



INTEGRATIVE MEDICINE & WELLNESS CENTER

OUTPATIENT OFFICE VISIT

TAX ID # 85-4132113

Company Name Integrative Medicine & Wellness Inc

Company Address 7900 Sudley Rd, Ste 416, Manassas, VA 20109, US

Phone (703) 563-3804 Fax (866) 611-2705

Practitioner Name/Credentials: Mariya Bourget, MD NPI 1477870541 / Practice 1619792256

Patient Name DOB.....

Address Date.....

PROCEDURES / VISITS:

CPT	Procedures/Diagnosis	Charge/Payment
___ 11980	___ Sub-Cutaneous Pellet Implant (Female)	___ \$477.00
___ 11980	___ Sub-Cutaneous Pellet Implant (Male)	___ \$799.00
___ 99204	___ Office Visit (New Patient) 30 minutes	___ \$180.00
___ 99205	___ Office Visit (New Patient) 60 minutes	___ \$300.00
___ 99213	___ Office Visit (Existing Patient) 20 minutes	___ \$100.00
___ 99214	___ Office Visit (Existing Patient) 30 minutes	___ \$150.00
___ 99215	___ Office Visit (Existing Patient) 60 minutes	___ \$225.00

DIAGNOSIS:

___ R53.83	Other Fatigue
___ E29.1	Testicular Hypofunction
___ N95.1	Menopausal and Female Climacteric States
___ N95.8	Other specified Menopausal and Perimenopausal Disorders
___ E34.9	Endocrine Disorder, unspecified
___ E53.8	Deficiency of other specified B group vitamins
___ E55.9	Vitamin D deficiency, unspecified
___ E03.9	Hypothyroidism, unspecified
___ R63.5	Abnormal weight gain
___ F41.9	Anxiety disorder, unspecified
___ Z71.3	Dietary counseling and surveillance
___ R03.0	Elevated blood-pressure reading, without diagnosis of hypertension
___ Z83.3	Family history of diabetes mellitus
___ E88.9	Metabolic disorder, unspecified
___ E63.9	Nutritional deficiency, unspecified
___ E66.3	Overweight
___ E66.9	Obesity, unspecified
___ E11.9	Type 2 diabetes mellitus without complications

Provider Name: Mariya Bourget, MD

Provider Signature Date.....