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 Santa Rosa CA 95401
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Place of Service Santa Rosa
 Windsor

EXAM	FEE	LABORATORY
New Patient		
Problem Focused	99201	Basic Metabolic Panel
Expanded Problem Focused	99202	Comprehensive Metabolic Panel, Mg, PO4
Detailed	99203	CBC & Diff
Comprehensive	99204	CHEM 20
Comprehensive/High Complex	99204	
Initial Visit/Procedure	99025	Cholesterol, Triglycerides
		HDL
		Digoxin
		Ferritin
		Folate
		GC Screen
		Glucose
		Glucose 1 HR
		Glycosylated HGB (A1C)
		HCT
		Hep BSAG
		Hepatitis Profile
		HGB & HCT
		HIV
		Iron & TIBC
		Kidney Profile
		Liver Profile
		Mono Test
		Pro Time
		PSA
		Sed. Rate
		Sirep Screen
		Thyroid Profile
		TSH
		Urinalysis w/ micro
		24 Hour Urine for Cr Cl, Urea Cl, Protein
		24 Hour Urine for Cr Cl, Oxalate Uric acid, Ca
		Urine Culture, if indicated
		1PTH
		OTHER TESTS

Tests / Procedures To Order

Diagnosis / ICD - 9

COPAY DUE

RETURN APPOINT INFO

Physicians Signature _____

Tax ID Number

555-22-4444

Payment Amount