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THE STATE OF SOUTH CAROLINA
In the Court of Appeals

S.C. SUPREME COURT

APPEAL FROM SPARTANBURG COUNTY
Court of Common Pleas

J. Mark Hayes, II, Circuit Court Judge

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APR 11 2016
SC Court of Appeals

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

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

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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INDEX

Form 4 Order (dated July 30, 2015) 1

Summons & Complaint 3

Answer of Defendants 23

Trial Transcript 28

 Argument on Defendants’ Motions in Limine 35

 Argument on Plaintiff’s Motion in Limine 77

 Plaintiff’s opening statement 102

 Defendants’ opening statement 118

 Lisa McKaughan direct examination 138

 Lisa McKaughan cross-examination 168

 Dr. Barry Singer direct examination 196

 Dr. Barry Singer cross-examination 219

 Dr. Barry Singer redirect examination 272

 Dr. William Woodruff direct examination 284

 Dr. William Woodruff cross examination 332

 Dr. William Woodruff redirect examination 358

 Dr. Sau-Yin Wan cross-examination 362

 Dr. Sau-Yin Wan direct examination 385

 Dr. Sau-Yin Wan recross-examination 467

 Dr. Willard Milby direct examination 494

 Dr. Willard Milby cross-examination 542

 Dr. Willard Milby redirect examination 589

Argument on Defendants’ Motions for Directed Verdict	596
Circuit court’s ruling on Defendants’ Motions for Directed Verdict ...	618
Trial Exhibits	622
Plaintiff’s Exhibit 1 (Medical Billing)	622
Plaintiff’s Exhibit 2 (Death Certificate)	627
Plaintiff’s Exhibit 3 (Probate Court Records)	628
Plaintiff’s Exhibit 4 (Bills)	629
Plaintiff’s Exhibit 5 (X-rays)	840
Joint Exhibit 1 (Medical Records)	842
Defendants Motions in Limine	1483

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 aerogenicly 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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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

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/V 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 Charges	\$356.00	\$80.73	\$150.38	\$0.00	\$125.89
			Total Pmt. Inv. Billing	\$356.00	\$80.73	\$150.38	\$0.00	\$125.89
			Balance Forward	\$356.00	\$80.73	\$150.38	\$0.00	\$125.89

Dec. 11. 2012 12:27PM Upstate Lung & Critical Care No. 4851 P. 3

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	Read Prov	POS Code	Units	Charges	Payments	Adjustments
01/11/2010	99204	NEW PATIENT COMPLEX OFFICE VISIT Diag 786.09	Sau Yin Wan	ULCCS	1.000	\$175.00	\$0.00	\$0.00
01/11/2010		Patient Copayment Cash				\$0.00	\$31.21	\$0.00
01/11/2010	94010	SPIROMETRY Diag 786.09	Sau Yin Wan	ULCCS	1.000	\$100.00	\$0.00	\$0.00
01/11/2010	71020	RADEX CH 2 VIEWS FRNT&LAT Diag 786.09	Sau Yin Wan	ULCCS	1.000	\$81.00	\$0.00	\$0.00
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
		\$148.01						
01/25/2010		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

No. 4851 P. 5

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	Rend 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

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.		7f. ZIP CODE 29379		
7g. INSIDE CITY LIMITS? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
8. EVER IN US ARMED FORCES? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		9. MARITAL STATUS AT TIME OF DEATH <input checked="" type="checkbox"/> Married <input type="checkbox"/> Married, but separated <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Never Married <input type="checkbox"/> 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: <input type="checkbox"/> Inpatient <input type="checkbox"/> Emergency Room/Outpatient <input type="checkbox"/> Dead on Arrival <input type="checkbox"/> Nursing home/Long term care facility <input type="checkbox"/> Decedent's home <input type="checkbox"/> Other (Specify) _____ IF DEATH OCCURRED SOMEWHERE OTHER THAN A HOSPITAL: <input type="checkbox"/> Hospice facility							
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 <input checked="" type="checkbox"/> Burial <input type="checkbox"/> Cremation <input type="checkbox"/> Donation <input type="checkbox"/> Entombment <input type="checkbox"/> Removal from state <input type="checkbox"/> 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				
22. SIGNATURE OF FUNERAL SERVICE LICENSEE OR OTHER AGENT <i>[Signature]</i>			23. LICENSE NUMBER (Of License) 1981		310 W. South St. Union, SC 29379		
23a. EMBALMER (Signature) <i>[Signature]</i>			23b. EMBALMER LICENSE NUMBER 2457		23c. LICENSE NUMBER (Of Facility) 350		
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? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
32. PART I. Enter the chain of events, diseases, 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): _____ Sequentially list 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 b. _____ Due to (or as a consequence of): _____ c. _____ Due to (or as a consequence of): _____ d. _____ Due to (or as a consequence of): _____ PART II. Enter other significant conditions contributory to death but not resulting in the underlying cause given in PART I.							
33. WAS AN AUTOPSY PERFORMED? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			34. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH? <input type="checkbox"/> Yes <input type="checkbox"/> No				
35. DID TOBACCO USE CONTRIBUTE TO DEATH? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Probably <input type="checkbox"/> No <input type="checkbox"/> Unknown		36. IF FEMALE: <input type="checkbox"/> Not pregnant within past year <input type="checkbox"/> Pregnant at time of death <input type="checkbox"/> Not pregnant, but pregnant within 42 days of death <input type="checkbox"/> Not pregnant, but pregnant 43 days to one year before death <input type="checkbox"/> Unknown if pregnant within the past year		37. MANNER OF DEATH <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Homicide <input type="checkbox"/> Accident <input type="checkbox"/> Pending investigation <input type="checkbox"/> Suicide <input type="checkbox"/> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
42. LOCATION OF INJURY: State: _____ City or Town: _____ County: _____ Street & Number: _____ Apartment Number: _____ Zip Code: _____							
43. DESCRIBE HOW INJURY OCCURRED:				44. IF TRANSPORTATION INJURY, SPECIFY: <input type="checkbox"/> Driver/Operator <input type="checkbox"/> Pedestrian <input type="checkbox"/> Passenger <input type="checkbox"/> Other (Specify) _____			
45. CERTIFIER (Check only one) <input checked="" type="checkbox"/> Certifying physician-To the best of my knowledge, death occurred due to the cause(s) and manner stated. <input type="checkbox"/> 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. <input type="checkbox"/> 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: <i>[Signature]</i>							
46. NAME, ADDRESS, AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH (Item 32) 300 Sherman St. Union, SC 29379				46a. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER			
47. TITLE OF CERTIFIER MS		48. LICENSE NUMBER 70468		49. DATE CERTIFIED (MM/DD/YYYY) 06/26/2012		50. FOR REGISTRAR ONLY-DATE FILED (MM/DD/YYYY) 07/03/2012	

NAME OF DECEDENT
For use by physician or institution
William Gault Farr

Items 1-32 To Be Completed/Verified By: FUNERAL DIRECTOR
Items 33-49 To Be Completed By: MEDICAL CERTIFIER

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

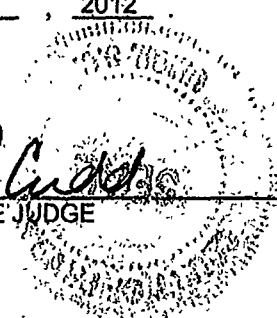
In the above matter and that this appointment, having been executed on the 6th day of July, 2012 is now in full force and effect, including authorization to receive all monies, income, principal, interest & dividends of and belonging to said estate.

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	Code	Fee	Units	Insurance	Patient
	WILLIAM G FARR(114966)/COURTNEY H DEVANE MD/479699					
	Hypopotasemia (276.8)					
	Nonddependent 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
1/28/2010	PAYMENT Payment from FARR, WILLIAM G				\$0.00	-\$12.22
1/28/2010	PAYMENT Payment from FARR, WILLIAM G				\$0.00	-\$6.45
02/12/2010	CONTRACTUAL ADJ Adjustment from MEDICARE SC	140621283			-\$6.91	\$0.00
2/12/2010	PAYMENT Payment from MEDICARE SC	140621283			-\$48.87	\$0.00
2/12/2010	Transfer from Insurance	140621283			-\$12.22	\$12.22
	YOUR INSURANCE CARRIER STATES THIS AMOUNT IS YOUR RESPONSIBILITY FOR UNMET DEDUCTIBLE.					
4/22/2011	PAYMENT Payment from MEDICARE SC	881131247			\$46.67	\$0.00
4/22/2011	CONTRACTUAL ADJ Adjustment from MEDICARE SC	881131247			\$1.90	\$0.00
04/22/2011	PAYMENT Payment from MEDICARE SC	881131247			-\$50.38	\$0.00
4/22/2011	Transfer from Insurance	881131247			-\$0.38	\$0.38
	Balance:				\$0.00	-\$5.07
	WILLIAM G FARR(114959)/COURTNEY H DEVANE MD/533994					
	Hypopotasemia (276.8)					
	Pure hypercholesterolemia (272.0)					
	Acute upper respiratory infections of unspecified site (466.9)					
	Nonddependent tobacco use disorder (305.1)					
8/23/2010	ESTABLISHED PATIENT LEVEL 3 (99213)		\$68.00	1.0	\$68.00	\$0.00
8/23/2010	At least one prescription created during the encounter was generated and transmitted electronically using a qualified erx system (G8553)		\$0.00	1.0	\$0.00	\$0.00
08/23/2010	PAYMENT Payment from FARR, WILLIAM G				\$0.00	-\$12.88
9/10/2010	CONTRACTUAL ADJ Adjustment from MEDICARE SC	880919194			-\$3.82	\$0.00
9/10/2010	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

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	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

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

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44.68

0.00

44.68

SPANTANBURG 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 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	M05 ERA MEDICARE PAYMENT	316	53.27CR
12/06	A5002	M53 Adjustment - Medicare Pro Fee	316	58.93CR
12/08	A5041	M05 Adjustment Medicare Outpatient	316	53.40CR

TOTAL PAYMENTS/ADJUSTMENTS 248.86CR

TSAC

34.14
 0.00
 34.14

F/C:SM F/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 Adjotment - 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

3A

1,561.39

0.00

1,561.39

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

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
1022 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

05/05/15

316507 MEDICARE 1500 F/C MC

05/05/15

01/19	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

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

02/02	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

E TS A D

0.00

0.00

0.00

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

5A

504.13

0.00

504.13

SPARTANBURG MEDICAL CENTER
PO BOX 277723
ANTHA, 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 040035	CLINIC EST PATIENT EXPANDED	1	129.00
		AREA TOTAL ***		129.00
04/11	***960 020035	PRO FEE OFFICE/OUTPATIENT VISIT, EST	1	76.00
		AREA TOTAL ***		76.00

TOTAL CHARGES 205.00

05/03	I9205	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

BENEFITS ASSIGNED

0.00

0.00

0.00

F/C:SI P/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	1,095.00
		AREA TOTAL ***		1,095.00

TOTAL PAYMENTS/ADJUSTMENTS

0.00

NETS ASSIGNED

0.00

0.00

835 Remittance Advice

Payer Name: PALMETTO GBA
NPI: 1518998038
ERA Date: 5/11/2012
Check Number: 881871213

Patient Name: FARR, WILLIAM G
HIC Number: [REDACTED] (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 Payer(s)
Date of Service: 4/17/2012 - 4/17/2012 (1 day)

MRN: 000478684
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		
Modifiers: GC, LT						
		1,095.00		864.98		230.02

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:

F/C:SM P/T:OPS

FARR, WILLIAM G

1106200081

03/04/11 03/10/11 2

CHRISTOPHE L NGUYEN

WILLIAM G FARR
1032 JONESTOWN 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	028315		1	3,786.00
03/10	028780		1	53.00
03/10	029115		1	67.00
		AREA TOTAL ***		3,906.00

835 Remittance Advice

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

Patient Name: FARE, WILLIAM G
HIC Number: [REDACTED] (HIC)
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: 000478684
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

-642-

Lung & Chest Medical Associates 002

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

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

-643-

Lung & Chest Medical Associates 003

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

-644-

Lung & Chest Medical Associates 004

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: ██████████; 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 Invlaid 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

-647-

Lung & Chest Medical Associates 007

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

-648-

Lung & Chest Medical Associates 008

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: ██████████; Record #: 65468; Acct #: 72213 PROB
 Date Range: 01/01/2010-12/31/2012

-649-

Lung & Chest Medical Associates 009

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: ██████████; Record #: 65468 ; Acct #: 72213 PROB
 Date Range: 01/01/2010-12/31/2012

-650-

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

-651-

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
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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

Patient Ledger Report

(Filtered by Transaction Date)

PROC DATE	TRAN DATE	TYPE	DESCRIPTION	PROF CHG	TECH CHG	DEBIT	CREDIT	BALANCE
MGC HEM ONC Spbg/ 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

Patient Ledger Report

(Filtered by Transaction Date)

PROC DATE	TRAN DATE	TYPE	DESCRIPTION	PROF CHG	TECH CHG	DEBIT	CREDIT	BALANCE
MGC HEM ONC Spibg/ 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
02/22/2014	02/25/2011	Chg	J3420 - Cyanocobalamin COLLECTION	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

Patient Ledger Report

(Filtered by Transaction Date)

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

Patient Ledger Report

(Filtered by Transaction Date)

PROC DATE	TRAN DATE	TYPE	DESCRIPTION	PROF CHG	TECH CHG	DEBIT	CREDIT	BALANCE
MGC HEM ONC Spbg/ 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
08/30/2011	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

Patient Ledger Report

(Filtered by Transaction Date)

PROC DATE	TRAN DATE	TYPE	DESCRIPTION	PROF CHG	TECH CHG	DEBIT	CREDIT	BALANCE
MGC HEM ONC Sp/ba/ 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

Patient Ledger Report

(Filtered by Transaction Date)

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

Patient Ledger Report

(Filtered by Transaction Date)

PROC DATE	TRAN DATE	TYPE	DESCRIPTION	PROF CHG	TECH CHG	DEBIT	CREDIT	BALANCE
MGC HEM ONC Splbg/ 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

Patient Ledger Report

(Filtered by Transaction Date)

PROC DATE	TRAN DATE	TYPE	DESCRIPTION	PROF CHG	TECH CHG	DEBIT	CREDIT	BALANCE
MGC HEM ONC Sotbg/ 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

(Filtered by Transaction Date)

PROC DATE	TRAN DATE	TYPE	DESCRIPTION	PROF CHG	TECH CHG	DEBIT	CREDIT	BALANCE
MGC HEM ONC Splbg/ 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 Spibg/ 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)

01091 Patient
DR H LITTLEFIELD MD LLC
JULY 2015

Physician Name: RONALD H. LITTLEFIELD, M.D. LLC

DATE 5/20/2015
TIME 11:14
PAGE 1

663

65 FARR WILLIAM G 1032 JONESVILLE LOCKHART HWY UNION SC 29378
IC# INS NAME SUBSCRIBER SA SCT EMPH
0001-MEDICARE FARR WILLIAM G Y I
0006-AAMI FARR WILLIAM G Y I
3285363509

051065 FARR WILLIAM G M SEX BDAY DR# RDR PAT RELATION# MISC VARS ALPHA VARS
- 30 0.00 11 - 60 0.00 61 - 90 0.00 91 - 120 0.00 121-150 0.00 OV9H 150 10000 UNPOSTED TOTAL BAL 0.00 PENDING 0.00 PAT HAL LAST AGING 0.00 08/03/13

10 T # 112651 U WILLIAM FARR Total: 300.00
07/10 LITTLEFIELD M LITTLEFIELD RONALD H LITTLE
610 99205 - -COMPLEX COMPR 786.50 -UNSPECIFIED CHE 01 230.00
610 ADX - -ADDITIONAL DX 272.4 -HYPERLIPIDEMIA 01 0.00
610 ADX - -ADDITIONAL DX 424.0 -MITRAL VALVE DI 01 0.00
610 ADX - -ADDITIONAL DX 401.1 -ESSENTIAL HYPER 01 0.00
10610 93000 - -SKG 786.50 -UNSPECIFIED CHE 01 70.00
100810 - -MEDICARE -1126511-Y-N-P cleared
300.00 / 157.03 / .00 / .00 / 103.71
new/est 1 NEW

10 T # 114211 U WILLIAM FARR Total: 45.00
07/10 LITTLEFIELD M LITTLEFIELD RONALD H LITTLE
610 90658 - -FLU VACCINE. SP V04.81 -INFLUENZA 01 20.00
610 00008 - -FLU V04.81 -INFLUENZA 01 25.00
100810 - -MEDICARE -1142111-Y-N-P cleared
45.00 / 32.23 / .00 / .00 / 12.77
new/est 2 ESTABLISHED

10 T # 114169 U WILLIAM FARR Total: 2,225.00
7/10 LITTLEFIELD M LITTLEFIELD RONALD H LITTLE
710 93015 - -CARDIOVASCULAR 786.50 -UNSPECIFIED CHE 01 295.00
10710 ADX - -ADDITIONAL DX 272.4 -HYPERLIPIDEMIA 01 0.00
10710 A9500 - -RADIO AGENT 786.50 -UNSPECIFIED CHE 02 430.00
710 70452 -19-MULTIPLE STUDIE 786.50 -UNSPECIFIED CHE 01 1,500.00
100810 - -MEDICARE -1141691-Y-N-P cleared
2 225.00 / 530.88 / .00 / .00 / 1,561.40
new/est 2 ESTABLISHED

10 T # 114246 U WILLIAM FARR Total: 49.00
7/10 LITTLEFIELD M LITTLEFIELD RONALD H LITTLE
710 99212 -25-PROBLEM EXOC 709.00 -ABDOMINAL PAIN. 01 49.00
100810 - -MEDICARE -1142461-Y-N-P cleared
49.00 / 29.00 / .00 / .00 / 12.07
new/est 1 ESTABLISHED

10 T # 114247 U WILLIAM FARR Total: 500.00
07/10 LITTLEFIELD M LITTLEFIELD RONALD H LITTLE
0710 J2785 - -REGADENOSON 786.50 -UNSPECIFIED CHE 04 500.00
100010 - -MEDICARE -1142471-Y-N-P cleared
500.00 / 155.90 / .00 / .00 / 308.12
new/est 2 ESTABLISHED

10 T # 114178 U WILLIAM FARR Total: 125.00
08/10 LITTLEFIELD M LITTLEFIELD RONALD H LITTLE
00710 94010 - -BREATHING CAVAC 786.50 -S09 01 125.00
100010 - -MEDICARE -1141781-Y-N-P cleared
125.00 / 23.99 / .00 / .00 / 95.01
new/est 2 ESTABLISHED

10 T # 114172 U WILLIAM FARR Total: 0.00
08/10 LITTLEFIELD M LITTLEFIELD RONALD H LITTLE
0710 - -LAB ONLY - 01 0.00
.00 / .00 / .00 / .00 / .00
new/est 2 ESTABLISHED

10 T # 114170 U WILLIAM FARR Total: 1,263.00
11/10 LITTLEFIELD M LITTLEFIELD RONALD H LITTLE
0010 93880 - -EXTRACRANIAL AR 424.0 -OCCLUSION AND S 01 588.00
0010 93885 - -INTRACRANIAL AR 437.0 -CEREBRAL ATHERO 01 675.00
101210 - -MEDICARE -1141701-Y-N-P cleared
1,263.00 / 203.10 / .00 / .00 / 909.05
new/est 2 ESTABLISHED

10 T # 114491 U WILLIAM FARR Total: 35.00
11/10 LITTLEFIELD M LITTLEFIELD RONALD H LITTLE
0110 94211 - -MINIMAL 490 -COPD 01 35.00
101410 - -MEDICARE -1144911-Y-N-P cleared
35.00 / 14.20 / .00 / .00 / 17.10
new/est 2 ESTABLISHED

10 T # 114171 U WILLIAM FARR Total: 1,550.00
05/10 LITTLEFIELD M LITTLEFIELD RONALD H LITTLE
0410 93300 - -ECHOCARDIOGRAPH 424.0 -MITRAL VALVE DI 01 1,550.00
110510 - -MEDICARE -1141711-Y-N-P cleared
1,550.00 / 177.02 / .00 / .00 / 1,328.73

(P00349) Patient
RONALD H LITTLEFIELD MD LLC
SER - JRAYES

Transactions by Patient

IO	T #	new/est	2 ESTABLISHED	Total:		
10	T # 115774	U WILLIAM	FARR	Total: 165.00		
/11/10	LITTLEFIELD M NGUYEN			RONALD H LITTLE		
11010	99215	-	-COMPREHENSIVE 400	-COPD 01	165.00	
11010	ADX	-	-ADDITIONAL DX 272.4	-HYPERLIPIDEMIA 01	0.00	
11010	ADX	-	-ADDITIONAL DX 401.1	-ESSENTIAL HYPERT 01	0.00	
11020	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		
/19/11	LITTLEFIELD M LITTLEFIELD			RONALD H LITTLE		
11611	99213	-	-EXPANDED 401.0	-ESSENTIAL HYPERT 01	70.00	
11611	ADX	-	-ADDITIONAL DX 272.4	-HYPERLIPIDEMIA 01	0.00	
11611	ADX	-	-ADDITIONAL DX 496	-COPD 01	0.00	
11611	ADX	-	-ADDITIONAL DX 424.0	-MITRAL VALVE DI 01	0.00	
	011911-		-MEDICARE	-1162341-Y-N-P cleared		
		70.00 /	26.42 / .00 /	.00 /	7.18	
		new/est	2 ESTABLISHED			
10	T # 121769	U WILLIAM	FARR	Total: 140.00		
/12/11	LITTLEFIELD M LITTLEFIELD			RONALD H LITTLE		
41111	99213	-	-EXPANDED 700.2	-SYNCOPE 01	70.00	
41111	ADX	-	-ADDITIONAL DX 496	-COPD 01	0.00	
41111	ADX	-	-ADDITIONAL DX 272.4	-HYPERLIPIDEMIA 01	0.00	
41111	99000	-	-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 # 125890	U WILLIAM	FARR	Total: 330.00		
/30/11	LITTLEFIELD M LITTLEFIELD	12/29/11		SRMS IP		
12911	99223	-	-INPATIENT HOSPITA 496	-COPD 01	330.00	
12911	ADX	-	-ADDITIONAL DX 466.0	-ACUTE BRONCHITI 01	0.00	
	123011-		-MEDICARE	-1258901-Y-N-P cleared		
	020812-		-AARP	-1258902-Y-N-P cleared		
		330.00 /	141.63 / 95.41 /	.00 /	152.96	
		new/est	2 ESTABLISHED			
11	T # 135891	U WILLIAM	FARR	Total: 310.00		
/30/11	LITTLEFIELD M LITTLEFIELD	12/29/11		SRMS IP		
13011	99223	-	-FOLLOWUP HOSPIT 496	-COPD 01	310.00	
13011	ADX	-	-ADDITIONAL DX 466.0	-ACUTE BRONCHITI 01	0.00	
	123011-		-MEDICARE	-1358911-Y-N-P cleared		
	020812-		-AARP	-1358912-Y-N-P cleared		
		310.00 /	73.05 / 18.26 /	.00 /	218.69	
		new/est	2 ESTABLISHED			
10	T # 135845	U WILLIAM	FARR	Total: 70.00		
/30/11	LITTLEFIELD M LITTLEFIELD			RONALD H LITTLE		
2913	99000	-	-59-EKG 706.05	-SOD 01	70.00	
	123011-		-MEDICARE	-1358451-Y-N-P cleared		
	020812-		-AARP	-1358452-Y-N-P cleared		
		70.00 /	14.22 / 3.50 /	.00 /	52.22	
		new/est	2 ESTABLISHED			
10	T # 135994	U WILLIAM	FARR	Total: 250.00		
/10/12	LITTLEFIELD M LITTLEFIELD			RONALD H LITTLE		
0912	00438	-	-ANNUAL WELLNESS 400.0	-ACUTE BRONCHITI 01	250.00	
0912	ADX	-	-ADDITIONAL DX 461.9	-SINUSITIS 01	0.00	
0912	ADX	-	-ADDITIONAL DX 496	-COPD 01	0.00	
0912	ADX	-	-ADDITIONAL DX 703.00	-ABDOMINAL PAIN, 01	0.00	
0912	08653	-	-PRESCRIPTIONS E 400.0	-ACUTE BRONCHITI 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		
/04/12	LITTLEFIELD M LITTLEFIELD	06/01/12		SRMS IP		
0112	99232	-	-FOLLOWUP HOSPIT 466.0	-ACUTE BRONCHITI 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		
/4/12	LITTLEFIELD M LITTLEFIELD	06/01/12		SRMS IP		
412	99232	-	-FOLLOWUP HOSPIT 466.0	-ACUTE BRONCHITI 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		
/6/12	LITTLEFIELD M LITTLEFIELD	06/01/12		SRMS IP		
1512	99233	-	-FOLLOWUP HOSPIT 466.0	-ACUTE BRONCHITI 01	310.00	
1512	ADX	-	-ADDITIONAL DX 272.4	-HYPERLIPIDEMIA 01	0.00	

001891 Patient
MD II LITTLEFIELD MD LLC
PR - JIAYES

Transactions by Patient

-665-
DATE 5/29/2015
TIME 11:14
PAGE 3

060712- -MEDICARE -1421601-Y-N-P cleared
062112- -AARP -1421602-Y-N-P cleared
110.00 / 70.46 / 14.11 / .00 / 214.47
new/est 2 ESTABLISHED

1	T #	142171 U WILLIAM	PARR	Total:	210.00
06/12	LITTLEFIELD M LITTLEFIELD	06/01/12	06/06/12	SRMS IP	
0612	99239	-	-HOSPITAL OFCHA	496	-COPD 01 210.00
0612	ADX	-	-ADDITIONAL DX	446.0	-ACUTE BRONCHITIS 01 0.00
0612	ADX	-	-ADDITIONAL DX	272.4	-HYPERLIPIDEMIA 01 0.00
060712-	-MEDICARE	-1421711-Y-N-P	cleared		
062112-	-AARP	-1421712-Y-N-P	cleared		
		210.00 / 70.54 / 19.64 / .00 / 111.82			
		new/est	2 ESTABLISHED		
12/25/10	0000	-PMT MEDICARE	08	1141701 r#	2498780999 30 203.16-
	0008	283.16-		114170	
12/25/10	0101	- Co-ins	70.72	08	1141701 r# 2498790999 30 0.00
	0008	0.00		114170	
12/25/10	0001	-W/O MEDICARE		08	1141701 r# 2498800999 30 909.05-
	0008	309.05-		114170	
12/25/10	0001	-PMT MEDICARE	08	1141701 r#	2501300999 30 23.99-
	0006	23.99-		114170	
12/25/10	0101	- Co-ins	6.00	08	1141781 r# 2501390999 30 0.00
	0006	0.00		114178	
12/25/10	0001	-W/O MEDICARE		08	1141781 r# 2501400999 30 95.01-
	0006	95.01-		114178	
12/25/10	0001	-PMT MEDICARE	08	1126511 r#	2501410999 30 157.03-
	0001	157.03-		112651	
12/25/10	0101	- Co-ins	39.26	08	1126511 r# 2501420999 30 0.00
	0001	0.00		112651	
12/25/10	0001	-W/O MEDICARE		08	1126511 r# 2501430999 30 103.71-
	0001	103.71-		112651	
12/25/10	0001	-PMT MEDICARE	08	1141691 r#	2501440999 30 530.08-
	0009	530.88-		114169	
12/25/10	0101	- Co-ins	132.72	08	1141691 r# 2501450999 30 0.00
	0002	0.00		114169	
12/25/10	0001	-W/O MEDICARE		08	1141691 r# 2501460999 30 1,561.40-
	0002	1,561.40-		114169	
12/25/10	0001	-PMT MEDICARE	08	1142111 r#	2501470999 30 32.22-
	0001	32.22-		114211	
12/25/10	0001	-W/O MEDICARE		08	1142111 r# 2501480999 30 12.77-
	0001	12.77-		114211	
12/25/10	0001	-PMT MEDICARE	08	1142461 r#	2501490999 30 29.06-
	0001	29.06-		114246	
12/25/10	0101	- Co-ins	7.27	08	1142461 r# 2501500999 30 0.00
	0001	0.00		114246	
12/25/10	0001	-W/O MEDICARE		08	1142461 r# 2501510999 30 12.67-
	0001	12.67-		114246	
12/25/10	0001	-PMT MEDICARE	08	1142471 r#	2501520999 30 158.90-
	0009	158.90-		114247	
12/25/10	0101	- Co-ins	38.99	08	1142471 r# 2501530999 30 0.00
	0009	0.00		114247	
12/25/10	0001	-W/O MEDICARE		08	1142471 r# 2501540999 30 308.12-
	0009	308.12-		114247	
12/25/10	0001	-PMT MEDICARE	08	1144911 r#	2500330999 30 14.26-
	0001	14.26-		114491	
12/25/10	0101	- Co-ins	3.86	08	1144911 r# 2500340999 30 0.00
	0001	0.00		114491	
12/25/10	0001	-W/O MEDICARE		08	1144911 r# 2500350999 30 17.18-
	0001	17.18-		114491	
12/11/10	0001	-CASH PAYMENT, THANK YOU		08	112651 2524880999 10 298.58-
	0001	29.26-		112651	
	0009	132.72-		114169	
	0001	7.27-		114246	
	0009	30.90-		114247	
	0006	6.00-		114178	
	0008	70.72-		114170	
	0001	3.56-		114491	
12/23/10	0001	-PMT MEDICARE	08	1141711 r#	2537590999 30 177.02-
	0010	177.02-		114171	
12/23/10	0101	- Co-ins	44.25	08	1141711 r# 2537600999 30 0.00
	0010	0.00		114171	
12/23/10	0001	-W/O MEDICARE		08	1141711 r# 2537610999 30 1,328.73-
	0010	1,328.73-		114171	
12/29/10	0001	-PMT MEDICARE	08	1157901 r#	2542750999 30 49.14-
	0001	99.14-		115790	
12/29/10	0101	- Co-ins	24.79	08	1157901 r# 2542760999 30 0.00
	0001	0.00		115790	
12/29/10	0001	-W/O MEDICARE		08	1157901 r# 2542770999 30 41.07-
	0001	41.07-		115790	
12/19/11	0001	-CASH PAYMENT, THANK YOU		08	2606720999 10 69.04-
	0010	44.26-		114171	
	0001	24.79-		115798	
12/04/11	0001	-PMT MEDICARE	08	1162341 r#	2623640999 30 26.42-
	0001	26.42-		116234	
12/04/11	0100	- Deduct	29.80	08	1162341 r# 2623650999 30 0.00
	0001	0.00		116234	
12/04/11	0101	- Co-ins	6.60	08	1162341 r# 2623660999 30 0.00
	0001	0.00		116234	
12/04/11	0001	-W/O MEDICARE		08	1162341 r# 2623670999 30 7.18-

RD00000) Patients
ONALD, M LITTLEFIELD MD LLC
SER - JHAYBY

Transactions by Patient

Date	Description	Amount	Ref	Trans ID	Trans Type	Trans Amt
4/12/11	0001 7.18- 0001-CASH PAYMENT, THANK YOU	36.40	116234	2700000999	10	36.40-
4/26/11	0001--PMT MEDICARE 0001 64.48-	16.12	121760	2730500999	30	64.40-
4/26/11	0101-- Co-ins 0001 0.00	0.00	121760	2730510999	30	0.00
4/26/11	0001--W/O MEDICARE 0001 59.40-	59.40	121760	2730520999	30	59.40-
1/12/11	0002-CHECK #819 0001 16.12-	16.12	121760	2823670999	20	16.12-
1/13/12	0001--PMT MEDICARE 0001 14.22-	14.22	135845	3065410999	30	14.22-
1/13/12	0101-- Co-ins 0001 0.00	0.00	135845	3065420999	30	0.00
1/13/12	0001--W/O MEDICARE 0001 52.22-	52.22	135845	3065430999	30	52.22-
1/13/12	0001--PMT MEDICARE 0001 141.63-	141.63	135890	3065440999	30	141.63-
1/13/12	0101-- Co-ins 0001 0.00	0.00	135890	3065450999	30	0.00
1/13/12	0001--W/O MEDICARE 0001 152.96-	152.96	135890	3065460999	30	152.96-
1/13/12	0001--PMT MEDICARE 0001 73.05-	73.05	135891	3065470999	30	73.05-
1/13/12	0101-- Co-ins 0001 0.00	0.00	135891	3065480999	30	0.00
1/13/12	0001--W/O MEDICARE 0001 218.69-	218.69	135891	3065490999	30	218.69-
1/26/12	0001--PMT MEDICARE 0001 157.24-	157.24	135994	3075320999	30	157.24-
1/26/12	0001--W/O MEDICARE 0001 92.76-	92.76	135994	3075330999	30	92.76-
1/26/12	0001--PMT MEDICARE 0001 0.00	0.00	135994	3076030	30	0.00
1/08/12	0006-PMT AARP 0001 3.56-	3.56	138848	3086660999	9	3.56-
1/08/12	0006-PMT AARP 0001 35.41-	35.41	138890	3086670999	9	35.41-
1/08/12	0006-PMT AARP 0001 10.26-	10.26	135891	3086680999	9	10.26-

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

Int Order : Patient #

Client #:	091065	Start	091065	Stop	091065	Include All	N
ating Date:	10/06/2010		06/06/2012				N

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/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

	CODE	DESCRIPTION	QTY	
***637 PHARMACY-SELF ADMIN 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

/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 [REDACTED] 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

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

GARRETT E SNIPES

870610 HOSPICE HOUSE ONLY

999 [REDACTED] 05/12/15

CODE	DESCRIPTION	QTY
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	TOTAL CHARGES	8,141.52
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06/23	A3070 873 HOSPICE HOUSE - ADJ	870	8,141.52CR
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	TOTAL PAYMENTS/ADJUSTMENTS		8,141.52CR
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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 [REDACTED] 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
6/19	A5041	614 MEDICARE OUTPATIENT- ADJ	316	84.76CR
6/20	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
9/10	A5041	86 MEDICARE OUTPATIENT- ADJ	316	84.76CR
9/15	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 [REDACTED] 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

/C:MG 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

870598 HOSPICE SRMC

999 [REDACTED] 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 [REDACTED] 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

P/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 010000	EKG/ECG ELECTROCARDIOGRAM, TRACING		1	227.00 227.00
			AREA TOTAL ***		
		TOTAL CHARGES			24,276.63
01/28	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
01/28	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

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	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

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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

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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
06/02	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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F/C:SM P/T:IP

FARR, WILLIAM G

1215200150

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
05/31	***450 002005	EMERGENCY ROOM ED VISIT LEVEL 5	1	1,207.00
		AREA TOTAL ***		1,207.00
06/02	***480 070055	CARDIOLOGY TTE W/DOPPLER, COMPLETE	1	1,589.00
		AREA TOTAL ***		1,589.00
05/31	***636 000124	DRUGS/DETAIL CODE PREDNISON 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	PREDNISON 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	PREDNISON 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	PREDNISON 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	PREDNISON 5MG ORAL	2	1.50
06/04	004679	ENOXAPARIN SODIUM 10MG INJ	12	450.00
06/05	000121	PREDNISON 5MG ORAL	2	1.50

Continued

F/C:SM P/T:IP

FARR, WILLIAM G

1215200150

05/31/12 06/06/12 6

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

F/C:SM P/T:IP

FARR, WILLIAM G

1215200150

05/31/12 06/06/12 7

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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F/C:SM 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

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

6/28	I5200	MC1 MEDICARE - ERA	316	9,339.10CR
07/17	I5205	M51 MEDICARE PART B - ERA	316	6.44CR
8/29	I6112	417 COMMERCIAL INSURANCE PAYMENT	850	1.61CR
5/14	I5205	M51 MEDICARE PART B - ERA	316	6.50CR
5/14	I5205	M51 MEDICARE PART B - ERA	316	6.44
06/14	A5040	367 MEDICARE INPATIENT- ADJ	316	23,453.45CR
6/28	A5040	MC1 MEDICARE INPATIENT- ADJ	316	23,783.06CR
6/28	A5040	MC1 MEDICARE INPATIENT- ADJ	316	23,453.45
7/16	A3080	11 Adjustment ePrescribe Penalty	316	0.08CR
07/17	A5002	M51 MEDICARE PRO FEE- ADJ	316	67.87CR
5/15	A5002	M51 MEDICARE PRO FEE- ADJ	316	67.87CR
5/15	A5002	M51 MEDICARE PRO FEE- ADJ	316	67.87
5/14	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

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05/10/12 05/10/12 1

SHARMILA MEHTA

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	
05/10	***335 080461	CHEMOTHERP-IV IRRIG CV ACCESS DEVICE-CHEMO	1	225.00
		AREA TOTAL ***		225.00
05/10	***636 006584	DRUGS/DETAIL CODE 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

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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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/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

1211401433

04/23/12 05/07/12 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	
04/27	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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F/C:MC P/T:IP

FARR, WILLIAM G

1211401433

04/23/12 05/07/12 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

DATE	CODE	DESCRIPTION	QTY	AMOUNT
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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F/C:MC P/T:IP

FARR, WILLIAM G

1211401433

04/23/12 05/07/12 6

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 060381	Diagnostic Radiopharmaceutical NDC 00270131635	100	733.00
		AREA TOTAL ***		733.00
04/27	***350 060220	CT SCAN CT THORAX W/O DYE	1	1,245.00
05/02	060221	CT THORAX W/CONTRAST	1	2,147.00
		AREA TOTAL ***		3,392.00
04/24	***410 010932	RESPIRATORY SVC 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

1211401433

04/23/12 05/07/12 8

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	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		
05/04	010500	INITIAL EVALUATION	1	343.00
		AREA TOTAL ***		343.00
04/23	***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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/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

05/12/15

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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F/C:MC P/T:IP

FARR, WILLIAM G

1211401433

04/23/12 05/07/12 10

CHRISTOPHE L NGUYEN

WILLIAM G FARR
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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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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

05/12/15

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

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

05/12/15

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	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

Continued

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

05/12/15

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

04/23/12 05/07/12 16

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 060215	GASTR-INST SVS BRONCHOSCOPY, CLEAR AIRWAYS	AREA TOTAL ***	1	1,769.00 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 1210301383 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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F/C:SI 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

██████████ 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
	***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:SI 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

██████████ 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	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

Continued

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	
04/17	***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

04/17/12 04/20/12 6

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	
					630.38
04/17	***710 030040	RECOVERY ROOM RECOVERY ROOM 061-120 MINUTES	AREA TOTAL ***	1	1,632.00 1,632.00
04/17	***960 030755	PRO FEE THORACOSCOPY W/DX BX, UNILAT	AREA TOTAL ***	1	1,095.00 1,095.00
04/17	***964 020000	PRO FEE/ANES CRNA ANESTHESIA SERVICES (P) PER MINUTE	AREA TOTAL ***	116	1,276.00 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	
	***510	CLINIC		
04/11	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

5/03	I5205	M52 MEDICARE PART B - ERA	316	37.80CR
05/04	I5200	MC1 MEDICARE - ERA	316	54.52CR
5/17	I5212	276 UHC-AARP - ERA	850	13.64CR
6/11	I6112	523 COMMERCIAL INSURANCE PAYMENT	850	9.45CR
4/19	A5041	360 MEDICARE OUTPATIENT- ADJ	316	60.84CR
05/03	A5002	M52 MEDICARE PRO FEE- ADJ	316	28.75CR
5/04	A5041	MC1 MEDICARE OUTPATIENT- ADJ	316	60.84CR
5/04	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 070205	Diagnostic Radiopharmaceutical F18 FDG	1	826.50
		AREA TOTAL ***		826.50
03/29	***404 070030	PET SCAN 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

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
	***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
	***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

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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	
	***350	CT SCAN		
05/31	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
06/04	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
06/05	010483	HHN	1	128.00

Continued

F/C:MC P/T:IP

FARR, WILLIAM G 1215200150 05/31/12 06/06/12 5

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 002005	EMERGENCY ROOM ED VISIT LEVEL 5	1	1,207.00
		AREA TOTAL ***		1,207.00
06/02	***480 070055	CARDIOLOGY TTE W/DOPPLER, COMPLETE	1	1,589.00
		AREA TOTAL ***		1,589.00
05/31	***636 000124	DRUGS/DETAIL CODE 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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F/C:MC P/T:IP

FARR, WILLIAM G 1215200150 05/31/12 06/06/12 6

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 7

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

DATE	CODE	DESCRIPTION	QTY	AMOUNT
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

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

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	
06/06	***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

F/C:MC 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

316501 MEDICARE

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
	***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: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 060381	Diagnostic Radiopharmaceutical NDC 00270131635	100	733.00
		AREA TOTAL ***		733.00
06/10	***350 060221	CT SCAN CT THORAX W/O & W/DYE	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: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

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	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
TOTAL PAYMENTS/ADJUSTMENTS				0.00

24,276.63

24,276.63

24,276.63

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] 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 [REDACTED] 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

	CODE	DESCRIPTION	QTY	
	***637	PHARMACY-SELF ADMIN 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 [REDACTED] 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

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] 06/22/12

CODE	DESCRIPTION	QTY
	TOTAL CHARGES	8,141.52
	TOTAL PAYMENTS/ADJUSTMENTS	0.00

8,141.52

8,141.52

8,141.52

F/C:MC 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

05/19/12

316507 MEDICARE 1500 F/C MC

05/19/12

	CODE	DESCRIPTION	QTY	
	***335	CHEMOTHERP-IV		
05/10	080461	IRRIG CV ACCESS DEVICE-CHEMO	1	225.00
		AREA TOTAL ***		225.00
	***636	DRUGS/DETAIL CODE		
05/10	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

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	
	***510	CLINIC		
04/11	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

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

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

1210301383

04/17/12 04/20/12 4

CHRISTOPHE L NGUYEN

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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

Continued

F/C:MC 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

██████████ 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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F/C:MC P/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

██████████ 04/26/12

316507 MEDICARE 1500 F/C MC

██████████ 04/26/12

DATE	CODE	DESCRIPTION	QTY	AMOUNT
		AREA TOTAL ***		630.38
04/17	***710 030040	RECOVERY ROOM RECOVERY ROOM 061-120 MINUTES	1	1,632.00
		AREA TOTAL ***		1,632.00
04/17	***960 030755	PRO FEE THORACOSCOPY W/DX BX, UNILAT	1	1,095.00
		AREA TOTAL ***		1,095.00
04/17	***964 020000	PRO FEE/ANES CRNA 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 04/23/12 05/07/12 1

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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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

██████████ 05/13/12

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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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

05/13/12

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 P/T:IP

FARR, WILLIAM G 1211401433

04/23/12 05/07/12 4

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

	***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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F/C:MC P/T:IP

FARR, WILLIAM G 1211401433 04/23/12 05/07/12 5

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

Continued

F/C:MC P/T:IP

FARR, WILLIAM G 1211401433 04/23/12 05/07/12 6

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

Continued

F/C:MC P/T:IP

FARR, WILLIAM G

1211401433

04/23/12 05/07/12 8

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	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		
05/04	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

DATE	CODE	DESCRIPTION	QTY	AMOUNT
	***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	PREDNISON 5MG ORAL	16	6.00
05/01	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00
05/02	000124	PREDNISON 5MG ORAL	16	6.00
05/03	000124	PREDNISON 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	PREDNISON 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	PREDNISON 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	PREDNISON 5MG ORAL	4	1.50
05/06	001170	ENOXAPARIN SODIUM 10MG INJ	6	450.00
		AREA TOTAL ***		14,353.50

	CODE	DESCRIPTION	QTY	
	***637	PHARMACY-SELF ADMINS 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	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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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	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

Continued

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

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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	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

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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

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

E/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 070205	Diagnostic Radiopharmaceutical F18 FDG	1	826.50
		AREA TOTAL ***		826.50
03/29	***404 070030	PET SCAN 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

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	
	***343	Diagnostic Radiopharmaceutical		
03/29	070205	F18 FDG	1	826.50
		AREA TOTAL ***		826.50

	***404	PET SCAN		
03/29	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

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 070205	Diagnostic Radiopharmaceutical F18 FDG	1	826.50
		AREA TOTAL ***		826.50
03/29	***404 070030	PET SCAN 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

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 070205	Diagnostic Radiopharmaceutical F18 FDG	1	826.50
		AREA TOTAL ***		826.50
03/29	***404 070030	PET SCAN 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

F/C:MC P/T:OPT

FARR, WILLIAM G 1135400712 12/19/11 12/19/11 1

SHARMILA MEHTA

WILLIAM G FARR
1032 JONESVILLE LOCKHT H
UNION SC 29379

316501 MEDICARE

██████████ 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

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

	CODE	DESCRIPTION	QTY	
	***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	1,031.00
10/10	077336	CONTINUING RAD PHYSICS WEEK	1	557.00
10/10	077413	INTERMED TX 6-10 PHOTON/ELECTRON	1	856.00
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	1,031.00
		AREA TOTAL ***		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

Continued

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	CEFTRIAZONE SODIUM 250MG INJ	4	225.00
12/29	002939	CEFTRIAZONE 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	CEFTRIAZONE 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 ADMINS 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

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	AREA TOTAL ***	QTY	
				227.00
12/29	***960 PRO FEE			
	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

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	
	***343	Diagnostic Radiopharmaceutical		
12/01	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

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	
	***636	DRUGS/DETAIL CODE		
12/05	006584	HEPARIN SODIUM 10U INJ	50	100.00
		AREA TOTAL ***		100.00

	***940	OTHER RX SVS		
12/05	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: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

	CODE	DESCRIPTION	QTY	
	***637	PHARMACY-SELF ADMIN 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

F/C:MC P/T:IP

FARR, WILLIAM G 1130601593 11/02/11 11/06/11 5

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	
	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
10/20	***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 SULEFATE 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

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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

DATE	CODE	DESCRIPTION	QTY	AMOUNT
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

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

F/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

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

DATE	CODE	DESCRIPTION	QTY	AMOUNT
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

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

F/C:MC P/T:OPT

FARR, WILLIAM G 1124300092 08/31/11 08/31/11 1

DREW MONITTO

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	
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

F/C:MC P/T:OPT

FARR, WILLIAM G 1122301465 08/12/11 08/12/11 1

SHARMILA MEHTA

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

08/18/11

316507 MEDICARE 1500 F/C MC

08/18/11

	CODE	DESCRIPTION	QTY	
08/12	***343 070205	Diagnostic Radiopharmaceutical F18 FDG	1	1,066.05
		AREA TOTAL ***		1,066.05
08/12	***404 070030	PET SCAN 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	
	***343	Diagnostic Radiopharmaceutical		
08/09	065240	LOCM 300-399MG/ML IODINE, PER 1ML	100	515.00
		AREA TOTAL ***		515.00
	***350	CT SCAN		
08/09	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: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

05/17	CODE	DESCRIPTION	QTY	
	***320	DX X-RAY		
	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: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	
	***343	Diagnostic Radiopharmaceutical		
04/11	025345	GAD-BASE MR CONTRAST NOS,1ML	15	200.85
		AREA TOTAL ***		200.85
	***611	MRI-BRAIN		
04/11	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

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

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

316501 MEDICARE

WILLIAM G FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

██████████ 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

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

316501 MEDICARE

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

██████████ 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

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
	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

02/02	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

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

01/21	CODE	DESCRIPTION	QTY	
	***761	TREATMENT RM		
	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

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

DATE	CODE	DESCRIPTION	QTY	AMOUNT
07/20	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

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

DATE	CODE	DESCRIPTION	QTY	AMOUNT
09/14	***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: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	
	***343	Diagnostic Radiopharmaceutical		
10/11	065240	LOCM 300-399MG/ML IODINE, PER 1ML	100	515.00
		AREA TOTAL ***		515.00
	***350	CT SCAN		
10/11	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

E/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	
	***010	ORDER COMMUNICATION MESSAGE		
10/18	099022	POC GLUCOSE	1	0.00
		AREA TOTAL ***		0.00
	***343	Diagnostic Radiopharmaceutical		
10/18	070205	F18 FDG	1	1,066.05
		AREA TOTAL ***		1,066.05
	***404	PET SCAN		
10/18	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	
	***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

F/C:MC P/T:GIC

FARR,WILLIAM G

1029800104

10/25/10 10/25/10 1

SARAH I VIDITO

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	
	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	
	***010	ORDER COMMUNICATION MESSAGE		
10/26	060379	CT GUIDANCE BX, ASP, INJ, LOCAL	1	0.00
		AREA TOTAL ***		0.00
	***270	MED/SUR SUPPLY		
10/26	031700	Z TRAY, BIOPSY DISPOSABLE	1	37.00
		AREA TOTAL ***		37.00
	***300	LABORATORY		
10/22	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
	***320	DX X-RAY		
10/26	050338	CHEST X-RAY	1	236.00
		AREA TOTAL ***		236.00
	***350	CT SCAN		
10/26	060124	CT SCAN FOR NEEDLE BIOPSY	1	1,767.00
		AREA TOTAL ***		1,767.00
	***369	OR/OTHER		
10/26	060313	Z CT INVASIVE PROCED 031-060 MIN	1	266.00
		AREA TOTAL ***		266.00
	***636	DRUGS/DETAIL CODE		
10/26	001026	DIPHENHYDRAMINE HCL 50MG INJ	1	225.00

Continued

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

F/C:MC P/T:GIC

FARR, WILLIAM G

1030200062

11/02/10 11/02/10 1

SARAH I VIDITO

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 1031200979 11/08/10 11/08/10 1

CHRISTOPHE L NGUYEN

WILLIAM GAULT FARR
1032 JONESVILLE LOCKHART
HWY
UNION SC 29379

316501 MEDICARE

11/14/10

316507 MEDICARE 1500 F/C MC

11/14/10

	CODE	DESCRIPTION	QTY	
	***510	CLINIC		
11/08	040035	EST PATIENT EXPANDED	1	120.00
		AREA TOTAL ***		120.00
	***960	PRO FEE		
11/08	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 010961	LABORATORY ASSAY OF CREATININE	1	51.00
		AREA TOTAL ***		51.00
11/10	***343 009106	Diagnostic Radiopharmaceutical GAD-BASE MR CONTRAST NOS, 1ML	15	200.85
		AREA TOTAL ***		200.85
11/10	***611 004094	MRI-BRAIN 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 070117	NUC MED/DX LUNG DIFFERENTIAL FUNCTION	1	1,083.00
		AREA TOTAL ***		1,083.00
11/11	***343 070269	Diagnostic Radiopharmaceutical TC99M MAA	1	72.10
		AREA TOTAL ***		72.10
11/11	***460 030000	PULMONARY FUNC 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	
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

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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F/C:MC P/T:IP

FARR, WILLIAM G 1032100540 12/02/10 12/15/10 2

CHRISTOPHE L NGUYEN

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316501 MEDICARE

12/21/10

316507 MEDICARE 1500 F/C MC

12/21/10

	CODE	DESCRIPTION	QTY	
	***210	CORONARY CARE		
12/02	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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F/C:MC P/T:IP

FARR, WILLIAM G 1032100540 12/02/10 12/15/10 3

CHRISTOPHE L NGUYEN

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UNION SC 29379

316501 MEDICARE

██████████ 12/21/10

316507 MEDICARE 1500 F/C MC

██████████ 12/21/10

DATE	CODE	DESCRIPTION	QTY	AMOUNT
12/06	000333	NORMAL SALINE SOL 500ML INFUSION	1	100.00
		AREA TOTAL ***		1,100.00

DATE	CODE	DESCRIPTION	QTY	AMOUNT
	***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

DATE	CODE	DESCRIPTION	QTY	AMOUNT
	***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

DATE	CODE	DESCRIPTION	QTY	AMOUNT
	***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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F/C:MC P/T:IP

FARR, WILLIAM G

1032100540

12/02/10 12/15/10 4

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316501 MEDICARE

██████████ 12/21/10

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██████████ 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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F/C:MC P/T:IP

FARR, WILLIAM G 1032100540

12/02/10 12/15/10 5

CHRISTOPHE L NGUYEN

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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

	CODE	DESCRIPTION	QTY	
***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	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

	CODE	DESCRIPTION	QTY	
***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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F/C:MC P/T:IP

FARR, WILLIAM G 1032100540

12/02/10 12/15/10 6

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12/21/10

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 060220	CT SCAN CT THORAX W/O DYE	1	1,305.00
		AREA TOTAL ***		1,305.00
12/02	***360 020250	OR SERVICES SURGERY 241-300 MIN	1	19,497.00
		AREA TOTAL ***		19,497.00
12/02	***370 010000	ANESTHESIA ANESTHESIA SERVICES (T) PER MINUTE	305	3,050.00
		AREA TOTAL ***		3,050.00
12/02	***410 020214	RESPIRATORY SVC MDI (METER-DOSE INHALER) TX	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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F/C:MC P/T:IP

FARR, WILLIAM G

1032100540

12/02/10 12/15/10 7

CHRISTOPHE L NGUYEN

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UNION SC 29379

316501 MEDICARE

12/21/10

316507 MEDICARE 1500 F/C MC

12/21/10

	CODE	DESCRIPTION	QTY	
12/05	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	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

	***636	DRUGS/DETAIL CODE	QTY	
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 SULEFATE 10MG INJ	1	250.00
12/04	002581	MORPHINE SULFATE 10MG INJ	1	250.00

Continued

F/C:MC P/T:IP

FARR, WILLIAM G

1032100540

12/02/10 12/15/10 8

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316501 MEDICARE

12/21/10

316507 MEDICARE 1500 F/C MC

12/21/10

	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

	CODE	DESCRIPTION	QTY	
	***637	PHARMACY-SELF ADMINS 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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F/C:MC P/T:IP

FARR, WILLIAM G

1032100540

12/02/10 12/15/10 9

CHRISTOPHE L NGUYEN

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 UNION SC 29379

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12/21/10

316507 MEDICARE 1500 F/C MC

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	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	SENNNA S TABLET	2	3.00
12/06	000155	SENNNA 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	SENNNA 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

Continued

F/C:MC P/T:IP

FARR, WILLIAM G 1032100540 12/02/10 12/15/10 10

CHRISTOPHE L NGUYEN

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UNION SC 29379

316501 MEDICARE

12/21/10

316507 MEDICARE 1500 F/C MC

12/21/10

	CODE	DESCRIPTION	QTY	
12/07	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
12/12	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

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

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

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

2/06	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
2/08	A5041	MC5 Adjustment Medicare Outpatient	316	53.40CR
		TOTAL PAYMENTS/ADJUSTMENTS		248.86CR

34.14

0.00

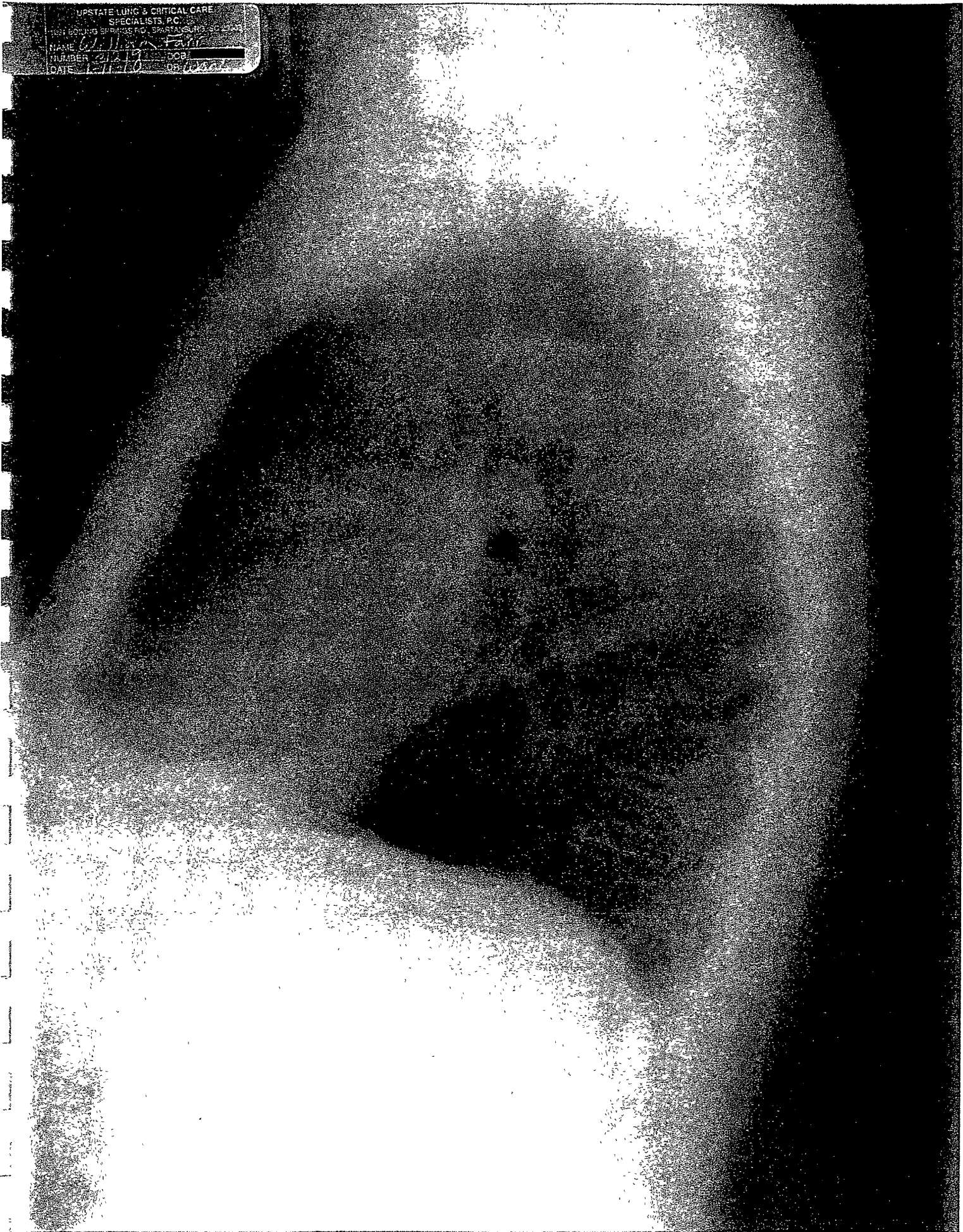
34.14

UPSTATE LUNG & CRITICAL CARE
SPECIALISTS, P.C.

NAME *William Fay*
NUMBER *212-19* DOB
DATE *1/11/78*



UPSTATE LUNG & CRITICAL CARE
SPECIALISTS, P.C.
1001 BOWLING GREEN BLVD., SPARTANBURG, SC 29303
NAME *William F. ...*
NUMBER *211-19...*
DATE *1-11-10* OR *10/11/10*



FARR v. WAN
Medical Records Index

Volume I

Palmetto Hematology Oncology (Sarah Vidito, D.O.)

1/5/2010: Office Visit..... 1

Upstate Lung & Critical Care (Sau-Yin Wan, M.D.)

1/11/2010: Office Visit and CXR Films with Report..... 2

Palmetto Hematology Oncology (Sarah Vidito, D.O.)

7/19/2010: Office Visit..... 3

Ronald H. Littlefield, M.D.

10/6/2010: New Patient Visit 4

Piedmont Imaging

10/7/2010: CXR and Report..... 5

Spartanburg Regional Healthcare System

10/11/2010: Radiology Report: Chest CT 6

Lung and Chest Medical Associates (Raul B. Cruz, M.D.)

10/14/2010: New Patient Visit 7

Ronald H. Littlefield, M.D.

10/14/2010: Office Visit..... 8

Spartanburg Regional Healthcare System

10/18/2010: Radiology Report: PET Scan 9
10/19/2010: Operative and Radiology Reports: Transbronchial Biopsy and CXR 10
 Surgical Pathology and Cytopathology Reports 11
 Microbiology Reports 12
10/26/2010: Radiology Reports: CT-Guided Biopsy and CXR 13
 Cytopathology Report 14
 Microbiology Reports 15

Lung and Chest Medical Associates (Raul B. Cruz, M.D.)

11/1/2010: Office Visit 16

Palmetto Hematology Oncology (Sarah Vidito, D.O.)

11/2/2010: Office Visit 17
11/8/2010: New Patient Consultation with Dr. Corso 18

Gibbs Surgical Oncology (Christophe L. Nguyen, M.D.)

11/8/2010: New Patient Visit 19

Ronald H. Littlefield, M.D.

11/10/2010: Office Visit 20

Spartanburg Regional Healthcare System

11/10/2010: Radiology Report: Head MRI 21
11/11/2010: Radiology Report: Differential Lung Perfusion 22

Gibbs Surgical Oncology (Christophe L. Nguyen, M.D.)

11/15/2010: Office Visit 23
11/16/2010: Consult from Dr. Littlefield 24

Spartanburg Regional Healthcare System

12/2/2010: Operative Report: Bronchoscopy and Thoracotomy with Bilobectomy 25

Radiology Report: CXR 26
Surgical Pathology Reports 27
Lab Reports 28
12/3/2010—12/22/2010: Radiology Reports 29
12/15/2010: Discharge Summary: S/P Bronchoscopy and Thoracotomy with Bilobectomy 30

Gibbs Surgical Oncology (Christophe L. Nguyen, M.D.)

12/22/2010: Office Visit 31

Lung and Chest Medical Associates (Raul B. Cruz, M.D.)

1/4/2011: Office Visit 32

Palmetto Hematology Oncology (Steven Corso, M.D.)

1/17/2011: Office Visit 33

Ronald H. Littlefield, M.D.

1/18/2011: Office Visit 34

Gibbs Surgical Oncology (Christophe L. Nguyen, M.D.)

1/19/2011: Office Visit 35
1/21/2011: Consultation by Dr. Drew Monitto: Radiation Oncology 36
2/2/2011: Office Visit 37

MUSC

2/14/2011: Surgical Pathology Report 38
2/15/2011: New Patient Visit 39

Palmetto Hematology Oncology (Sharmila Mehta, M.D.)

2/22/2011: Office Visit 40

Spartanburg Regional Healthcare System

3/10/2011: Operative Report: Insertion of Port-A-Cath 41

Palmetto Hematology Oncology (Sharmila Mehta, M.D.)

3/21/2011: Office Visit..... 42

Lung and Chest Medical Associates (Raul B. Cruz, M.D.)

4/4/2011: Office Visit..... 43

Ronald H. Littlefield, M.D.

4/11/2011: Office Visit..... 44

Palmetto Hematology Oncology (Sharmila Mehta, M.D.)

4/11/2011—5/10/2011: Office Visits 45

Lung and Chest Medical Associates (Raul B. Cruz, M.D.)

5/31/2011: Office Visit..... 46

Spartanburg Regional Healthcare System

8/9/2011: Radiology Report: Chest CT 47

Palmetto Hematology Oncology (Sharmila Mehta, M.D.)

8/10/2011: Office Visit..... 48

Spartanburg Regional Healthcare System

8/12/2011: Radiology Report: PET Scan/Whole Body CT..... 49

Lung and Chest Medical Associates (Raul B. Cruz, M.D.)

8/17/2011: Office Visit..... 50

Spartanburg Regional Healthcare System

8/22/2011: Operative Report: Fiberoptic Bronchoscopy 51

Cytopathology Report..... 52

Palmetto Hematology Oncology (Sharmila Mehta, M.D.)

8/30/2011—12/5/2011: Office Visits 53

Spartanburg Regional Healthcare System

8/31/2011: Follow-up Notes: Radiation Oncology 54
10/18/2011: Admission History and Physical: Recurrent Lung Cancer 55
 Consult from James G. Botts, M.D. 56
11/2/2011: Radiology Report: Chest CT 57
12/1/2011: Radiology Report: Chest CT 58
12/20/2011: Surgical Pathology Report 59
12/29/2011: Admission History and Physical: Recurrent Lung Cancer 60

Ronald H. Littlefield, M.D.

12/29/2012: Office Visit..... 61

Palmetto Hematology Oncology (Sharmila Mehta, M.D.)

1/16/2012: Office Visit..... 62

Ronald H. Littlefield, M.D.

1/9/2012: Office Visit..... 63

Spartanburg Regional Healthcare System

3/12/2012: Radiology Reports: Chest and Abdomen CT Scans..... 64

Lung and Chest Medical Associates (Raul B. Cruz, M.D.)

3/13/2012—3/23/2012: Office Visits 65

Spartanburg Regional Healthcare System

3/19/2012: Cytopathology Reports 66

Palmetto Hematology Oncology (Sharmila Mehta, M.D.)

3/27/2012: Office Visit..... 67

Gibbs Surgical Oncology (Christophe L. Nguyen, M.D.)

4/11/2012: Office Visit..... 68

Spartanburg Regional Healthcare System

4/17/2012: Operative Report: Lung Biopsy, Robotic-Assisted..... 69
Surgical Pathology Report..... 70
4/20/2012: Discharge Summary: Status Post Lung Biopsy..... 71
4/23/2012: Admission History and Physical: Shortness of Breath 72
4/24/2012: Consult by Dr. Raul M. B. Cruz..... 73
5/3/2012: Cytopathology Report..... 74
5/4/2012: Consult by Dr. Brian Bell 75

Lung and Chest Medical Associates (Raul B. Cruz, M.D.)

5/25/2012: Office Visit..... 76

Volume II

Spartanburg Regional Healthcare System

5/31/2012 Admission Face Sheet and H&P: Shortness of breath..... 77
Progress Notes and Physician's Orders 78
Home Care Referral and Transfer to Hospice Care..... 79
6/10/2012 ED Record: Pneumonia 80
6/10/2012—6/12/2012 Admission Face Sheet and Consults: Pneumonia..... 81
Physician's Orders and Progress Notes 82
Radiology Reports, Labs and Microbiology Reports 83
ECG Strips..... 84
Respiratory Therapy..... 85

6/12/2012—6/16/2012 Admission Face Sheet: Respiratory Failure 86
Transfer Report: Regional Hospice Home..... 87
Physician’s Orders and Progress Notes 88
Abstract Summary Form and Discharge Summary 89

Regional Hospice House

6/7/2012—6/16/2012: Face Sheets and Plans of Care 90
Hospice Initial Assessment and Re-evaluations..... 91
Progress Notes 92
Discharge Summary 93

Hospice Care of South Carolina

6/16/2012—6/19/2012: Patient Information and Initial Assessment Summaries 94
HPI and Plan of Care 95
Charts and Physician’s Orders 96
Death Information 97





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

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

Page: - 2 -

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 BOILING SPRINGS RD. SUITE 200

ALBANY, NY 12206

NAME: [REDACTED]

NUMBER: 2119

DOB: [REDACTED]

UPSTATE LUNG & CRITICAL CARE
SPECIALISTS, P.C.
1091 BOLINGBROOK RD., SPARTANBURG, SC 29303
NAME *William Fair*
NUMBER *2121* DOB
DATE *12/10/00* DR *WFAIR*

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:

Complains 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 Bolling 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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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.**

Joseph J. Falduto, M.D.
Joseph A. Bassett, II, M.D.
David H. Lee, M.D.
Louis De La Torre, M.D.
Sau Yin Wan, M.D.
Christopher Alvarado, M.D.
Farhan Siddiqui, M.D.
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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 Méhta, 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.

GENITOURINARY: 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 Vytorin 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



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

m: 1/1

Piedmont Imaging In

Farr William

M 08-72951

Acc: 08-110208

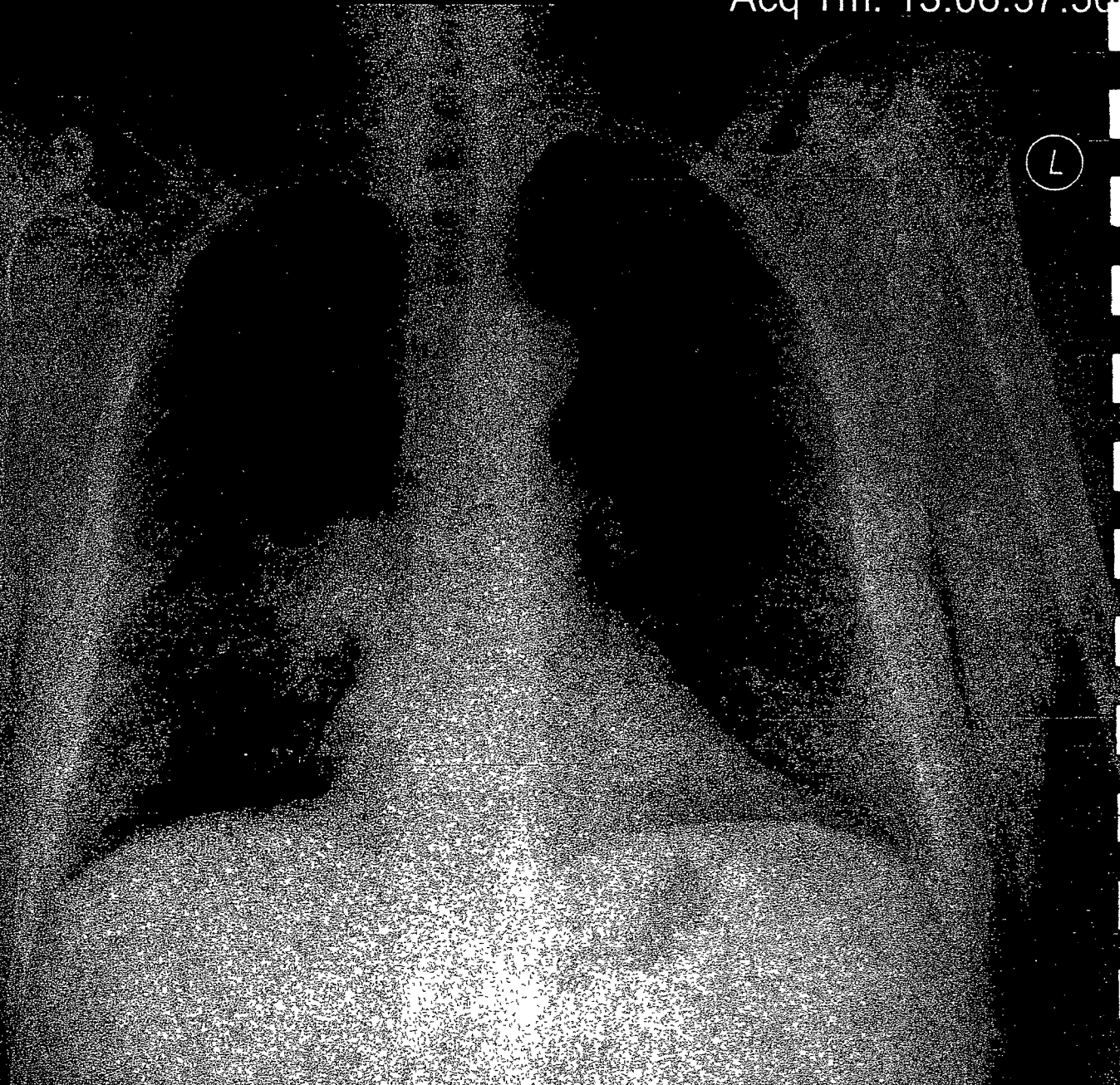
2010 Oct 0

Acq Tm: 13:06:37.50

CHEST

ROSSY

(L)



n:DCM / Lin:DCM / Id:ID

V:4096 L:2048

IMAGE MAY NOT BE TO SCALE

Piedmont CXR 001



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.





8-729514-1102087-005

Patient Chief Complaint Form - General

Name: Farr, William Age: 68 yrs Date: 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>Spantau burg Regional</u>
Bone scan	<u>?</u>	_____
Myelogram	_____	_____
Cat scan	_____	_____
MRI	<u>?</u>	<u>Spantau burg 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

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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

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684 N. Pine Street
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

NAME William Farr

DATE 10-6-10

NAME _____

DATE _____

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: _____

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: DL: 466

Symptoms/Comments _____

Physician's Signature [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: Farr, William Date of Birth: [REDACTED] SSN: [REDACTED]

Patient Address: 1032 JONESVILLE LOCKHART HWY

Patient City: UNION State: SC Zip: 29399

Email: _____ Email2: _____

Patient Phone: Primary (864) 251-0531 Secondary _____ Sex M Approx. Weight: 137

Marital Status: Married Employer: _____ Employer Phone: _____

Referring Physician: LITTLEFIELD MD, RONALD Next Appointment: _____

Emergency Contact Name: LISA FARR Emergency Contact Relationship: DAUGHTER

Emergency Contact Address: 1032 JONESVILLE LOCKHART HWY. UNION SC

Phone: 216-2789

Responsible Party: Farr, William Date of Birth: [REDACTED]

Resp. Party Address: _____

Resp. Party City: _____ State: _____ Zip: _____

Resp. Party Phone: Primary (864) 251-0531 Secondary _____

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: [REDACTED] Date of Birth: [REDACTED] Relation to Patient: SELF

Sex: M Group Name: _____

Group Number: _____ Member ID#: [REDACTED] 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

Piedmont SC

(864) 542-0033 Phone

(864) 542-0025 Fax

Date of Service: 10/7/2010



8-729514-1102087-004



8-729514-1102087-004

Patient Name: Farr, William		Date of Birth: [REDACTED]
Patient ID: 729514	Patient MRN: _____	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	<input type="checkbox"/> STAT <input type="checkbox"/> CALL REPORT
DIAGNOSIS FROM DOCTORS ORDER: _____		PT WT: _____
HISTORY: _____		
SURGICAL: <input type="checkbox"/> No Surgery <input type="checkbox"/> Appendectomy <input type="checkbox"/> Renal <input type="checkbox"/> Lung <input type="checkbox"/> Cardiac <input type="checkbox"/> Brain <input type="checkbox"/> Spine <input type="checkbox"/> Cholecystectomy <input type="checkbox"/> Hysterectomy <input type="checkbox"/> Joint/Extremity on present scan Other: _____		
Details: _____		
PRIOR FILMS: <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> With Present Study <input type="checkbox"/> Awaiting films from outside site		
CONTRAST ALLERGIES: <input type="checkbox"/> None <input type="checkbox"/> Iodinated <input type="checkbox"/> Gad		
Details: _____		
Contrast: <input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> Oral Iodinated (Gastro) <input type="checkbox"/> Oral Barium Based (Barocat) <input type="checkbox"/> Intraarticular	<input type="checkbox"/> IV Type: _____ Dose: _____	<input type="checkbox"/> Radiopharmaceutical Type: _____ Dose: _____
Other Drugs Used: _____		
EXAM COMPLICATIONS: <input type="checkbox"/> None <input type="checkbox"/> Other <input type="checkbox"/> Contrast Reaction <input type="checkbox"/> IV Extravasation		
Details: _____		
Exam Series: _____	Images: _____	Images Right to Left <input type="checkbox"/> Tech: _____ Images Left to Right <input type="checkbox"/>
FILMS TO BE READ BY: _____		FILM DELIVERY: None
TELERAD STUDY TO: _____		
<input type="checkbox"/> CALL BACK	<input type="checkbox"/> DICTATED, CALL BACK	DICTATED BY:
RADIOLOGIST NOTES:		



8-728514-1102087-002

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
Jay [Signature]

Date 10/07/2010

Witness

Date 10/07/2010

Piedmont SC

Patient Information

3

Patient Name: Farr, William SSN: [REDACTED]
 Patient Phone: (864) 251-0531 DOB: [REDACTED] Sex/Age: M / 68 yrs MRN: [REDACTED]
 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
 CPT Codes: 1)71020 XR-Chest 2 views
 Archive
 Discm
 Copies
 CD

Comments: CC Archive #: [REDACTED] MOD #: [REDACTED] L or R Ext: [REDACTED]
 Technologist: [REDACTED] Contrast Type: [REDACTED] Amount: [REDACTED]
 Contrast Dr.: [REDACTED] Reading Dr.: Ceballos
 Creatinine Results: [REDACTED] Date: 10-7-10

- 74000 XR-Abdomen, 1 AP view
- 74010 XR-Abdomen, AP and additi 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
- 73060 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
- 73585 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
- 77078 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
- 72080 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
- 78098 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 Inc
 Patient Name: Farr, William
 ID: 729514 MRN: 729514
 DOS: 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

SPARTANBURG REGIONAL MEDICAL CENTER
Radiology Report
North Grove

-878-

NAME: FARR, WILLIAM GAULT

UNIT #: 000478684

ORDERING PHYSICIAN: LITTLEFIELD, RONALD H

CI#: 2876972

LOC: OPT

DOB: [REDACTED]

AN#: S1028400749

Pt. Type: OPT

NORTH GROVE RADIOLOGY

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

UNIT #: 000478684

ORDERING PHYSICIAN: LITTLEFIELD, RONALD H

CI#: 2876972

LOC: OPT

DOB: [REDACTED]

AN#: S1028400749

Pt. Type: OPT

NORTH GROVE RADIOLOGY

Checkin-Exam Code Summary
2876972-65095

is unremarkable.

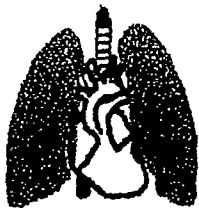
Bone window images demonstrate no significant bony abnormality suggestive of metastatic disease.

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



Scott from [unclear]

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

- Devane
- Littlefield

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: 1632 Jonesville Lockhart 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? _____

- colon 12

- Shulm -> IPPD -> 7.50

- fertility
- ABG
- anemia
- skin
- fx. bone

II. Current Medications (list all prescribed and over the counter medications including inhalers and vitamins)
Klor-Con M20, Nifedipine ER-30mg,
Triamterene-HCTZ 37.5-25
Vytorin 10-40 mg
Boyer 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
- Amphibiosis
- Sarcoid
- Cataracts
- Other: _____

- Heart Attack
- CHF (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
of
chess
y
g
bl
OTB
PPD
Quin
Buitz

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 _____	<u>Hernia</u> _____
Implanted Defibrillator _____	Heart Valve replacement _____	
Other <u>Colonoscopy</u> _____		

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

VII. Family History:

Mother	Alive/Deceased <u>Deceased</u>	Age/Age at death _____	Health Conditions/Cause of death _____
Father	Alive/Deceased <u>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 _____	Other: _____
Heart Disease _____	Sleep Apnea _____	

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:** Snoring 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: 10-7-10
 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.

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 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.

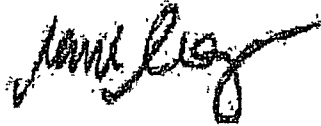
Immunizations: Pneumococcal 2006. Influenza 2010.

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 Fari 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
Triamterene 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

UNIT #: 000478684

ORDERING PHYSICIAN: CRUZ, RAUL MANUEL B

CI#: 2882885

LOC: OPT

DOB: [REDACTED]

AN#: S1028800355

Pt. Type: OPT

OPT REGISTRATION

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

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

UNIT #: 000478684

ORDERING PHYSICIAN: CRUZ, RAUL MANUEL B

CI#: 2883926

LOC: END

DOB: [REDACTED]

AN#: S1029200952

Pt. Type: END

ENDOSCOPY SERV

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, LAEHAM, 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: - ENDOSCOEY 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, F11400, 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 1032 JONESVILLE LOCKHART HWY, Union, SC, 29379 864-251-0531	Accession #:	SC10-1801
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 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



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 866-388-5500
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

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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 #MF10292006

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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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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3/27/2013

J. David Wren, MD PHD, Director

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

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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

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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: ██████████
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 DISCHAR

PT Type: ENDOSCOPY

PHYS FAX#: 864 5823750

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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: ██████████
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

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