

**WESTSIDE MEDICAL CLINIC**

**Procedure Comparison Report - By Provider**

Procedures: (000000000) - (ZZZZZZZZZ) , Categories: ( ) - (ZZ)

Providers: (00000) - (ZZZZZ)

Code	Description	Period: (6/1/2003) - (6/30/2003)			Period (5/1/2003) - (5/30/2003)		
		Units	Amount	Average	Units	Amount	Average
<b>Provider: 71312 SIDNEY FOSTER MD</b>							
57410	PELVIC EXAM	5.00	142.15	27.43	8.00	227.44	28.43
59400	ROUTINE OBSTETRIC CARE	3.00	243.10	81.10	0.00	0.00	0.00
59410	VAGINAL DELIVERY	1.00	1,800.00	1,800.00	2.00	3,600.00	1,800.00
59430	POSTPARTUM CARE	1.00	66.40	66.40	9.00	597.60	66.40
71010	X-RAY - CHEST	4.00	414.00	103.50	1.00	103.50	103.50
88150	PAP SMEAR	2.00	55.00	27.50	4.00	110.00	27.50
99261	CONSULTATIONS -	4.00	170.40	42.60	1.00	42.60	42.60
15780	DERMABRASION; TOTAL	1.00	28.43	28.43	6.00	170.58	28.43
15783	DERMABRASION	3.00	188.25	62.75	9.00	564.75	62.75
80019	SMAC	2.00	50.00	25.00	3.00	75.00	25.00
81000	URINALYSIS	1.00	15.50	15.50	4.00	62.00	15.50
82465	CHOLESTEROL TEST	2.00	40.00	20.00	8.00	320.00	20.00
85021	CBC	1.00	20.00	20.00	5.00	100.00	20.00
93000	EKG -	3.00	1,350.00	450.00	1.00	450.00	450.00
99201	NEW PATIENT	1.00	56.00	56.00	2.00	112.00	56.00
99211	OFFICE VISIT	1.00	25.00	25.00	3.00	75.00	25.00
99213	OFFICE VISIT MODERATE	4.00	208.00	52.00	2.00	104.00	52.00
99391	EXAM - ESTABLISHED	1.00	35.00	35.00	6.00	210.00	35.00
76915	ULTRASOUND - OB	2.00	550.00	275.00	1.00	275.00	275.00

*Figure 8-9 Procedure Comparison report*