

Client		Order	
Account #:	LAWIM	Billing Type:	Medicaid
Name:	IthacaMed (Dr. Law)	Collected:	02/07/2022 16:42
Address:	404 N. Cayuga St. Ithaca NY, 14850	Order #:	103635CE14564
		Bar #:	LAWIM#103635CE14564_
A131752255			



Cayuga
MEDICAL CENTER
A Member of Cayuga Health System

Cayuga Medical Center
101 Dates Drive
Ithaca, NY 14850
Fax: 607-274-4481
(607)274-4474

Patient	Primary Insurance	Secondary Insurance
Clinic Pat. ID: 16460	Network:	Network:
Name: BLAYK,BONZEANNE R	Type: Medicaid	Type:
MRN#: M000597460	Name: MOLINA	Name:
SSN#: XXX-XX-9647	HEALTHCARE OF NY (MEDICAID REPLACEMENT - HMO)	Address:
Race:	Address: PO BOX 22615 LONG BEACH, CA 90801	Policy #:
Sex/DOB/Age: Female 05/01/1956 65 Years	Policy #: AN33246W	Group #:
Address: 1668 TRUMANSBURG RD ITHACA, NY 14850	Subscriber: BLAYK,BONZEANNE ROSE - Self	Subscriber DOB:
Phone: (607)351-4879	Subscriber DOB: 05/01/1956	Subscriber Address:
	Subscriber 1668	
	Address: TRUMANSBURG RD ITHACA, NY 14850	

Guarantor	Ordering Physician	Miscellaneous
Guarantor: BLAYK,BONZEANNE R	Physician: Law,Adam	Floor # / Room #: ES ORDER:1093932H14564
Address: 1668 TRUMANSBURG RD ITHACA, NY 14850	Physician #: ADA0008	Entered By: ATHENA ORDER
Phone: (607)351-4879	UPIN #:	Req #: 72084
DOB: 05/01/1956	NPI #: 1023014974	Ordering Location:
Relationship: Self		

Specimens	Temperature	Diagnosis Codes
2 mL Serum	SST	Refrigerated
EST	Estradiol (CPT: 82670)	F64.0
	Notes: peak and trough - 2 tests.	
	Electronically signed by ADAM LAW	
TEST	Testosterone (CPT: 84403)	F64.0
	Notes: Electronically signed by ADAM LAW	

Electronically Signed By: Law,Adam , MD , 02/07/2022 16:09

