(4) Appt. 8.20
Arr 10:8.34

KENNETH A. ROSEN, M.D., P.A.
DERMATOLOGY
9000 S.W. 87 COURT, SUITE 202
MIAMI, FLORIDA 33176
TELEPHONE (305) 279-6012 • FAX (305) 279-7709
I.D. # 59-1707209

PATIENT NAME Jerome Greenberg ACCOUNT # 93581 DATE 7-24-01

TOTAL CHARGES _____
AMOUNT PAID _____

❑ CHECK ❑ CASH ❑ CREDIT CARD

PLACE OF SERVICE: ❑ OFFICE
❑ HOSPITAL _____

DIAGNOSIS

C AK 7020
2 4483

DOCTOR'S SIGNATURE

RETURN:
___ DAYS ___ WEEKS ___ MONTHS

___	0	MEDICATION	0	___
___	1	INITIAL VISIT	90020	___
___	2	OFFICE VISIT	90080	___
___	3	INCISIONAL SKIN BIOPSY	11100	___
___	4	PATHOLOGY FEE	88304	___
___	5	EX SKIN TAG UP 15	11200	___
___	6	EX SKIN TAG ADD 100	11201	___
___	7	EX BGN LESION 0.5 CM	11400	___
___	8	EX BGN 0.5 - 1.0 CM	11401	___
___	9	EX BGN 1.0 - 2.0 CM	11402	___
___	R	REFILLED INSURANCE		___
___	10	EX BGN 2.0 - 3.0 CM	11403	___
___	11	EX BGN 3.0 - 4.0 CM	11404	___
___	12	EX BGN OVER 4 CM	11406	___
___	13	EX BGN LESION 0.5 CM	11420	___
___	14	EX BGN 0.5 - 1.0 CM	11421	___
___	15	EX BGN 1.0 - 2.0 CM	11422	___
___	16	EX BGN 2.0 - 3.0 CM	11423	___
___	17	EX BGN 3.0 - 4.0 CM	11424	___
___	18	EX BGN OVER 4 CM	11426	___
___	19	EX BGN LESION 0.5 CM	11440	___
___	20	EX BGN 0.5 -1.0 CM	11441	___
___	21	EX BGN 1.0 - 2.0 CM	11442	___
___	22	EX BGN 2.0 - 3.0 CM	11443	___
___	23	EX BGN 3.0 - 4.0 CM	11444	___
___	24	EX BGN OVER 4 CM	11446	___
___	25	EX MALGUP TO 0.5 CM	11600	___
___	26	EX MALG 0.5 - L.0 CM	11601	___
___	27	EX MALG 1.0 - 2.0 CM	11602	___
___	28	EX MALG 2.0 - 3.0 CM	11603	___
___	29	EX MALG 3.0 - 4.0 CM	11604	___
___	30	EX MALG OVER 4 CM	11606	___
___	31	EX MALG UP TO 0.5 CM	11620	___
___	32	EX MALG 0.5 - 1.0 CM	11621	___
___	33	EX MALG 1.0 - 2.0 CM	11622	___
___	34	EX MALG 2.0 - 3.0 CM	11623	___
___	35	EX MALG 3.0 - 4.0 CM	11624	___
___	36	EX MALG OVER 4.0 CM	11626	___
___	37	EX MALG UP TO 0.5 CM	11640	___
___	38	EX MALG 0.5 - 1.0 CM	11641	___
___	39	EX MALG 1.0 - 2.0 CM	11642	___
___	40	EX MALG 2.0 - 3.0 CM	11643	___
___	41	EX MALG 3.0 - 4.0 CM	11644	___
___	42	EX MALG OVER 4.0 CM	11646	___
___	43	INTRALESIONAL INJ	11900	___
___	44	KOH SLIDE	87220	___
___	45	CULTURE FUNGI	87101	___
___	46	ACNE SURGERY	10400	___
___	47	INCISION & DRAINAGE	10060	___
___	48	HOME VISIT	90170	___
___	49	DESTRUCTION	17110	___
___	50	DEBRIDEMENT NAILS	11700	___
2	51	INCISIONAL BIOPSY	11101	___
___	52	CHEM. SURGERY	17000	___
___	53	CONSULTATION	90620	___
___	54	BRIEF VISIT	90000	___
___	55	LIMITED VISIT	90010	___
___	56	IV INTERMEDIATE	90015	___
___	57	EXTENDED VISIT	90017	___
___	58	COMPREHENSIVE VISIT	90020	___
___	59	MINIMUM VISIT	90030	___
___	60	BRIEF VISIT	90040	___
___	61	RV INTERMEDIATE	90050	___
___	62	INTERMEDIATE VISIT	90060	___
___	63	EXTENDED VISIT	90070	___
___	64	COMPREHENSIVE VISIT	90080	___
___	75	COST TO HANDLE	99000	___
___	76	CONSUL INTERMEDIATE	90600	___
___	77	DESTRUCT 1ST LESION FACE	17000	___
___	78	DESTRUCT 2&3 LESION FACE	17001	___
___	79	DESTRUCT OVER 4 FACE	17002	___
___	80	DESTRUCT 1ST LESION BODY	17100	___
___	81	DESTRUCT 2ND LESION BODY	17101	___
___	82	DESTRUCT OVER 2 BODY	17102	___
___	83	DESTRUCT PENIAL WART	54055	___
___	84	BIOPSY OUTER EAR	69100	___
___	85	INITIAL CONSULT, LIMITED	90600	___
___	86	BIOPSY LIP	40490	___
___	87	INCISION & DRAINAGE	10060	___
___	88	SENSITIVITY CULTURE	87184	___
___	90	NURSING HOME RV	99311	___
___	91	CONSULTATION	99241	___
___	92	CONSULTATION	99242	___
___	93	HOSPITAL CONSULTATION	99251	___
___	94	HOSPITAL CONSULTATION	99252	___
___	95	HOSPITAL VISIT	99261	___
___	96	HOSPITAL VISIT	99262	___
___	97	INITIAL VISIT	99201	___
___	98	INITIAL VISIT	99202	___
___	99	INITIAL VISIT	99203	___
___	BF	BALANCE FORWARD	BF	___
___	100	RETURN VISIT	99211	___
___	101	RETURN VISIT	99212	___
___	102	RETURN VISIT	99213	___
___	103	NURSING HOME IV	99301	___
___	104	NURSING HOME RV	99311	___
___	105	CASE MANAGEMENT	99371	___
___	106	CASE MANAGEMENT TEL CAL	99372	___
___	107	PARING & CURR. BGN.	11050	___
___	108	HYPER LESION (2-4)	11051	___
___	109	HYPER LESION > 4	11052	___
___	110	SHAVING SUPERFICIAL LES.	11060	___
___	111	SHAVING SUPERFICIAL (2-4)	11061	___
___	112	SHAVING SUPERFICIAL > 4	11062	___
___	113	INTRALESIONAL INJ > 7	11901	___
___	114	SUBCUTANEOUS FILLING	11950	___
___	115	DESTRUCT BGN LES > 15	17104	___
___	116	DEST. BGN LES (COMP)	17105	___
___	117	ELECTR. DEST. FIBRO TAGS	17200	___
___	118	DESTR MALG UP TO 0.5 CM	17260	___
___	119	DEST MALG .6 - L CM	17261	___
___	120	DEST MALG 1.1 - 2 CM	17262	___
___	121	DEST MALG 2.1 - 3 CM	17263	___
___	122	DEST MALG 3.L - 4 CM	17264	___
___	123	DEST MALG > 4 CM	17266	___
___	124	DEST MALG UP TO 0J.5 CM	17270	___
___	125	DEST MALG 0.6 - 1 CM	17271	___
___	126	DEST MALG 1.1 - 2 CM	17272	___
___	127	DEST MALG 2.1 - 3 CM	17273	___
___	128	DEST MALG 3.1 - 4 CM	17274	___
___	129	DEST MALG > 4 CM	17276	___
___	130	DEST MALG UP TO 0.5 CM	17280	___
___	131	DEST MALG 0.6 - 1 CM	17281	___
___	132	DEST MALG 1.1 - 2 CM	17282	___
___	133	DEST MALG 2.1 - 3 CM	17283	___
___	134	DEST MALG 3.1 - 4 CM	17284	___
___	135	DEST MALG > 4 CM	17286	___
___	136	BIOPSY EYELID	67810	___
___	137	BIOPSY PENIS	54100	___
___	138	DEST PENIAL LESION CHEM	54050	___
___	139	DESS. & CURR. PENIAL LES.	54055	___
___	140	CRYO PENIAL LESION	54056	___
___	141	LASER PENIAL LESION	54057	___
___	142	SERV. AFTER HOURS	99050	___
___	143	SERV. AFTER 10 PM-8AM	99052	___
___	144	SUNDAY & HOLIDAYS	99054	___
___	200	ACNE CLEANING	200	___
___	201	FACIAL NORMAL - DRY SKIN	201	___
___	202	PAPAYA ENZYME PEEL	202	___
___	203	COLLAGEN BLANKET	203	___
___	204	COLLAGEN SERIES	204	___
___	205	PARAFFIN HANDS & FACE	205	___
___	206	EYEBROW TWEEZING	206	___
___	207	MAKE UP LESSON	207	___
___	208	MAKE UP APPLICATION	208	___
___	209	ELECTROLYSIS	209	___
___	___	INCISION & DRAINAGE	10060.87	___
___	___	CHEMICAL EXFOL. ACNE	17360.89	___
___	___	CULTURE FUNGI	87101.89	___
___	___	SENSITIVITY CULTURE	87184.88	___

8/7 93581
APPOINTMENT
Mr Jerome
Oct 30 AT 830 O'CLOCK

KENNETH A. ROSEN, M.D., P.A.

(305) 279-6012

9000 S.W. 87 COURT
SUITE 202
MIAMI, FL 33176

IF UNABLE TO KEEP APPOINTMENT, KINDLY GIVE 24 HOURS NOTICE