

Cayuga Medical Center LIVE
101 Dates Drive
Ithaca, NY 14850

PATIENT ABSTRACT

Page: 1
Date: 09/28/22 13:05
User: MEDITECH, INFCE

Patient: Blayk, Bonzeanne R Account Number: A00135688513 Facility: Cayuga Medical Center

Service Date/Time: 09/21/22 11:55 Med Rec Num: M000597460
Room-Bed: Obs Pt: N
Length of Stay: 1 Patient Class: REF-NY
Discharge Date/Time: Abs Fin Class: MEDICAID
Discharge Disposition: HOME Status: Final
Product Line: Status Date: 09/28/22
Reg Type: Referred

From Institution: Birthdate: 05/01/1956
Admit Priority: ELECTIVE File Est DOB:
Admission Source: HOME Age: 66
Admitted thru ED: Age At Reg : 66
Arrival Mode: Birth Sex: F
Ambulance Run Number: Legal Sex: F
Readmission Code: ABS Sex: F
Expected Length of Stay: Marital Status: DIVORCED
Admission Legal Status: Language: ENGLISH
Country of Origin: Zip: 14850
County: TOMPKINS
Ethnicity AMERICAN Race WHITE
Additional Ethnicities Additional Races

Weight :
Weight (g) :
Height :
Height (in) :

Discharge Data

Discharge Date/Time:
Discharge Disposition: HOME
Discharge Location:
Discharge Comment:
To Institution:

Provider Data

	Name	Specialty	Type
Primary Care Provider:	Midura, Alan T	MED	MD
Attend Provider:	Law, Adam	INTMED	MD
Family Provider:			
Referring Provider:			

Other Providers

Name	Specialty	Type	Association	Date
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Services:

Start Date/Time	Registration Service	Specialty	Days	Main Specialty
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Special Care Units/Locations

Start Date/Time	End Date/Time	Days	Special Care Unit	Location
09/21/22 11:55		1		LAB

Maternity Data

Length of Labor: Number of Live Births: 0
Delivery Date/Time: Number of Stillborns: 0
Delivery Method:

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Stillborn Data

Newborn Data

Account Number Medical Record Number Sex Weight Height

ABS Financial Class: MEDICAID
Client:

Status: UR
Balance: 523.00
UR Balance: 523.00
AR Balance: 0.00
BD Balance: 0.00
Billed Charges: 0.00

---Standard Insurance Order---

Insurance Policy Number
MOLINA
SP

Patient's Reason for Visit Diagnosis (1st Dx is Admit Dx if Admit checkbox selected)

Primary Code Set: ICD-10

Code Set	Code	Name	Alt	Source	Admit	Visit
ICD-10	F64.0	Transsexualism	No	ABS		X

Diagnosis Data:

Primary Code Set: ICD-10

Eff Date	Code Set	Code	Name	Alt	No	Src	POA
09/21/22	ICD-10	F64.0	Transsexualism			ABS	

EAPG Data

APG Source: APG Version: 3.15
HCPCS/CPT Version: January 1, 2022 Version Primary Grouper Version: Version 39.1
Last Interactive Group: Last Batch Group:

Total APG Claim

Total Reimbursement:	Total Full APG Weight:
Total APG Payment:	Total Adjusted APG Weight:
Total Transition Payment:	Total Claim Payment:
Total Non Transition Payment:	Charges: 523.00
Total Existing Payment:	Outlier:
Total Blended Payment:	
Total Add On:	

Other Data:

HISPANIC: 0
MOMS MR #:
SYSTOLIC BLOOD PRESSURE ON ARRIVAL:
HEART RATE ON ARRIVAL:
ANESTHESIA TYPE:
MS DRG:
MS DRG DESCRIPTION:
MS DRG CASE WEIGHT:

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MS DRG LENGTH OF STAY:
MS DRG EXPECTED REIMBURSEMENT:
SEVERITY OF ILLNESS:
NY APR DRG LENGTH OF STAY:
ABS OR TIME:
Birthweight (g):
First Assist CPT:
First Assist Modifier:
First Assist: