabolic focus.

2. Postoperative changes from colostomy with some presacral and perirectal scarring without evidence for colon cancer recurrence or residual.

Transcriptionist- n/a

Reading Radiologist- JOSEPH K KURKJIAN MD

Releasing Radiologist- JOSEPH K KURKJIAN MD

Released Date Time- 10/18/10 1554

Page 2

OP REPORT

PATIENT NAME: FARR, WILLIAM G

DOB: [REDACTED]

MEDICAL RECORD #: 478684

PROCEDURE DATE: 10/19/2010

ACCOUNT NUMBER: 1029200952

ROOM:

PROCEDURE

Fiber-optic bronchoscope with transbronchial biopsy x3 in the right upper lobe B2 and B3 orifices and transbronchial brushing and BAL of the right upper lobe.

INDICATION FOR PROCEDURE

Right upper lobe infiltrate rule out malignancy.

PROCEDURE DATE

10/19/10.

PROCEDURE IN DETAIL

After explaining the risks and benefits, he was consented. Proper time out was done identifying the patient and procedure. A total of 50 mcg fentanyl and 5 mg Versed and 8 mL of 1% lidocaine was used. Bronchoscope was passed through of the right naris showing the vocal cords to be mobile. The trachea was clear. The carina was sharp. Examination of the left upper and lower lobes showed to be clear and free of secretions, mass or bleeding. Examination of the right upper lobe showed no endobronchial lesion or three upper lobe orifices. There was no narrowing bleeding noted. Examination of the right middle and lower lobes showed to be clear and free of secretions, mass or bleeding. Transbronchial forceps biopsy was done in the right B2 and B3 followed by Cytobrush and a BAL that were sent for cultures pathology and cytology. The patient tolerated the procedure well. A chest x-ray is ordered to rule out iatrogenic pneumothorax.

IMPRESSION

Right upper lobe infiltrate rule out malignancy. Specimens as above was sent.

DICTATED BY: RAUL MANUEL B. CRUZ, M.D.

D:10/19/2010 13:37:19

T:10/22/2010 21:31:05/lf

1012228/882822

cc:

OP REPORT Page 2 of 2

FARR, WILLIAM G

478684

Note: Document is draft unless signed.<END FOOTER>

Authenticated by Raul Manuel B. Cruz, MD. On 10/27/2010 03:42:20 PM

SPARTANBURG REGIONAL MEDICAL CENTER
Radiology Report

-891-

NAME: FARR, WILLIAM GAULT

ORDERING PHYSICIAN: CRUZ, RAUL MANUEL B

LOC: END

Pt. Type: END

DOB: [REDACTED]
ENDOSCOPY SERV

UNIT #: 000478684

CI#: 2883926

AN#: S1029200952

FINAL

Exam

34350 SU CHEST, POST-OP

Date: 10/19/10 1344

Ord Diag: 786.6-CHEST SWELLING/MASS/LUMP

Portable AP upright view

Date: October 19, 2010 at 1350 hours

comparison chest x-ray : No comparison

Clinical Information: Postop right lung biopsy

Findings: EKG leads overlie the chest. Heart normal size and mediastinum unremarkable. Infiltrate is present right upper lobe. No pleural effusion. No pneumothorax.

Impression: Right upper lobe infiltrate

Transcriptionist- n/a

Reading Radiologist- MICHAEL ENRIGHT MD

Releasing Radiologist- MICHAEL ENRIGHT MD

Released Date Time- 10/19/10 1410

Page 1

 * SPARTANBURG REGIONAL MEDICAL CENTER DEPARTMENT OF LABORATORY MEDICINE
 * 101 E. WOOD STREET, SPARTANBURG, SOUTH CAROLINA 29303-3072/864-560-6212
 * DRS. WREN, MIMS, LAPEHAM, CALDWELL, CAMPBELL, BARUCH AND FARR

 FARR WILLIAM GAULT MR#: (0002)00047-86-84 Fin.No.:1029200952 Admitted: 19OCT10
 68 YRS MALE DOB: [REDACTED] Page: 1
 Dr. CRUZ RAUL Printed: 20OCT10
 Location: - ENDOSCOPY 0928
 =====

 SURGICAL PATHOLOGY

PATHOLOGY: S-10-13657 SURGERY: 10/19/10

HISTORY:

Pre-Op: Abnormal chest x-ray
 Post-Op: RUL infiltrate
 Past history of CA: Yes, colon

SPECIMEN:

Transbronchial bx. RUL (RUSH)

GROSS DESCRIPTION:

Received in formalin labeled with the patient's name, DOB, and "transbronchial bx. RUL". The specimen is filtered and consists of multiple fragments of pink-tan tissue aggregating 0.8 x 0.6 x 0.1 cm. The specimen is wrapped and totally submitted as received in one cassette. --JA/sj

Tissue handling and fixation:

Cold ischemic time less than or equal to 1 hour
 Time in 10% phosphate buffered neutral formalin is between 6 and 72 hours

(AB /AA)10/19/10

DIAGNOSIS:

LUNG, RIGHT UPPER LOBE, TRANSBRONCHIAL BIOPSY:
 BENIGN BRONCHIAL MUCOSA, BRONCHIAL WALL, AND LUNG PARENCHYMA; NEGATIVE FOR
 MALIGNANCY IN THESE SECTIONS (SEE COMMENT)

COMMENT: These results were called to Dr. Cruz on 10-20-10 at 0825.

88305 x1

T28100, P11400, T26000, T28000, T96002

(AB /SBJ) verified by Amy Baruch, MD, Pathologist
 10/20/10 20OCT2010 09:27 (electronic signature)
 FINAL VERIFICATION

%%END



CELLIGENT
DIAGNOSTICS

106 Venture Boulevard, Spartanburg, South Carolina 29306
Phone: 864-583-3850 Toll Free: 888-583-3850 Fax: 864-583-1405
Billing: 704-973-5500 or 866-389-5500
www.celligent.net

CYTOPATHOLOGY REPORT

Patient:	FARR, WILLIAM GAULT	Accession #:	SC10-1801
	1032 JONESVILLE LOCKHART HWY, Union, SC, 29379 864-251-0531		
SSN:	[REDACTED]	Date Collected:	19 OCT 2010
DOB/Age:	[REDACTED]	Date Received:	19 OCT 2010
Office ID:	478684	Date Reported:	20 OCT 2010
Practice:			
Physician:	CRUZ, RAUL MANUEL - SRMC		
Cc:	SRMC		

SPECIMEN:

Specimen Source: Bronchial Lavage (Right upper lobe)
Test(s) Ordered: NonGYN Cytology - Thin Prep

GROSS DESCRIPTION:

Specimen received in CytoLyt; 40 mL clear pink fluid.

SPECIMEN ADEQUACY:

Satisfactory for evaluation.

INTERPRETATION:

ATYPICAL CELLS PRESENT

COMMENT:

See also concurrent surgical biopsy (SRMC #S10-13657) and bronchial brushing (#SC10-1802).

Electronic Signature: Gist H. Farr, MD October 20, 2010 9:31AM
Point of Service: Celligent Diagnostics - SR, 101 East Wood St, Spartanburg, SC, 29303

HISTORY:

History of colon cancer; Bronchoscopy 10/19/2010; Right upper lobe infiltrate.

ICD9 CODES:

786.6

END OF REPORT



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DIAGNOSTICS

106 Venture Boulevard, Spartanburg, South Carolina 29306
Phone: 864-583-3850 Toll Free: 888-583-3850 Fax: 864-583-1405
Billing: 704-973-5500 or 866-389-5500
www.celligent.net

CYTOPATHOLOGY REPORT

Patient:	FARR, WILLIAM GAULT 1032 JONESVILLE LOCKHART HWY, Union, SC, 29379 864-251-0531	Accession #:	SC10-1802
SSN:	[REDACTED]	Date Collected:	19 OCT 2010
DOB/Age:	[REDACTED]	Date Received:	19 OCT 2010
Office ID:	478684	Location:	SRMC Outpatient
Practice:		Date Reported:	20 OCT 2010
Physician:	CRUZ, RAUL MANUEL - SRMC		
Cc:	SRMC		

SPECIMEN:

Specimen Source: Bronchial Brushing (Right upper lobe)
Test(s) Ordered: NonGYN Cytology - Thin Prep

GROSS DESCRIPTION:

Specimen received in CytoLyt; 30 mL clear pink fluid.

SPECIMEN ADEQUACY:

Satisfactory for evaluation.

INTERPRETATION:

REACTIVE BRONCHIAL CELLS

COMMENT:

See also concurrent surgical biopsy (SRMC #S10-13657) and BAL (#SC10-1801).

Electronic Signature: Gist H. Farr, MD October 20, 2010 9:31AM
Point of Service: Celligent Diagnostics - SR, 101 East Wood St, Spartanburg, SC, 29303

HISTORY:

History of colon cancer; Bronchoscopy 10/19/2010; Right upper lobe infiltrate.

ICD9 CODES:

786.6

END OF REPORT

J. David Wren, MD PHD, Director

Spartanburg Regional Medical Center
101 E. Wood Street
Spartanburg, South Carolina 29303-3072

-895-

Dept of Laboratory Medicine
864-560-6212

FARR, WILLIAM GAULT
68Y
CRUZ, RAUL B

MR#: S000478684
DOB: [REDACTED]
Location: ENDOSCOPY

ACCT#: S1029200952
Admitted: 10/19/2010
PT Type: ENDOSCOPY

MICROBIOLOGY

CULTURE RESPIRATORY
Accession #: MU10292052

Collected: 10/19/2010 13:25
Specimen: BRONCHOALVEOLAR LAVAGE
Source:

Gram Stain with Culture (Final)
No polys seen and No organisms seen

CULTURE AFB AND AFB SMEAR
Accession #MT10292006

Collected: 10/19/2010 13:25
Specimen: BRONCHOALVEOLAR LAVAGE
Source:

Pending

CULTURE FUNGUS WITH SMEAR
Accession #MF10292004

Collected: 10/19/2010 13:25
Specimen: BRONCHOALVEOLAR LAVAGE
Source:

Pending

Patient Name: FARR, WILLIAM GAULT
Location: ENDOSCOPY

OUTPATIENT SRMC FINAL DISCHARGE TO

PT Type: ENDOSCOPY

PHYS FAX#: 864 5823750

Printed: 10/20/2010 01:02

Page: 1 of 1

DP - SRHS - 0040

PRINTED BY: DB30588

DATE

SRHS 0040
3/27/2013

J. David Wren, MD PHD, Director

Spartanburg Regional Medical Center
101 E. Wood Street
Spartanburg, South Carolina 29303-3072

Dept of Laboratory Medicine
864-560-6212

FARR, WILLIAM GAULT
68Y
CRUZ, RAUL B

MR#: S000478684
DOB: [REDACTED]
Location: ENDOSCOPY

ACCT#: S1029200952
Admitted: 10/19/2010
PT Type: ENDOSCOPY

MICROBIOLOGY

CULTURE RESPIRATORY
Accession #: MU10292052

Collected: 10/19/2010 13:25
Specimen: BRONCHOALVEOLAR LAVAGE
Source:

Gram Stain with Culture (Final)
No polys seen and No organisms seen

Results: (Prelim)
>10,000 Cfu/ML
Normal Respiratory Flora Isolated
Culture Pending

CULTURE AFB AND AFB SMEAR
Accession #MT10292006

Collected: 10/19/2010 13:25
Specimen: BRONCHOALVEOLAR LAVAGE
Source:

Acid Fast Smear with Culture (Final)
No Acid Fast Bacilli on Direct Smear

CULTURE FUNGUS WITH SMEAR
Accession #MF10292004

Collected: 10/19/2010 13:25
Specimen: BRONCHOALVEOLAR LAVAGE
Source:

Fungal Smear with Culture (Final)
Calcofluor White: no yeast or fungal elements seen

Patient Name: FARR, WILLIAM GAULT
Location: ENDOSCOPY

OUTPATIENT SRMC FINAL DISCHARGE TO

PT Type: ENDOSCOPY

PHYS FAX#: 864 5823750

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Page: 1 of 1

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SRHS 0041

3/27/2013

J. David Wren, MD PHD, Director

Spartanburg Regional Medical Center
101 E. Wood Street
Spartanburg, South Carolina 29303-3072

-897-

Dept of Laboratory Medicine
864-560-6212

FARR, WILLIAM GAULT
68Y
CRUZ, RAUL B

MR#: S000478684
DOB: [REDACTED]
Location: ENDOSCOPY

ACCT#: S1029200952
Admitted: 10/19/2010
PT Type: ENDOSCOPY

MICROBIOLOGY

CULTURE RESPIRATORY
Accession #: MU10292052

Collected: 10/19/2010 13:25
Specimen: BRONCHOALVEOLAR LAVAGE
Source:

Gram Stain with Culture (Final)
No polys seen and No organisms seen

Results: (Final)
>10,000 cfu/ML
Normal Respiratory Flora Isolated

Patient Name: FARR, WILLIAM GAULT
Location: ENDOSCOPY

OUTPATIENT SRMC FINAL DISCHARGE TO

PT Type: ENDOSCOPY

PHYS FAX#: 864 5823750

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SRHS 0042

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3/27/2013

-898-

J. David Wren, MD PHD, Director

Spartanburg Regional Medical Center
101 E. Wood Street
Spartanburg, South Carolina 29303-3072

Dept of Laboratory Medicine
864-560-6212

FARR, WILLIAM GAULT
68Y
CRUZ, RAUL B

MR#: S000478684
DOB: [REDACTED]
Location: ENDOSCOPY

ACCT#: S1029200952
Admitted: 10/19/2010
PT Type: ENDOSCOPY

MICROBIOLOGY

CULTURE FUNGUS WITH SMEAR
Accession #MF10292004

Collected: 10/19/2010 13:25
Specimen: BRONCHOALVEOLAR LAVAGE
Source:

Fungal Smear with Culture (Final)
Calcofluor White: no yeast or fungal elements seen

Results: (Final)
Fungus Culture Negative at 1 week
SOURCE bal rul

Patient Name: FARR, WILLIAM GAULT
Location: ENDOSCOPY

OUTPATIENT SRMC FINAL DISCHARGE TO

PT Type: ENDOSCOPY

PHYS FAX#: 864 5823750

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DATE

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3/27/2013

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J. David Wren, MD PHD, Director

Spartanburg Regional Medical Center
101 E. Wood Street
Spartanburg, South Carolina 29303-3072

-899-

Dept of Laboratory Medicine
864-560-6212

FARR, WILLIAM GAULT
68Y
CRUZ, RAUL B

MR#: S000478684
DOB: [REDACTED]
Location: ENDOSCOPY

ACCT#: S1029200952
Admitted: 10/19/2010
PT Type: ENDOSCOPY

MICROBIOLOGY

CULTURE AFB AND AFB SMEAR
Accession #MT10292006

Collected: 10/19/2010 13:25
Specimen: BRONCHOALVEOLAR LAVAGE
Source:

Acid Fast Smear with Culture (Final)
No Acid Fast Bacilli on Direct Smear

Results: (Prelim)

S.C. Department of Health and Environmental Control (8231 Parklane Road Columbia, S.C.) Results indicate: Acid Fast
Bacilli Concentrated Smear=Negative. Final report made after 7 weeks.
SOURCE bal rul

Patient Name: FARR, WILLIAM GAULT
Location: ENDOSCOPY

OUTPATIENT (OPT) SRMC FINAL DISCHARGE

PT Type: ENDOSCOPY

PHYS FAX#: 864 5823750

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SRHS 0044
3/27/2013

J. David Wren, MD PHD, Director

Spartanburg Regional Medical Center
101 E. Wood Street
Spartanburg, South Carolina 29303-3072

-900-

Dept of Laboratory Medicine
864-560-6212

FARR, WILLIAM GAULT
68Y
CRUZ, RAUL B

MR#: S000478684
DOB: [REDACTED]
Location: ENDOSCOPY

ACCT#: S1029200952
Admitted: 10/19/2010
PT Type: ENDOSCOPY

MICROBIOLOGY

CULTURE FUNGUS WITH SMEAR
Accession #MF10292004

Collected: 10/19/2010 13:25
Specimen: BRONCHOALVEOLAR LAVAGE
Source:

Fungal Smear with Culture (Final)
Calcofluor White: no yeast or fungal elements seen

Results: (Final)
Fungus Culture Negative at 4 weeks
SOURCE bal rul

Patient Name: FARR, WILLIAM GAULT
Location: ENDOSCOPY

OUTPATIENT SRMC FINAL DISCHARGE TO

PT Type: ENDOSCOPY

PHYS FAX#: 864 5823750

Printed: 11/16/2010 01:01

Page: 1 of 1
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3/27/2013

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