CON Follow Up Question Responses for Matter #21-10-2451 Letter Dates August 27, 2021

Part I: Project Identification and General Information:

- Please Identify whether the center has had problems with either scheduling Surgical Time or the availability of Operating rooms for physicians, and/or the availability of staff for the extended hours of operation:
 - a. Scheduling Surgical Times:

PSCF has experienced multiple events of issue where accommodating surgeons surgical cases has not been achieved due to lack of OR time for the day of request due to the OR being full or any limited available time is not feasible for the surgeons or patients due to limited open times. It has also been difficult due to days that the surgeon is required to be at the Frederick Health Hospital, is on call or at his/her office-evaluating patients during clinic hours. These issues make if difficult or impossible to accommodate requests for surgical time due to the surgeons schedule or patient scheduling limitations. We also work diligently to accommodate their ambulatory surgical case demand while respecting and supporting the surgeons time that is required at the Frederick Health Hospital. However, this has become an increasing issue resulting in time conflicts and loss of cases. We have experienced a significant increase in 2021 and have lost or had to turn away multiple cases due to the above. Open operating room time has become increasingly scarce at PSCF and scheduling surgical cases has become more and more difficult, time consuming and inconvenient for patients and surgeons. We are now at a time where cases are being scheduled after 1700.

b. Availability of staff:

PSCF has and continues to be well staffed. We have not had any problems staffing for late/extended days to date. We are fortunate that we are able to recruit staff leaving local hospitals and this trend appears to be continuing and on the increase. PSCF receives multiple referrals and letters submitted to our email via PSCF website requesting employment opportunities (see attached example Exhibit 1) A large number of our staff have been with PSCF for and extended time and assists in maintaining a stable workforce.

PSCF is actively developing a program to provide incentive differential pay to staff who work beyond their scheduled hours at any given time to insure they are thanked and satisfied, in addition to enabling them to make a little extra money periodically. Clinical Coordinators monitor the staff to minimize fatigue, dissatisfaction and fatigue. Provision of a patient

oriented, staff centered environment has resulted in a positive attitude workforce and minimal shortages at this time. Meals are provided if indicated.

Employee Satisfaction Questionnaires are distributed periodically to monitor staff satisfaction, take corrective actions if indicated and to mitigate and minimize turnover. This process provides a wealth of information and staff buy in based upon their input and creativity.

Recruitment by referrals, perpetual posting of clinical jobs has worked well for PSCF to insure adequate, qualified and robust staffing from opening the facility at 0630am until the last patient is discharged through creative staffing and team staggering to meet the needs of extended days.

2. Briefly describe the proposed projects impact on the centers operations and workflow:

The workflow in the proposed project will be significantly improved. Processing 250 cases per month in 6300 square feet has space challenges that requires strategic planning on a daily basis to insure patients are provided with high quality and safest care with positive outcomes and satisfaction. It presents challenges that staff overcome quite readily and have developed a smooth rhythm and timely turn over. However, the potential for a backup and disruption in flow is possible and can significantly affect length of day and everyone's satisfaction regarding length of stay due to delays.

In the propose project, the clinical team will be met with ample space for storage, supplies, patient processing in pre-op, OR and PACU with a significantly improved buffer to enable the staff to provide care to any patient that needs a little extra time and attention without creating a delay in any other area. This may seem insignificant, but is one of the top items on the wish list for all of the clinical team to enjoy the following without creating delays:

- a. Provide additional space for patients that take longer to process
- b. Provide additional space for privacy with patients are waiting to go to the OR or be discharged when they have met the criteria.
- c. Provide ample room for guests and to review discharge instructions with patients and family.
- d. Provide ample consultation space and isolation facilities if needed.
- e. Provide ample workspace for computers, papers, supplies and essential resources that enables the staff to access them easily during provision of care.
- f. Provide ample workspace to promote improved worker safety from slips, trips, falls and confined spaces.
- g. Provides ample education and training space.
- h. Provides ample room for receiving and storage of supplies near the designated works spaces.
- i. Provides ample room for medication preparation and storage.

- j. Provides adequate space for patient movement from registration to PreOp to OR to PACU and enabling separation and distance in addition to enhanced privacy up until discharge.
- k. Provides increase and improved workspace for Materials Management, Medical Waste, Dirty and Sterile Processing.
- I. Provides a very welcome lounge for staff, surgeons, reps and guests to break during the day.
- m. Provides ample private space for a lactation room
- n. Enables the entire Business office to return to being housed within the facility, enhancing access and communication to all clinical and professional staff in addition to patients and their families/care takers.
- o. Lay out of PreOp and PACU will assist in staffing efficiency as they can move back and forth more readily to assist one another in providing the highest quality care possible with maintaining patient privacy and visual monitoring of all patients at all times.
- p. Additional space will enable
- q. Waiting space will enable a pediatric area and adult waiting with multiple multimedia, educational media and relaxation in a stressful environment for patients and visitors.
- r. Access to Eyewash stations and showers will enhance safety and disaster programs and provide a morale boost.

Overall, the concept of flow will remain the same, but will minimize and or eliminate delays as small space falls victim to periodically. The admissions, financial counselling and processing to readiness for Pre-Op will be enhanced with all of the business office on site working in sync to provide quality service and will be less inconvenient to the patient, thus improving satisfaction with their visits.

The much-needed impact on operations and flow will be within one main facility (business and Clinical Providers) and significantly improved with the benefit of unrestricted by space and access to all staff, providers, systems and communications.

3. What type of renovation work is included in the \$167,800.00

In summary, the repoyations as described in attachment R will be as follows:

	\$167,800.00
Permits:	\$5,000.00
Architect and Engineering fees:	\$35,000.00
Building shell and interior breakdown and re-buildout of 1065 square feet:	\$147,800.00
in summary, the renovations as described in attachment b win be as follows.	

Building Shell Build out of interior by PSCF

This renovation of the current 1065 square feet will be renovated to match the new expansion and provide continuous flow in addition to:

- a. Enlarging the current Clean Room to enable the addition of a second washer/disinfector and sterilizer.
- b. Add additional workspace for Sterile Processing Staff.
- c. Add additional storage space for sterilized equipment and supplies
- d. Enlarge the current Dirty Room to match the size of sterile processing room to add workspace.
- e. The addition in square feet will improve workflow; improve worker safety and movement throughout the areas.
- f. The renovation will enable easy access and flow to and from the operating rooms and procedure rooms.
- g. The renovation will enable space for clean and dirty equipment carts to promote safe transport and enhanced infection control in the Restricted Corridor.
- h. The renovation will include addition of men and woman's rest rooms.
- i. The current four space Recover Room will be converted to a supply deliver space and equipment storage. This will improve wear and tear on equipment resulting in cost containment and contain/minimize external elements from entering from outside the building, thus enhancing infection control processes.
- j. Operating Room Space will be renovated and equipped with state of the art lighting, fire suppression management, electrical etc.

In Summary:

Upon completion of the expansion project, 1,065 square feet of existing space will be renovated as noted below in six areas:

	Renovated Areas	Square Footage	Work Description
1.	Class "C" Surgery Room Modifications The renovation of a Class	296 SF	Removal of Casework and installation of
	"C" Surgical Operating Room		new drywall ceiling, new finishes and upgraded HVAC and Lighting.
2.	Clean Equipment		
	The renovation of a clean and sutility room into a clean Millwork	soiled 374 SF	Room is expanded, New Equipment added, New Finishes, New
	equipment/instrument storage	eroom	Cabinetry, HVAC
3.	Clean Equipment Room		
	The renovation of a corridor in corridor, clean equipment roor equipment		Construct Room is created from existing Finishes, lighting, Door and Hardware, of HVAC

4. Soiled Utility Room

Addition of a Soiled Utility Room 38 SF Construct Room with Door and

Finishes HVAC

5. The renovation of Staff Changing Rooms for accessibility.

Men's and Women's Changing Room 186 SF Construct Dedicated Changing Area with

Lockers, HVAC, Lighting

6. Renovation of the staff toilet room to add a shower and changing bench

Staff Toilet Room 45 SF Renovate Existing and add ADA

Shower Upgrade HVAC

Renovation Area Total: 1,065 square feet Design Fees and Building Permit is included in this cost.

Architect and Engineering Fees:

Site Plan, Internal Renovation within the guidelines of Life Safety Codes, Design and HVAC and vacuum development and room enlargement to regulatory specifications.

Permitting will be managed and acquired by the Architectural Firm and Engineers as required by all regulatory bodies and the City of Frederick.

- 4. Regarding Required Approvals and Site Control, please respond to the following (onpp.10-11):
 - a. What is the status of the applicants progress in receiving all the necessary State and local approvals, including site plan approval for the project:

The project has been presented two times and a third presentation is scheduled for September 27, 2021, with the City of Frederick Planning Commission.

- a. Sketch Plan submitted June 9th with approval to proceed with site design submission on July 21, 2021.
- b. Fire and Life Safety with City of Frederick, Fire Safety Engineer and Building Official reviewed plan design and life safety characteristics with approval to proceed to permitting phase. Since the number of patients rendered incapable of self-preservation exceeds three, an NFPA 13 sprinkler system is required and will be installed to protect the Surgery Center.
- c. Site Plan Development presentation is scheduled for Monday September 27, 2021
- b. Please Clarify whether Scott E. Andochick DDS, MD or Andochick Properties LLC (as indicated in Attachment F1) owns the center:

Andochick Properties LLC owns the entire building at 81 Thomas Johnson Court, Frederick Maryland. Scott E. Andochick DDS, MD owns and operates Andochick Properties LLC.

Andochick properties leases the suite B space to Andochick Surgical Center LLC, dba Physicians Surgery Center of Frederick.

5. Please provide an organizational chart that shows the relationship of Scott E. Andochick, DDS, MD, Andochick Properties LLS, Andochick Surgical Center, LLC dba Physicians Surgery Center of Frederick and any other related entities or organizations. The chart should identify the parent and all subsidiaries.

See Exhibit 2 and Exhibit 3

History:

2000 to November 2007: Exhibit 2

Andochick Properties LLC leased 81 Thomas Johnson Court, Frederick Maryland in its entirety to Andochick Surgical Center LLC

December 2007-Current: Exhibit 3

Andochick Surgical Center LLC dba Physicians Surgery Center of Frederick was legally formed as a new multil specialty surgical center entity December 2007 and leases the space consisting of the surgery center (Suite B) from Andochick Properties LLC.

In December of 2007, **Andochick Center for Cosmetic Surgery LLC** was formed and now leases the remainder (a separate business entity) of space at 81 Thomas Johnson Court (Suite A) from Andochick Properties LLC from December 2007 to Current.

6. Please provide expected dates and timeframes for the completion of the construction project and implementation of operations in the new addition.

The anticipated schedule is:

May 2022 Commence with construction, starting with earthwork

March 2023 Expansion Construction Completed,

March 15, 2023 Certificate of Occupancy Issued by the City of Frederick
April 15, 2023 Installation of equipment and stocking of supplies completed

May 1, 2023 State Accreditation Site Visit complete and approved

May 15, 2023 First Patient Seen

7. Please clarify whether the center will have a total of 17522 square feet as indicated on p. 9 or a total of 19722 square feet as indicated on p. 13.

Please accept the following clarifications:

The existing Surgery Center area is: 5,857 square feet
The proposed addition is: 11,222 square feet

Total area of finished center:

17,079 square feet

Upon completion of the proposed project, the final square feet will be 17,079 square feet. The new space to incur interior build out will consist of 11,222 square feet added to the current space of 5,857 square feet (1065 square feet of the current 5,875 square feet will be renovated, not added on to).

Part II. PROJECT BUDGET

8. Please respond to the following

a. Clarify the cost of renovations: \$127,800.00 as indicated in Table E, Project Budget, or \$ 147,800.00 as reported on p. 15 of the CON application.

The figure of 147,800.00 on table page 15 is a typographical error. Table E is correct as the correct figure for remodeling of the 1065 sf in the current space is 127,800.00.

The correct values are as follows

Current Building space (shell and interior build out) \$127,800.00 (1065sf @120.00 per sf)

Architecture and Engineering Fees \$35,000.00
Permits \$5,000.00

\$167,800.00

Six areas will be renovated in the existing facility as noted below:

i. Class "B" Surgery Room Modifications: Removal of Casework and installation of

new drywall ceiling, new finishes and

upgraded HVAC and Lighting.

ii. Renovation of clean and soiled utility: Room is expanded, New Equipment added, New

Finishes, New Millwork, Cabinetry, HVAC

iii. Clean Equipment Room: Room created from existing corridor,

New Finishes, lighting, Door and Hardware,

HVAC

iv. Soiled Utility Room Construct Room with Door and Finishes HVAC

7. The renovation of Staff Changing Construct Dedicated Changing Area with

Rooms for accessibility. Lockers, HVAC, Lighting

vi. Staff toilet room to add a shower Renovate Existing and add ADA

and changing bench Shower Upgrade HVAC

Estimated Renovation Construction Cost for six areas above: \$127,800

Design Fees \$35,000

Building Permit \$5,000

Total Renovation Costs: \$167,800

b. The space proposed for the project is unclear. Clarify the square footage for the proposed project of 11,222 sf, or 12,287 sf as reported in Table E in the middle column (Budget for PSCF liability....).

The correct sf for the project of the new shell is 11,222 sf.

The remodel/renovation space is 1065 sf

Together, the budget is for both: New internal space buildout: 11,222 sf

Renovation current of space: 1065 sf (of the current

5,875 sf)

Total sf 12,287 sf

(The total of **the new addition** shell buildout will be the 11,222sf space, which PSCF will budget to build out the interior only).

c. Under Table E, the Total Use of Funds is \$5,223,701, while the total Source of Funds is reported as \$5,775,000. Please revise table E, Project Budget to show a Total Use of Funds equivalent to the Total Source of Funds.

See attached Exhibit 4: Revised Table E.

d. Explain the basis for the assumed \$200,000.00 contingency fund.

The contingency fund is to assist the PSCF to manage additional costs that may be incurred due to factors such as weather delays, supply and resource issues, labor cost fluctuations. It is not extra money or money that needs to be spent, but is available should a need occur.

A typical construction contingency fund is between 5-10% of the total budget. PSCF is setting aside approximately 5% (\$200,000.00) to insure coverage of unexpected expenses and will only be spent if necessary. It is hoped the fund will be untouched at completion of the internal buildout of the shell.

The proposed contingency is 5% of the construction budget (\$3,591,401 + 220,000 + \$127,800 = \$3,939,201 @ 5% = \$200,000). The contingency amount is very modest and address costs that fluctuate due to the economy, demand for materials and supplies and forecasting 6 to 12 months into the future. Considering the COVID 19 effect on materials, contingency plays a vital part of the project success.

e. The applicant expects to use \$2.2 million in working capital loans. Explain why there are no financing costs associated with the proposed total project costs:

See attached exhibit 5: Costs for Capital loan: Landlord and Physicians Surgery Center of Frederick Financial Responsibility.

- 9. Please clarify and reconcile the difference in costs reported for
 - a. The building landlord and for the PSCF buildout reported in table E, Project budget with
 - b. The shell building and the Interior Build Out reported in Attachment B, Basis of Design. It would appear that the cost estimates for these two items should match.

Please accept the Revised Basis of Design 9.23 as the costs are

See attached Table E Project Budget Exhibit 4.

See attached Revised Basis of Design Exhibit 5.

10. Regarding attachment D, Table C-Construction characteristics, please state whether the new construction will include a wet or dry sprinkler system and the square footage for this sprinkler system.

A wet and dry system is proposed for the new construction area. A dry pipe system is proposed for the unheated attic spaces and a wet pipe for the heated spaces. Total coverage is 11,222 square feet. The dry pipe system will be activated by smoke detectors connected to a valve in the mechanical room in lieu of a dry standpipe.

See Exhibit 6 and Table C (Exhibits 46-50), Construction Characteristics has been updated to reflect this development.

Part IV. Consistency with general Review Criteria:

STATE HEALTH PLAN: COMAR 10.24.11 STATE HEALTH PLAN FOR FACILITIES AND SERVICES: GENERAL SERVICES STANDARDS:

Information Regarding Charges:

11. Regarding subparagraph (b), please identify whether any complaints involving the subject ambulatory surgical center have been submitted to either the Consumer Protection Division in the Office of the Attorney General or to the Maryland Insurance Administration. If yes, describe the outcome/resolution of these complaints.

Andochick Surgical Center LLC, dba: Physicians Surgery Center of Frederick **is not aware** of any complaints against the organization through the Attorney General or to the Maryland Insurance Administration since its formation in November 2007.

Information Regarding Procedure Volume:

See attached Exhibit 7: Individual Physicians Submission of projected case volume.

Charity Care Policy:

13. In Attachments I and PSCF's Charity Care Policy, identify the language in the facility' policy that addresses the provisions in subparagraph (a)(i), (a)(ii) and (a)(iii), cited below:

(a)(i)

See Exhibit 8: Charity Care Policy: Under section "Documentation A: "Upon receipt of information needed, a probable eligibility determination will be made within two business days and the patient notified"

See Exhibit 39: Annual review and approval of Charity Care Policy for PSCF.

(a)(ii)

See Exhibit 9: Revised Public notice posted in facility lobby (English and Spanish) and copies available to the public upon request and link to website.

See Exhibit 10: Revised annual publication to notify the public regarding PSCF Charity Care Policy and link to website for policy and application. Available in multiple languages via Simple Admit patient screening website.

See Exhibit 11: Revised Website with link for the public to access the PSCF Charity Care Policy and application.

(a)(iii)

See Exhibit 8: Charity Care Policy: See section "Scope" and "Approval Process"

QUALITY OF CARE:

14. Please provide evidence that PSCF is certified to participate in the Medicare and Medicaid programs.

See attached Exhibit 12: Revalidated Medicare Enrollment Application letter of approval.

See attached Exhibit 13: DHMH Maryland Medicaid Program application approval letter.

15. Please provide copies of various reports in your response to this standard used to measure the quality of care provided at PSCF such as the CTQ Voyance Patient Satisfaction Survey, benchmarking studies and other reports cited on page 25-26.

Please see correction to response (iii) on page 25:

CTQ Voyance Patient Satisfaction: Corrected to: PSCF consistently rates above the 90th percentile nationwide. (99% is an error. Actual is 90th percentile).

See attached Exhibit 14: September 2021 Monthly Patient Satisfaction and Benchmarking.

See attached Exhibit 15: Performance Analysis Report for year of 2020.

See attached Exhibit 16: Financial Benchmarking Percent of Revenue applied to supplies, staffing and man-hours per case for Quality Care Study 2016-Current.

See attached Exhibit 17: Normo-thermia in PACU benchmarking study.

See attached Exhibit 18: Total Joint Checklist Patient Navigation Tool

See attached Exhibit 19: Annual Benchmarking Review compared to National Averages

See attached Exhibit 20: Leapfrog Quality Reporting Annual Survey 2020

See attached Exhibit 21: Maryland Quality Reporting and FASF Annual Survey 2019 and Message no reporting required for 2020

See attached Exhibit 22: AHRQ Reporting Period for 1/01/2020-12/31/2020

See attached Exhibit 23: HNSN Report for 2019/2020 Reporting Season

See attached Exhibit 24: Comparative Benchmarking Analysis for Transfer rates and Flu Vaccination rates 2020

^{**}Additional examples available upon request

Need-Minimum Utilization for Expansion of an Existing Facility:

16. Please resubmit the list of physicians using the attached Addendum B from the MHCC Ambulatory Surgery CON application. Complete this form for each physician currently on staff and for those surgeons recruited to perform surgical cases at PSCF upon project completion. Identify the specialty for all current physicians, and for those physicians anticipated to join the practice. Identify the year in which new practitioners are projected to start performing surgical procedures at PSCF.

See attached Exhibit 25: Current Physicians and Specialty List

See attached Exhibit 7: Addendum B for all current and future surgeons with year they are expected to start at PSCF.

17. On page 32, you state, "minute projections are based upon historical average of 60 minutes per case. (many cases are greater than 3 hours), and surgical turnaround time will be calculated at an average of 25 minutes (turn over times typically varies between 15-45 minutes)."

As indicated in Question #17 and Addendum B, provide the historical utilization for surgical cases and surgical minutes for the last two years. Please report historical turn over time for this period separately.

Please see attached exhibit 54: Table 1-2: Statistical Projections-Entire Facility and Proposed project

Please see attached Exhibit 26: Explanation and supportive documentation of OR utilization in Minutes generated from Health Systems Technology Report for 2019, 2020 and 2021. Times are unchanged.

Please see attached Exhibit 55: Explanation of Turn Over times: Spread sheet with average turn over time calculated via Excel with first case of the day removed (first case is not included in turn over time calculations since they are first case of the day. Calculations begin after first case of the day is complete and second case is rolled into the room. All others are included). The average was 20.123 minutes for 2019 with a range of 2 minutes to 352 minutes. Due to the potential for data entry errors at time of entering times in HST, a margin of error was included in overall analysis of 4 minutes. Therefore, the average of 25 minutes was used. This is believed to cover the increasing complexity of cases being added to the schedule in 2020 and 2021 with more time consuming turn over (total shoulder, knee and hip replacements). See Exhibit 55 for example of how turn over times were averaged.

SUPPORT SERVICES:

18. Please clarify whether PSCF is licensed to provide, or contract with another provider for the pathology services.

PSCF provides the surgical space for specimen collection during surgical procedures for diagnostic purposes, and they are picked up daily by one of the off-site licensed and accredited families noted below as selected by the surgeon:

- a. Frederick Health Hospital Laboratory Services main location at 400 West 7th Street, Frederick MD 21701 and Opposumtown Pike, Frederick MD.
- b. HCT Pathology located at 900 S Caton Avenue Baltimore, MD 21229.

CONSTRUCTION COSTS:

19. Subparagraph (7)(b) of this standard states "the projected cost per square foot of a new construction shall be compared to the benchmark cost of good quality "Class A" construction given in the Marshall Valuation Service guide...'

Both attachments B and G-1 in your CON application state that construction for the new construction will be good quality "Class D" construction type. Using the MVS guide for construction costs, please revise the two attachments`, the Project Budget and the response to Viability of Proposal, if necessary, to reflect the construction cost for a good quality "Class A" ambulatory surgical facility.

Please consider the following data when comparing the cost estimates prepared from the design plan and the Swift Marshall CoreLogic program. Worksheets from Core Logic are attached for basis of comparison.

Construction Cost estimate associated from proposed design:

Cost Estimates based on the square footage as designed for a single-story structure with slab on grade which includes land costs of \$375,000 is: \$4,734,201

MVS Construction Cost estimate from proposed square footage:

Cost Estimate developed from the MVS calculator with basis of a Quality Level as specified by MVS as "Good" noted as 3.0 and a construction type "A" comprised of stud; brick veneer exterior walls is:

construction type "A" comprised of stud; brick veneer exterior walls is: \$4,620,811

This estimate, which is attached as addendum A-1. The MVS valuation

includes Land Costs

MVS Construction Cost estimate from proposed square footage:

Cost Estimate developed from the MVS calculator with basis of a Quality Level as specified by MVS as "Good" noted as 3.0 and a

construction type "D" comprised of stud, brick veneer exterior walls is: \$4,517,447

This estimate, which is attached as addendum A-2

As noted above, the proposed design and construction estimate cost exceeds the Class A valuation cost by \$113,390, therefore the proposed construction meets or exceeds the standard of a Class A structure. The projected cost of the structure as per Subparagraph (7)(b) item ii requires that the projected cost per square foot shall be no more than the benchmark level of Type A, Good Quality by 15%. The projected cost is 3% more and conforms to the item ii standard.

Please consider the following per square foot costs:

Proposed construction estimate: \$4,734,201/11,222 =\$422 per square foot

MVS Type A, Good Quality construction estimate: \$4,620,811/11,222 =\$411 per square

foot.

This equates to \$11 per square foot or 3%.

As requested, **The Project Budget, Table E** and description has been revised as noted:

The Capital Cost is represented as \$5,234,201

Less: Movable Equipment: \$300,000 Contingency: \$200,000

Facility Cost Estimate: \$4,734,201

See attached Exhibit 27: Table E-Project Budget See attached Exhibit 28: Core Logic Swift Estimator

See attached Exhibit 29: Table C-Construction Characteristics

20. Regarding Attachment E-1, please provide FCB Bank Documentation that includes the proposed term for a \$2.2 million loan that includes the interest rate, length of the loan, and any terms such as debt service costs or use of funds for working capital for the loan.

See attached Exhibit 30: Letter from FCB Bank regarding prequalification for Commercial construction permanent mortgage loan. The term and interest rate will be agreed upon and locked in upon approval by the MHCC.

See attached Exhibit 30a: Financing Proposal

FINANCIAL FEASIBILITY:

21. A response is required for each subparagraphs for this standard:

A surgical facility project shall be financially feasible. Financial projections filed as part of an application that includes the establishment or expansion of surgical facilities and services shall be accompanied by a statement containing each assumption used to develop the projections.

- (a) An applicant shall document that:
- (i) Utilization projections are consistent with observed historic trends in use of each applicable service by the likely service area population of the facility;

See attached Exhibit 31 and 31a: Utilization Projections and History

(ii) Revenue estimates are consistent with utilization projections and are based on current charge levels, rates of reimbursement, contractual adjustments and discounts, bad debt, and charity care provision, as experienced by the applicant facility or, if a new facility, the recent experience of similar facilities;

See attached Exhibit 32: Projections of Cases and Revenue

(iii) Staffing and overall expense projections are consistent with utilization projections and are based on current expenditure levels and reasonably anticipated future staffing levels as experienced by the applicant facility, or, if a new facility, the recent experience of similar facilities;

See attached Exhibit 33: Tble L Workforce Information and Exhibit 34

(iv) The facility will generate excess revenues over total expenses (including debt service expenses and plant and equipment depreciation), if utilization forecasts are achieved for the specific services affected by the project within five years of initiating operations.

See attached Exhibit 34: Revenues and Expenses with Charity Care

Statement from C. Melton, CBM accounting for PSCF (10/10/2021):

"For the financial projections: Projections are based on historical trends for **actual** cash collections. They are not inflated for billing and receivables. Thus, there is no need to include allowance for bad debt or contractual allowances."

(b) A project that does not generate excess revenues over total expenses even if utilization forecasts are achieved for the services affected by the project may be approved upon

demonstration that overall facility financial performance will be positive and that the services will benefit the facility's primary service area population.

Na

B) NEED

- 22. Please respond to the following questions about or requests for clarification of statistical projections in Tables 1-Entire Facility and Table 2-Proposed:
 - a. The Projected case volumes are the same in tables 1 and 2 for the years 2022 through 2025. Please clarify. Show the projected case volumes for the entire ASF (Four OR's and two PR's) in table 1-Entire Facility; and provide the projected case volume for the proposed project (the two new ORs and one new procedure room) in Table 2-Proposed Project.

See attached Exhibit 35: Corrected Statistical Projections Table I and Table II.

b. Provide the assumptions used to project the 40% increase in both the future total case volumes and total surgical minutes for tables for the years 2022 and through 2025.

The assumptions for the 40% increase is estimated based upon:

The addition of three new orthopedic surgeons in 2021 The addition of one new ophthalmologist 2022

Adding four new surgeons that will be able to bring all of their outpatient surgery cases (when able to obtain sufficient open OR time in 2022) and grow their practices, will be added to the current 10 surgeons credentialed at the center now. The addition of the four and the current surgeons experiencing increased case load will result in approximately a 40 percent increase in surgeons and based on their projections. Additionally, the unknown projections of an additional ophthalmologist in 2022 adding more cases, the values were estimated using this information.

Surgical minutes for the Operating room were provided with the assumption that the estimated overall average time per case is 60 minutes. However, as the surgeons proceed with building their case loads, it may be found to be a conservative estimation.

Procedure room minutes were based upon the overall average time per case at 35 minutes. Since these are estimations, there is a margin of error may be considered and could be conservative.

c. Are the statistical projections in Tables 1 and 2 for the calendar year or fiscal year?

All statistical projections for the PSCF are for its fiscal year, which is from January through December annually. PSCF calculates based on calendar year.

C) AVAILABILITY OF MORE COST EFFECTIVE ALTERNATIVES:

- 24. The applicant states "relocating to another site within Frederick County" was determined to be too costly and not viable at this time. Please provide information underlying this finding, including costs:
- a. For PSCF, once shell is built it will only need to build out two more OR's and one PR. The rest of the space will be partially remodeled.
- b. the shell will be funded by the Andochick Properties and PSCF will build out the inside and remodel a portion of the remaining space. PSCF will only be responsible for building out part of the space and lease it from the Andochick Properties. This will enable efficient use of funds
- c. Moving to another location places equipment at risk of costly damage.
- d. Gases, generator and primary HVAC is currently in place and will only need to be extended to the shell.
- e. Bringing the Business Office into the new facility will save 6K per month in additional rent that can be applied to the lease of the shell. All of site storage facilities can be cancelled and placed in new shell ample storage, saving an additional 350.00/month and adding convenience in access.
- f. To lease space on Thomas Johnson Drive and the Frederick area research indicates it runs between \$15.00/sf to \$44.00/sf for Class A or Class B structures.

Most are Triple Net rent. In this type of commercial real estate rent, you pay the amount listed and you have pay additional costs (usually Operating Expenses) on top of that. These expenses vary from property to property. The NNN expenses usually include your proportionate share of the exterior maintenance of the building, property insurance and property taxes.

In addition, PSCF will remain responsible to fund the internal build out of the facility which may be greater than \$2.7million for an empty shell that will require extensive internal build out to meet all required regulations for a surgical center. That is due to the fact the entire facility will require internal build out for all four of the operating rooms and two procedure rooms in addition to storage, sterile processing department, business office department, Pre-Op and Recovery, waiting space, Mechanical and Medical Gas lines, and storage space. If PSCF remains in 81 Thomas Johnson Court Suite B and it is extended and added on to, only part of the current space will require remodeling and the two current operating rooms intact which can be a substantial savings and more cost efficient. Medical Gas, Electric and HVAC will just need to be extended to support the addition as the current space is equipped and can be added on to. Back up Generator power is already on site and can be extended or added on to support the addition if approved. PSCF feels it is most cost effective to the Surgical Center as the tenant to remain at 81 Thomas Johnson Court Suite B if permitted to do so.

Please see attached Exhibit 53: Examples of building lease and sold pricing in the Frederick area.

Please see attached examples of local structures and proposed cost to lease per square feet.

Please see attached Exhibit 54: Current lease agreement. Added structure rate will not change. PSCF will lease at \$32.27/sf.

PSCF current lease agreement is for \$32.00/sf

- g. An alternate site if not preferred due to current site having outstanding exposure, access and familiarity in the community.
- h. Moving to a different site will require facility closure and loss of revenue during the transition.

Moving costs must also be considered as an added expense. If the facility stays in the current location, the buildout will not incur moving fees as all supplies, equipment and furniture will be delivered by the vendor upon purchase and not require moving.

D) VIABILITY OF THE PROPOSAL:

24. Please document the availability of \$500,000 (Attachment H-1) for the proposed project. Evidence for this standard can be provided by a letter from FCB Bank or an accountant stating the applicant has the case resources to support the \$500,000 in cash equity.

See attached Exhibit 36: Letter from FCB Bank

25. Regarding tables 3 and 4, PSCF does not include an allowance for bad debt, contractual allowances or charity care. Please clarify the basis for not including these items in the financial projections.

"For the financial projections: Projections are based on historical trends for **actual** cash collections. They are not inflated for billing and receivables. Thus, there is no need to include allowance for bad debt or contractual allowances."

The above response if from the facility Bookkeeping and Accounting Team: CBM Accounting

26. Describe how PSCF will comply with subparagraph .05A (3) of the Charity Care Policy standard and the provision of charity care to its patient population.

- 3. Standard .05(A) (3) Charity Care Policy.
 - (a) Each hospital and ambulatory surgical facility shall have a written policy for the provision of charity care that ensures access to services regardless of an individual's ability to pay and shall provide ambulatory surgical services on a charitable basis to qualified indigent persons consistent with this policy. The policy shall have the following provisions:
 - (i) Determination of eligibility for Charity Care

 See attached Exhibit 8, section "Documentation: Sentence #2
 - (ii) See attached Exhibits 9: Posted in Lobby in Spanish and English See attached Exhibit 10: Annual publication in Frederick News Post See attached Exhibit 11: PSCF website www.physicianssurgctr.com with link to policy and application. See Exhibit 11a: Simple Admit notice to patients during preoperative screening process with link to website for policy and application.
 - (iii) Criteria for EligibilitySee attached Exhibit 8: Charity Care Policy, section "Scope, sentences two and three.

Methods of Compliance with Standard .05(A)(3):

1. Ongoing review and updates/revisions of the Charity Care Policy will be reviewed and approved by the Board of Directors to assess compliance, improve community access and monitor for the

attainment of goals as set forth in the following table. The goals will be reviewed and evaluated annually to determine if increases are indicated and incorporated in the annual Board of Directors review and approval of systems.

Year	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Expenses	3192181.	3299538.	3783991.6	3805413.	4017706	4417548	476285	552121	609012	654185
	81	39	6	99			6	3	5	5
Charity	\$3,847.0	\$5500.00	\$9905.00	\$8000.00	0	16000	24000	32000	40000	45000
Care	0				pandemi					
					С					
% Charity	.10	.16	.26	.20	0	.36	.48	.57	.65	.68-1.0
Care										

See attached Exhibit 8: Updated Charity Care policy: Includes revised eligibility and application process in addition to a link to the PSCF website, full policy and application.

2. Monthly reports from the Business Office Manager will be submitted to the Performance Improvement Committee monthly to enable evaluation of progress in meeting the goals in table above. The Charity Care Review will take place monthly and will enable the facility to evaluate it's progress, outreach to the patient population and take corrective measures to promote improvement on an ongoing basis as needed.

See attached Exhibit 37: Business Office Monthly Summation Report Record incorporated into the Performance Improvement Program that is reported to the Board of Directors at Quarterly Meetings.

See attached Exhibit 38: Business Office Excerpt from May 2021 PI Minutes page 8-9.

See attached Exhibit 39: June and September Board Meeting Agenda and Business Office Reporting to the Board of Directors (which includes Charity Care Reporting as noted on Exhibit 37) for Evaluation and compliance recommendations as indicated.

See attached Exhibit 40 line 19: Annual Board of Directors Review of Systems Record.

- 3. Public information to promote Access to Charity Care has been implemented as follows:
 - a. Notice of Charity care with link to documents on the PSCF Website. This document is posted for all to review in the facility Lobby at all times. It is in English and Spanish.

See Attached Exhibit 9

b. Annual publication of PSCF Charity Care Policy is posted in the Frederick News Post with link to the PSCF website and subsequent link to the Policy and Application

See attached Exhibit 10

c. The PSCF website has been updated to provide a link to the policy, eligibility criteria, and to inform the community an answer will be provided within two days of receipt of application.

See attached Exhibit 11

d. The PSCF patient brochure has been updated to include a link to the PSCF website and subsequent link to the Charity Care Policy and Application.

See attached Exhibit 41.

e. Simple Admit Patient On line pre-screening program has a notice regarding Charity Care, contact information and link to the PSCF website with the subsequent Policy and application for all to access.

See attached Exhibit 11a.

- f. All notifications will enable patient to read and access the Charity Care policy, application, eligibility criteria and determination of charity care coverage within two business days of patient's request.
- g. The Frederick County Health Department will be contacted every May(periodically as needed) and notified of updated and current PSCF Charity Care policy. See attached recommendations from Rissah Watkins at FrederickCountyMD.gov to assist PSCF in meeting its annual goals of Charity Care and to improve access to the community we serve regardless of ability to pay. Any additional recommendations from FCHD will be implemented.

See attached Exhibit 42: Communication with Rissah Watkins

h. Letters will be sent annually and periodically, to include a link to the facility website and subsequent Charity Care Policy and application. The letter will inform these organizations of our policy and encourage patient outreach and access to care at PSCF regardless of ability to pay.

See attached Exhibit 43: Sample letter Mailed to the following organizations July 2021.

Mission of Mercy

Religious Coalition Emergency Community Needs

Frederick Community Action Agency

Julio Menocal, MD

Centro Hispano

Asian American Services of Maryland

Church Community

- i. All PSCF surgeons and their schedulers are notified periodically of the PSCF Charity Care Policy, links on the PSCF website, eligibility criteria and determination of coverage time line (two days) so they can share the information with their patients and encourage access regardless of ability to pay. Hard copies are available to the offices for those who do not have internet access. Assistance is provided to complete applications if patient unable to do so.
- j. All applications will be kept on file regardless of their eligibility. This will include discounted care due to financial hardships and reported to the Board of Directors quarterly. The applications will be monitored for compliance to the Policy, eligibility and determinations of funds as described in the PSCF policy as a component of the Performance Improvement Program on a continual basis.

See attached Exhibit 44: Example Application

k. All Business off Staff have been trained to offer patients an application for Charity Care if they believe the patient may be in a position of need and concerned about making payment

after conventional methods of payment plans are not feasible. Copies of the Policy and Application are available in the Business Office for patient convenience. Assistance is available to those who are not able to fill the application out.

I. All Charity Care Activities will be monitored and carried out by the Business Office Manager and approved as indicated by the Administrator. Activities will be reported to the Performance Improvement Committee monthly via the Business Office: Monthly Summation PI Report and formally reported to the Board of Directors quarterly for review, updates and recommendations as indicated to insure achievement of projected goals.

PSCF has consistently demonstrated its commitment to charity care in the community served. It has increased year over year with the exception of 2020 due to the pandemic and demand for surgical services declining due to physicians not seeing patient in their offices and referring to local surgeons. It is revealing improvement in the first half of 2021. In the meantime, PSCF will continue its campaign to provide services to those in need. In addition to charity care, PSCF will also offer assistance to those experiencing immediate and/or temporary hardship to insure all persons seeking surgical care are able to receive it at PSCF as appropriate.

PSCF is committed to meeting or exceeding the average charity care provided by all facilities in Maryland and will work diligently to insure all are provided care regardless of ability to pay.

Year	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Expenses	3192181.	3299538.	3783991.6	3805413.	4017706	4417548	476285	552121	609012	654185
	81	39	6	99			6	3	5	5
Charity	\$3,847.0	\$5500.00	\$9905.00	\$8000.00	0	16000	24000	32000	40000	45000
Care	0				pandemi					
					С					
% Charity	.10	.16	.26	.20	0	.36	.48	.57	.65	.68-1.0
Care										

27. In Table L-Workforce Information, please briefly describe methods that PSCF will use to recruit the 24.5 FTE's estimated to be needed for the center expansion. Does the applicant anticipate any challenges in recruiting staff?

Please accept updated Table L: Exhibit 45 (In review of table L, it was noted that the number of recruits should be adjusted to 20.8 due to previous errors in completion of the table for last year of the project. However, needs may fluctuate and the table will be revised periodically if indicated.

Methods of Recruitment:

- a. Utilization of Zip Recruiter on a continual basis and other vendors as indicated
- b. Access to local Educational Center Frederick Community College for new graduates in the Nursing, surgical technician and Nursing Assistant programs to recruit qualified candidates.
- c. "Word of Mouth" referrals from current staff and physicians.

- d. Shadow program for interested candidates to observe the workplace under supervision. This has proven to be very popular among candidates
- e. PSCF often has professional's health care workers contact the facility as they leave the hospital setting. These persons are offered interviews and tours promptly as a recruiting method.
- f. PSCF offers M-F work days, no weekends, no holidays and competitive pay/benefits and matching 401K.
- g. PSCF offers flexible work hours to provide work and home life balance. Self-scheduling is offered as an option.
- h. PSCF offers a pleasant and productive work environment with late pay differential for hours that exceed 1730pm.
- i. Education and Training program on site
- j. Facility Open House

At this time, PSCF **does not** anticipate difficulty in hiring 20.8-25 new FTE's and has not had difficulty hiring in the recent past to accommodate accelerating caseload we are currently experiencing, to insure the highest quality care in a safe and pleasant environment.

Many of PSCF staff that have left for other positions return to work at the Facility at a later date due to its reputation of a safe, pleasant and supportive work environment.

F) IMPACT ON EXISTING PROVIDERS AND THE HEALTH CARE DELIVERY SYSTEM

28. The applicant states that one surgeon with privileges at Meritus will have a minimal impact on this hospital. Please identify this physician by name and provide the volume of surgical cases and surgical minutes that will move from Meritus to PSCF for the years 2022 through 2025:

Adam Mecinski, MD performs immediate breast reconstruction procedures at Meritus for inpatients only. He performed 25 cases there in 2020 in collaboration with a general surgeon credentialed at Meritus and not at PSCF. None of these cases will be pulled from Meritus to PSCF as stated by the surgeons scheduling and surgical team. There will be no impact on Meritus Hospital.

Year	Number of cases to PSCF	Minutes moved to PSCF (estimations is based upon an average 90minutes per case)
2022	0	0
2023	0	0
2024	0	0
2025	0	0

29 Please provide a response on the impact of proposed project on:

a. Payer mix:

See attached Exhibit 46: Payer Mix by percent for past years and projections for future project.

PSCF expects to experience an increase in Medicare and Medicaid payer mix in addition to Charity care as previously noted in exhibit 34.

b. The cost to the health care delivery system for PSCF as well as other ambulatory surgical facilities in Frederick County.

As previously addressed PSCF believes, the impact will not be substantial on the hospital. Only Shoulder Replacements and Hip Replacements will be moved to PSCF from Frederick Health Hospital and none will come from Meritus hospital. They must be screened as appropriate and healthy enough for the outpatient setting or they will be performed at FHH. PSCF anticipates they will be of low volume and therefore will not affect the hospital in a significant manner.

The surgeons that will bring those cases to PSCF do not work at other ambulatory surgery centers in Frederick County and the impact will not affect them.

The cost to PSCF will be approximately 3,000.00-4,500.00 per case is supplies and implants which will be reimbursed by the patients insurance in the global payment. The main cost to PSCF will be a non disposable hip distraction device that is approximately \$3,000.00 and not billable to insurance.

ATTACHMENTS:

- 30. Regarding Attachment C and the line diagrams:
 - a. On attachment C-1, the existing PSCF diagram indicates it currently has one sterile operating room and three procedure rooms. This is inconsistent with the Current Capacity and Proposed Changes Table on p. 10, which indicates two sterile operating rooms and one non-sterile procedure room. Please clarify the discrepancy in the current inventory of your operating and procedure rooms.

Please accept the following clarifications:

- 1. Please refer to a revised set of line diagrams in which illustrates the following:
 - The area of the lower portion of the facility as delineated by the one-hour demising wall line is an area not included in the project.
 - The Surgery Center per this diagram is comprised of one sterile operating room and two non-sterile procedure rooms
 - The scope of work for the renovation is to refinish and upgrade the mechanical and lighting systems of the procedure room adjacent to the sterile corridor to a Class B operating Room.
 - The existing procedure room shall remain as existing.
 - The procedure room referred to in the lower area of the building is not part of this project.

See attached Exhibit 47 Existing Site Plan

See attached Exhibit 48 Existing Floor Plan for PSCF (Suite B)

See attached Exhibit 49 Site Concept A6

See attached Exhibit 50 Schematic Plan H (Suite B)

See attached Exhibit 51 Expansion Space Plan (Suite B)

See attached Exhibit 52 for Cost estimates

- b. On Attachments C-3, C-4, and C-6, please identify the proposed use for the space identified in the lower half of the facility as "OR(procedure) (Class B, Exist)". What is the planned use for this room?
- 1. Please accept the revised Attachments C-3, C-4 and C-6 which clarifies the extent and scope of the project.

See attached Exhibit 51 for revised attachment C-3

See attached Exhibit 50 for revised attachment C-4

See attached Exhibit 50 and 51 for revised attachment C-6 clarification

- The area of the lower portion of the facility as delineated by the one-hour demising wall line is an area not included in the project.
- The procedure room referred to in the lower area of the building is not part of this project.

Please contact me pertaining to any design or architectural questions or concerns.

RESPECTFULLY SUBMITTED: MEDARCH DESIGN PLLC

Scott A. Norberg, AIA, LEED AP (P) 703-999-1074

Matter #21-10-2451	
Supplementary Information Attestation:	
· · · · · · · · · · · · · · · · · · ·	ties of perjury that the facts stated in this application the best of my knowledge, information and belief.
Scott E. Andochick, MD	Date

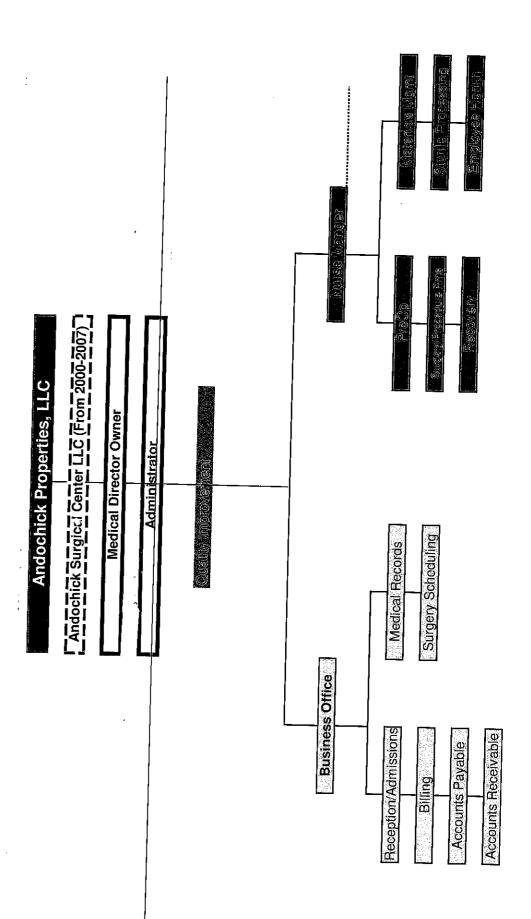
Matter #21-10-2451

Supplementary Information Attestation:

I hereby declare and affirm under the penalties of perjury that the facts stated in this application and its attachments are true and correct to the best of my knowledge, information and belief.

Scott E. Andochick, MD

Date



* Includes Medical Staff Oversight and Peer Review

** See Tab: Patient Care Committee (PCC)

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Printing Selection: From Date of Service=1/1/2020 To Date of Service=12/31/2020 Physician ID=(257) Hide Detail?=No Include Unbilled Visits?=No *derick 12 - Physicians Surgery Center Report ID: ME9005 - Procedure Summary

Page: 1 of 1 Andochick Properties LLC *Performance Improvement/ Patient Care Committee** Surgery Scheduling Medical Records Administrator Medical Executive Committee Business Office leception/Admissior Accounts Payable Billing

* Includes Medical Staff Oversight and Peer Review

Accounts Receivable

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TABLE E. PROJECT BUDGET

INSTRUCTION: Estimates for Capital Gosts (1 a.e). Financing Costs and Other Cash Requirements (2,a-g), and Working Capital Startup Gosts (3) must reflect current costs as of the date of application and include all costs for construction and renovation. Explain the basis for construction cost estimates, renovation cost estimates, confingencies, interest image construction period, and infiation in an attachment to the application.

USE OF FUNDO	Hospital Building:Landlord Ilability	See Attached Explanation of Budget for PSCF liability for internal bulid and renovation: 12287sf	Total
USE OF FUNDS			
1. CAPITAL COSTS			
a. New Construction			
(1) Building	\$1,684,401	\$1,907,000	\$3,591
(2) Fixed Equipment (3) Site and Infrastructure	\$0	\$50,000	\$50
(3) Site and Infrastructure (4) Architect/Engineering Fees	\$220,000	\$0	\$220
(5) Permits (Building, Utilities, Etc.)	\$154,500	\$130,500	\$285
SUBTOTAL	\$21,000	\$24,000	\$45
b. Renovations	\$2,079,901	\$2,111,500	\$4,191
(1) Building			·
(2) Fixed Equipment (not included in construction)	\$0	\$127,800	\$127
(3) Architect/Engineering Fees	\$0	\$0	
(4) Permits (Building, Utilities, Etc.)	\$0	\$35,000	\$35
SUBTOTAL	\$0 \$0	\$5,000	\$5
c. Other Capital Costs	\$0	\$167,800	\$167
(1) Movable Equipment			
(2) Contingency Allowance	\$0 \$05,000	\$300,000	\$300
(3) Gross interest during construction period	\$95,000	\$105,000	\$200
(4) Other (Specify/add rows if needed)			
SUBTOTAL	\$95.000	\$405.000	***
TOTAL CURRENT CAPITAL COSTS	\$2,174,901		\$500 \$4.950
d. Land Purchase	\$2,174,901 \$375,000	\$2,684,300	\$4,859
e. Inflation Allowance	\$375,000		\$375
TOTAL CAPITAL COSTS			
2. Financing Cost and Other Cash Requirements	\$2,549,901	\$2,684,300	\$5,234
a. Loan Placement Fees			Market Strong for Server 5
b. Bond Discount			
c CON Application Assistance			
c1. Legal Fees	\$6,199		\$6
c2. Other (Specify/add rows if needed)			
d, Non-CON Consulting Fees			
d1. Legal Fees		(1946년) 1일 시간 (1947년) 1일 12일 (1946년) 1일 (1947년) 1일 1일 1일 (1947년) 1일 (1947	
d2. Other (Specify/add rows if needed)			
e. Debt Service Reserve Fund			<u>de Steologia (de la comercia</u> Pagasanto de la transpersa de la comercia
f Other (Specify/add rows if needed) Construction Financing	\$18,900	\$7,000	\$25
g. Start Up operations	\$0	\$8,700	φ25 \$8
	\$25,099	\$15,700	\$40
SUBTOTAL		and the second s	<u>. 19 σ. μεταλό το πουστορφ40</u> 1971, από φωρα το διαλομούς στο
3. Working Capital Startup Costs		62.700.000	0E 07E
3. Working Capital Startup Costs TOTAL USES OF FUNDS	\$2,575,000	\$2,700,000	\$5,275
Working Capital Startup Costs TOTAL USES OF FUNDS Sources of Funds	\$2,575,000		
3. Working Capital Startup Costs TOTAL USES OF FUNDS Sources of Funds 1. Cash (PSCF-500,000/SEA 500,000)		\$2,700,000 \$500,000	
3. Working Capital Startup Costs TOTAL USES OF FUNDS Sources of Funds 1. Cash (PSCF-500,000/SEA 500,000) 2. Philanthropy (to date and expected)	\$2,575,000		
3. Working Capital Startup Costs TOTAL USES OF FUNDS Sources of Funds 1. Cash (PSCF-500,000/SEA 500,000) 2. Philanthropy (to date and expected) 3. Authorized Bonds	\$2,575,000		
3. Working Capital Startup Costs TOTAL USES OF FUNDS Sources of Funds 1. Cash (PSCF-500,000/SEA 500,000) 2. Philanthropy (to date and expected) 3. Authorized Bonds 4. Interest Income from bond proceeds listed in #3	\$2,575,000		
3. Working Capital Startup Costs TOTAL USES OF FUNDS Sources of Funds 1. Cash (PSCF-500,000/SEA 500,000) 2. Philanthropy (to date and expected) 3. Authorized Bonds 4. Interest Income from bond proceeds listed in #3 5. Mortgage	\$2,575,000 \$500,000	\$500,000	\$1,000
3. Working Capital Startup Costs TOTAL USES OF FUNDS Sources of Funds 1. Cash (PSCF-500,000/SEA 500,000) 2. Philanthropy (to date and expected) 3. Authorized Bonds 4. Interest Income from bond proceeds listed in #3 5. Mortgage 6. Working Capital Loans (two notes up to 2,2M each over 20years at 4%	\$2,575,000		\$1,000
3. Working Capital Startup Costs TOTAL USES OF FUNDS Sources of Funds 1. Cash (PSCF-500,000/SEA 500,000) 2. Philanthropy (to date and expected) 3. Authorized Bonds 4. Interest Income from bond proceeds listed in #3 5. Mortgage 6. Working Capital Loans (two notes up to 2,2M each over 20years at 4% 7. Grants or Appropriations	\$2,575,000 \$500,000	\$500,000	\$1,000
3. Working Capital Startup Costs TOTAL USES OF FUNDS Sources of Funds 1. Cash (PSCF-500,000/SEA 500,000) 2. Philanthropy (to date and expected) 3. Authorized Bonds 4. Interest Income from bond proceeds listed in #3 5. Mortgage 6. Working Capital Loans (two notes up to 2,2M each over 20years at 4% 7. Grants or Appropriations a. Federal	\$2,575,000 \$500,000	\$500,000	\$1,000
3. Working Capital Startup Costs TOTAL USES OF FUNDS Sources of Funds 1. Cash (PSCF-500,000/SEA 500,000) 2. Philanthropy (to date and expected) 3. Authorized Bonds 4. Interest Income from bond proceeds listed in #3 5. Mortgage 6. Working Capital Loans (two notes up to 2.2M each over 20years at 4% 7. Grants or Appropriations a. Federal	\$2,575,000 \$500,000	\$500,000	\$1,000
3. Working Capital Startup Costs TOTAL USES OF FUNDS Sources of Funds 1. Cash (PSCF-500,000/SEA 500,000) 2. Philanthropy (to date and expected) 3. Authorized Bonds 4. Interest Income from bond proceeds listed in #3 5. Mortgage 6. Working Capital Loans (two notes up to 2,2M each over 20years at 4% 7. Grants or Appropriations a. Federal b. State c. Local	\$2,575,000 \$500,000	\$500,000	\$1,000
3. Working Capital Startup Costs TOTAL USES OF FUNDS Sources of Funds 1. Cash (PSCF-500,000/SEA 500,000) 2. Philanthropy (to date and expected) 3. Authorized Bonds 4. Interest Income from bond proceeds listed in #3 5. Mortgage 6. Working Capital Loans (two notes up to 2,2M each over 20years at 4% 7. Grants or Appropriations a. Federal b. State c. Local 8. Other (Specify/add rows if needed)	\$2,575,000 \$500,000 \$1,700,000	\$500,000	\$1,000 \$3,900
3. Working Capital Startup Costs TOTAL USES OF FUNDS Sources of Funds 1. Cash (PSCF-500,000/SEA 500,000) 2. Philanthropy (to date and expected) 3. Authorized Bonds 4. Interest Income from bond proceeds listed in #3 5. Mortgage 6. Working Capital Loans (two notes up to 2,2M each over 20years at 4% 7. Grants or Appropriations a. Federal b. State c. Local 8. Other (Specify/add rows if needed) Owner Contribution of Land \$375,000	\$2,575,000 \$500,000 \$1,700,000 \$375,000	\$500,000 \$2,200,000	\$1,000 \$3,900 \$375
3. Working Capital Startup Costs TOTAL USES OF FUNDS Sources of Funds 1. Cash (PSCF-500,000/SEA 500,000) 2. Philanthropy (to date and expected) 3. Authorized Bonds 4. Interest Income from bond proceeds listed in #3 5. Mortgage 6. Working Capital Loans (two notes up to 2,2M each over 20years at 4% 7. Grants or Appropriations a. Federal b. State c. Local 8. Other (Specify/add rows if needed)	\$2,575,000 \$500,000 \$1,700,000 \$375,000 \$2,575,000	\$500,000 \$2,200,000 \$2,700,000	\$1,000 \$3,900 \$375 \$5,275
3. Working Capital Startup Costs TOTAL USES OF FUNDS Sources of Funds 1. Cash (PSCF-500,000/SEA 500,000) 2. Philanthropy (to date and expected) 3. Authorized Bonds 4. Interest Income from bond proceeds listed in #3 5. Mortgage 6. Working Capital Loans (two notes up to 2,2M each over 20years at 4% 7. Grants or Appropriations a. Federal b. State c. Local 8. Other (Specify/add rows if needed) Owner Contribution of Land \$375,000 TOTAL SOURCES OF FUNDS	\$2,575,000 \$500,000 \$1,700,000 \$375,000	\$500,000 \$2,200,000	\$1,000 \$3,900 \$375
3. Working Capital Startup Costs TOTAL USES OF FUNDS Sources of Funds 1. Cash (PSCF-500,000/SEA 500,000) 2. Philanthropy (to date and expected) 3. Authorized Bonds 4. Interest Income from bond proceeds listed in #3 5. Mortgage 6. Working Capital Loans (two notes up to 2,2M each over 20years at 4% 7. Grants or Appropriations a. Federal b. State c. Local 8. Other (Specify/add rows if needed) Owner Contribution of Land \$375,000 TOTAL SOURCES OF FUNDS	\$2,575,000 \$500,000 \$1,700,000 \$375,000 \$2,575,000	\$500,000 \$2,200,000 \$2,700,000	\$1,000 \$3,900 \$375 \$5,275,
3. Working Capital Startup Costs TOTAL USES OF FUNDS Sources of Funds 1. Cash (PSCF-500,000/SEA 500,000) 2. Philanthropy (to date and expected) 3. Authorized Bonds 4. Interest Income from bond proceeds listed in #3 5. Mortgage 6. Working Capital Loans (two notes up to 2,2M each over 20years at 4% 7. Grants or Appropriations a. Federal b. State c. Local 8. Other (Specify/add rows if needed) Owner Contribution of Land \$375,000 TOTAL SOURCES OF FUNDS pal Lease Costs (if applicable) 1. Land	\$2,575,000 \$500,000 \$1,700,000 \$375,000 \$2,575,000	\$500,000 \$2,200,000 \$2,700,000	\$1,000 \$3,900 \$375 \$5,275,
3. Working Capital Startup Costs TOTAL USES OF FUNDS Sources of Funds 1. Cash (PSCF-500,000/SEA 500,000) 2. Philanthropy (to date and expected) 3. Authorized Bonds 4. Interest Income from bond proceeds listed in #3 5. Mortgage 6. Working Capital Loans (two notes up to 2,2M each over 20years at 4% 7. Grants or Appropriations a. Federal b. State c. Local 8. Other (Specify/add rows if needed) Owner Contribution of Land \$375,000 TOTAL SOURCES OF FUNDS all Lease Costs (if applicable) 1. Land 2. Building	\$2,575,000 \$500,000 \$1,700,000 \$375,000 \$2,575,000	\$500,000 \$2,200,000 \$2,700,000	\$1,000 \$3,900 \$375 \$5,275 Total
3. Working Capital Startup Costs TOTAL USES OF FUNDS Sources of Funds 1. Cash (PSCF-500,000/SEA 500,000) 2. Philanthropy (to date and expected) 3. Authorized Bonds 4. Interest Income from bond proceeds listed in #3 5. Mortgage 6. Working Capital Loans (two notes up to 2,2M each over 20years at 4% 7. Grants or Appropriations a. Federal b. State c. Local 8. Other (Specify/add rows if needed) Owner Contribution of Land \$375,000 TOTAL SOURCES OF FUNDS	\$2,575,000 \$500,000 \$1,700,000 \$375,000 \$2,575,000	\$500,000 \$2,200,000 \$2,700,000	\$5,275, \$1,000 \$3,900 \$375, \$5,275,

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5. Other (Specify/add rows if needed)Recommended Contingency

\$0

^{*} Describe the terms of the lease(s) below, including information on the fair market value of the item(s), and the number of years, annual cost, and the interest rate for the lease.

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ATTACHMENT B BASIS OF DESIGN REVISED:

9.30.2021

This request for approval involves the expansion of the Physicians Surgery Center of Frederick, Maryland with the addition of two Class "C" Surgical Operating Rooms and a Class "A" Procedure Room. The expansion is proposed at 11,222 square feet and is a single-story structure. The expanded Sterile Surgery Center area is congruent to the existing Surgery Center area to achieve a continuous Surgery Area.

The design of the expansion is to create a "State of the Practice" Surgical Center featuring medical activities located adjacently and a facility promoting a Patient Experience for healing and wellbeing.

The anticipated schedule is to commence with construction in 10 to 12 months as noted below:

May 2022	Commence with construction, starting with earthwork
March 2023	Expansion Construction Completed,
March 15, 2023	Certificate of Occupancy Issued by the City of Frederick
April 15, 2023	Installation of equipment and stocking of supplies completed
May 1, 2023	Accreditation Site Visit
May 15, 2023	First Patient Seen

The total anticipated project cost is as follows:

Use of Funds:

1. Capital Costs

a. New Construction

	10 EQ4 404
11,222 @ \$320/sf:	\$3,591,401
2. Fixed Equipment:	\$50,000
3. Site and Infrastructure Improvements:	\$220,000
4. Architect and Engineering Fees:	\$285,000
5. Permits:	\$45,000
Subtotal	\$4,191,401

b. Renovation:

6. Building (Shell and Interior build-out)	
1,065 @ \$120/sf:	\$127,800
Architect and Engineering Fees:	\$35,000
8. Permits:	<u>\$5,000</u>
Subtotal	\$167,800
Total Project Construction:	\$4,359,201

Land	\$375,000
Movable Equipment	\$300,000
Recommended Contingency	\$200,000
Adjusted Total	\$875,000

Total Project Capital \$5,234,201

Recommended \$200,000 contingency of 5% on the construction costs

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ATTACHMENT B, BASIS OF DESIGN, REVISED:

9.30.2021

The anticipated project cost for Shell (Landlord) and Interior Build Out is summarized below:

Shell Building:

Area under consideration:

11,222 square feet

Construction:

\$1,684,401

Site Improvements:

\$220,000

Design and Engineering: Permit Fees:

\$154,500 \$21,000

Sub Total:

\$2,079,901

Cost Per Square Foot: \$185/ft

Interior Buildout:

Area under consideration: Construction:

11,222 square feet

\$1,907,000

Fixed Equipment:

\$50,000

Design and Engineering:

\$130,500

Permit Fees:

<u>\$24,000</u>

Sub Total:

\$2,111,500

Cost Per Square Foot: \$188/ ft

Interior Renovation:

Area under consideration:

1,065 Square Feet

Renovation Construction:

\$127,800

Design and Engineering:

\$ 35,000

Permitting:

\$ 5,000

Sub Total:

\$167,800

Total Project Construction Costs:

\$4,359,201

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ANDOCHICK PROPERTIES SURGERY CENTER EXPANSION CONSTRUCTION CHARACTERISTICS 9.30.2021

Description:

The expansion of the Physicians Surgery Center of Frederick is characterized by the following construction features and specifications:

Class of Construction: The expansion and renovation of the existing center is classified as a Class "A" construction as defined by quality. This single-story building is comprised of concrete slab on grade with stud framed wall and roof structure with masonry cladding on the exterior perimeter. The new construction is protected by a NFPA 13 wet system below the attic and a dry pipe system in the attic.

Type of Construction: The type of construction based upon structure, finishes, the operating MEP systems, emergency power and integrated medical gas systems places this facility in the Good category, and per Marshall Valuation Systems rated as 3.0.

Number of Stories: 1

Project Space shall be 11,222 square feet of new construction and 1,065 of renovated space in the existing facility. This square footage is on the first floor.

- 1. Total area of the expansion is: 11,222 square feet and the renovated portion of the existing Surgery Center is: 1,065 square feet a total PROJECT AREA of 12,287 square feet.
- 2. Total Surgery Center area is the project area: 12,287 square feet and the existing Surgery Center: 4,792 square feet a total Surgery Center area of 17,079 square feet.
- 3. Total Building area demised by a one hour fire wall is the Surgery Center of 17,079 square feet plus the non-associated medical suite of 2,648 square feet for at total building area with expansion of 19,727 square feet.

Perimeter in Lineal Feet: The expansion project has 443.5 lineal feet, and the existing facility has 309.75 lineal feet for a total of 753.25 lineal feet.

Wall Height: is 10 feet on the expansion project and existing building. Average height with roof structure is 18 feet.

Elevators: None as building is single story and access is on grade

Sprinklers and Fire Suppression. The facility at grade is required to be protected by an NFPA Type 13 System per the NFPA 101 Life Safety Code and the IBC 2018 Building Code. A wet pipe system will protect the facility below the attic and a dry pipe system will protect the unheated attic. The facility is also equipped with type ABC Fire Extinguishers at appropriate locations.





Other Characteristics:

Continuous Power is supplied by an onsite generator and switch gear. Generator operation and testing is monitored at the nurse's station.

Nurse Call System is installed at all pre-opt/post-opt patient bays and monitored at the Nurse's station.

MED Gases are integrated in the facility and provided at all pre-opt/post-opt patient bays, surgical areas, and procedure rooms. Access to the MED Gas supply is restricted and accessed from the exterior of the building.

Type of HVAC System: The system is designed to meet the ASHRAE 170, 2017 performance standards and is zoned with dedicated mechanical equipment serving the surgical areas to achieve the number of air changes per hour, fresh air, and filtering through high and low return supply ducts. Other areas are supplied by separated units through a VAV distribution.

Type of Exterior Walls: Exterior walls are comprised of bearing on a concrete footing with 2 by 6 studs at 16 inches on center with sheathing applied to the exterior face covered by a moisture and air barrier with brick veneer anchored to the framing with a one-inch air space. Stud cavities are filled with glass fiber insulation with a value of R-25 or greater. One layer of type "X" 5/8 gypsum wallboard is applied and finished on the interior face and the underside of trusses. Truss cavities and attic is insulated with R-40 mineral wool. Attic contains draft stops as required.

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Individual Physician's Submission (provide this form for each physician who will do procedures at the proposed facility)

Facility(s) from which	these cases will be migrating	E	- KIA	3.27
	2023	Year 3	Minutes Cases Minutes Cases Minutes	120
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ears		Year 200	Minutes	
Volume		Ye	Cases	60
Surgical Volume Latest 2 complete ye		Year 2014	Cases Minutes Cases	
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Physician Name Scott E	Andeenick, MD			

5 most frequently performed surgeries, two most recent years	wo most re	cent vears
Surgical Procedure*	Yr 1	Yrz
Breast Reconstruction		
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* List in descending order based on the cumulative 2 year volume

I hereby declare and affirm under the penalties of perjury that the facts stated in this affidavit are true and correct to the best of my knowledge, information and belief

Signature X C

Scott A NDOCK

Volume projections – ambulatory surgery facility applications

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Individual Physician's Submission (provide this form for each physician who will do procedures at the proposed facility)

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* List in descending order based on the cumulative 2 year volume

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Signature

Print Name:_

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Physician Name	Kusin Nevert Belo				

5 most frequently performed surgeries, two most recent years	No most rec	ent years
Surgical Procedure*	Yr.1	Yr2

* List in descending order based on the cumulative 2 year volume

I hereby declare and affirm under the penalties of perjury that the facts stated in this affidavit are true and correct to the best of my knowledge, information and belief.

Signature Signature

Print Name:

EXHIBIT 7

Volume projections – ambulatory surgery facility applications

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Physician Name	derrine, MD					

5 most frequently performed surgeries, two most recent years	o most rec	ent vears
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List in descending order based on the cumulative 2 year volume	ative 2 vear	Volume

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Signature____

Print Name:

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Physician	Name	Adom	meenrabi mo									

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Surgical Procedure*	Yr 1	Yr2

* List in descending order based on the cumulative 2 year volume

I hereby declare and affirm under the penalties of perjury that the facts stated in this affidavit are true and correct to the best of my knowledge, information and belief.

Signature

Print Name: Hda

Volume projections – ambulatory surgery facility applications

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Individual Physician's Submission (provide this form for each physician who will do procedures at the proposed facility)

Facility(s) from which	these cases will be migrafing			NONE	
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Physician Name	Thadanily				

5 most frequently performed surgeries, two most recent years	No most rec	ent vears
Surgical Procedure*	Yr1	Yr2

* List in descending order based on the cumulative 2 year volume

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Signature_

Print Name:

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Physician Name Steven Horton, MD			

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Surgical Procedure	Yr 1	Yr2

^{*} List in descending order based on the cumulative 2 year volume

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Signature

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Volume projections – ambulatory surgery facility applications

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Dhynisian	Name	GUPTH, MD					

5 most frequently performed surgeries, two most recent years	wo most rec	ent Vears
Surgical Procedure*	Yr.1	Yr2

* List in descending order based on the cumulative 2 year volume

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Physician	Christopher	HENRY, MD							

5 most frequently performed surgeries, two most recent years	wo most rec	sent years
Surgical Procedure*	Yr1	Yr2

* List in descending order based on the cumulative 2 year volume

I hereby declare and affirm under the penalties of perjury that the facts stated in this affidavit are true and correct to the best of my knowledge, information and better

Signature

Print Name:

Volume projections – ambulatory surgery facility applications

This forms package has been prepared to assist CON applicants for Ambulatory Surgical Facilities in providing information required for the CON review (see below). Each potentially involved physician should be asked to complete an individual submission, and the project sponsor (applicant) should aggregate that data (final table in this package). The information requested in this form will enable the applicant to comply with the regulations (listed immediately below) that prescribe data an applicant must provide.

The State Health Plan....General Surgical Services Excerpted from COMAR 10.24.11.06C.

An application to establish a new ambulatory surgical facility shall present the following data as part of its impact assessment, in addition to addressing COMAR 10.24.01.08G(3)(f):

- (1) The number of surgical cases projected for the facility and for each physician and practitioner;
- (2) A minimum of two years of historic case volume data for each physician or practitioner, identifying each facility at which cases were performed and the average operating room time per case. Calendar year or fiscal year data may be provided as long as the time period is identified and is consistent for all physicians; and
- (3) The proportion of case volume expected to shift from each existing facility to the proposed facility.
 - (4) Impact on an affected hospital.
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^{*} List in descending order based on the cumulative 2 year volume

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* List in descending order based on the cumulative 2 year volume

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Signature

Print Name: 50077

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^{*} List in descending order based on the cumulative 2 year volume

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SCOTT

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Individual Physician's Submission (provide this form for each physician who will do procedures at the proposed facility)

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Print Name: SCOT

ADDENDUM B: PROVIDING INDIVIDUAL PHYSICIAN VOLUME DATA

Volume projections – ambulatory surgery facility applications

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- (b) The operating room capacity assumptions in .06A of this Chapter and the operating room inventory rules in .06D of this Chapter shall be used in the impact assessment.

Note: duplicate and/or expand these forms as needed to accommodate providers.

Physicians Surgery Center of FrederickPOLICY: Charity Care

The Facility Administrator or Business Office Manager will review each request for charity care and approval will be based on criteria outlined in this policy. Guidelines for determining charity care criteria will be approved by the Facility Board of Managers.

PURPOSE:

To establish consistent eligibility requirements for patients requesting part or all of their balances for services rendered by the Facility to be written off as charity care.

SCOPE:

All patients requesting part or all of their accounts to be written off as charity care will be reviewed on a case-by-case basis. Persons with a family income below 100% of current federal poverty guideline who have no health insurance coverage and are not eligible for any public program to cover medical expenses are eligible for services free of charge. Those above 100% but below 300% will be eligible for discounts on a sliding scale for families.

PROCEDURE:

DOCUMENTATION

- A. Every patient requesting charity care write-offs must complete a Financial Assistance Form (found in the Appendix) and attach any and all applicable documentation. Upon receipt of information needed a probable eligibility determination will be made within two business days, and the patient notified. Patients are requested to apply prior to receiving service. Applications will not be considered more than ninety (90) days after insurance pays. Refunds of amounts paid prior to application approval will not be made. A link to the policy and documents is available to the public and can be found on the facility website at www.physicianssurgetr.com
- B. Income verification will be required by one or more of the following: pay stubs, W-2 forms, tax returns, an employer written statement, etc. Other documentation required includes but is not limited to copies of the following:
 - 1. Medical bills
 - 2. Utility bills
 - 3. Car payment stubs
 - 4. Rent receipts
 - 5. Bank statements
 - 6. Alimony/child support receipts
 - 7. Government assistance receipts
 - 8. Other income/investment statements (e.g. 401K)
- C. Each application will be considered for a specified amount. The approval of an application will not be considered as an approval for any or all future accounts. Each application will require new verification information to be considered for charity.

APPROVAL PROCESS

- A. The Facility Administrator must approve all balances to be written off as Charity Care.
- B. Each patient applying for charity care must make a good faith effort, as determined by the Facility, to obtain coverage from available public assistance programs such
 - 1. Medicare
 - 2. Medicaid

		(

- 3. Vocational rehabilitation
- 4. Victims of Crime
- 5. Children Special Services
- 6. Church program
- 7. If the patient has been denied public assistance they must supply documentation denying eligibility.
- 8. A patient who refuses to apply or follow through with applications for other assistance will not be eligible for charity care.
- C. Medicaid patients who meet our financial guidelines and receive services determined to be non-covered by Medicaid will be deemed covered expense for charity care and will not require the application process.
- D. In the case of patients who are faced with catastrophically large medical bills, the Facility Administrator may make a discretionary recommendation that the patient is medically indigent and thus is eligible for charity care. This determination will be made on a case-by-case basis and will require verification of all medical expenses.
- E. If patients do not qualify for medical assistance through the state or Facility charity care guidelines, refer to FINBO.06 Discounts for Self-Pays and Uninsured Patients.
- F. Patients whose income does not exceed 300% of the most current Poverty Income Guidelines issued by the Department of Health and Human Services will qualify for charity care discounts after verification of employment. These guidelines are updated annually. The current Poverty Income Guidelines can be found as follows: http://aspe.hhs.gov/poverty
- G. The Financial Assistance Form, along with any applicable supporting documentation, should be returned to the business office for account reconciliation and the appropriate write-off applied to the account prior to closing the accounting month. Write-offs should be performed using the appropriate charity care write-off code.
- H. The Facility reserves the right to reverse charity care approval if the information provided by the patient in the application is later determined to be falsified or is compensation for services obtained from another source.
- I. This policy will be shared with physicians, and made public patients of the facility and the community at large.
- J. Charity Care Reports will be submitted to the Board of Directors Periodically to monitor and promote compliance and progress toward meeting overall annual goal for the facility and community.

Associated Documentation

Policy STAT Form – Financial Assistance Form

Review and Approval Signatures:	
Board of Directors Chairman/Medical Director:	14/2021
Standy	19/15/21
Medical Executive Committee:	/ 4/80/2621
m m	19/15/21
Administrator:	14/80/2021
Administrator: Shannon Magre	1 09/15/2021
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Public Notice: .

PSCF's mission is to provide high quality and affordable health care services to the community it serves. This includes providing medical care services on a charity basis for those who qualify without regard to age, race, creed, color, sexual orientation or national origin.

Qualifications include those that are determined to be financially or medically indigent. A financially indigent patient is a person who is uninsured or underinsured and is accepted for care with no obligation or a discounted obligation to pay for services based on income and family size. The facility uses poverty income guidelines issued by the U.S. Department of Health and Human Services to determine a person's eligibility for charity care as a financially indigent patient.

Persons whose income does not exceed 300% of the most current Poverty Income Guidelines issued by the Department of Health and Human Services will qualify for charity care discounts after verification of employment. These guidelines are updated annually. The current Poverty Income Guidelines can be found on: http://aspe.hhs.gov.poverty.

Persons with family income below 100 percent of the current federal poverty guideline who have no health insurance coverage and are not eligible for any public program providing coverage for medical expenses shall be eligible for services free of charge. At a minimum, persons with family income above 100 percent of the federal poverty guideline but below 300 percent of the federal poverty guideline shall be eligible for services at a discounted charge, based on a sliding scale of discounts for family income bands.

A medically indigent patient is a person whose medical bills after payment by third-party payer exceeds 35% of the person's annual gross income and is unable to pay the remaining bill.

Upon receipt of your eligibility request/documents, you will be provided with probable eligibility notification within two days.

Additional information concerning the charity care program can be obtained from the Business Office Manager at 240-215-3070. This policy can be accessed at www.physicianssrgctr.com

Updated 3.2021-Updated 10, 2021

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Public Notice: Frederick News Post

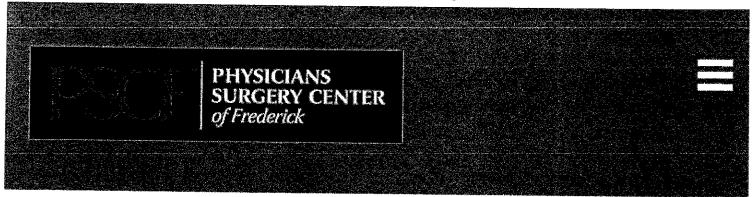
PSCF's mission is to provide high quality and affordable surgical care services to the community it serves. This includes providing surgical care services on a charity basis for all who qualify without regard to age, race, creed, color, sexual orientation or national origin.

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Updated 10.5,2021

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Billing

Paying Your Bill

We've kept registration, consultation, and even surgery as simple and streamlined as they can be and we're keeping our bill pay system simple, as well.

Physicians Surgery Center of Frederick is pleased to offer convenient, secure online bill pay, which is designed to eliminate misunderstandings and questions, while keeping the payment process clear and easy-to-follow. It's nice to forego paper checks and postage, and to have the convenience of 24/7 service.

We have experienced greater patient satisfaction with online bill pay, but if you prefer your invoice mailed, please let us know.

Please let us know prior to your surgery if you need help making special financial arrangements; we're happy to discuss alternative payment methods with you. To review the PSCF Charity Care Policy, click 10/9/21, 11:17 AM Billing

> here. To access the Financial Assistance form, click here.

In addition to printing your receipt, we encourage you to verify with us by phone or email that your payment has posted. Feel free to contact us with any questions related to your account or online payment at (240) 215-3070 x221.



■ ONLINE BILL PAY

Insurance

Please work with our team before, during, and after your surgery so that we can coordinate the process of filing and managing your insurance claims. Our team will take their time to walk you through every aspect of billing and payment, ensuring that you understand your coverage, co-pays, deductibles, or difference you may owe.

We request on the day of your procedure that you bring your current insurance and Medicare card for both primary and secondary insurances.

We accept the following:

- United Health Care
- CareFirst
- Medicare
- Cigna
- Aetna
- WC
- JH Priority Partners
- Amerigroup

- Riverside
- Tricare

Collections and Payment Policy

Co-pays and deductibles will be due on the day of your surgery.

For patients with no insurance coverage, or for those having cosmetic surgery, all fees will be due in advance.

We're happy to accept cash, cashier's checks, credit cards, and personal checks with valid identification.

CareCredit is a patient payment plan with eligibility determined by the patient's out of pocket expense. Plans extend up to 12 months and may offer interest-free payments. Apply at our facility or by visiting www.carecredit.com or by calling (800) 365-2895 for an Automated Phone Application.

Special Financial Arrangements

Please let us know prior to your surgery if you need assistance with special financial arrangements based upon need; we're happy to discuss and assist you with alternative payment methods, and will provide an eligibility determination within two days.

Our Mission

Physicians Surgery Center of Frederick (PSCF) provides cost-effective outpatient services using modern, state-of-the-art technology in a friendly and caring environment by a highly-skilled, compassionate staff. Serving Frederick, Maryland and surrounding communities, we strive to achieve excellence in all areas of Ambulatory Surgery service to our community.

Language Assistance

Language assistance services are available to you, free of charge. Call 1-877-463-3464 (TTY: 1-800-735-2258).

Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-877-463-3464 (TTY: 1-800-735-2258).

Click here for more languages.

Contact Us

Email

info@physicianssurgctr.com

Phone

240-215-3070

Fax

240-215-3071

Address

Physicians Surgery Center of Frederick 81 Thomas Johnson Court Suite B

Frederick, Maryland 21702

https://physicianssurgetr.com/billing/

AMBER MEADOWS

Home About Us Physicians Patients Billing FAQ Contact Us

Copyright © 2018 Physicians Surgery Center of Frederick

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July 30, 2019

Andochick Surgical Center Lle Attn: Shannon Ireland-Magro 81 Thomas Johnson Ct, Ste B Frederick, MD 21702-4674

CCN: 781900800206-001

PTAN: 131Z NPI: 1710952841

Dear Andochick Surgical Center Lle:

We are pleased to inform you that your revalidated Medicare enrollment application is approved. Listed below are your National Provider Identifier (NPI) and Provider Transaction Access Number (PTAN).

To start billing, you must use your NPI on all Medicare claim submissions. Because the PTAN is not considered a Medicare legacy identifier, do not report it as an "other" provider identification number to the National Plan and Provider Enumeration System (NPPES).

Your PTAN has been activated and will be the required authentication element for all inquiries to customer service representatives (CSRs), written inquiry units, and the interactive voice response (IVR) system. The IVR allows you to inquire about claims status, beneficiary eligibility and transaction information.

Medicare Enrollment Information-Organization

Provider/Supplier Name:

Andochick Surgical Center Llc

Organization's Practice Location:

81 Thomas Johnson Ct, Ste B, Frederick MD

21702-4674

Organization's PTAN(s):

131Z

Organization's NPI(s):

1710952841

Organization's Specialty:

Ambulatory Surgical Center

You are:

Participating

Effective date:

February 26, 2001

The changes noted below have been made:

P.O. Box 3157 Mechanicsburg, PA 17055-1836

www.novitas-solutions.com

INNOVATION IN ACTIO ACMS CONTRACTOR - ISO 9001-2008 CERTIFII

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We have updated your correspondence mailing address to 81 Thomas Johnson Ct, Ste B, Frederick MD 21702-4674.

We have corrected an existing practice location address from 81 Thomas Johnson Court, Suite B, Frederick MD 21702-4348 to 81 Thomas Johnson Ct, Ste B, Frederick MD 21702-4674. Your special payments 'pay to' address has been changed to 81 Thomas Johnson Ct, Ste B, Frederick MD 21702-4674 effective 07/08/2019.

We have updated your enrollment record to reflect 81 Thomas Johnson Ct, Ste B, Frederick MD 21702-4674 as the storage location facility where patients' medical records are maintained effective 07/08/2019.

The mailing address of your Contact Person Shannon Ireland-Magro has been changed to reflect 81 Thomas Johnson Ct, Ste B, Frederick MD 21702-4674.

The changes noted below have been made in regards to your CMS-588 Electronic Funds Transfer (EFT) Authorization Agreement:

The financial institution's address has been updated to 165 Thomas Johnson Dr, Ste A, Frederick MD 21702-4742

The EFT contact person's email address has been updated to reflect Tammy.Dorsey@physiciansSurgeryCenter.net.

Please verify the accuracy of your enrollment information.

If you are an existing Medicare provider and currently do not submit claims electronically, or are new to the Medicare program and plan on filing claims electronically, please contact our EDI department at 877-235-8073 (Option 3).

Get instant access to the world of online Medicare transactions with Novitasphere! Novitasphere is a FREE, secure internet portal for Part A and B customers to easily connect directly to Novitas Solutions. Novitasphere provides quick access to verify beneficiary eligibility, submit claims, perform claim corrections (Part B), retrieve electronic remittance advice, obtain comparative billing reports, and submit medical review records. It's free, easy, and secure to perform transactions online, saving your office valuable time. We encourage everyone to explore and discover the online world of Novitasphere! To find out more, including how to enroll for Novitasphere, visit the Novitasphere Center at:

Jurisdiction L Part B Providers and Suppliers:

http://www.novitas-solutions.com/webcenter/portal/Novitasphere JL

You are required to submit updates and changes to your enrollment information in accordance with specified timeframes pursuant to 42 CFR §424.516. Reportable changes include, but are not limited to, changes in: (1) legal business name (LBN)/tax identification number (TIN), (2) practice location, (3) ownership, (4) authorized/delegated officials, (5) changes in payment information such as electronic funds transfer information and (6) final adverse legal actions, including felony convictions, license suspensions or revocations, an exclusion or debarment from participation in Federal or State health care program, or a Medicare revocation by a different Medicare contractor.

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Providers and suppliers may enroll or make changes to their existing enrollment in the Medicare program using the Internet-based Provider Enrollment, Chain and Ownership System (PECOS). Go to: https://www.cms.gov/MedicareProviderSupEnroll.

Providers and suppliers enrolled in Medicare are required to ensure strict compliance with Medicare regulations, including payment policy and coverage guidelines. CMS conducts numerous types of compliance reviews to ensure providers and suppliers are meeting this obligation. Please visit the Medicare Learning Network at https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/index.html for further information about regulations and compliance reviews, as well as Continuing Medical Education (CME) courses for qualified providers.

Additional information about the Medicare program, including billing, fee schedules, and Medicare policies and regulations can be found at our Web site at https://www.novitas-solutions.com or the Centers for Medicare & Medicaid Services (CMS) Web site at https://www.cms.gov/home/medicare.asp.

If you disagree with the effective date determination in this letter, you may request a reconsideration before a contractor hearing officer. The reconsideration is an independent review and will be conducted by a person who was not involved in the initial determination. You must request the reconsideration in writing to this office within 60 calendar days of the postmark date of this letter. The reconsideration must state the issues or findings of fact with which you disagree and the reasons for disagreement. You may submit the additional information with the reconsideration request that you believe may have a bearing on the decision. However, if you have additional information that you would like a hearing officer to consider during the reconsideration or, if necessary, an administrative law judge to consider during a hearing, you must submit that information with your request for reconsideration. This is your only opportunity to submit information during the administrative appeals process; you will not have another opportunity to do so unless an administrative law judge specifically allows you to do so under 42 CFR §498.56(e).

The reconsideration request must be signed and dated by the physician, non-physician practitioner or any responsible authorized or delegated official within the entity. Failure to timely request a reconsideration is deemed a waiver of all rights to further administrative review.

The reconsideration request should be sent to:

Centers for Medicare & Medicaid Services Center for Program Integrity Provider Enrollment & Oversight Group 7500 Security Boulevard Mailstop AR 18-50 Baltimore, MD 21244-1850

If you have any questions regarding this letter, please call our JL Provider Enrollment Contact Center at 877-235-8073 between the hours of 8:00 AM - 4:00 PM ET.

Sincerely,

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Trissy A. Thomas Medicare Provider Enrollment Novitas Solutions, Inc.

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Provider Enrollment Reconsideration Request

I am requesting a Reconsideration and submitting documentation on case/tracking #:

This process gives the provider or supplier an opportunity to disagree with an effective date determined in this letter. Complete the form below, attach a copy of the determination letter you received, describe the reason you are submitting this request, attach all supporting documentation applicable to your case and mail your request to:

Centers for Medicare & Medicaid Services
Center for Program Integrity
Provider Enrollment & Oversight Group
7500 Security Boulevard
Mailstop AR 18-50
Baltimore, MD 21244-1850

1.	Name of Provider:							
2.	NPI:							
3.	Medicare ID (PTAN or OSCAR), if applicable:							
4.	Reason for submissi	on, reason you disagree (atta	ch additional pages as needed):	Manuscraphics over 1944-4				
5.	*Person Appealing	☐ Provider ☐ Authorized Official	☐ Legal Representative ☐ Delegated Official					
6.	Signature of person a	nppealing:	Date:					
7.								
8,	Print name of person appealing: Complete address of person appealing:							
9.								
10.	Fax number:							

^{*}Provider: individual physician or non-physician practitioner

^{*}Legal Representative: a personal representative of the provider/supplier with legal standing.

^{*}Authorized Official: an appointed official as indicated on the CMS-855.

^{*}Delegated Official: an individual who is delegated by an authorized official as indicated on the CMS-855.





STATE OF MARYLAND

DHMH

Maryland Department of Health and Mental Hygiene

201 W. Preston Street Baltimore, Maryland 21201

Martin O'Malley, Governor - Anthony G. Brown, Lt. Governor - Joshua M. Sharfstein, M.D., Secretary

DATE OF ISSUE: 01/19/12

PHYSICIANS SURGERY CTR OF FREDERICK 81 THOMAS JOHNSON CT SUITE B FREDERICK MD 21702-0000

Provider Type: 39 AMBUL SURG Primary Speciality:

Welcome to the Maryland Medicaid Program.

The enrollment application you submitted has been approved. Your Maryland Medicaid provider number is 4208838~00. Your service begin date is 01/01/11. Please use this number when corresponding with this agency or whenever you bill Medicaid for service beginning 01/01/11.

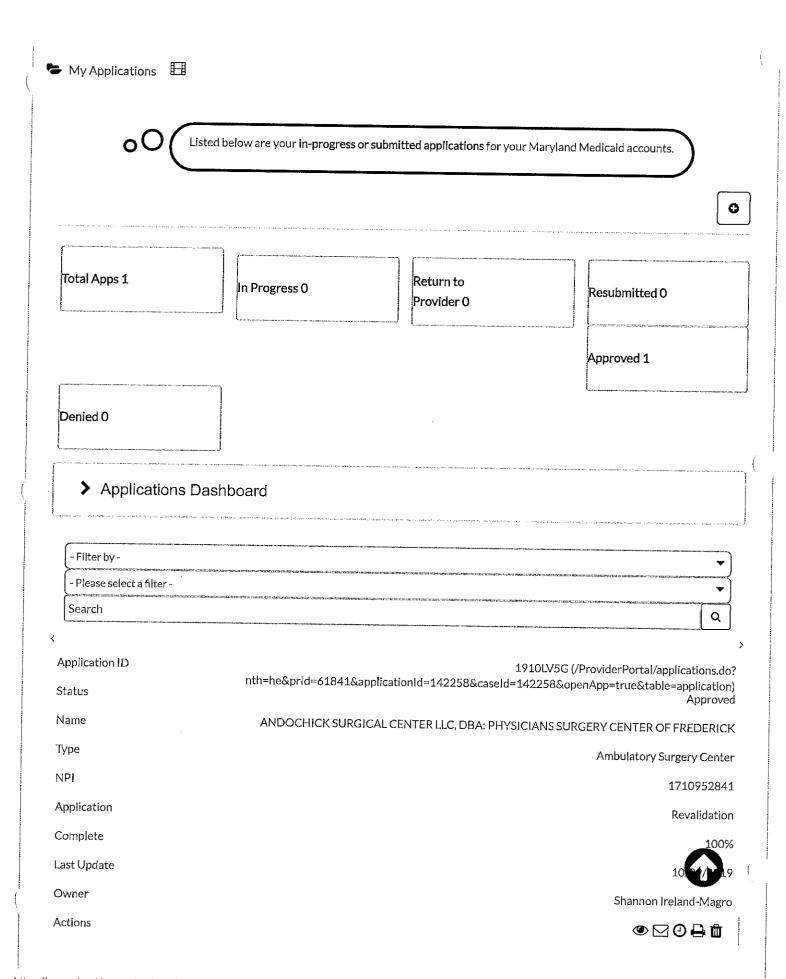
If any of the information you supplied on your application changes, (mailing address, practice locations, speciality, tax I.D., etc.) you must notify the Provider Enrollment Section immediately in writing.

Thank you for participating in the Maryland Medical Assistance Program.

Sincerely,

Provider Enrollment Section

			(
			(



ePREP Portal

Version: 4.10.11.1 Build: #1229

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Addendum Cover Page for Maryland Medical Assistance Program Application FACILITY/ORGANIZATION

PT 39 AMBULATORY SURGERY CENTER

If you have questions, please contact the Provider Enrollment Helpline at 1-844-4MD-PROV (1-844-463-7768)

Monday – Friday from 7am – 7pm.

All providers are required to use the electronic Provider Revalidation and Enrollment Portal, or ePREP (eprep.health.maryland.gov) for enrollment, information updates, provider affiliations and revalidations.

Please fill out the information below and upload the completed addendum to the "Additional Information" section under "Practice Information" within the ePREP (eprep.health.maryland.gov) "Applications" tab, along with any additional documents requested within the addendum.

Provider Information

NPI:	
1710952841	
Tax ID:	
522239166	
MA Provider Number (if already enrol	led in Maryland Medicaid):
420883800	· · · · · · · · · · · · · · · · · · ·

Please visit health.maryland.gov/ePREP for more information about ePREP



Addendum Cover Page for Maryland Medical Assistance Program Application FACILITY/ORGANIZATION

PT 39 AMBULATORY SURGERY CENTER

If you have questions, please contact the Provider Enrollment Helpline at 1-844-4MD-PROV (1-844-463-7768) Monday – Friday from 7am – 7pm.
Please upload this form to the "Additional Information" section under "Practice Information" within the ePREP (eprep.health.maryland.gov) "Applications" tab, along with any additional applicable supporting documents requested below.
Section I:
Please upload the following document to <u>ePREP</u> :
1. A copy of your Medicare approval letter from CMS (containing your PTAN)
Section II:
Please respond to all questions below and upload any applicable documents to ePREP:
1. Will you be rendering x-ray services?
YES NO
 If yes, please include a copy of your Radiation Machine Facility Registration and Certification issued by the Maryland Department of Environment or an x-ray certification from the state in which you practice in your upload.
Section III: Please check the box for each of the services you render:
□ Abortion services □ Vasectomy services □ Lab services

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Physicians Surgery Center of Frederick Patient Survey

EdgePerception™ Performance Analysis Report For Sep2021

43 Patient Responses Were Received This Period

Overall & Category Scoring	Thi	s Period	Last I	Period
	Score	SPH Nat'l Average	Score	Change
Overall Score	96.6	94.3	95.2	1.4
Facility	97.1	95.8	95.9	1.2
People	97.8	95.3	96,4	1.4
	The state of the s		***************************************	
Personal	96.7	95.0	95.0	1.7

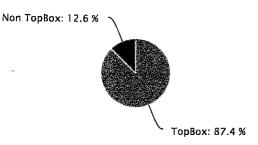
Key Indicator Summary Note: Values below starting point of graph will not appear within graph.	This Period		Last Period	
	Score	SPH Nat'l Average	Score	Change
Confidence in care received	97.6	96.5	95,9	1.7
Recommend facility	97.0	96.2	95.9	1.1

Key Loyalty Indicators

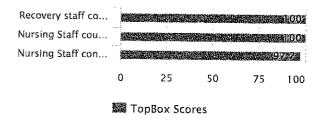
100 Score 75 50 Confidence in care Recommend facility received

Your Facility SPH National Average

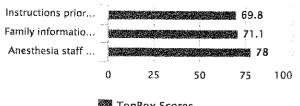
TopBox - All Responses



Highest 3 TopBox Performance This Month



Lowest 3 TopBox Performance This Month



TopBox Scores

Clean Survey Analysis

A 'Clean Survey' contains No negative responses (Disagree or Strongly Disagree). SPH Analytics excludes metrics that may create ambiguity, such as billing, scheduling and parking. This measurement illustrates your % of 'Completely Satisfied' patients.

During this period, your facility had 90.7% Clean Surveys. In comparison the SPH National average was 82.00%.

CODE	TOP 3 'ADVANCERS' THIS PERIOD	CURRENT SCORE	PREVIOUS SCORE	CHANGE
A01	Recovery staff courtesy	100.0	94.8	5.2
A03	Adequacy of recovery time in facility	95.8	91.7	4.1
A04	Helpfulness of homecare instructions	93.0	90.1	2.9

CODE	TOP 3 'DECLINERS' THIS PERIOD	CURRENT SCORE	PREVIOUS SCORE	CHANGE
P03	Instructions prior to surgery	91.3	94.2	-2.9
D04	Anesthesia staff spent time	93.3	95.2	-1.9
D06	Surgeon spent time	95.9	96.4	-0.5

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EdgePerception_Sep21_PSFPS.htm

Page: 1

	EdgePerception Per	formance Analy	sis Repor	t, Sep202	1	
AT A STATE OF THE	Sco	res & Comparis	ons			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Code P09	Facility	Score	SPH Nat'l Average	SPH Nat'l Percentile	Previous Score	Change
P99	Facility cleanliness Felt safe	97.1	96.5	55.8%	95.9	1.2
	reit sate	97.1	96.3	59.8%	95.8	1.3
Code A01	People	Score	SPH Nat'l Average	SPH Nat'l Percentile	Previous Score	Change
A05	Recovery staff courtesy	100.0	96.4	100.0%	94.8	5.2
700 201	Staff concern during follow-up call	94.9	94.0	57.0%	93.2	1.7
003	Nursing Staff concern for comfort	99.4	96.8	90.9%	97.7	1.7
203 204	Anesthesia staff courtesy	97.6	96.3	70.6%	96.4	1.2
)0 4)05	Anesthesia staff spent time	93,3	94.4	30.0%	95.2	-1.9
006	Surgeon courtesy	98.8	96.9	85.6%	97.1	1.7
200 207	Surgeon spent time	95,9	94.7	60.3%	96.4	-0.5
13	Clerks & Receptionists	99.4	95.8	88.3%	97.7	1.7
13	Nursing Staff courtesy	100.0	97.4	100.0%	98.3	1.7
Ode 02	Personal Pain level control	Score	SPH Nat'l Average	SPH Nat'i Percentile	Previous Score	Change
.03		95.8	94.1	73.0%	95.7	0.1
09	Adequacy of recovery time in facility Respect for privacy	95.8	93.9	74.4%	91.7	4.1
01	Confidence in care received	97.1	95.6	72.9%	95.9	1.2
602	Recommend facility	97.6	96.5	65.4%	95.9	1.7
	recommend admity	97.0	96.2	60.0%	95.9	1.1
ode	Process	Score	SPH Nat'l Average	SPH Nat'l Percentile	Previous Score	Change
04	Helpfulness of homecare instructions	93.0	93.4	43.3%	90.1	2.9
08	Family information during the visit	92.8	92.8	46.8%	91.3	1.5
31	Nursing Staff explanations	98.3	96.5	81.5%	96.4	1.9
32	Surgeon explanations	96.5	95.5	58.8%	95.2	1.3
03	Instructions prior to surgery	91.3	93.8	13.4%	94.2	-2.9
)8	Walt time	94.8	89.7	85.2%	93.0	1.8

Score Highlighting (Green/Red):
Score is in green if change from last period is > 2 points

Score is in red if change from last period is < 2 points

EdgePerception_Sep21_PSFPS.htm

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	EdgePerception Pe	rformance An	alysis R	eport, S	2p2021		
,,v		Trend Analy	sis				
Code	Facility	Sep21	Aug21	Jul21	Jun21	May21	Apr21
P09	Facility cleanliness	97.1	95.9	98.2	95.8	94.8	96.8
P99	Felt safe	97.1	95.8	98.6	96.4	95.3	97.5
Code	People	Sep21	Aug21	Jul21	Jun21	May21	Арг21
A01	Recovery staff courtesy	100.0	94.8	97.3	95.1	95.8	96.4
A05	Staff concern during follow-up call	94.9	93.2	96.6	90.1	93.8	94.1
D01	Nursing Staff concern for comfort	99.4	97.7	97.8	95.1	95.8	97.2
D03	Anesthesia staff courtesy	97.6	96.4	97.2	95.6	95.6	96.0
D04	Anesthesia staff spent time	93.3	95.2	96.3	93.1	95.2	93.4
D05	Surgeon courtesy	98.8	97.1	98.2	97.6	93.9	97.5
D06	Surgeon spent time	95.9	96.4	98.2	97.0	93.3	96.5
P07	Clerks & Receptionists	99.4	97.7	96.4	95.2	94.8	96.4
P13	Nursing Staff courtesy	100.0	98.3	96.9	97.0	97.6	96,8
Code	Personal	Sep21	Aug21	Jul21	Jun21	May21	Apr21
A02	Pain level control	95.8	95.7	96.4	93.9	92.3	94.5
A03	Adequacy of recovery time in facility	95.8	91.7	93.8	86.9	94.3	92.1
D09	Respect for privacy	97.1	95.9	97.8	94.6	93.4	96.1
G01	Confidence in care received	97.6	95.9	96.4	96.4	94.8	97.2
G02	Recommend facility	97.0	95,9	97.3	95.7	92.3	96.1
Code	Process	Sep21	Aug21	Jul21	Jun21	May21	Apr21
A04	Helpfulness of homecare instructions	93.0	90.1	94.2	91.5	93.9	93.0
D08	Family information during the visit	92.8	91.3	92.5	91.4	90.0	92.9
D31	Nursing Staff explanations	98.3	96.4	96.9	94.6	95.3	97.1
D32	Surgeon explanations	96.5	95.2	97.8	95.2	92.6	96.1
P03	Instructions prior to surgery	91.3	94.2	94.2	87.2	90.6	95.0
P08	Wait time	94.8	93.0	94.6	88.1	92.0	95.7

Trend Highlighting (Green/Red):

EdgePerception_Sep21_PSFPS.htm

¹st three scores in green for two consecutive monthly score increases

¹st three scores in red for two consecutive monthly score decreases

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·····		Response Ana	alysis				
Code P09	Facility	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A	Total
rus 1299	Facility cleanliness Felt safe	38	5	0	0	0	43
	reit sare	38	5	0	0	0	43
Code	People	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A	Total
A01	Recovery staff courtesy	42	0	0	o	1	43
\05	Staff concern during follow-up call	31	8	0	0	3	42
001	Nursing Staff concern for comfort	42	1	0	0	Ō	43
003	Anesthesia staff courtesy	38	4	0	0	1	43
004	Anesthesia staff spent time	32	8	1	0	1	42
05	Surgeon courtesy	41	2	0	0	Ö	43
006	Surgeon spent time	36	7	0	0	Ō	43
07	Clerks & Receptionists	42	1	0	0	0	43
13	Nursing Staff courtesy	43	0	0	0	0	43
ode	Personal	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A	Total
02	Pain level control	37	4	1	o	1	43
.03 .09	Adequacy of recovery time in facility	35	7	0	0	1	43
09	Respect for privacy	38	5	0	0	0	43
i02	Confidence in care received	38	4	0	0	0	42
102	Recommend facility	37	5	0	0	0	42
ode 04	Process	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A	Total
08 08	Helpfulness of homecare instructions	34	8	0	1	0	43
სი 31	Family information during the visit	27	11	0	0	5	43
31 32	Nursing Staff explanations	40	3	0	0	0	43
32 03	Surgeon explanations	37	6	0	0	0	43
)3)8	Instructions prior to surgery Wait time	30	12	1	0	0	43
70	vvait time Symphony Performance Health, 2021 All	36	6	1	٥	D	43

10/7/21, 3:01 PM Report Display

EdgePerception Performance Analysis Report, Sep2021

Perspective: Favorable Analysis

Code	Facility	Eligible Responses	Favorable Responses	Favorable Percentage
P09	Facility cleanliness	43	43	100.0%
P99	Felt safe	43	43	100.0%

Code	People	Eligible Responses	Favorable Responses	Favorable Percentage
A01	Recovery staff courtesy	42	42	100.0%
A05	Staff concern during follow-up call	39	39	100.0%
D01	Nursing Staff concern for comfort	43	43	100.0%
D03	Anesthesia staff courtesy	42	42	100.0%
D04	Anesthesia staff spent time	41	40	97.6%
D05	Surgeon courtesy	43	43	100.0%
D06	Surgeon spent time	43	43	100.0%
P07	Clerks & Receptionists	43	43	100.0%
P13	Nursing Staff courtesy	43	43	100.0%

Code	Personal	Eligible Responses	Favorable Responses	Favorable Percentage
A02	Pain level control	42	41	97.6%
A03	Adequacy of recovery time in facility	42	42	100.0%
D09	Respect for privacy	43	43	100.0%
G01	Confidence in care received	42	42	100.0%
G02	Recommend facility	42	42	100.0%

Code	Process	Eligible Responses	Favorable Responses	Favorable Percentage
A04	Helpfulness of homecare instructions	43	42	97.7%
D08	Family information during the visit	38	38	100.0%
D31	Nursing Staff explanations	43	43	100.0%
D32	Surgeon explanations	43	43	100.0%
P03	Instructions prior to surgery	43	42	97.7%
P08	Wait time	43	42	97.7%
	Totals	929	924	99.5%

Favorable Percentage Color Coding: If the favorable percentage for any key performance indicator is less than 95%, the percentage is highlighted in red. This brings to your attention that more than 5% of your respondents (which equates to more than 1 out of every 20) provided an unfavorable response for the measure. This may suggest that you need to look at the performance or behavior tied to this measure more closely.

Calculation of Favorable Percentage: Your eligible responses are simply the total of all 'Strongly Agree', 'Agree', 'Disagree' and 'Strongly Disagree' responses. Your Favorable responses are the sum of your 'Strongly Agree' and 'Agree' responses. The Favorable Percentage divides your Favorable Responses by your Eligible Responses.

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Perspective: Top Box and Net Promoter® Analysis

Code	Facility	Eligible Resp	TopBox Resp	TopBox %	Promoter Resp	Passive Resp	Detractor Resp	Net Promoter Score
P09 Facility cleanliness		43	38	88.4%	38	5	0	88.4
P99 Felt safe		43	38	88.4%	38	5	0	88.4

Code	People	Eligible Resp	TopBox Resp	TopBox %	Promoter Resp	Passive Resp	Detractor Resp	Net Promoter Score
A01	Recovery staff courtesy	42	42	100.0%	42	0	0	100.0
A05	Staff concern during follow-up call	39	31	79.5%	31	8	0	79.5
D01	Nursing Staff concern for comfort	43	42	97.7%	42	1	0	97.7
D03	Anesthesia staff courtesy	42	38	90.5%	38	4	0	90.5
D04	Anesthesia staff spent time	41	32	78.0%	32	8	1	75.6
D05	Surgeon courtesy	43	41	95,3%	41	2	0	95,3
D06	Surgeon spent time	43	36	83.7%	36	7	0	83.7
P07	Clerks & Receptionists	43	42	97.7%	42	1	0	97.7
P13	Nursing Staff courtesy	43	43	100.0%	43	0	0	100.0

Code	e Personal	Eligible Resp	TopBox Resp	TopBox %	Promoter Resp	Passive Resp	Detractor Resp	Net Promoter Score
A02	Pain level control	42	37	88.1%	37	4	1	85.7
A03	Adequacy of recovery time in facility	42	35	83.3%	35	7	0	83.3
D09	Respect for privacy	43	38	88.4%	38	5	0	88.4
G01	Confidence in care received	42	38	90.5%	38	4	0	90,5
G02	Recommend facility	42	37	88.1%	37	5	0	88.1

Code	Process	Eligible Resp	TopBox Resp	TopBox %	Promoter Resp	Passive Resp	Detractor Resp	Net Promoter Score
A04	Helpfulness of homecare instructions	43	34	79.1%	34	8	1	76.7
D08	Family information during the visit	38	27	71.1%	27	11	0	71.1
D31	Nursing Staff explanations	43	40	93.0%	40	3	0	93.0
D32	Surgeon explanations	43	37	86.0%	37	6	0	86.0
P03	Instructions prior to surgery	43	30	69.8%	30	12	1	67.4
P08	Wait time	43	36	83.7%	36	6	1	81.4
	Totals	929	812	87.4%	812	112	5	86.9

Top Box Color Coding: If your Top Box Percentage is less than 60%, then this score is highlighted in red to bring this to your attention. This may suggest that you need to look at the performance or behavior tied to this measure more closely.

Net Promoter Color Coding: If your Net Promoter Score is less than 50, then this score is highlighted in red to bring this to your attention. This may suggest that you need to look at the performance or behavior tied to this measure more closely.

Calculation of Top Box Percentage: Notice that your Top Box and Promoter counts are the same. Your Top Box indicates the number of responses that fell in your highest rating, which is typically 'Strongly Agree'. When this number is divided by your eligible responses (Not Applicable responses are not included) you have your Top Box Percentage.

Calculation of Net Promoter Score: Your Net Promoter Score takes into account both your Promoter (Top Box) and Detractor responses. The calculation is: percentage of Promoters minus percentage of Detractors equals NPS. This provides your Net Promoter Score for each measure.

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Critical To Improvement (CTI) Analysis

Code	Area	Weighted Rank	Current Score	SPH Nat'l Average	Score Ranking	Survey Correlation	SPH Nat'l Correlation
P03	Instructions prior to surgery	44	91.1	93.8	22	0.68	0.33
A04	Helpfulness of homecare instructions	40	92.9	93.4	20	0.64	0.38
D08	Family Information during the visit	40	92.6	92.8	21	0.54	0.36
P09	Facility cleanliness	32	97.0	96.5	11	0.65	0.38
A05	Staff concern during follow-up call	30	94.7	94.0	17	0.34	0.39
D32	Surgeon explanations	29	96.4	95.5	13	0,45	0.35
D04	Anesthesia staff spent time	28	93.1	94.4	19	0.19	0.37
P99	Felt safe	27	97.0	96.3	12	0.39	0.44
Q71	Rating of the facility	27	97.6	92.0	9	0.50	0.76
D09	Respect for privacy	24	97.0	95.6	10	0.39	0.38
P08	Wait time	24	94.6	89.7	18	0.08	0.29
A03	Adequacy of recovery time in facility	23	95.7	93.9	16	0.17	0.40
D06	Surgeon spent time	22	95.8	94.7	14	0.17	0.37
P07	Clerks & Receptionists	22	99.4	95.8	5	0.50	0.38
A02	Pain level control	20	95.7	94.1	15	0.04	0.35
D03	Anesthesia staff courtesy	20	97.6	96.3	8	0.31	0.37
D31	Nursing Staff explanations	18	98.2	96.5	7	0.22	0.42
D01	Nursing Staff concern for comfort	14	99.4	96.8	4	0.22	0.44
D05	Surgeon courtesy	10	98.8	96.9	6	-0.09	0.37
Q70	Rating of the provider	6	100.0	93.8	3	0	0.50
P13	Nursing Staff courtesy	4	100.0	97.4	2	0	0.41
A01	Recovery staff courtesy	2	100.0	96.4	1	0	0.43

The Critical To Improvement (CTI) Analysis identifies suggested areas in which to focus your quality improvement initiatives. The CTI ranking, presented in order of decreasing importance, is calculated by combining those areas in the current report with the lowest overall scores, with those areas that your patients have identified as being important to overall satisfaction. Any relationship between individual question responses and overall satisfaction is determined by calculating a mathematical relationship between each response and overall satisfaction. This relationship is expressed as a correlation, with a correlation of '1' being the highest possible relationship between the survey response and overall satisfaction.

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Survey Distribution and Response Summary

Survey Demographics	This I	Period	Last	Period
Survey Distribution by SPH Analytics	Count	Percent	<u>Count</u>	Percent
Surveys Mailed by SPH Analytics	0		0	
Surveys Emailed by SPH Analytics	130		137	-
Interactive Voice Response Surveys by SPH Analytics	0		0	
Surveys Texted by SPH Analytics	0		0	
Removed Email Addresses	1	.8%	0	0.00%
Invalid Email Addresses	0	0.00%	0	0.00%
Total Surveys Distributed	129		137	
Survey Responses	Count	Percent	<u>Count</u>	Percent
Paper Surveys Entered by SPH Analytics	0		0	
Online Survey Responses	43	33.3%	43	31.4%
Interactive Voice Survey Responses	0	.00%	0	.00%
Text Based Survey Responses	0	.00%	0	.00%
Survey Responses Entered by Facility	0		0	
Web Site Link Survey Responses	0		0	
Total Survey Responses	43		43	

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Promoter Analysis

On a scale of 0-10

Promoters (score 9-10) are loyal enthusiasts who will keep buying and refer others, fueling growth.



Passives (score 7-8) are satisfied but unenthusiastic customers who are vulnerable to competitive offerings.





Detractors (score 0-6) are unhappy customers who can damage your brand and impede growth through negative word-of-mouth.

To calculate your company's Net Promoter Score (NPS), take the percentage of customers who are Promoters and subtract the percentage who are Detractors.

	Summary of Response Distribution for Net Promoter Questions (Scoring Range: 0-10)											
Code	Promoter	10	9	8	7	6	5	4	3	2	1	0
Q70	Rating of the provider	36	6	0	0	0	0	0	0	0	0	0
Q71	Rating of the facility	33	8	1	0	0	0	0	0	0	0	0

	Net Promoter Overall Scoring								
Code	Promoter	Score	SPH Nat'l Average	SPH Nat'l Ranking	Previous Score	Change			
Q70	Rating of the provider	100.0	93.8	T1	95.2	4.8			
Q71	Rating of the facility	97.6	92.0	T18	88.4	9.2			

Score Highlighting (C	Green/Red):
-----------------------	-------------

Your Net Promoter Score is green if it has increased by more than 10 points from the prior period

Your Net Promoter Score is red if it has decreased by more than 10 points from the prior period

EdgePerception_Sep21_PSFPS.htm

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Comments & Suggestions (With Patient ID and Date of Service)

Anesthesia Care

I did advise that I often get very nauseous but was told he would take care of that and not to worry but I got very sick for two days and couldnt even keep down sips of water nor could take my pain medication due to throwing up (22847727 09/03/2021) My anesthesloiogist was friendly and knowledgeable. She answered every question I had prior to me asking. (22847767 09/01/2021)

Great group of staff (22847778 09/07/2021)

Discharge Instructions & Home Follow-up

Being contacted at home the following day was a nice touch. It showed that you all follow through and ensure your patients are safe and recovering. Thank you! (22847767 09/01/2021)

I wasnt expecting a call but glad I did. I got to express my satisfaction. (22847778 09/07/2021)

Was not contacted (22847793 09/08/2021)

I wasn't available to answer any of their phone calls. However, I did receive a paper survey. (22925330 08/31/2021)

My printed discharge instructions item 5 included instructions for splint on 9/21 at 1PM. When I logged onto the patient portal, the appointment indicated the splint appointment was on 9/20. I called Onley and she said that 9/21 was correct. I asked why the portal showed 9/20 and she told me to hold on. A few minutes later she came back on the line to tell me that 9/20 was correct. (22925338 09/16/2021)

Improvements?

Can't think of anything. (22713458 08/17/2021)

Can't think of anything. (22847726 09/09/2021)

Not get sick from the anesthesia lol (22847727 09/03/2021)

No. (22847729 09/08/2021)

I can't think of anything. (**Anonymous Response**)

Nope. It was much better than expected. (22847762 09/01/2021)

No (22847764 09/03/2021)

The only thing that would possibly make me any happier with my experience is if I were told that you would be opening up another facility in my area so I would not have to travel as far to receive excellent service. Nevertheless, if I had to undergo any further procedures I would definitely take the trip to your facility. I cant thank your staff enough!! (22847767 09/01/2021) No (22847769 09/02/2021)

No (22847778 09/07/2021)

No. Keep up the good work. (22847780 09/02/2021)

No. (22925335 09/14/2021)

Allow patient's spouse in the waiting room during surgery and then in the recovery room during recovery. (22925338 09/16/2021)

Upon discharge I would have liked more detailed instruction on how to care for my graft donor site. I did receive the information I needed after I called my doctors office the following day. (**Anonymous Response**)

My Recovery in the Facility

Again cant speak highly enough of the staff. Great crew. (22847778 09/07/2021)

Nursing Care & Communication

The nursing staff was very friendly and they helped me to relax and eased my nervousness before surgery. (**Anonymous Response**)

Could not be nicer (22847764 09/03/2021)

Although I too am a registered nurse, its different being on the other side of the clipboard. Prior to this injury Ive managed to stay on the caregiver side yet once this traumatic accident took place I found myself require care. Its been disheartening to see how so many healthcare providers mistreat and outright ignore their patients. In my vulnerable state Ive had to trade in my patients hat and place on my advocate hat on many occasions. It was so refreshing to just focus on recovering believing that I was in good hands. (22847767 09/01/2021)

Answered all my questions and I was amazed how they worked together. I told my daughter how good they are. What a wonderful group. (22847778 09/07/2021)

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EdgePerception_Sep21_PSFPS.htm

Page: 10

EdgePerception Performance Analysis Report, Sep2021

Comments & Suggestions (With Patient ID and Date of Service)

Prior to My Surgery

My surgeon wasnt an option on the list, it was Gabriel Petruccelli. (22847762 09/01/2021)

Very pleasant and stressless (22847764 09/03/2021)

Great job by my preop nurse. (22925338 09/16/2021)

Initially I got lost. The gentleman who answered the phone was able to kindly guide me directly to the facility. I was greeted at my car and escorted in where I was walked to the front desk and checked in by a friendly staff member. Although everyone was wearing a mask, I could tell they were smiling. A smile is worth a thousand words. (22847767 09/01/2021) It went a lot faster than I expected (22847778 09/07/2021)

After my initial appointment on 14 July I was told that Onley would call me the next week to schedule surgery. The next week passed with no calls so the week of 26 July I called Onley. The call went to her voicemail where I left my name and number. Still no call back. Finally, towards the end of the week of 26 July, Onley answered the phone when I called. I asked her why she hadn't called me and she got noticeably defensive saying that she had called but I never answered. There was no record of a call in my call log so I asked her what number she called and she said 304- 514-9052. She was calling the wrong number!

My number is 301-514-9052. I left this number on her voice mail every time I called. It had been written incorrectly on a form that Onley was using. (22925338 09/16/2021)

Surgeon Care & Communication

Dr. Horton is an excellent surgeon and I felt very fortunate to be under his care. (**Anonymous Response**)

I felt quite confident going into surgery. I was told she is awesome and I agree. (22847778 09/07/2021)

My surgeon is excellent (22847793 09/08/2021)

I wasn't aware of the additional Laser charge until the day immediately preceding my surgery. \$1,500 was a total surprise especially when I learned that charge was only for one eye. (22925330 08/31/2021)

What did you like best?

Relatively convenient to my residence in Waynesboro, PA. (22713458 08/17/2021)

Friendly and well organized - and my intake nurse, Becky, was again able to get the IV needle in on the first try and did not give me any disconfort. (22847726 09/09/2021)

Not too big so you feel safe and looked after by friendly staff (22847727 09/03/2021)

I feel tike I receive more personalized care than i would in a hospital setting. I felt like my chances of contacting COVID or any infection were way less than in a hospital setting. I always feel like I get one on one care due to the low patient staff ratio. I hope to not need future surgeries but if I do i want them at Physicians Surgery Center. Judy law (22847729 09/08/2021)

The staff was very professional and friendly, the facility was clean and everything went smoothly. (**Anonymous Response**) The friendliness and care shown by the staff. (**Anonymous Response**)

I love how nice abs caring everyone was. They made me feel very welcome and not like just another surgery patient. They were prompt with getting nerve blocks in me when I woke up in a lot of pain and immediately informed my husband. Theyre quick and nice. Great combination. Any time before the surgery that I started to feel nervous that feeling would immediately go away because they made me feel so at home. (22847762 09/01/2021)

Very personal and friendly atmosphere as well as very professional (22847764 09/03/2021)

Streamlined and quick admitting. Everything up to surgical procedure was smooth, quick, and made to make me feel comfortable and calm. Good experience. (**Anonymous Response**)

The little things matter and you all have a full understanding of that. I pray that as you pour yourselves out everyday to your patients you are replenished and your cup runs over. If any of you ever find yourself on the other side of the clipboard I hope you receive the same kindness that I did. It meant a lot. Thank you so much. Keep smiling under those mask we see them!!! (22847767 09/01/2021)

Courteous staff (22847769 09/02/2021)

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EdgePerception_Sep21_PSFPS.htm

Page: 11

EdgePerception Performance Analysis Report, Sep2021

Comments & Suggestions (With Patient ID and Date of Service)

Everything went so smoothly. Each of the staff I encountered were fantastic. (22847778 09/07/2021)

The entire staff was kind, friendly and very professional. (22847780 09/02/2021)

Convenience (22847793 09/08/2021)

Size and efficiency (22847795 09/08/2021)

Convenience to my home. (22925330 08/31/2021)

Friendliness and efficiency. (22925335 09/14/2021)

Care given during preop by preop nurse. (22925338 09/16/2021)

I felt very comfortable with the staff and the care that I received. (**Anonymous Response**)

What did you like least?

Had a good deal of rouble finding the right building. The roads all seem to start with the same name. (22713458 08/17/2021) That my husband was not able to come in and had to wait in the car - but I completely understand that due to Covid it is necessary (22847726 09/09/2021)

I can't think of anything. (22847729 09/08/2021)

N/A (**Anonymous Response**)

The professionalism exhibited by the staff. (**Anonymous Response**)

Nothing, honestly. (22847762 09/01/2021)

N/A (22847764 09/03/2021)

Due to cardiac history - procedures prior to scheduling surgery were hectic and amounted to my surgery being delayed for 30 days from date of injury (**Anonymous Response**)

Nothing (22847769 09/02/2021)

N/A (22847778 09/07/2021)

Na (22847795 09/08/2021)

Nothing worth noting. (22925335 09/14/2021)

Poor communication with Onley. (22925338 09/16/2021)

Your Experience

My nurse took the time to go outside and strongly suggest that my husband go and get a bite to eat :). Thank you so much. He was a nervous wreck! (22847767 09/01/2021)

From start to finish I felt comfortable and I was taken great care of. (22847778 09/07/2021)

I was surprised by the amount of clutter visible during my walk from preop to surgery. (22925338 09/16/2021)

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EdgePerception_Sep21_PSFPS.htm

	> - Scores for 2	Survey(s) Return	ed This P	eriod	
Code	Facility	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
P09	Facility cleanliness	100.0	97.1	75.0	25.0
P99	Felt safe	100.0	97.1	75.0	25.0
Code	People	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
A01	Recovery staff courtesy	100.0	100.0	100.0	0.0
405	Staff concern during follow-up call	100.0	94.9	75.0	25.0
D01	Nursing Staff concern for comfort	100.0	99.4	75.0	25.0
003	Anesthesia staff courtesy	100,0	97.6	100.0	0.0
004	Anesthesia staff spent time	100.0	93.3	100.0	0.0
005	Surgeon courtesy	100.0	98.8	100.0	0.0
006	Surgeon spent time	100.0	95.9	100.0	0.0
207	Clerks & Receptionists	100.0	99.4	100.0	0.0
213	Nursing Staff courtesy	100.0	100.0	100.0	0.0
ode	Personal	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
.02	Pain level control	62.5	95.8	75.0	-12.5
.03	Adequacy of recovery time in facility	100.0	95.8	75,0	25.0
009	Respect for privacy	100.0	97.1	75.0	25.0
901	Confidence in care received	100.0	97.6	75.0	25.0
02	Recommend facility	100.0	97.0	100.0	0.0
ode	Process	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
04	Helpfulness of homecare instructions	100.0	93.0	100.0	0.0
80	Family information during the visit	100.0	92.8	75.0	0.0 25.0
31	Nursing Staff explanations	100.0	98.3	100.0	25.0 0.0
32	Surgeon explanations	100.0	96.5	100.0	0.0
03	Instructions prior to surgery	100.0	91,3	100.0	0.0
80'	Wait time	100.0	94.8	100.0	0.0

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EdgePerception_Sep21_PSFPS.htm

10/7/21, 3:01 PM Report Display

EdgePerception Performance Analysis Report, Sep2021

----> - Comments & Suggestions

Anesthesia Care

My anesthesiologist was friendly and knowledgeable. She answered every question I had prior to me asking. (22847767 09/01/2021)

Discharge Instructions & Home Follow-up

Being contacted at home the following day was a nice touch. It showed that you all follow through and ensure your patients are safe and recovering. Thank you! (22847767 09/01/2021)

improvements?

Nope. It was much better than expected. (22847762 09/01/2021)

The only thing that would possibly make me any happler with my experience is if I were told that you would be opening up another facility in my area so I would not have to travel as far to receive excellent service. Nevertheless, if I had to undergo any further procedures I would definitely take the trip to your facility. I cant thank your staff enough!! (22847767 09/01/2021)

Nursing Care & Communication

Although I too am a registered nurse, its different being on the other side of the clipboard. Prior to this injury live managed to stay on the caregiver side yet once this traumatic accident took place I found myself require care. Its been disheartening to see how so many healthcare providers mistreat and outright ignore their patients. In my vulnerable state live had to trade in my patients hat and place on my advocate hat on many occasions. It was so refreshing to just focus on recovering believing that I was in good hands. (22847767 09/01/2021)

Prior to My Surgery

My surgeon wasnt an option on the list, it was Gabriel Petruccelli. (22847762 09/01/2021)

Initially I got lost. The gentleman who answered the phone was able to kindly guide me directly to the facility. I was greeted at my car and escorted in where I was walked to the front desk and checked in by a friendly staff member. Although everyone was wearing a mask, I could tell they were smiling. A smile is worth a thousand words. (22847767 09/01/2021)

What did you like best?

I love how nice abs caring everyone was. They made me feel very welcome and not like just another surgery patient. They were prompt with getting nerve blocks in me when I woke up in a lot of pain and immediately informed my husband. Theyre quick and nice. Great combination. Any time before the surgery that I started to fee! nervous that feeling would immediately go away because they made me feel so at home. (22847762 09/01/2021)

The little things matter and you all have a full understanding of that. I pray that as you pour yourselves out everyday to your patients you are replenished and your cup runs over. If any of you ever find yourself on the other side of the clipboard I hope you receive the same kindness that I did. It meant a lot. Thank you so much. Keep smiling under those mask we see them!!! (22847767 09/01/2021)

What did you like least?

Nothing, honestly. (22847762 09/01/2021)

Your Experience

My nurse took the time to go outside and strongly suggest that my husband go and get a bite to eat :). Thank you so much. He was a nervous wreck! (22847767 09/01/2021)

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EdgePerception_Sep21_PSFPS.htm

Promoter Analysis For ---->

	Summary of Response Distribution for Net Promoter Questions (Scoring Range: 0-10)											
Code	Promoter	10	9	8	7	6	5	4	3	2	1	0
Q70	Rating of the provider	2	0	0	0	0	0	0	0	0	0	n
Q71	Rating of the facility	2	0	0	0	0	0	0	0	0	0	0

	Net Promoter Overall Scoring								
Code	Promoter	Score	SPH Nat'l Average	SPH Nat'l Ranking	Previous Score	Change			
Q70	Rating of the provider	100.0	93.8	T1	100.0	0.0			
Q71	Rating of the facility	100.0	92.0	T18	100.0	0.0			

	Score Highlighting (Green/Red):
	Your Net Promoter Score is green if it has increased by more than 10 points from the prior period
	Your Net Promoter Score is red if it has decreased by more than 10 points from the prior period
- 1	Contract Cumphony Defendance Live Book at

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EdgePerception_Sep21_PSFPS.htm

	EdgePerception Performar	ice Analysis Report	, sepzuz	#	
	Levine, Matthew J - Scores for	2 Survey(s) Return	ed This F	Period	
Code	Facility	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
209	Facility cleanliness	100.0	97.1	100.0	0.0
99	Felt safe	100.0	97.1	75.0	25.0
Code	People	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
\ 01	Recovery staff courtesy	100.0	100.0	100.0	0.0
05	Staff concern during follow-up call	100.0	94.9	100.0	0.0
001	Nursing Staff concern for comfort	100.0	99.4	100.0	0.0
003	Anesthesia staff courtesy	100.0	97.6	100.0	0.0
004	Anesthesia staff spent time	100.0	93.3	100.0	0.0
05	Surgeon courtesy	100.0	98.8	100.0	0.0
06	Surgeon spent time	100.0	95.9	100.0	0.0
07	Clerks & Receptionists	100.0	99.4	100.0	0.0
13	Nursing Staff courtesy	100.0	100.0	100.0	0.0
ode	Personal	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
.02	Pain level control	100.0	95.8	100.0	0.0
.03	Adequacy of recovery time in facility	100.0	95.8	100.0	0.0
09	Respect for privacy	100.0	97.1	100.0	0.0
01	Confidence in care received	100.0	97.6	100.0	0.0
02	Recommend facility	100.0	97.0	100.0	0.0
ode	Process	Provider's Current Score	Facility's Overali Score	Provider's Previous Score	Change
.04	Helpfulness of homecare instructions	100.0	93.0	75.0	25.0
08	Family information during the visit	100.0	92.8	100.0	0.0
31	Nursing Staff explanations	100.0	98.3	100.0	0.0
32	Surgeon explanations	100.0	96.5	100.0	0.0
03	Instructions prior to surgery	100.0	91.3	100.0	0.0
809	Wait time	100.0	94.8	100.0	0.0

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EdgePerception_Sep21_PSFPS.htm

Promoter Analysis For Levine, Matthew J

	Summary of Response Distribution for Net Promoter Questions (Scoring Range: 0-10)											
Code	Promoter	10	9	8	7	6	5	4	3	2	1	0
Q70	Rating of the provider	1	0	0	0	0	0	0	0	0	0	n
Q71	Rating of the facility	1	0	0	0	0	0	Ō	0	0	0	0

	Net Promoter Overall Scoring								
Code	Promoter	Score	SPH Nat'i Average	SPH Nat'l Ranking	Previous Score	Change			
Q70	Rating of the provider	100.0	93.8	T1 T	100.0	0.0			
Q71	Rating of the facility	100.0	92.0	T18	100.0	0.0			

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EdgePerception_Sep21_PSFPS.htm

	Mecinski, Adam M - Scores for	8 Survey(s) Return	ed This F	Period	
Code	Facility	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
P09	Facility cleanliness	96.9	97.1	100.0	-3.1
P99	Felt safe	96.9	97.1	100.0	-3.1
Code	People	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
A01	Recovery staff courtesy	100.0	100.0	87.5	12.5
405	Staff concern during follow-up call	96.9	94.9	93.8	3.1
D01	Nursing Staff concern for comfort	100.0	99.4	100.0	0.0
003	Anesthesia staff courtesy	93.8	97.6	95.8	-2.0
004	Anesthesia staff spent time	81,3	93.3	95.8	-14.5
005	Surgeon courtesy	96,9	98.8	100.0	-3.1
006	Surgeon spent time	93.8	95.9	95.8	-2.0
² 07	Clerks & Receptionists	100.0	99.4	100.0	0.0
□13	Nursing Staff courtesy	100.0	100.0	100.0	0.0
Code	Personal	Provider's Current Score	Facility's Overali Score	Provider's Previous Score	Change
\02	Pain level control	100.0	95.8	95.8	4.2
\03	Adequacy of recovery time in facility	90.6	95.8	83.3	7.3
009	Respect for privacy	100.0	97.1	95.8	4.2
301	Confidence in care received	96.4	97.6	91.7	4.7
302	Recommend facility	100.0	97.0	87.5	12.5
Code	Process	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
\04	Helpfulness of homecare instructions	93.8	93.0	75.0	18.8
008	Family information during the visit	84.4	92.8	85.0	-0.6
D31	Nursing Staff explanations	96.9	98.3	100.0	-3.1
032	Surgeon explanations	96.9	96.5	95.8	1.1
200		00.0			

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Wait time

P03

P08

Instructions prior to surgery

EdgePerception_Sep21_PSFPS.htm

90.6

96.9

91.3

94.8

95.8

79.2

Page: 18

-5.2

17.7

Mecinski, Adam M - Comments & Suggestions

Anesthesia Care

I did advise that I often get very nauseous but was told he would take care of that and not to worry but I got very sick for two days and couldnt even keep down sips of water nor could take my pain medication due to throwing up (22847727 09/03/2021)

Improvements?

Not get sick from the anesthesia lol (22847727 09/03/2021)

Upon discharge I would have liked more detailed instruction on how to care for my graft donor site. I did receive the information I needed after I called my doctors office the following day. (**Anonymous Response**)

What did you like best?

Not too blg so you feel safe and looked after by friendly staff (22847727 09/03/2021)

Size and efficiency (22847795 09/08/2021)

I felt very comfortable with the staff and the care that I received. (**Anonymous Response**)

What did you like least?

Na (22847795 09/08/2021)

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EdgePerception_Sep21_PSFPS.htm

Promoter Analysis For Mecinski, Adam M

Summary of Response Distribution for Net Promoter Questions (Scoring Ran								g Rang	e: 0-10)		
Code	Promoter	10	9	8	7	6	5	4	3	2	1	0
Q70	Rating of the provider	6	2	0	0	0	0	0	0	0	0	0
Q71	Rating of the facility	6	2	0	0	0	0	0	0	0	0	0

	Net Promoter Overall Scoring								
Code	Promoter	Score	SPH Nat'l Average	SPH Nat'l Ranking	Previous Score	Change			
Q70	Rating of the provider	100.0	93.8	T1	100.0	0.0			
Q71	Rating of the facility	100.0	92.0	T18	66.7	33.3			

Score Highlighting (Green/Red):
Your Net Promoter Score is green if it has increased by more than 10 points from the prior period
Your Net Promoter Score is red if it has decreased by more than 10 points from the prior period

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EdgePerception_Sep21_PSFPS.htm

EdgePerception Pe	rformance Analysis	Report, Sep2021
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Nesbitt Silon, Kristin - Scores for 12 Survey(s) Returned This Period

					
Code	Facility	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
P09	Facility cleanliness	97.9	97.1	93.8	4.1
P99	Felt safe	100.0	97.1	96.9	3.1
Code	People	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
A01	Recovery staff courtesy	100.0	100.0	93.8	6.2
A05	Staff concern during follow-up call	95.8	94.9	100.0	-4.2
D01	Nursing Staff concern for comfort	100,0	99.4	93.8	6.2
D03	Anesthesia staff courtesy	100.0	97.6	92.9	7.1
D04	Anesthesia staff spent time	100.0	93.3	92.9	7.1
D05	Surgeon courtesy	100.0	98.8	100.0	0.0
D06	Surgeon spent time	97.9	95.9	96.9	1,0
207	Clerks & Receptionists	97.9	99.4	93.8	4.1
P13	Nursing Staff courtesy	100.0	100.0	93.8	6.2
Code	Personal	Provider's Current Score	Facility's Overall Score	Provider's Previous	Change
402	Pain level control	97.9	95.8	Score 96.9	1.0
403	Adequacy of recovery time In facility	95.8	95.8	93.8	2.0
009	Respect for privacy	95.8	97.1	96.9	-1.1
301	Confidence in care received	97.9	97.6	96.9	1.0
G02	Recommend facility	97.9	97.0	96.9	1.0
Code	Process	Provider's Current	Facility's Overall	Provider's Previous	Change
40 4	Helpfulness of homecare instructions	Score	Score	Score	
008	Family information during the visit	85.4	93.0	96.9	-11.5
031	Nursing Staff explanations	93.8	92.8	93.8	0.0
032	Surgeon explanations	100.0	98.3	93.8	6.2
203	Instructions prior to surgery	100.0	96.5	96.9	3.1
208	Wait time	89.6	91.3	90.6	-1.0

Wait time © Copyright Symphony Performance Health. 2021 All Rights Reserved.

P08

EdgePerception_Sep21_PSFP8.htm

97.9

94.8

90.6

Page: 21

7.3

10/7/21, 3:01 PM Report Display

EdgePerception Performance Analysis Report, Sep2021

Nesbitt Silon, Kristin - Comments & Suggestions

Anesthesia Care

Great group of staff (22847778 09/07/2021)

Discharge Instructions & Home Follow-up

I wasnt expecting a call but glad I did. I got to express my satisfaction. (22847778 09/07/2021)

My printed discharge instructions item 5 included instructions for splint on 9/21 at 1PM. When I logged onto the patient portal, the appointment indicated the splint appointment was on 9/20. I called Onley and she said that 9/21 was correct. I asked why the portal showed 9/20 and she told me to hold on. A few minutes later she came back on the line to tell me that 9/20 was correct. (22925338 09/16/2021)

Improvements?

Can't think of anything. (22847726 09/09/2021)

No (22847778 09/07/2021)

Allow patient's spouse in the walting room during surgery and then in the recovery room during recovery. (22925338 09/16/2021)

My Recovery in the Facility

Again cant speak highly enough of the staff. Great crew. (22847778 09/07/2021)

Nursing Care & Communication

Answered all my questions and I was amazed how they worked together. I told my daughter how good they are. What a wonderful group. (22847778 09/07/2021)

Great job by my preop nurse. (22925338 09/16/2021)

Prior to My Surgery

It went a lot faster than I expected (22847778 09/07/2021)

After my initial appointment on 14 July I was told that Onley would call me the next week to schedule surgery. The next week passed with no calls so the week of 26 July I called Onley. The call went to her volcemail where I left my name and number. Still no call back. Finally, towards the end of the week of 26 July, Onley answered the phone when I called. I asked her why she hadn't called me and she got noticeably defensive saying that she had called but I never answered. There was no record of a call in my call log so I asked her what number she called and she said 304-514-9052. She was calling the wrong number! My number is 301-514-9052. I left this number on her voice mail every time I called. It had been written incorrectly on a form that Onley was using. (22925338 09/16/2021)

Surgeon Care & Communication

I felt quite confident going into surgery. I was told she is awesome and I agree. (22847778 09/07/2021)

What did you like best?

Friendly and well organized - and my intake nurse, Becky, was again able to get the IV needle in on the first try and did not give me any disconfort. (22847726 09/09/2021)

The friendliness and care shown by the staff. (**Anonymous Response**)

Everything went so smoothly. Each of the staff I encountered were fantastic. (22847778 09/07/2021)

Care given during preop by preop nurse. (22925338 09/16/2021)

What did you like least?

That my husband was not able to come in and had to wait In the car - but I completely understand that due to Covid it is necessary (22847726 09/09/2021)

The professionalism exhibited by the staff. (**Anonymous Response**)

N/A (22847778 09/07/2021)

Poor communication with Onley. (22925338 09/16/2021)

Your Experience

From start to finish I felt comfortable and I was taken great care of. (22847778 09/07/2021)

I was surprised by the amount of clutter visible during my walk from preop to surgery. (22925338 09/16/2021)

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EdgePerception_Sep21_PSFPS.htm

Promoter Analysis For Nesbitt Silon, Kristin

Summary of Response Distribution for Net Promoter Questions (Scoring Range: 0-10)												
Code	Promoter	10	9	8	7	6	5	4	3	2	1	0
Q70	Rating of the provider	10	2	0	0	0	0	0	0	<u> </u>	0	0
Q71	Rating of the facility	8	3	1	0	0	0	0	0	0	0	0

	Net Promoter Overall Scoring									
Code	Promoter	Score	SPH Nat'l Average	SPH Nat'i Ranking	Previous Score	Change				
Q70	Rating of the provider	100.0	93.8	T1	100.0	0.0				
Q71	Rating of the facility	91.7	92.0	T18	100.0	-8.3				

Score Highlighting (Green/Red):	1
Your Net Promoter Score is green if it has increased by more than 10 points from the prior period	
Your Net Promoter Score is red if it has decreased by more than 10 points from the prior period	

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EdgePerception_Sep21_PSFPS.htm

	Steinberg, James M - Scores for	5 Survey(s) Retur	ned This	Period	
Code	Facility	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
P09	Facility cleanliness	100.0	97.1	100.0	0.0
P99	Felt safe	100.0	97.1	100.0	0.0
Code	People	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
A01	Recovery staff courtesy	100.0	100.0	100.0	0.0
A05	Staff concern during follow-up call	90.0	94.9	96.9	-6.9
D01	Nursing Staff concern for comfort	100.0	99.4	100.0	0.0
D03	Anesthesia staff courtesy	100.0	97.6	100.0	0.0
D04	Anesthesia staff spent time	100.0	93,3	100.0	0.0
D 05	Surgeon courtesy	100.0	98.8	100.0	0.0
206	Surgeon spent time	95.0	95.9	100.0	-5.0
207	Clerks & Receptionists	100.0	99.4	100.0	0.0
P13	Nursing Staff courtesy	100.0	100.0	100.0	0.0
Code	Personal	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
A02	Paln level control	95.0	95.8	96.9	-1.9
A03	Adequacy of recovery time in facility	95.0	95.8	100.0	-5.0
209	Respect for privacy	100.0	97.1	100.0	0.0
G01	Confidence in care received	100.0	97.6	100.0	0.0
G02	Recommend facility	100.0	97.0	100.0	0.0
Code	Process	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
A04	Helpfulness of homecare instructions	100.0	93.0	94.4	5.6
800	Family Information during the visit	100.0	92.8	94.4	5.6
031	Nursing Staff explanations	100.0	98.3	100.0	0.0
032	Surgeon explanations	95.0	96.5	100.0	-5.0
203	Instructions prior to surgery	95.0	91.3	91.7	3.3
208	Wait time	80.0	94.8	100.0	-20.0

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EdgePerception_Sep21_PSFPS.htm

Steinberg, James M - Comments & Suggestions

Improvements?

No (22847769 09/02/2021)

No. Keep up the good work. (22847780 09/02/2021)

What did you like best?

Streamlined and quick admitting. Everything up to surgical procedure was smooth, quick, and made to make me feel comfortable and calm. Good experience. (**Anonymous Response**)

Courteous staff (22847769 09/02/2021)

The entire staff was kind, friendly and very professional. (22847780 09/02/2021)

What did you like least?

Due to cardiac history - procedures prior to scheduling surgery were hectic and amounted to my surgery being delayed for 30 days from date of injury (**Anonymous Response**)

Nothing (22847769 09/02/2021)

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EdgePerception_Sep21_PSFPS.htm

Promoter Analysis For Steinberg, James M

	Summary of Response Distribution for Net Promoter Questions (Scoring Range: 0-10)											
Code	Promoter	10	9	8	7	6	5	4	3	2	1	0
Q70	Rating of the provider	5	0	0	0	0	0	0	0	0	0	0
Q71	Rating of the facility	5	0	0	0	0	0	0	0	0	0	0

Net Promoter Overall Scoring							
Code	Promoter	Score	SPH Nat'l Average	SPH Nat'l Ranking	Previous Score	Change	
Q70	Rating of the provider	100.0	93.8	T1	100.0	0.0	
Q71	Rating of the facility	100.0	92.0	T18	100.0	0.0	

Score Highlighting (Green/Red):
Your Net Promoter Score is green if it has increased by more than 10 points from the prior period
Your Net Promoter Score is red if it has decreased by more than 10 points from the prior period

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 ${\tt EdgePerception_Sep21_PSFPS.htm}$

	EdgePerception Performan	ice Analysis Report	, Sep202	1								
	Thadani, Sunil M - Scores for 9 Survey(s) Returned This Period											
Code	Facility	Provider's Current Score	Facility's Overali Score	Provider's Previous Score	Change							
P09	Facility cleanliness	91.7	97.1	92.9	-1.2							
P99	Felt safe	88.9	97.1	92,3	-3.4							
Code	People	Provider's Current Score	Facility's Overali Score	Provider's Previous Score	Change							
A01	Recovery staff courtesy	100.0	100.0	92.9	7.1							
405	Staff concern during follow-up call	90.6	94.9	86.5	4.1							
D01	Nursing Staff concern for comfort	97.2	99.4	98.2	-1.0							
003	Anesthesia staff courtesy	94.4	97.6	96.4	-2.0							
004	Anesthesia staff spent time	88,9	93.3	96.4	-7.5							
005	Surgeon courtesy	97.2	98.8	91.1	6.1							
206	Surgeon spent time	91.7	95.9	92.9	-1.2							
2 07	Clerks & Receptionists	100.0	99.4	96.4	3.6							
213	Nursing Staff courtesy	100.0	100.0	98.2	1.8							
Code	Personal	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change							
1 02	Pain level control	96.9	95.8	96.2	0.7							
103	Adequacy of recovery time in facility	97.2	95.8	87.5	9.7							
009	Respect for privacy	91.7	97.1	94.6	-2.9							
301 300	Confidence in care received	94.4	97.6	94.6	-0.2							
302	Recommend facility	88.9	97.0	94.6	-5.7							
ode	Process	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change							
\04	Helpfulness of homecare instructions	91.7	93.0	92.9	-1.2							
800	Family information during the visit	87.5	92.8	89.6	-2.1							
31	Nursing Staff explanations	94.4	98.3	92.9	1.5							
032	Surgeon explanations	88.9	96.5	89.3	-0.4							
203	Instructions prior to surgery	83.3	91.3	94.6	-11.3							

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Wait time

P08

EdgePerception_Sep21_PSFPS.htm

91.7

94.8

94.6

Page: 27

-2.9

10/7/21, 3:01 PM Report Display

EdgePerception Performance Analysis Report, Sep2021

Thadani, Sunil M - Comments & Suggestions

Discharge Instructions & Home Follow-up

I wasn't available to answer any of their phone calls. However, I did receive a paper survey. (22925330 08/31/2021)

Improvements?

Can't think of anything. (22713458 08/17/2021)

No (22847764 09/03/2021)

No. (22925335 09/14/2021)

Nursing Care & Communication

Could not be nicer (22847764 09/03/2021)

Prior to My Surgery

Very pleasant and stressless (22847764 09/03/2021)

Surgeon Care & Communication

I wasn't aware of the additional Laser charge until the day immediately preceding my surgery. \$1,500 was a total surprise especially when I learned that charge was only for one eye. (22925330 08/31/2021)

What dld you like best?

Relatively convenient to my residence in Waynesboro, PA. (22713458 08/17/2021)

Very personal and friendly atmosphere as well as very professional (22847764 09/03/2021)

Convenience to my home. (22925330 08/31/2021)

Friendliness and efficiency. (22925335 09/14/2021)

What did you like least?

Had a good deal of rouble finding the right building. The roads all seem to start with the same name. (22713458 08/17/2021)

N/A (22847764 09/03/2021)

Nothing worth noting. (22925335 09/14/2021)

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EdgePerception_Sep21_PSFPS.htm

Promoter Analysis For Thadani, Sunil M

Summary of Response Distribution for Net Promoter Questions (Scoring Range: 0-10)												
Code	Promoter	10	9	8	7	6	5	4	3	2	1	0
Q70	Rating of the provider	7	2	0	0	0	0	0	0	0	0	0
Q71	Rating of the facility	7	2	0	0	0	0	0	0	0	0	ō

Net Promoter Overall Scoring										
Code	Promoter	Score	SPH Nat'l Average	SPH Nat'l Ranking	Previous Score	Change				
Q70	Rating of the provider	100.0	93.8	T1	84.6	15.4				
Q71	Rating of the facility	100.0	92.0	T18	85.7	14.3				

Score Highlighting (Green/Red):
Your Net Promoter Score is green if it has increased by more than 10 points from the prior period
Your Net Promoter Score is red if it has decreased by more than 10 points from the prior period
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EdgePerception_Sep21_PSFPS.htm

	EdgePerception Performan	ce Analysis Report	, Sep202	1	
	Gupta, Rishi R - Scores for 2 S	Survey(s) Returne	d This Pe	riod	
Code	Facility	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
P09	Facility cleanliness	100.0	97.1	100.0	0.0
P99	Felt safe	100.0	97.1	100.0	0.0
Code	People	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
A01	Recovery staff courtesy	100.0	100.0	100.0	0.0
A05	Staff concern during follow-up call	100.0	94.9	0.0	100.0
D01	Nursing Staff concern for comfort	100.0	99.4	100.0	0.0
D03	Anesthesia staff courtesy	100.0	97.6	100.0	0.0
D 04	Anesthesia staff spent time	100.0	93.3	100.0	0.0
D 05	Surgeon courtesy	100.0	98.8	100.0	0.0
206	Surgeon spent time	100.0	95.9	100.0	0.0
P07	Clerks & Receptionists	100.0	99.4	100.0	0.0
P13	Nursing Staff courtesy	100.0	100.0	100.0	0.0
Code	Personal	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
402	Pain level control	100.0	95.8	100.0	0,0
A03	Adequacy of recovery time in facility	100.0	95.8	100.0	0.0
209	Respect for privacy	100.0	97.1	100.0	0.0
3 01	Confidence in care received	100.0	97.6	100.0	0.0
G02	Recommend facility	100.0	97.0	100.0	0.0
Code	Process	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
404	Helpfulness of homecare instructions	100.0	93.0	75.0	25.0
800	Family information during the visit	100.0	92.8	75.0	25.0
031	Nursing Staff explanations	100.0	98.3	100.0	0.0
032	Surgeon explanations	100.0	96.5	100.0	0.0
203	Instructions prior to surgery	100.0	91.3	100.0	0.0
208	Wait time	100.0	94.8	75.0	25.0

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EdgePerception_Sep21_PSFPS.htm

Gupta, Rishi R - Comments & Suggestions

Discharge Instructions & Home Follow-up

Was not contacted (22847793 09/08/2021)

Improvements?

No. (22847729 09/08/2021)

Surgeon Care & Communication

My surgeon is excellent (22847793 09/08/2021)

What did you like best?

I feel like I receive more personalized care than I would in a hospital setting. I felt like my chances of contacting COVID or any infection were way less than In a hospital setting. I always feel like I get one on one care due to the low patient staff ratio. I hope to not need future surgeries but if I do i want them at Physicians Surgery Center. Judy law (22847729 09/08/2021) Convenience (22847793 09/08/2021)

What did you like least?

I can't think of anything. (22847729 09/08/2021)

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EdgePerception_Sep21_PSFP8.htm

Report Display

EdgePerception Performance Analysis Report, Sep2021

Promoter Analysis For Gupta, Rishi R

Summary of Response Distribution for Net Promoter Questions (Scoring Range: 0-10)												
Code	Promoter	10	9	8	7	6	5	4	3	2	1	0
Q70	Rating of the provider	2	0	0	0	0	0	0	0	0	0	0
Q71	Rating of the facility	1	1	0	0	0	0	0	0	0	0	0

Net Promoter Overall Scoring							
Code	Promoter	Score	SPH Nat'l Average	SPH Nat'l Ranking	Previous Score	Change	
Q70	Rating of the provider	100.0	93.8	T1	100.0	0.0	
Q71	Rating of the facility	100.0	92.0	T18	100.0	0.0	

Score Highlighting (Green/Red):
Your Net Promoter Score is green if it has increased by more than 10 points from the prior period
Your Net Promoter Score is red if it has decreased by more than 10 points from the prior period

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EdgePerception_Sep21_PSFPS.htm

	EdgePerception Performar	ice Analysis Report	, Sep202	1	
	Horton, Steven A - Scores for 3	3 Survey(s) Return	ed This P	eriod	
Code	Facility	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
P09	Facility cleanliness	100.0	97.1	100.0	0.0
P99	Felt safe	100.0	97.1	100.0	0.0
Code	People	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
401	Recovery staff courtesy	100.0	100.0	100.0	0.0
۹05	Staff concern during follow-up call	100.0	94.9	100.0	0.0
D01	Nursing Staff concern for comfort	100.0	99.4	100.0	0.0
203	Anesthesia staff courtesy	100.0	97.6	87.5	12.5
204	Anesthesia staff spent time	87.5	93.3	62.5	25,0
005	Surgeon courtesy	100.0	98.8	100.0	0.0
006	Surgeon spent time	100.0	95.9	100.0	0.0
207	Clerks & Receptionists	100.0	99.4	100.0	0.0
213	Nursing Staff courtesy	100.0	100.0	100.0	0.0
Code	Personal	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
\02	Pain level control	91.7	95,8	87.5	4.2
/03	Adequacy of recovery time in facility	100.0	95.8	100.0	0.0
009	Respect for privacy	100.0	97.1	87.5	12.5
901	Confidence in care received	100.0	97.6	100.0	0.0
G02	Recommend facility	100.0	97.0	100.0	0.0
Code	Process	Provider's Current	Facility's Overall	Provider's Previous	Change
\04	Helpfulness of homecare instructions	Score 100.0	Score	Score	05.0
008	Family information during the visit	100.0	93.0	75.0	25.0
031	Nursing Staff explanations	100.0	92.8	100.0	0.0
032	Surgeon explanations	100.0	98.3	100.0	0.0
203	Instructions prior to surgery	100.0	96.5	100.0	0.0

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Wait time

Instructions prior to surgery

P03

P08

EdgePerception_Sep21_PSFPS.htm

100.0

100.0

91.3

94.8

100.0

100.0

Page: 33

0.0

0.0

Horton, Steven A - Comments & Suggestions

Improvements?

I can't think of anything. (**Anonymous Response**)

Nursing Care & Communication

The nursing staff was very friendly and they helped me to relax and eased my nervousness before surgery. (**Anonymous Response**)

Surgeon Care & Communication

Dr. Horton is an excellent surgeon and I felt very fortunate to be under his care. (**Anonymous Response**)

What did you like best?

The staff was very professional and friendly, the facility was clean and everything went smoothly. (**Anonymous Response**)

What did you like least?

N/A (**Anonymous Response**)

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EdgePerception_Sep21_PSFPS.htm

Promoter Analysis For Horton, Steven A

Summary of Response Distribution for Net Promoter Questions (Scoring Range: 0-10)												
Code	Promoter	10	9	8	7	6	5	4	3	2	1	0
Q70	Rating of the provider	3	0	0	0	0	0	0	0	0	0	0
Q71	Rating of the facility	3	0	0	0	0	0	0	0	0	0	0

	Net Promoter Overall Scoring							
Code	Promoter	Score	SPH Nat'l Average	SPH Nat'i Ranking	Previous Score	Change		
Q70	Rating of the provider	100.0	93.8	T1 _	100.0	0.0		
Q71	Rating of the facility	100.0	92.0	T18	50.0	50.0		

Score Highlighting (Green/Red):
Your Net Promoter Score is green if it has increased by more than 10 points from the prior period
Your Net Promoter Score is red if it has decreased by more than 10 points from the prior period

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EdgePerception_Sep21_PSFPS.htm

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Physicians Surgery Center of Frederick Patient Survey

EdgePerception™ Performance Analysis Report For 2020

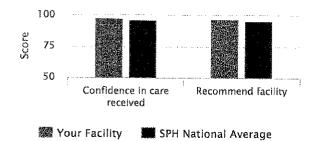
294 Patient Responses Were Received This Period

Overall & Category Scoring	This Year		Last	Year
	Score	SPH Nat'l Avg	Score	Change
Overall Score	96.3	94.3	95.9	0.4

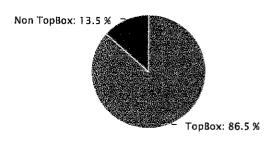
Facility	97.9	95.3	97.2	0.7
People	96.8	95.2	96,6	0.2
Personal	96.5	95.1	95.7	0.8
Process	94.9	02.8	94.7	0.2

Key Indicator Summary Note: Values below starting point of graph will not appear within graph.	This Year		Last Year	
	Score	SPH Nat'l Avg	Score	Change
Confidence in care received	97.6	96.5	96.8	0.8
Recommend facility	97.1	96.0	95.6	1.5

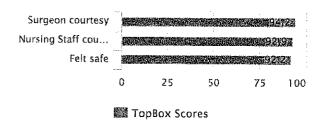
Key Loyalty Indicators



TopBox - All Responses

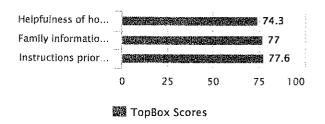


Highest 3 TopBox Performance This Year



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Lowest 3 TopBox Performance This Year



EdgePerceptionAnnual_2020_PSFPS.htm

Clean Survey Analysis

During this year, your facility had 85.00% Clean Surveys. In comparison the SI

CODE	TOP 3 'ADVANCERS' THIS YEAR	CURRENT SCORE	PREVIOUS SCORE	CHANGE
P08	Walt time	94.1	91.9	2.2
G02	Recommend facility	97.1	95,6	1.5
D05	Surgeon courtesy	98.5	97.6	0.9

CODE	TOP 3 'DECLINERS' THIS YEAR	CURRENT SCORE	PREVIOUS SCORE	CHANGE
D08	Family information during the visit	93.0	94.7	-1.7
A05	Staff concern during follow-up call	94.7	95.9	-1.2
A04	Helpfulness of homecare instructions	92.3	93.3	-1.0

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EdgePerceptionAnnual_2020_PSFPS.htm

	EdgePercepti	on Performanc	e Analysi:	s Report,	2020				
	Scores & Comparisons								
Code	Facility	Score	SPH Nat'l Average	SPH Nat'l Ranking	Previous Score	Change			
- 09	Facility cleanliness	97.7	96.4	94	97.2	0.5			
99	Felt safe	98.0	96.2	29	97.2	8.0			
Code	People	Score	SPH Nat'l Average	SPH Nat'l Ranking	Previous Score	Change			
1 01	Recovery staff courtesy	96.9	96,3	T153	96.5	0.4			
\ 05	Staff concern during follow-up call	94.7	94.0	202	95.9	-1,2			
001	Nursing Staff concern for comfort	97.8	96.8	101	97.5	0.3			
003	Anesthesia staff courtesy	96.6	96.3	T164	96.3	0.3			
004	Anesthesia staff spent time	95.6	94.6	122	95.1	0.5			
005	Surgeon courtesy	98.5	96.9	17	97.6	0.9			
006	Surgeon spent time	96.8	94.6	54	96.3	0.5			
2 07	Clerks & Receptionists	96.1	96.0	166	96.3	-0.2			
213	Nursing Staff courtesy	98.0	97.3	93	97.8	0.2			
ode	Personal	Score	SPH Nat'l Average	SPH Nat'l Ranking	Previous Score	Change			
\02	Pain level control	95.4	94.3	122	95.0	0.4			
.03	Adequacy of recovery time In facility	94.8	93.9	167	94.2	0.6			
009	Respect for privacy	97.4	95.6	27	96.9	0.5			
301	Confidence in care received	97.6	96.5	64	96.8	0.8			
302	Recommend facility	97.1	96.0	36	95.6	1.5			
ode	Process	Score	SPH Nat'l Average	SPH Nat'i Ranking	Previous Score	Change			
104	Helpfulness of homecare instructions	92.3	93.4	386	93.3	-1.0			
800	Family Information during the visit	93.0	92.2	196	94.7	-1.7			
31	Nursing Staff explanations	97,8	96.4	56	97.5	0.3			
32	Surgeon explanations	97.7	95.4	20	96.8	0.9			
203	Instructions prior to surgery	94.2	94.0	274	94.2	0.0			
208	Wait time	94.1	89.8	41	91.9	2.2			

Score Highlighting (Green/Re	d)	:
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Score is in green if change from last period is > 2 points

Score is in red if change from last period is < 2 points

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EdgePerceptionAnnual_2020_PSFPS.htm

EdgePerception Performance Analysis Report, 2020							
Trend Analysis							
Code	Facility	2020	2019	2018	2017	2016	2015

I=							
P09 P99	Facility cleanliness	97.7	97.2	95,7	97.0	0,0	0.0
ree	Felt safe	98.0	97.2	96.0	97.2	0.0	0.0
Code	People	2020	2019	2018	2017	2016	2015
A01	Recovery staff courtesy	96.9	96.5	96.0	97.1	0.0	0.0
A05	Staff concern during follow-up call	94.7	95.9	95.1	95.6	0,0	0.0
D01	Nursing Staff concern for comfort	97.8	97.5	97.0	97.6	0.0	0.0
D03	Anesthesia staff courtesy	96.6	96.3	96.8	95.2	0.0	0.0
D04	Anesthesia staff spent time	95,6	95.1	95.7	93.3	0.0	0.0
D05	Surgeon courtesy	98.5	97.6	97.0	97.2	0.0	
D06	Surgeon spent time	96.8	96.3	95.8	94.6	0.0	0.0 0.0
P07	Clerks & Receptionists	96.1	96,3	95.2	96.0	0.0	
P13	Nursing Staff courtesy	98.0	97.8	97.5	97.8	0.0	0.0
Code	Personal	2020	2019	2018	2017	2016	0.0 201 5
4 02	Pain level control	95.4	95.0	94.3			
A03	Adequacy of recovery time in facility	94.8	94.2	93.0	95.2	0.0	0.0
209	Respect for privacy	97.4	96.9	95.9	94.7	0.0	0.0
3 01	Confidence in care received	97.6	96.8	95.9 96.6	96.5	0.0	0.0
302	Recommend facility	97.1	95.6	95.2	96.5 96.0	0.0 0.0	0.0 0.0
ode	Process	2020	2019	2018	2017	2016	2015
\ 04	Helpfulness of homecare instructions	92,3	93,3	91.8			
800	Family information during the visit	93.0	93.3 94.7		92.9	0.0	0.0
31	Nursing Staff explanations	97.8	94.7 97.5	94.2	95.7	0.0	0.0
32	Surgeon explanations	97.7		96.4	97.5	0.0	0.0
03	Instructions prior to surgery	94.2	96.8	96.3	95.7	0.0	0.0
08	Wait time		94.2	94.2	93.8	0.0	0.0
~		94.1	91.9	91.6	90.8	0.0	0.0

1st three scores in green for two consecutive annual score increases 1st three scores in red for two consecutive annual score decreases

EdgePerceptionAnnual_2020_PSFPS.htm

	EdgePerc	eption Perform	iance Ai	naiysis R	eport, 20	20	THE PERSON NAMED IN COLUMN TO PE
		Response Ana	alysis				
Code	Facility	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A	Total
P09	Facility cleanliness	267	27	0	o	0	294
P99	Felt safe	270	23	0	0	0	293
Code	People	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A	Total
401	Recovery staff courtesy	255	32	0	1	3	291
105	Staff concern during follow-up call	226	46	3	1	18	294
201	Nursing Staff concern for comfort	268	26	0	0	0	294
003	Anesthesia staff courtesy	247	39	0	0	8	294
004	Anesthesia staff spent time	238	47	1	0	8	294
005	Surgeon courtesy	274	17	0	0	0	291
006	Surgeon spent time	259	34	0	1	0	294
207	Clerks & Receptionists	254	37	3	0	0	294
213	Nursing Staff courtesy	273	20	1	0	0	294
Code	Personal	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A	Total
02	Pain level control	245	40	3	1	5	294
.03	Adequacy of recovery time in facility	233	51	3	0	4	291
009	Respect for privacy	264	30	0	0	0	294
901	Confidence in care received	267	25	1	0	0	293
302	Recommend facility	261	31	1	0	0	293
Code	Process	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A	Total

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A04	Helpfulness of homecare instructions	217	68	6	1	0	292
D08	Family information during the visit	207	56	5	1	25	294
D31	Nursing Staff explanations	267	26	0	0	1	294
D32	Surgeon explanations	265	27	0	0	0	292
P03	Instructions prior to surgery	228	65	1	0	0	294
P08	Walt time	236	51	6	0	1	294

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EdgePerceptionAnnual_2020_PSFPS.htm

EdgePerception Performance Analysis Report, 2020

Perspective: Favorable Analysis

Code	Facility	Eligible Responses	Favorable Responses	Favorable Percentage
P09	Facility cleanliness	294	294	100.0%
P99	Felt safe	293	293	100.0%

Code	People	Eligible Responses	Favorable Responses	Favorable Percentage
A01	Recovery staff courtesy	288	287	99.7%
A05	Staff concern during follow-up call	276	272	98.6%
D01	Nursing Staff concern for comfort	294	294	100.0%
D03	Anesthesia staff courtesy	286	286	100.0%
D04	Anesthesia staff spent time	286	285	99.7%
D05	Surgeon courtesy	291	291	100.0%
D06	Surgeon spent time	294	293	99.7%
P07	Clerks & Receptionists	294	291	99.0%
P13	Nursing Staff courtesy	294	293	99.7%

Code	Personal	Eligible Responses	Favorable Responses	Favorable Percentage
A02	Pain level control	289	285	98.6%
A03	Adequacy of recovery time in facility	287	284	99.0%
D09	Respect for privacy	294	294	100.0%
G01	Confidence in care received	293	292	99.7%
G02	Recommend facility	293	292	99.7%

Code	Process	Eligible Responses	Favorable Responses	Favorable Percentage
A04	Helpfulness of homecare instructions	292	285	97.6%
D08	Family information during the visit	269	263	97.8%
D31	Nursing Staff explanations	293	293	100.0%
D32	Surgeon explanations	292	292	100.0%
P03	Instructions prior to surgery	294	293	99.7%
P08	Wait time	293	287	98.0%
	Totals	6,379	6,339	99.4%

Favorable Percentage Color Coding: If the favorable percentage for any key performance indicator is less than 95%, the percentage is highlighted in red. This brings to your attention that more than 5% of your respondents (which equates to more than 1 out of every 20) provided an unfavorable response for the measure. This may suggest that you need to look at the performance or behavior tied to this measure more closely.

Calculation of Favorable Percentage: Your eligible responses are simply the total of all 'Strongly Agree', 'Agree', 'Disagree' and 'Strongly Disagree' responses. Your Favorable responses are the sum of your 'Strongly Agree' and 'Agree' responses. The Favorable Percentage divides your Favorable Responses by your Eligible Responses.

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EdgePerception Performance Analysis Report, 2020

Perspective: Top Box and Net Promoter Analysis

	Code Fa	CHIV	igible TopBo Resp Resp	х ТорВох %	Promoter Resp	Passive Resp	Detractor Resp	Net Promoter Score
ļ	P09 Facility cleanliness		294 267	90,8%	267	27	0	90.8
	P99 Felt safe		293 270	92.2%	270	23	0	92.2

Code	People	Eligible Resp	TopBox Resp	TopBox %	Promoter Resp	Passive Resp	Detractor Resp	Net Promoter Score
A01	Recovery staff courtesy	288	255	88.5%	255	32	1	88.2
	Staff concern during follow-up call	276	226	81.9%	226	46	Á	80.4
D01	Nursing Staff concern for comfort	294	268	91.2%	268	26	Ö	91.2
D03 ,	Anesthesia staff courtesy	286	247	86.4%	247	39	0	86.4
D04 /	Anesthesia staff spent time	286	238	83.2%	238	47	1	82.9
D05	Surgeon courtesy	291	274	94.2%	274	17	Ó	94.2
D06 3	Surgeon spent time	294	259	88.1%	259	34	1	87.8
P07 (Clerks & Receptionists	294	254	86.4%	254	37	3	85.4
P13 I	Nursing Staff courtesy	294	273	92.9%	273	20	1	92.5

Code	Personal	Eligible Resp	TopBox Resp	TopBox %	Promoter Resp	Passive Resp	Detractor Resp	Net Promoter Score
A02	Pain level control	289	245	84.8%	245	40	A	83.4
A03	Adequacy of recovery time in facility	287	233	81.2%	233	51	3	80.1
D09	Respect for privacy	294	264	89.8%	264	30	n	89.8
G01	Confidence in care received	293	267	91.1%	267	25	1	90.8
G02	Recommend facility	293	261	89.1%	261	31	1	88.7

Code	1 100033	Eligible Resp	TopBox Resp	TopBox %	Promoter Resp	Passive Resp	Detractor Resp	Net Promoter Score
A04	Heipfulness of homecare instructions	292	217	74.3%	217	68	7	71.9
D08	Family information during the visit	269	207	77.0%	207	56	6	74.7
D31	Nursing Staff explanations	293	267	91.1%	267	26	0	91.1
D32	Surgeon explanations	292	265	90.8%	265	27	0	90.8
P03	Instructions prior to surgery	294	228	77.6%	228	65	1	77.2
P08	Walt time	293	236	80.5%	236	51	Ŕ	78.5
	Totals	6,379	5,521	86.5%	5.521	818	40	85.9

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EdgePerceptionAnnual_2020_PSFPS.htm

Top Box Color Coding: If your Top Box Percentage is less than 60%, then this score is highlighted in red to bring this to your attention. This may suggest that you need to look at the performance or behavior tied to this measure more closely.

Net Promoter Color Coding: If your Net Promoter Score is less than 50, then this score is highlighted in red to bring this to your attention. This may suggest that you need to look at the performance or behavior tied to this measure more closely.

Calculation of Top Box Percentage: Notice that your Top Box and Promoter counts are the same. Your Top Box indicates the number of responses that fell in your highest rating, which is typically 'Strongly Agree'. When this number is divided by your eligible responses (Not Applicable responses are not included) you have your Top Box Percentage.

Calculation of Net Promoter Score: Your Net Promoter Score takes into account both your Promoter (Top Box) and Detractor responses. The calculation is: percentage of Promoters minus percentage of Detractors equals NPS. This provides your Net Promoter Score for each measure.

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EdgePerception Performance Analysis Report, 2020

Critical To Improvement (CTI) Analysis

Code	Area	Weighted Rank	Current Score	SPH Nat'l Average	Score Ranking	Survey Correlation	SPH Nat'l Correlation
D04	Anesthesia staff spent time	31	95.1	94.6	14	0.54	0.37
D08	Family information during the visit	28	94.4	92.2	16	0.50	0.35
P03	Instructions prior to surgery	28	94.2	94.0	17	0.49	0.31
A04	Helpfulness of homecare instructions	26	92.6	93.4	19	0.48	0.36
D09	Respect for privacy	26	96.7	95.6	7	0.58	0.38
P99	Felt safe	25	97.0	96.2	5	0.68	0.41
A01	Recovery staff courtesy	24	96.6	96.3	9	0.53	0.42
D03	Anesthesia staff courtesy	24	96.4	96.3	10	0.52	0.37
P09	Facility cleanliness	24	96.8	96.4	6	0.56	0.38
A03	Adequacy of recovery time in facility	21	94.1	93.9	18	0.47	0.38
A05	Staff concern during follow-up call	21	95.3	94.0	13	0.48	0.35
P08	Wait time	21	92.2	89.8	20	0.39	0.28
D32	Surgeon explanations	18	96.6	95.4	8	0.48	0,33

10/7/21, 3:02 PM Report Display

P07	Clerks & Receptionists	18	95.9	96.0	12	0.47	0.39
A02	Pain level control	17	94.9	94.3	15	0.44	0.34
P13	Nursing Staff courtesy	17	97.8	97.3	1	0.53	0.42
D01	Nursing Staff concern for comfort	16	97.5	96.8	3	0.52	0.39
D06	Surgeon spent time	16	95.9	94.6	11	0.47	0.35
D31	Nursing Staff explanations	13	97.3	96.4	4	0.48	0.38
D05	Surgeon courtesy	6	97.6	96.9	2	0.47	0.36

The Critical To Improvement (CTI) Analysis identifies suggested areas in which to focus your quality improvement initiatives. The CTI ranking, presented in order of decreasing importance, is calculated by combining those areas in the current report with the lowest overall scores, with those areas that your patients have identified as being important to overall satisfaction. Any relationship between individual question responses and overall satisfaction is determined by calculating a mathematical relationship between each response and overall satisfaction. This relationship is expressed as a correlation, with a correlation of '1' being the highest possible relationship between the survey response and overall satisfaction.

EdgePerceptionAnnual_2020_PSFPS.htm

EdgePerception Performance Analysis Report, 2020

Survey Distribution and Response Summary

Survey Demographics	This	Year	Last	Year
Survey Distribution by SPH Analytics	<u>Count</u>	<u>Percent</u>	Count	Percent
Surveys Mailed by SPH Analytics	0		0	
Surveys Emailed by SPH Analytics	750	***************************************	1024	
Interactive Voice Response Surveys by SPH Analytics	0		0	
Surveys Texted by SPH Analytics	0		0	
Removed Email Addresses	2	.3%	7	.7%
Invalid Email Addresses	0	0.00%	0	0.00%
Total Surveys Distributed	748		1017	
Survey Responses	<u>Count</u>	<u>Percent</u>	Count	<u>Percent</u>
Paper Surveys Entered by SPH Analytics	0		0	
Online Survey Responses	294	39.3%	371	36.5%
Interactive Voice Survey Responses	0	.00%	0	.00%
Text Based Survey Responses	0	.00%	0	.00%
Survey Responses Entered by Facility	0		0	
Web Site Link Survey Responses	0	,,,	0	
Total Survey Responses	294		371	

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EdgePerception Performance Analysis Report, 2020

Promoter Analysis

On a scale of 0-10 how likely are you to recommend a friend or colleague?

Promoters (score 9-10) are loyal enthusiasts who will keep buying and refer others, fueling growth.



Passives (score 7-8) are satisfied but unenthusiastic customers who are vulnerable to competitive offerings.



Detractors (score 0-6) are unhappy customers who can damage your brand and impede growth through negative word-of-mouth.

To calculate your company's Net Promoter Score (NPS), take the percentage of customers who are Promoters and subtract the percentage who are Detractors.

	Summary of Respons	e Distr	ibution	for Net	Promo	ter Que	stions	(Scorin	g Rang	e: 0-10))	<u></u>	
Code	Promoter	10	9	8	7	6	5	4	3	2	1	0	

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Q70	Rating of the provider		20		·				ļ				1
<u> </u>		250	1 .5.5	9] 1	0	0	j 0	0	0	0	0 '	
Q/1	Rating of the facility	225	53	12	0	2	2	0	0	0	0	0	

Net Promoter Overall Scoring (Corporate and SPH National Averages and Ranks are for the Entire Location)									
Code	Promoter	Score	SPH Nat'l Average	SPH Nat'i Ranking	Previous Score	Change			
Q70	Rating of the provider	96.6	94.2	78	95.7	0.9			
Q71	Rating of the facility	93.2	92.1	209	92.4	8,0			

Your Net Promoter Score is green if it has increased by more than 10 points from the prior period

Your Net Promoter Score is red if it has decreased by more than 10 points from the prior period

EdgePerceptionAnnual_2020_PSFPS.htm

	EdgePerception Perform	ance Analysis Repo	ort, 2020		
	> - Scores for 45	Survey(s) Return	ed This P	Period	
Code	Facility	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
P09	Facility cleanliness	98.9	97.7	94,4	4.5
P99	Felt safe	98.3	98.0	95.4	2.9
Code	People	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
A01	Recovery staff courtesy	97.7	96.9	97.2	0.5
A05	Staff concern during follow-up call	94.2	94.7	94.0	0.2
D01	Nursing Staff concern for comfort	98.3	97.8	98.1	0.2
D03	Anesthesia staff courtesy	96.1	96.6	94.4	1.7
004	Anesthesia staff spent time	96.7	95.6	93.3	3.4
205	Surgeon courtesy	97.2	98.5	96.3	0.9
206	Surgeon spent time	97.2	96.8	94.4	2.8
P07	Clerks & Receptionists	95.6	96.1	97.2	-1.6
⊃13	Nursing Staff courtesy	98.9	98.0	97.2	1.7
Code	Personal	Provider's Current Score	Facility's Overali Score	Provider's Previous Score	Change
402	Pain level control	97.8	95.4	97.1	0.7
403	Adequacy of recovery time in facility	95.9	94.8	95.4	0.5
209	Respect for privacy	98.3	97.4	95.4	2.9
G01	Confidence in care received	98.3	97.6	96.3	2.0
302	Recommend facility	97.8	97.1	95.2	2.6
Code	Process	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
\04	Helpfulness of homecare instructions	93.3	92.3	91.7	1.6
800	Family information during the visit	92.9	93.0	94.4	-1.5
031	Nursing Staff explanations	98.9	97.8	97.1	1.8
)32	Surgeon explanations	97.2	97.7	94.4	2.8
203	Instructions prior to surgery	94.4	94.2	93.5	0.9
809	Wait time	93.2	94.1	88.0	5.2

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EdgePerception Performance Analysis Report, 2020

Promoter Analysis For ---->

	Summary of Response Distribution for Net Promoter Questions (Scoring Range: 0-10)												
Code	Promoter	10	9	8	7	6	5	4	3	2	1	0	

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10/7/21, 3:02 PM

Q70	Rating of the provider	39	6	0	0	0	0	0	0	0	0	0	
Q71	Rating of the facility	37	6	2	0	0	0	0	0	0	0	0	

Net Promoter Overall Scoring									
Code	Promoter	Score	SPH Nat'l Average	SPH Nat'l Ranking	Previous Score	Change			
Q70	Rating of the provider	100.0	93.6	78	96.2	3.8			
Q71	Rating of the facility	95.6	91.5	209	88.0	7.6			

Score Highlighting (Green/Red):

Your Net Promoter Score is green if it has increased by more than 10 points from the prior period

Your Net Promoter Score is red if it has decreased by more than 10 points from the prior period

EdgePerceptionAnnual_2020_PSFPS.htm

	Andochick, Scott E - Scores for :	L1 Survey(s) Retur	ned This	Period	
Code	Facility	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
P09	Facility cleanliness	95.5	97.7	100.0	-4.5
P99	Felt safe	95.5	98.0	100.0	-4.5
Code	People	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
A01	Recovery staff courtesy	93.2	96.9	96.9	-3.7
A05	Staff concern during follow-up call	92.5	94.7	100.0	-7.5
001	Nursing Staff concern for comfort	95.5	97.8	100.0	-4.5
003	Anesthesia staff courtesy	95.5	96.6	93.8	1.7
004	Anesthesia staff spent time	95.5	95.6	96.9	-1.4
005	Surgeon courtesy	100.0	98.5	100.0	0.0
006	Surgeon spent time	97.7	96.8	100.0	-2.3
207	Clerks & Receptionists	84.1	96.1	93.8	- 9.7
13	Nursing Staff courtesy	95.5	98.0	100.0	-4.5
Code	Personal	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
\02	Pain level control	81.8	95.4	96.9	-15.1
103	Adequacy of recovery time in facility	86.4	94.8	96.9	-10.5
009	Respect for privacy	95.5	97.4	100.0	-4.5
301	Confidence in care received	97.7	97.6	96.9	8,0
302	Recommend facility	95.5	97.1	100.0	-4.5
Code	Process	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
\04	Helpfulness of homecare instructions	86.4	92.3	96.9	-10.5
800	Family information during the visit	84.1	93.0	100.0	-15.9
D31	Nursing Staff explanations	95.5	97.8	100.0	-4.5
D32	Surgeon explanations	97.7	97.7	100.0	-2.3

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Instructions prior to surgery

Wait time

P03

P08

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-6.0

-4.5

96.9

100.0

94.2

94.1

90.9

95.5

EdgePerception Performance Analysis Report, 2020

Promoter Analysis For Andochick, Scott E

Summary of Response Distribution for Net Promoter Questions (Scoring Range: 0-10)												
Code	Promoter	10	9	8	7	6	5	4	3	2	1	0

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Q70	Rating of the provider	9	1	1	0	l 0	0	1 0	0	l o	1 0	l o 1	
Q71	Rating of the facility	6	3	2	0	0	0	0	0	0	0	0	

Net Promoter Overall Scoring											
Code	Promoter	Score	SPH Nat'i Average	SPH Nat'l Ranking	Previous Score	Change					
Q70	Rating of the provider	90.9	93.6	78	100.0	-9 .1					
Q71	Rating of the facility	81.8	91.5	209	100.0	-18.2					

Your Net Promoter Score is green if it has increased by more than 10 points from the prior period

Your Net Promoter Score is red if it has decreased by more than 10 points from the prior period

EdgePerceptionAnnual_2020_PSFPS.htm

	EdgePerception Perform	ance Analysis Repo	rt, 2020		
	Johnson, David A - Scores for	1 Survey(s) Return	ed This P	eriod	TATO TO THE TOTAL STATE
Code	Facility	Provider's Current Score	Facility's Overali Score	Provider's Previous Score	Change
P09	Facility cleanliness	100.0	97,7	0.0	100.0
P99	Felt safe	100.0	98.0	0.0	100.0
Code	People	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
4 01	Recovery staff courtesy	100.0	96.9	0.0	100.0
A05	Staff concern during follow-up call	100.0	94.7	0.0	100.0
D01	Nursing Staff concern for comfort	100.0	97.8	0.0	100.0
003	Anesthesia staff courtesy	100.0	96.6	0.0	100.0
004	Anesthesia staff spent time	100.0	95.6	0.0	100.0
005	Surgeon courtesy	100.0	98.5	0.0	100.0
206	Surgeon spent time	100.0	96.8	0.0	100.0
207	Clerks & Receptionists	100.0	96.1	0.0	100.0
213	Nursing Staff courtesy	100,0	98.0	0.0	100.0
Code	Personal	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
\02	Pain level control	100.0	95.4	0.0	100.0
.03	Adequacy of recovery time in facility	100.0	94.8	0,0	100.0
009	Respect for privacy	100.0	97.4	0.0	100.0
301	Confidence in care received	100.0	97.6	0.0	100.0
302	Recommend facility	100.0	97.1	0.0	100.0
Code	Process	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
.04	Helpfulness of homecare instructions	100.0	92,3	0.0	100.0
800	Family information during the visit	100.0	93.0	0.0	100.0
31	Nursing Staff explanations	100.0	97.8	0.0	100.0
32	Surgeon explanations	100.0	97.7	0.0	100.0
203	Instructions prior to surgery	100.0	94.2	0.0	100.0
809	Wait time	100.0	94.1	0.0	100.0

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EdgePerceptionAnnual_2020_PSFPS.htm

100.0

EdgePerception Performance Analysis Report, 2020

Promoter Analysis For Johnson, David A

	Summary of Respons	e Distr	ibution	for Net	Promo	ter Que	stions	(Scorin	g Rang	e: 0-10)	
Code	Promoter	10	9	8	7	6	5	4	3	2	1	0
		· · · · · · · · · · · · · · · · · · ·										

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10/7/21, 3:02 PM Report Display

Q70	Rating of the provider	1	0	0	0	0	0	0	0	0	0	0	
Q71	Rating of the facility	1	0	0	0	0	0	0	0	0	0	0	

	Net Promoter Overall Scoring											
Code	Promoter	Score	SPH Nat'l Average	SPH Nat'l Ranking	Previous Score	Change						
Q70	Rating of the provider	100.0	93.6	78	0.0	100.0						
Q71	Rating of the facility	100.0	91.5	209	0.0	100.0						

Score Highlighting (Green/Red):

Your Net Promoter Score is green if it has increased by more than 10 points from the prior period

Your Net Promoter Score is red if it has decreased by more than 10 points from the prior period

EdgePerceptionAnnual_2020_PSFPS.htm

	EdgePerception Performa	nce Analysis Repo	ort, 2020		
	Levine, Matthew J - Scores for 24	4 Survey(s) Retur	ned This	Period	
Code	Facility	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
² 09	Facility cleanliness	96.9	97.7	96.7	0.2
99	Felt safe	96.9	98.0	97.5	-0.6
Code	People	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
A 01	Recovery staff courtesy	93.8	96.9	96.6	-2.8
\ 05	Staff concern during follow-up call	91.7	94.7	94.6	-2.9
001	Nursing Staff concern for comfort	93.8	97.8	97.5	-3.7
003	Anesthesia staff courtesy	92.7	96.6	96.7	-4.0
004	Anesthesia staff spent time	91.7	95.6	96.7	-5.0
005	Surgeon courtesy	97.9	98.5	98.3	-0.4
006	Surgeon spent time	95.8	96.8	97.5	-1.7
P07	Clerks & Receptionists	91.7	96.1	96.7	-5.0
213	Nursing Staff courtesy	91.7	98.0	97.5	-5.8
Code	Personal	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
\02	Paln level control	88.5	95.4	93.3	-4.8
A03	Adequacy of recovery time in facility	90.6	94.8	95.8	-5.2
009	Respect for privacy	94.8	97.4	96.7	-1,9
301	Confidence in care received	96.9	97.6	98.3	-1.4
302	Recommend facility	94.8	97.1	97.5 ·	-2.7
Code	Process	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
\ 04	Helpfulness of homecare instructions	84.4	92.3	89.2	-4.8
800	Family information during the visit	91.7	93.0	96.7	-5.0
031	Nursing Staff explanations	93.5	97.8	96.7	-3,2
032	Surgeon explanations	95.8	97.7	98.3	-2.5
P03	Instructions prior to surgery	93.8	94.2	96.7	-2.9
P08	Wait time	91.7	94.1	96.7	-5.0

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EdgePerceptionAnnual_2020_PSFPS.htm

EdgePerception Performance Analysis Report, 2020

Promoter Analysis For Levine, Matthew J

	Summary of Response Distribution for Net Promoter Questions (Scoring Range: 0-10)											
Code	Promoter	10	9	8	7	6	5	4	3	2	1	0

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Q70	Rating of the provider	20	2	2	0	0	1 0	l 0	l 0	0	0 1	0	1
Q/1	Rating of the facility	16	4	1	0	2	1	0	0	0	0	0	

Net Promoter Overall Scoring												
Code	Promoter	Score	SPH Nat'I Average	SPH Nat'l Ranking	Previous Score	Change						
Q70	Rating of the provider	91.7	93.6	78	93.3	-1.6						
Q71	Rating of the facility	70.8	91.5	209	90.0	-19.2						

Your Net Promoter Score is green if it has increased by more than 10 points from the prior period

Your Net Promoter Score is red if it has decreased by more than 10 points from the prior period

EdgePerceptionAnnual_2020_PSFPS.htm

***************************************	EdgePerception Perform				*********
	Mecinski, Adam M - Scores for 4	l2 Survey(s) Retur	ned This	Period	
Code	Facility	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
P09	Facility cleanliness	99.4	97.7	97.5	1.9
- 99	Felt safe	98.8	98.0	97.4	1.4
Code	People	Provider's Current Score	Facility's Overali Score	Provider's Previous Score	Change
A01	Recovery staff courtesy	98.8	96.9	96.1	2,7
\05	Staff concern during follow-up call	97.4	94.7	96.7	0.7
001	Nursing Staff concern for comfort	98.8	97.8	95.2	3.6
003	Anesthesia staff courtesy	97.9	96.6	97.3	0.6
004	Anesthesia staff spent time	97.2	95.6	95.8	1.4
005	Surgeon courtesy	98.7	98.5	94.8	3.9
006	Surgeon spent time	95.8	96.8	95.3	0.5
207	Clerks & Receptionists	98.2	96.1	96.6	1,6
213	Nursing Staff courtesy	100.0	98.0	97.0	3.0
ode	Personal	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
102	Pain level control	99.4	95.4	93.3	6.1
.03	Adequacy of recovery time in facility	97.6	94.8	94.5	3.1
009	Respect for privacy	98.8	97.4	98.3	0.5
301	Confidence in care received	98.2	97,6	96.2	2.0
302	Recommend facility	97.0	97.1	94.9	2.1
ode	Process	Provider's Current Score	Facility's Overali Score	Provider's Previous Score	Change
.04	Helpfulness of homecare instructions	92.7	92.3	92.8	-0.1
08	Family information during the visit	94.4	93,0	95.6	-1.2
31	Nursing Staff explanations	98.2	97.8	97.5	0.7
32	Surgeon explanations	97.6	97.7	96.2	1.4
03	Instructions prior to surgery	94.6	94.2	93.2	1.4
08	Wait time	98.2	94.1	93.5	4.7

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EdgePerception Performance Analysis Report, 2020

Promoter Analysis For Mecinski, Adam M

	Summary of Response Distribution for Net Promoter Questions (Scoring Range: 0-10)												
Code	Promoter	10	9	8	7	6	5	4	3	2	1	0	
						·				·			

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Q70	Rating of the provider	29	8	4	1	0	0	0	0	0	0	0	
Q71	Rating of the facility	30	10	2	0	0	0	0	0	0	0	l 0	

	Net Promoter Overall Scoring													
Code	Promoter	Score	SPH Nat'l Average	SPH Nat'l Ranking	Previous Score	Change								
Q70	Rating of the provider	88.1	93.6	78	89.8	-1.7								
Q71	Rating of the facility	95.2	91.5	209	94.9	0.3								

Your Net Promoter Score is green if it has increased by more than 10 points from the prior period

Your Net Promoter Score is red if it has decreased by more than 10 points from the prior period

EdgePerceptionAnnual_2020_PSFPS.htm

	Nesbitt, Kristin S - Scores for 60	0 Survey(s) Returr	ed This I	Period	
Code	Facility	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
P 0 9	Facility cleanliness	97.9	97.7	96.9	1.0
P99	Felt safe	98.8	98.0	96.0	2.8
Code	People	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
4 01	Recovery staff courtesy	96.6	96.9	96.1	0.5
A 05	Staff concern during follow-up call	95.3	94.7	95.3	0.0
001	Nursing Staff concern for comfort	99.2	97.8	98.2	1.0
003	Anesthesia staff courtesy	97.8	96.6	96.1	1.7
004	Anesthesia staff spent time	95.7	95.6	94.7	1.0
005	Surgeon courtesy	99.6	98.5	98.2	1.4
206	Surgeon spent time	96.3	96.8	96.3	0.0
207	Clerks & Receptionists	97.5	96.1	95.8	1.7
213	Nursing Staff courtesy	99.6	98.0	98.0	1.6
Code	Personal	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
A 02	Pain level control	96.7	95.4	94.3	2.4
A03	Adequacy of recovery time in facility	94.1	94.8	91.7	2.4
009	Respect for privacy	99.2	97.4	96.2	3.0
3 01	Confidence in care received	97.1	97.6	96.3	0.8
302	Recommend facility	97.1	97.1	94.2	2.9
Code	Process	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
\04	Helpfulness of homecare instructions	91.7	92.3	93.2	-1.5
800	Family information during the visit	92.9	93.0	94.1	-1.2
031	Nursing Staff explanations	99.2	97.8	97. 1	2.1
D32	Surgeon explanations	97.9	97.7	96.5	1.4
203	Instructions prior to surgery	94.2	94.2	92.9	1.3
208	Wait time	94.2	94.1	90.8	3.4

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EdgePerception Performance Analysis Report, 2020

Promoter Analysis For Nesbitt, Kristin S

Summary of Response Distribution for Net Promoter Questions (Scoring Range: 0-10)												
Code	Promoter	10	9	8	7	6	5	4	3	2	1	0

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Q70 Rating of the provider	51	7	1	0	0	l 0	l 0	l o	0	0	l o l
Q71 Rating of the facility	44	12	3	0	0	1	0	0	0	0	0

	Net Promoter Overall Scoring												
Code	Promoter	Score	SPH Nat'l Average	SPH Nat'i Ranking	Previous Score	Change							
Q70	Rating of the provider	98.3	93.6	78	95.6	2.7							
Q71	Rating of the facility	91.7	91.5	209	86.6	5.1							

Your Net Promoter Score is green if it has increased by more than 10 points from the prior period

Your Net Promoter Score is red if it has decreased by more than 10 points from the prior period

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	EdgePerception Perform	ance Analysis Repo	ort, 2020		
	Steinberg, James A - Scores for	38 Survey(s) Retu	rned This	Period	***************************************
Code	Facility	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
P09	Facility cleanliness	98.0	97.7	98.2	-0.2
P99	Felt safe	98.7	98.0	98.2	0.5
Code	People	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
A01	Recovery staff courtesy	97.4	96.9	96.3	1.1
A05	Staff concern during follow-up call	95.9	94.7	97.4	-1.5
001	Nursing Staff concern for comfort	97.4	97.8	97.0	0.4
003	Anesthesia staff courtesy	98.0	96.6	97.6	0.4
004	Anesthesla staff spent time	96.1	95.6	97.5	-1.4
005	Surgeon courtesy	98.0	98.5	99.4	-1.4
006	Surgeon spent time	98.7	96.8	99.4	-0.7
207	Clerks & Receptionists	98.0	96.1	97.6	0.4
213	Nursing Staff courtesy	98.0	98.0	98.2	-0.2
Code	Personal	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
102	Pain level control	92.1	95.4	94.6	-2,5
.03	Adequacy of recovery time in facility	95.4	94.8	92.9	2.5
009	Respect for privacy	97.4	97.4	97.0	0.4
301	Confidence in care received	98.0	97.6	97.0	1.0
902	Recommend facility	98.0	97.1	96.4	1.6
Code	Process	Provider's Current	Facility's Overali	Provider's Previous	Change

Instructions prior to surgery © Copyright Symphony Performance Health. 2021 All Rights Reserved.

Nursing Staff explanations

Surgeon explanations

Wait time

Helpfulness of homecare instructions

Family information during the visit

A04

D08

D31

D32

P03

P08

EdgePerceptionAnnual_2020_PSFPS.htm

3.7

0.3

0.4

-0.7

-0,9

2.1

Score

91.7

95.1

97.0

99.4

97.6

94.0

EdgePerception Performance Analysis Report, 2020

Score

95.4

95,4

97.4

98.7

96.7

96.1

Score

92.3

93.0

97.8

97.7

94.2

94.1

Promoter Analysis For Steinberg, James A

Summary of Response Distribution for Net Promoter Questions (Scoring Range: 0-10)												
Code	Promoter	10	9	8	7	6	5	4	3	2	1	0
			<u> </u>									

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Q70	Rating of the provider	36	2	0	0	0	0	0	0	0	0	0	
071	Rating of the facility	33	5	0	10	0	0	0	0	0	0	0	

	Net Promoter Overall Scoring												
Code	Promoter	Score	SPH Nat'l Average	SPH Nat'l Ranking	Previous Score	Change							
Q70	Rating of the provider	100.0	93.6	78	97.6	2.4							
Q71	Rating of the facility	100.0	91.5	209	92.9	7.1							

Score Highlighting (Green/Red):

Your Net Promoter Score is green if it has increased by more than 10 points from the prior period

Your Net Promoter Score is red if it has decreased by more than 10 points from the prior period

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دها أو المراجع	EdgePerception Performa		***************************************		
Code	Thadani, Sunil M - Scores for 72	2 Survey(s) Return Provider's Current	Facility's Overall	Provider's Previous	Change
	•	Score	Score	Score	·
P09	Facility cleanliness	96.2	97.7	97.3	-1.1
99	Felt safe	97.6	98.0	97.9	-0.3
Code	People	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
401	Recovery staff courtesy	97.1	96.9	97.0	0.1
A 05	Staff concern during follow-up call	93.7	94.7	95.8	-2.1
001	Nursing Staff concern for comfort	97.9	97.8	97.7	0.2
003	Anesthesia staff courtesy	95.8	96.6	96.3	-0.5
004	Anesthesia staff spent time	95.1	95.6	94.0	1.1
005	Surgeon courtesy	98.6	98.5	98.0	0.6
006	Surgeon spent time	96.5	96.8	96.3	0.2
207	Clerks & Receptionists	96.2	96.1	95.3	0.9
213	Nursing Staff courtesy	97.6	98.0	98.0	-0.4
Code	Personal	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
۸02	Pain level control	96.7	95.4	96.3	0.4
\03	Adequacy of recovery time in facility	95.6	94.8	96.5	-0.9
009	Respect for privacy	96.2	97.4	97.0	-0.8
301	Confidence in care received	97.2	97.6	97.3	-0.1
302	Recommend facility	97.2	97.1	96.6	0.6
Code	Process	Provider's Current Score	Facility's Overall Score	Provider's Previous Score	Change
\04	Helpfulness of homecare instructions	94.0	92.3	96.0	-2.0
008	Family information during the visit	92.9	93.0	94.0	-1.1
031	Nursing Staff explanations	97.9	97.8	98.3	-0.4
D32	Surgeon explanations	98.3	97.7	96.7	1.6
203	Instructions prior to surgery	93.4	94.2	95.0	-1.6

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Wait time

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1.7

90.3

EdgePerception Performance Analysis Report, 2020

92.0

94.1

Promoter Analysis For Thadani, Sunil M

Summary of Response Distribution for Net Promoter Questions (Scoring Range: 0-10)												
Code	Promoter	10	9	8	7	6	5	4	3	2	1	0
				~								

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Q70 Rating of the provider				Rep	ort Display	/						
Q71 Rating of the facility	65 58	6 12	1 2	0	0	0	0	0	0	0	0	
and a state recently			<u> </u>	<u> </u>	I	<u> </u>	1	0	0	0	0	

	Net P	romoter Overall Sc	oring	41.00	- Appropriate Special	
Code 270	Promoter	Score	SPH Nat'l Average	SPH Nat'l	Previous	Change
!70 !71	Rating of the provider	98.6	93.6	Ranking 78	Score 100.0	
4/1	Rating of the facility	97.2	91.5	209	98.7	-1.4 -1.5

Your Net Promoter Score is green if it has increased by more than 10 points from the prior period

Your Net Promoter Score is red if it has decreased by more than 10 points from the prior period

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			and the state of the	The the things	

Code	Facility	Provider's Current	Facility's Overall	Provider's Previous	Change
P09	Facility cleanliness	Score 100,0	Score	Score	
P99	Felt safe	75.0	97.7	97.9	2.1
Code		Provider's	98.0	100.0	-25.0
Joue	People	Current	Facility's Overall	Provider's	-
. 01	Recovery staff courtesy	Score	Score	Previous Score	Change
05	Staff concern during follow-up call	75.0	96.9	97.9	-22.9
01	Nursing Staff concern for comfort	75.0	94.7	97.9	-22.9
03	Anesthesia staff courtesy	75.0	97.8	100.0	-25.0
04	Anesthesia staff spent time	100.0	96.6	95.8	4.2
05	Surgeon courtesy	100.0	95.6	91,7	8.3
06	Surgeon spent time	100.0	98.5	97.7	2.3
07	Clerks & Receptionists	100.0	96.8	89.6	10.4
13	Nursing Staff courtesy	100.0	96.1	97.9	2.1
		100.0	98.0	100.0	0.0
ode	Personal	Provider's	Facility's	Provider's	******
		Current Score	Overall	Previous	Change
)2	Pain level control	100.0	Score	Score	_
)3	Adequacy of recovery time in facility	75.0	95.4	100.0	0.0
9	Respect for privacy	75.0 75.0	94.8	97.9	-22.9
1	Confidence in care received	100.0	97.4	97.9	-22.9
2	Recommend facility	100.0	97.6	97.9	2.1
de	the state of the s	Provider's	97.1	95.8	4.2
ue	Process	Current	Facility's Overall	Provider's	
4	Holpfulmon of h	Score	Score	Previous Score	Change
3	Helpfulness of homecare instructions	75,0	92.3	93.8	40.0
1	Family information during the visit	100.0	93.0	93.8 93.2	-18.8
2	Nursing Staff explanations	75.0	97.8	93.Z 97.7	6.8
3	Surgeon explanations	75.0	97.7	97.7 93.8	-22.7
}	Instructions prior to surgery Wait time	75.0	94.2	93.8 85.4	-18.8
	AASIT RUUS		UT.4	00.4	-10,4

Wait time © Copyright Symphony Performance Health. 2021 All Rights Reserved.

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-16.7

91,7

EdgePerception Performance Analysis Report, 2020

75.0

94.1

Promoter Analysis For Pillar Topaloglu, Angelique J

	Summary of Respons	se Distr	ibution	for Ne	t Promo	oter Que	estions	(Scorin	a Rana	e: 0-10	13	
Corde	Promoter	10	9	8	7	6	5	4	3	2	1	0
s://ctonsolu	tions.com/csn/ctgprod/AnnualRanort\	/i=				 		 				

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1070	Rating of the provider	1 0	1 1	0	0	0	0	0	U	U	0	U
Q70	Rating of the provider	<u> </u>	-					0	0	Ω	0	l o l
071	Rating of the facility	0	1	ן ט	U	Ü	U		<u></u>	<u> </u>	1	

······································	N	et Promoter Overall Sc	oring	AND STREET		
Code	Promoter	Score	SPH Nat'l Average	SPH Nat'l Ranking	Previous Score	Change
Q70	Rating of the provider	100.0	93.6	78	90.9	9.1
Q70 Q71	Rating of the facility	100.0	91.5	209	100.0	0.0

Score Highlighting (Green/Red):	
Your Net Promoter Score is green if it has increased by more than 10 points from the prior period	
Your Net Promoter Score is red if it has decreased by more than 10 points from the prior period	

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Continuous Quality Improvement Study

DATE: January-May 2019 STUDY # or Title: Percent of Revenue for Quality Patient Care.	Team Member(initials): SM/SL/JAT/SC/KM applied to supplies, staffing and man-hours per case

TYPE OF ISSUE:		
CLINICAL	ADMINISTRATIVE _	X
COST-OF-CARE	PATIENT OUTCOME_	
	PATIENT SAFETY	X

I. Purpose for this study/activity:

• <u>Statement of purpose</u>: To minimize waste and promote cost effective, efficient patient care. In doing so, quality will be maintained to the highest standard and cost minimized while providing the patient with a positive experience.

Why is this problem significant to the center: Due to the current trends and escalating cost in provision of medical care, it is important to keep cost in control without affecting patient safety, quality of care and experience in a negative fashion.

II. Identify the following for this study:

Performance goals for anesthesia are continuous improvement in safety, quality and positive outcomes in addition to a good experience for every patient while containing costs.

The highest quality of care will be provided in a cost efficient manner insuring patient safety and organizational viability.

Desired performance goals:

Supply cost per month: 20% of monthly collections

Staffing Cost per month: 22% of collections

Clinical Man hours per case: 11

III. Description of Data Collection: (what will this study look at)

Data will be collected monthly regarding case volume, total collections, supply and implant cost, staffing costs and man hours per case. Values will be compared month to month and actions taken as necessary to promote improvement.

See attached data collection ledger.

IV. Describe <u>how</u> data will be collected:

Data will be collected utilizing Profit and Loss reports at the end of each month, the monthly patient census and payroll costs and placed on a ledger by month to monitor efficiencies and trends.

Patient outcomes and satisfaction will be monitored for ongoing improvement and satisfaction.

V. Data Collection Analysis: (describe these findings as it pertains to the problem)

Data collected for the first five months of 2019 were evaluated and compared to goals set by the committee. Staff, managers and physicians are made aware of results to encourage efficiency, minimize waste and promote a positive patient outcome (patient outcomes and satisfaction by month is monitored and taken into consideration to assist in this process and use as a form measure for quality).

Supply cost goals were met consistently yet staffing goals ran high, but with some improvement in Feb, March and April.

It was noted that in Jan and May, there were new hire orientations that took place and increased cost for the month.

For 2019:

Supply cost per month: 16.8% of collections Staffing Cost per month: 27.3% of collections

Clinical Man hours per case: 13.68

VI. Comparison of current performance against study goals:

Goals:

Supply cost per month: 3.2% less than performance goal Staffing Cost per month: 5.3 higher than performance goal Clinical Man hours per case: 2.6 higher than performance goal

VII. Describe corrective actions taken and <u>how</u> these were implemented to resolve problem/concern:

- 1. Commend MM for purchasing practices
- 2. Meet monthly with clinical coordinators to work on developing programs to minimize staffing without negative impact on the facility.
- 3. Request all staff to participate in the process of cost containment and awareness
- 4. Promote quality and safety first attitudes among team members daily and at staff meetings
- 5. Celebrate successful months with the staff and open discussion for innovative ideas for ongoing improvement.
- 6. Work with managers to develop creative staffing plans that enrich but also contain cost.

VIII. Re-measurement of Problem and Corrective Action: December 2019

Monthly data will be collected and compared to goal attainments and summarized in December 2019. This will be reported to the Board of Directors at that time for recommendation and support.

IX. Describe implementation of additional corrective actions and re-measurement activities (including how data was collected) until problem is resolved. State comparison of the new current performance vs. study goal.

Monitor periodically and revisit if problems in security occur.

X. Communicate Findings/QI_Activity Reported to:

Medical Director

CQI mtg

Date:_June 2019

Date:_6/11/2019

Board of Directors

Date:_November 2019

Staff mtg Date: May 28 2019 and November 2019

Describe any educational activities associated with this study/list dates:

Monthly Review with Materials Management and Clinical Coordinators Regarding cost of supplies and staffing and brainstorming methods of containment without negative impact on quality of care.

VIII. B: Re-measurement of Problem and Corrective Action: December 2019

Monthly data was collected and compared to goal attainments and summarized in December 2020. This will be reported to the Board of Directors at that time for recommendation, directives and support.

See attached Data Sheet for results of 2020 data collection.

2020 goals:

Expected Performance Goals:

Supply cost per month: 20% of monthly total collections Staffing Cost per month: 22% of Monthly total collections

Clinical Man hours per case: 11

2020 values:

Supply cost per month: 18.7% of collections Staffing Cost per month: 32.25% of collections

Clinical Man hours per case: 24

Summary of Values: comparison to performance goals

Supply cost per month: 1.3% less than performance goal

Staffing Cost per month: 5.3% less than performance goal Clinical Man hours per case: 21.25 higher than performance goal

During the year of 2020 due to the COVID-19 Pandemic there was a significant increase in staffing costs compared to 2019. It is believed that the following contributed to the increase, but is not limited to these potential causes.

a. Discontinuation of elective surgery as mandated by the Maryland Governor.

Attrition and costs associated to rehire during layoffs: cost to hire, onboard and train x5

Paycheck protection: staff paid when not working due to COVID FFCA payment to staff caring for children, family, sick with COVID, taking care of family with COVID or paid to quarantine due to exposure.

Maintaining staff on payroll when not working at facility due to PPP loan guidelines and need to maintain all processes incorporated into the organization. For example Risk Management, safety, education and training, performance improvement, Infection Control and COVID associated implementations, etc.

This occurred simultaneously with decreased case volume and decrease in revenue amplifying the increase.

This significantly raised staffing cost compare to revenue during 2020. However, quality was maintained and patient satisfaction high.

Additional staffing needed for patient screening, education and training, documentation of events, storing and management of supplies and turn over, facility wide Enhanced Infection Control practices.

- IX. Describe implementation of additional corrective actions and re-measurement activities (including how data was collected) until problem is resolved. State comparison of the new current performance vs. study goal.
 - 1. Board of Directors awareness and support during pandemic
 - 2. Discussion with Clinical Coordinators and staffing managers.
 - 3. Improve efficiency of scheduling to improve OR utilization encouraging surgeons support
 - 4. Send staff home when finished for the day
 - 5. Utilize technicians to screen and assist clinical staff.
 - 6. Take no shortcuts on quality
 - 7. Monitor monthly for ongoing improvement throughout 2021
 - 8. Hold monthly meetings with materials management and clinical scheduling to collaborate and brainstorm on areas that will generate improvement.

Monitor periodically and revisit if problems re-occur.

X. Communicate Findings/QI Activity Reported to:

Medical Director

CQI mtg

Board of Directors

Staff mtg

Date: December 11, 2020

Date: January, 2021

Date: January 29, 2021

Staff mtg Date: January 29, 2021
Other Date: Ongoing Education and training

Describe any educational activities associated with this study/list dates:

Monthly Review with Materials Management and Clinical Coordinators Regarding cost of supplies and staffing and brainstorming methods of containment without negative impact on quality of care.

VIII. C: Re-measurement of Problem and Corrective Action: December 2021

Monthly data was collected in 2021 and monitored carefully for improvement or need to takee additional corrective measures.

2021 goals:

Goals:

Supply cost per month: 19-20% of collections Staffing Cost per month: 20-22% of collections

Clinical Man hours per case: 11

2021 values: Pending

Supply cost per month: Staffing Cost per month: Clinical Man hours per

Summary of Values: Pending and ongoing

IX. Describe implementation of additional corrective actions and re-measurement activities in 2021 (including how data was collected) until problem is resolved. State comparison of the new current performance vs. study goal.

Monitor periodically and revisit if problems in security occur.

X. Communicate Findings/QI Activity Reported to: Pending and ongoing

Medical Director☑Date:CQI mtg☑Date:Board of Directors☑Date:Staff mtg☑Date:Other☑Date:

	 	 /	
 	 •		

2021 Cost	Jan	Feb	Mar	Apr	Мау	Jun	17	Aug	Sep	Oct	Nov	Dec	Average
to					3 navrolle		•			(!) 0 3
Revenue		•					11			s payroll			
Study										, , ,			
Case Volume: 200	193	189	201	225	208								
Total Collections	397066.13	322828.31	580984.16	46.15									
Supply Costs: 19-20% of collections	56429.95	49317.06	84685.02	47818.49									
	17.8%	17.6%	18%	13%							**************************************		
(includes pharmacy)	14565.00	7742.96	20356.29	13925.00				1-1				-	
	70994.95	57060.02		61743.49									
Implante	00 0000	000											
pigiilis.	02,200,00	69,799.00		97699.00		-							
Total Supply plus Implants	126260.95	183919.04	208940.31	159442.49									
Total Supplies including implants cost to Revenue for	31%	%95	36%	34%									
month		•											
Staffing Costs: 20-22% of net	94761.59	83659.14	89315.42	132200.04									
collections	23%	26%	14%	28.5%	_								
	4647	4238	4195.89	4344.07	1431.81								
Clinical Man hours per case: 11	24		20.8		21.3								
									_				
								_		_	_		

			(
			(

2020 Cost	Jan	Feb	Mar	Apr	Мау	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Average
to					3 payrolls					m			
Revenue										payroll			
Study	"									S		٠	
Case Volume: 200	252	105	168	22	76	231	220	188	205	213	173	700	
Total Collections	473527.57	415694.35	330,057.94	150,562.48	126,054.64	337,116.60	472,179.01	406,858.95	355,082.91	443,583.0	407706.41	372,731.93	1/3.5/month 357,982.58/
Supply Costs: 19-20%	56051.59	36694.19	26303.15	53263.72	31541.85	26162.44	43,444.30	68,888.16	51,098.24	59643.68	80513.34	44411.05	month 48370.76/mo
	11.8%	8.82%	%8	35.37	25%	7.76%	9.2%	16.93%	14.3%	13.4%	19.7%	11.9%	12.93%
(include pharmacy)	11,831	12,236	2,390	11,852	1,374	9,971	25,897	8,753	24,080	14266.26	13502.27	10226.44	12401.57
	14%	11.7%	8.7%	43%	26%	10.7%	16.6%	19%	21%	16.6%	23%	14.65%	18.7%
Implants:	48303.61	103136.33	27239.94	93623.37	34385.96	54167.37	83.615.66	133 336 04	76 845 00	06/199 17	122041 00	20.000	
Total Supply plus Implants	131643.80	158539.79	61302.55	170957.99	73751.04	101365.10	172397.00	148977.20	152023.00	170397.0	227956.00	94034.62	138024.44/mo
Staffing Costs: 20-22% of net	108728.05	104551.81	89495.46	89211.62	94330.99	104919.58	109,296.76	104,011.68	102,751.69	152622.9	109210.79	115530.47	92252.13/mo
collections	23%	25.1%	27.1%	59%	74%	31%	23.1%	26.8%	28.9%	1 34.4%	26.7%	30.9%	33.25%
Clinical Man hours per case: 11	11.6	28	15	288	51	12.3	14.9	15.7	14.43	21.14	26.9	20.9	24.15
											•		

2019 Cost to	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Average
Revenue					3 payrolls						ω		
Study											payrolls		
Case Volume: 200	200	151	208	219	250	190	221	200	178	228	215	226	207/mo
Total Collections	281304.60	347657.00	379983.00	376052.06	402050.42	382247.51	406067.56	380984.92	404557.41	434473.02	363550.98	460284.92	384934.5/
													mo
Supply Costs: 19-20% of collections	18.9%	23%	16.2%	17.3%	15.1%	16.1%	13.2%	22%	12%	15%	19.5%	14%	16.8%%
	53385.75	79987.10	61583.33	65210.09	61042.79	61794.95	53616.75	84683.95	48573.68	67895.47	71158.60	64448.59	
Implants:	16%	14%	27%	17.8%	19%	25.6%	15.3%	14%	23%	16%	25.6%	22.1%	19.6%
	45498.39	48273.04	103414.80	67100.05	76689.59	98229.15	62524.73	52634.70	92370.79	69867.89	93141.48	101951.72	
Total Supply plus Impiants	35.15%	36.8%	43.4%	38.0%	36.3%	41.8%	28.6%	34%	35%	32%	45.1%	36.1%	36%
	98884.14	128206.14	164997.83	144498.00	146067.51	160024.10	116141.48	137318.65	140944.47	137763.36	164300.08	166400.31	
Staffing Costs: 20-22% of net collections	31.3%	25.6%	23.8%	24%	35.4%	23.1%	25.6%	24%	24%	24.2%	41.4%	25.3%	27.3%
	88315.48	89132.00	90469.31	85527.67	3 payrolls 142437.76	88380.91	104056.95	93,260.96	97417.80	105377.01	3 payrolls 150649.29	116728.94	88382.64/
													mo
Clinical Man hours per	2536.85	2557.70	2482.83	2531.95	4168.66	2663.53	3089.98	2730.94	2496.31	2714.36	2814.68	2923.70	
case: 11	12.6/case	16.9/case	11.9/case	11.5/case	16.6/case	14.0/case	13.9/case	13.65/case	14.02/case	11.9/case	13.0/case	12.9/case	13.68%

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2017 Cost to	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Revenue Study												
Case Volume: 200	150	131	187	149	166	171	132	190	153	165	15,4	
Revenue					265961.00	337560.10	334842.58	388090.83	294147.54	340715.48	346142.28	
Supply Costs: 19-20% of collections	24.6	40	42		38	31	38	48	29	51	35	
Staffing Costs: 20-22% of net collections	26	21.2	22	23	27	34	22	20	28	26	32	
Salaries and Benefits	63295.79	63972.03	71469.00	78532	73668.94	118546.50	76604.36	76927.74	83357.13	86215.12	134540.24	
Implants	20788.47	33432.62	53659.06	31957.76	44069.34	41355,54	52218.84	69378.43	36810.02	73070.26	72398.49	
Drugs	9748.18	34619.70	22505.78	14499.66	10598.57	13503.95	31806.08	34013.64	18788.30	29459.60	26536.34	
Supplies	21947.84	28332.07	35925.97	40890.93	36048.92	29011.58	30913.60	68730.92	23582.46	59399.29	25250.12	
Total all Clinical Expenses	70361.07	123034.03	133233.00	108833.71	101445.04	105806.87	129560.70	187218.64	86264.07	175457.82		
Clinical Man hours per case: 11	12.6	12.4	10.9	12.5	13.8	12.2	12	12,4	133	14.9	14.5	

2016 Cost to	Jan	Feb	Mar	Apr	May	Jun	ı	Aug	Sep	Oct	Nov
Revenue Study											
Case Volume: 200	103	119	114	114	151	141	123	148	120	128	
Supply Costs: 19-20% of	34	37	24	27	25	38	38	47.5	48	37	34
collections											
Staffing Costs:	30	24	28	27	25	32	26	27.5	27.2	32.3	36.7
20-22% of net											
collections											
Salaries and Benefits	65,181	69,578	62,518	83,678	61,970	93,422.00	75,090.00	76,127.00	80,597.00	69,236.00	100,809
Implants	29,309	33,134	22,804	36,604	50,154	21,819.06	42,853.00	57,958.87	62,963.80	35,022.78	38,754.90
Drugs	9,427	26,101	6,238	18,742	16,562	22,897.61	31,070.69	21432.49	17,949.27	10,678.50	23499.90
Supplies	25,254	27,112	18,736	27,370	26,688	45,755.6	24,823.64	35,72834	39,136.73	16,801.26	21841.98
								4			-
Total Clinical Expenses	74,908	100,104	54,0711	94,363	108,106	109,365	103,364	130,853	141,233	79,574	
		İ									-
Clinical Man hours per	Data not	12.9	12.7	12.9	14.28	13.3					
case: 11	available	available	available	available	available						

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Continuous Quality Improvement Study

DATE: January 1-April 2020/September-December 2020 Team Members (initials): SM/SP

STUDY Title: Study of Normothermia in PACU after all surgical cases

TYPE OF ISSUE:				
CLINICAL	X	ADMINISTRATIVE		
COST-OF-CARE		PATIENT OUTCOME	х	
		PATIENT SAFETY	Х	

I. Purpose for this study/activity :

<u>Statement of purpose</u>: To capture whether all patients having surgical procedures under general or neuraxial anesthesia are normothermic within 15 minutes of arrival in PACU.

This study was initially done in 2014, measuring cases greater than 30 minutes and in 2017 for cases greater than 60 min or more in duration. This measure was introduced in ASC Quality Reporting Program in 2015 reviewing cases with duration of 60 minutes or more.

While PSCF has maintained focus on insuring normothermia preoperatively, intraoperatively and post operatively, and the center had met this goal in 2014, it was deemed appropriate by the Performance Improvement Committee to re-study to monitor compliance and patient safety is insured.

Why is this problem significant to the center: Impairment of thermoregulatory control due to anesthesia may result in perioperative hypothermia and contribute to surgical site infection. Hypothermia, even when mild, is associated with consequences such as increased susceptibility to infection, impaired coagulation, cardiovascular stress and cardiac complications, as well as post-anesthetic shivering and thermal discomfort.

Maintaining patient normothermia pre-, peri- and post-operatively is a critical element of preventing surgical site infections and other complications such as metabolic acidosis, cardiovascular effects, increased respiratory distress and surgical bleeding.

Many patients are in a vulnerable age range, and should be comfortable and normothermic during their visit to PSCF. This applies to all surgical patients.

Maintaining normothermia and patient perception of warmth positively affect satisfaction and important focus of PSCF.

II. Identify the following for this study:

Performance goal against which the organization will compare its current performance:

A reasonable goal for this measure is a normothermia rate in the 95%-100% range, per the ASC Quality Collaboration. We are using 95% as our goal for this study.

Normothermia is defined as: The American Society of Peri-Anesthesia Nurses (ASPAN)'s Evidence-Based Clinical Practice Guideline for the Promotion of Perioperative Normothermia states, "Perioperative hypothermia, defined as a core temperature below 36 degrees C,(96.8 F) has adverse effects that range from patient thermal discomfort to increased morbidity and mortality.

(Ref IC Today; Essentials of maintaining Normothermia: 2/22/2010)

III. Description of Data Collection: (what will this study look at)

Data will be collected on patients in the OR undergoing anesthesia, using a collection tool which will record initial temperature on arrival to PACU.

All complaints about feeling cold regardless of temperature will be documented and monitored for corrective measures prior to discharge.

Patient Satisfaction

Post op infections

IV. Describe <u>how</u> data will be collected:

Nurse will record temperature on arrival to PACU and duration of anesthesia for the case.

V. Data Collection Analysis: (describe these findings as it pertains to the problem)

Data will be collected daily on Data Collection Tool and entered into HST for review.

Number of cases reviewed:

520

Number of temps less than 96.8:

5 0.96%

Number of temps equal to 96.8

6 1.1%

Number of temps greater than 96.8:

509 97.8%

VI. Comparison of current performance against study goals:

100% of patients arriving in PACU will be normothermic within 15 minutes of arrival.

Deficiency rate of: 2.2%

Infection Rate: <.01%

No related patient complaints or negative outcomes reported during this period attributable to temperature.

VII. Describe corrective actions taken and <u>how</u> these were implemented to resolve problem/concern:

Provide warming devices in Pre-Op: warm blankets, bair huggers and warming lights Provide heated blankets in the OR

Provide warm fluids in OR and PACU as needed and monitor temperature continuously

Utilize Bair Hugger warmers in OR and PACU as indicated.

Utilize radiant heat in PACU and Bair Hugger

Repeat temperature if needed

Patient interview and assessment of comfort and corresponding systems review

Document temperature and action taken to resolve.

Offer warm drinks if indicated

Provide patient with their clothing for comfort as soon as feasible

Offer patient to contribute to solution and implement as able to do so safely

Report to physicians if not promptly resolved.

Communicate Findings/QI Activity Reported to:

Medical DirectorDate:June 26, 2020CQI mtgDate:June 26, 2020Board of DirectorsDate:June 29, 2020Staff mtgDate:June/July 2020OtherDate:

VIII. Re-measurement of Problem and Corrective Action (must perform second round of data collection and analysis to objectively determine whether the corrective actions have achieved and sustained demonstrable improvement):

506 patients reviewed from September through December 2020

Temperature less than 96.8: 2
Temperature greater than 96.8: 504

No significant deficiency noted upon initial review. Improvement and consistent compliance noted.

The temperature recording process has been added to HST for continual monitoring. Periodic audits will be conducted.

Add temperature criteria to monthly chart audit.

IX. Describe implementation of additional corrective actions and re-measurement activities (including how data was collected) until problem is resolved. State comparison of the new current performance vs. study goal.

Based on the analysis, we have consistently achieved our goal of 95% of patients being discharged with a norm thermic body temperature ≥96.8F.

Medical Director	Communicate Findings/	QI Act	ivity Rep	orted to:
Board of Directors Date: January 13, 2021 Staff mtg Date: February 3, 2021 Other Date: Describe any educational activities associated with this study/list dates: Add issue to HST for ongoing and periodic chart auditing.				
Other Date:	CQI mtg	\boxtimes	Date:	January , 2021
Other Date:	Board of Directors	\boxtimes	Date:	January 13, 2021
Describe any educational activities associated with this study/list dates: Add issue to HST for ongoing and periodic chart auditing.	Staff mtg	\boxtimes	Date:	February 3, 2021
Add issue to HST for ongoing and periodic chart auditing.	Other		Date: _	
Continue to monitor and record issues if presented on patient satisfaction sur	Add issue to HST for ongoing	ng and	periodic c	hart auditing.
Continue to monitor and record issues it presented on patient satisfaction sur	Continue to manitor and re-	aard iar	uoo if pro	contod on patient esticfaction curvey
	Continue to monitor and rec	JOI 0 133	sucs it pic	sented on padent satisfaction surveys

Total Joint Checklist: Patient Navigation	Initial when Complete	Additional Comments
Posting		
Confirm Pre-Op Call Complete	1	
Contact patient to schedule tour, meet with staff and provide additional education		Date of tour:
Patient Teaching Materials Provided to patient and family member(s)		Can be given during tour, by email or mail as patient prefers. Date provided:
Confirm Patient has received prescriptions for post operative Meds and Walker		
Patient Confirms Bayada (or alternative Home Health agency as directed by patients insurance/address) has Contacted him/her. Amanda to sign off on this record conveying completion.		
Confirm Physical Therapy and Home Health has been scheduled to start post op day 1.		Confirm copies of referrals on left side of chart. Confirmed by:
Confirm MRSA Nasal Test was ordered and completed with results on chart.		
Confirm patient was sent for pre surgical testing by surgeon and that it has been completed and placed on chart		
Confirm patient was sent to PCP or other specialists for clearance		
/or H&P and place a copy on chart		
Confirm Patient received preoperative Showering instructions and		
product from surgeons office		
Patient Snack Preferences		
Instruct patient on final review to report new conditions and/or illness prior to DOS		
Confirm Anesthesia Services		Provider Name:
Pre-Op Fluid intake teaching complete and fluids provided as ordered by anesthesia services (ERAS)		Provider Name:
Preferences Card Checklist confirmed all product and reps. present		
Anesthesia and Surgeons Preferred Meds at facility and ready for use		
Nozin Nasal Prep in Preop		
Confirm with MMI Day of Surgery Physical Therapy at center is		MMI PT
scheduled prior to patients discharge and that patient brings their		Baker PT
walker to the center on DOS	No. 10	Other
Final Confirm on Day of Surgery home health is confirmed to visit		Name of Agency:
patient post op day 1.		
On Day of surgery Fax Operative report to Home Health Services for		
billing purposes Post On Call One Month		
Post Op Call One Month		
Post op Call 90 Days Other:		
Nurse Navigator:		Data assumbled
ivarise ivavigator.		Date completed

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Tonic	Notice of Date				
	National Rate	PSCF 2018	PSCF 2019	PSCF 2020	PSCF 2021
Annual Infection Rate	0.42	0.33	ט טע		
Admissions After Discharge within 48 hours	9.0	0.048			
Annual Hospital Transfers		0.0		0.14	
0/ C+>ff Fl. Vania	0.85	0.096	0.12	0.14	
70 Stari Fiu Vaccine	73%	97.04	98.1	97.8	
%COVID Vaccine	no previous data	eu	a c	2:10	
Patient Satisfaction	V V6	05.3	BI-	30%	
Patient Falls	0 00		93.9	96.3	
Medication Errors	100:0	0	⊃ 	0	
Dation+ Dissa	0.0	0.048	0.2	0	
raueilt buiji	0.001	0	0	C	
Mortality	0.78				
Turn Over Goal 7-10 minutes	7-10 min den on case mix) 	ב ו	
Cupuly Cost / Bourse	מווון מכלי מון במסב ווווע	17.02	14.91	16.28	
Supply cost/ Reveriue	. 23%	16.8	15.91	16.8	
Staff Cost/Revenue	21.60%	26.86	27.3	20.00	
Man Hours per Case	17.8	1000	27.7	22.66	
765 cases per OR by year	***	**************************************	13.08	24.15	
OR1			*	*	
7 00 3	59/	1037	1243	1041	
Jun 2	765	1037	1243	1042	
Cost per minute 133.00	22-133/min (\$62/min ave)	35/min	30.85/min	35 01 /min	
Total Operating Expenses	81.90%	92.4	82 38	7 88 7	
			0000	00.7	

Reference Beckers 2016 data

200

All facilities

T. Employee salaries and wages:

L. Employee salaries and wages:

L. T. Employee salaries and wages:

L. T. Employee salaries and benefits: 4.8 percent

R. Occupancy costs: 6.1 percent

Drugs and medical supplies: 23 percent

5. Other medical costs: 0.3 percent

6. Insurance: 0.6 percent

General and administrative: 16.4 percent

8. Management fees: 5 percent

9. Billing fees: 2.8 percent

Total operating expenses: 76.2 percent

11. EBITDA: 23.8 percent

Atlantic

12. Employee salaries and wages: 24 percent

Taxes and benefits: 5.2 percent

14. Occupancy costs: 6.9 percent

15. Drugs and medical supplies: 24.8 percent

16. Other medical costs: 0.3 percent

17. Insurance: 0.8 percent

General and administrative: 17 percent

19. Management fees: 5 percent

20. Billing fees: 3.2 percent

21. Total operating expenses: 81.9

percent

22. EBITDA: 18.1 percent

OR costs ranged from \$22 to \$133 per minute, depending on the complexity of the procedure, with an average cost page 1.00 per minute, depending on the complexity of the procedure, with an average cost page 1.00 per minute, depending on the complexity of the procedure, with an average cost page 1.00 per minute, depending on the complexity of the procedure, with an average cost page 1.00 per minute, depending on the complexity of the procedure, with an average cost page 1.00 per minute, depending on the complexity of the procedure, with an average cost page 1.00 per minute, depending on the complexity of the procedure, with an average cost page 1.00 per minute, depending on the complexity of the procedure, with an average cost page 1.00 per minute, depending on the complexity of the procedure, with an average cost page 1.00 per minute, depending the complexity of the procedure, with an average cost page 1.00 per minute, depending the complexity of the procedure, with a complexity of the procedure page 1.00 per minute, depending the complexity of the procedure page 1.00 per minute, depending the complexity of the procedure page 1.00 per minute, depending the complexity of the procedure page 1.00 per minute, depending the complexity of the procedure page 1.00 per minute, depending the complexity of the procedure page 1.00 per minute, depending the complexity of the procedure page 1.00 per minute, depending the complexity of the procedure page 1.00 per minute, depending the complexity of the procedure page 1.00 per minute, depending the complexity of the procedure page 1.00 per minute, depending the complexity of the procedure page 1.00 per minute, depending the complexity of the procedure page 1.00 per minute, depending the complexity of the procedure page 1.00 per minute, depending the complexity of the procedure page 1.00 per minute, depending the complexity of the procedure page 1.00 per minute, depending the complexity of the page 1.00 per minute, depending the complexity of the page 1.00 per minute, depending

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Mailing Address

Chairperson of Board

First Name of Chairperson

Last Name of Chairperson

Secondary Survey Contact

First Name of Secondary Survey

Last Name of Secondary Survey

Phone Number of Secondary

Phone Number Extension of

Secondary Survey Contact

Title of Secondary Survey Contact CEO

Street Address

City

State

Zip Code

Contact

Contact

shannon.magro@physicianssurger E-mail Address of Secondary

Survey Contact

Survey Contact

2021 ASC Survey

Saved Survey

Facility Name: ANDOCHICK SURGICAL CENTER, DBA

PYSICIANS SURGERY CENTER OF F

-acility ID: 21C20212 Saved: 08/13/2021



PATIENT SAFETY AND QUALITY

81 Thomas Johnson Ct Ste B

Frederick

Maryland

Scott

Scott

Andochick

301-620-4200

seandochick@hotmail.com

Andochick

21702-4674

Facility Information

ANDOCHICK SURGICAL CENTER, DBA PYSICIAN **Facility Name**

S SURGERY CENTER OF F

Facility's CMS Certification Number (CCN) 21C0001340

Does your facility share this CCN with another

No

facility? NHSN ID

40286

Facility's Federal Tax Identification Number (TIN) 522239166 Facility's National Provider Identifier (NPI)

1710952841

Does your facility share this NPI with another

Nο

facility?

Demographic Information

Physical Address

Street Address

81 Thomas Johnson Ct Ste B

City Frederick Marvland State 21702-4674 Zip Code

Main Phone Number

Facility Website Address Contact Information 2402153070

shannon.magro@physicianssurger

https://physicianssurgetr.com

Shannon

Administrator

vcenter.net

Shannon

Administrator

ycenter.net

Shannon

Magro

Magro

Administrator

Name of Administrator

Last Name of Administrator Magro

Title of Administrator

E-mail Address of Administrator

Primary Survey Contact

First Name of Primary Survey

Contact

Last Name of Primary Survey

Contact

Title of Primary Survey Contact

Phone Number of Primary Survey 2402153070

Contact

Phone Number Extension of

Primary Survey Contact

E-mail Address of Primary Survey

Contact

Public Relations Contact

First Name of Public Relations

Contact

Last Name of Public Relations

Contact

Phone Number of Public Relations 2402153070

Phone Number Extension of Public

Relations Contact

E-mail Address of Public Relations shannon.magro@physicianssurger

Contact

ycenter.net

Affiliation or Management Company Information

Is your facility affiliated with a hospital or management

company?

If 'yes,' the name of the affiliated hospital or management company.

No

Affiliation/Management Company Public Relations Contact

First Name of

Affiliation/Management Company

Public Relations Contact

Last Name of

EXHIBIT

First Name of

Affiliation/Management Company

Contact

Last Name of

Affiliation/Management Company

Contact

E-mail Address of

Affiliation/Management Company

Contact

2021 ASC Survey

Affiliation/Management Company Public Relations Contact

Phone Number of

Affiliation/Management Company

Public Relations Contact

Phone Number Extension of

Affiliation/Management Company

Public Relations Contact

E-mail Address of

Affiliation/Management Company

Public Relations Contact

Additional Contact Information

General Inbox E-mail Address

Section 1

BASIC FACILITY INFORMATION

1ABASIC FACILITY INFORMATION

1. *	12-month reporting time period used: ① 01/01/2019 - 12/31/2019
	© 01/01/2020 - 12/31/2020
	07/01/2020 - 06/30/2021
- W	
neral	Information
2. *	Total number of <u>operating rooms</u> . 2
3. *	Total number of <u>endoscopic procedure rooms</u> .
4. *	Total number of adult patient discharges from your facility during the reporting period.
	2060
5. *	Total number of pediatric patient discharges (17 years of age and younger) from your facility during the reporting period. 54
6. *	Does your facility have a formal teaching agreement with a training institution (e.g., academic medical center)?
(No No

Transfer Agreements

10. * Does your facility have a <u>written transfer agreement</u> with a pediatric or general acute care hospital for patients who require a higher level of care?

Yes

() No

1B

PERSON-CENTERED CARE: BILLING ETHICS AND MONITORING HEALTH CARE INEQUITY

1.	What pricing information for common shoppable services does your facility display on its website? Select all that apply.
	Payer-specific negotiated charges
	Discounted cash prices
:	Not applicable; facility does not provide any of these common shoppable services
Ī.	None of the above
* 2.	Based on your previous answers, you do not need to answer this question.
* * * * * * *	
Networ	k Matching
3.*	same health plans as the facility or accept a rate paid by those health plans as payment in full (i.e. without balance billing)? Yes No
Out-of-N	Not applicable; all healthcare professionals are employed by the facility letwork Services
3 3 3 3 3 3 3 3	
4 .	Based on your previous answers, you do not need to answer this question.
*****	# 9 0 2 4 5 4 5 6 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9
6 3 6 8 5 8 8 8	***************************************
5.	Based on your previous answers, you do not need to answer this question.

* 6	a sa a s
3 D.	Based on your previous answers, you do not need to answer this question.
*****	*************
7.	Based on your previous answers, you do not need to answer this question.
******	**************************************
8.	Based on your previous answers, you do not need to answer this question.
* * * * * * *	

Billing Practices

9.* Does your facility provide every patient with a billing statement and/or master itemized bill for both facility and professional services within 60 days from the date of service that includes all of the following?
 a. Name and address of the facility where billed services occurred b. Name(s) of healthcare professionals who billed services c. Date(s) of service d. An individual line item for each service or bundle of services performed
 e. Description of services billed, including facility fees, that accompanies each line item or bundle of services f. Amount of any principal, interest, or fees (e.g., late or processing fees)
g. Amount of any principal, interest, of fees (e.g., face of processing fees) g. Amount of any adjustment to the bill (e.g., health plan payment or discounts) h. Amount of any payments already received (from the patient or any other party) i. Instructions on how to apply for financial assistance j. Instructions on how to obtain a copy of the bill in the patient's primary language
Yes No
Only upon request
10. * Does your facility give patients instructions for contacting a billing representative who has the authority to do the following within 5 business days of being contacted by the patient or patient representative?
 a. Initiate an investigation into errors on a bill b. Review, negotiate and offer a price adjustment or debt forgiveness based on facility policy c. Establish a payment plan
Yes No
11. * Does your facility take legal action against patients for late payment or insufficient payment of a medical bill? Pes No
Monitoring Health Equity Inequity
12. * Which of the following demographic data does your facility collect from its patients? Patient self-identified race
Patient self-identified ethnicity
Patient (or if appropriate the parent's/guardian's) self-identified primary language Patient self-identified sexual orientation
Patient self-identified gender identity None of the above

_	3. A Has your facility taken any of the following steps to ensure the accuracy of the demographic data collected from its patients in question #12?
	Train staff responsible for registering patients
	Ensure appropriate data collection fields are available in EHR (if applicable)
	Compare data collected from patient experience surveys with EHR data (if applicable)
	Compare data collected through patient portals with EHR data (if applicable)
	Other
	None of the above
Mir - manualismo, more musico,	
14	. * Does your facility use the demographic data it collects from patients in question #12 to stratify any qua
	measure(s) with the aim of identifying health care disparities?
	(Yes
	○ No
15	. * Which type(s) of quality measure(s) does your facility stratify? Clinical process measures
	Clinical outcome measures
	OAS CAHPS
	Name of the state
	Other patient experience measures Other
Um referencementerfesser neuwoge.	
16.	* By stratifying the measure(s) selected in question #15, has your facility identified any disparities among i
	patients based on the demographic data in question #12? Yes, disparities were identified
	No, disparities were not identified
	Inadequate data available to determine if disparities exist
94994444444444444444444444444444444444	indusquate data dyanable to determine il dispanties exist
* * * * *	***************************************
17.	Based on your previous answers, you do not need to answer this question.
40	
18.	Based on your previous answers, you do not need to answer this question.
19	* Does your facility share data on its efforts to understand health care disparities and the impact of those
	efforts on its public website?
	Yes No

	Section 1 Affirmation	
Affirmed By: Shannon Magro	Title: ANDOCHICK SURGICAL CENTER, DBA:PYSICIANS SURGERY CENTER OF F	Date: 07/31/2021
	Section 2	
Λ.	MEDICAL, SURGICAL, AND CLINICAL STAFF	.
Į,	MEDICAL, SURGICAL, AND CLINICAL STAFF	
(regardless of ACLS training patient is present in the factors) Yes No Not applicable; pediatric patients		ble in the building while an adu
certification?	dical, surgical, and clinical staff are required by	the facility to maintain ACLS
Anesthesiologists Certified Registered Nurse Ar	nesthetists (CRNAs)	
Physicians	,	
Nurses (RN or MSN)		
Physician Assistants (PAs)		
Nurse Practitioners (NPs)		
Surgical Technicians		
First Assists		
18-11-11-11-11-11-11-11-11-11-11-11-11-1		**************************************
***************************************	IA present at all times and immediately availab	ole in the building until all adult

9	<u>clinician</u> (regardless of PALS training), present at all times and immediately available in the building whil
_	rediatric patient (infant through 12 years) is present in the facility?
9	Yes
	O No
	Not applicable; adult patients only
	Which of the following medical avairable and disciplant for a second of the following medical avairable and disciplant for a second of the following medical avairable and disciplant for a second of the following medical avairable and disciplant for a second of the following medical avairable and disciplant for a second of the following medical avairable and disciplant for a second of the following medical avairable and disciplant for a second of the following medical avairable and disciplant for a second of the following medical avairable and disciplant for a second of the following medical avairable and disciplant for a second of the following medical avairable and disciplant for a second of the following medical avairable and disciplant for a second of the following medical avairable and disciplant for a second of the following medical avairable and disciplant for a second of the following medical avairable and disciplant for a second of the second of
3. ^ V	Which of the following medical, surgical, and clinical staff are required by the facility to maintain PALS exertification?
(·	Anesthesiologists
⊡	Certified Registered Nurse Anesthetists (CRNAs)
	Physicians
<u> </u>	Nurses (RN or MSN)
	Physician Assistants (PAs)
	Nurse Practitioners (NPs)
	Surgical Technicians
	First Assists
6. * Is	there a physician or CRNA present at all times and immediately available in the building until all ediatric patients (infant through 12 years) are physically discharged from the facility? Yes
6. * Is	ediatric patients (infant through 12 years) are physically discharged from the facility?
7. * To	ediatric patients (infant through 12 years) are physically discharged from the facility?) Yes) No
7. * To	ediatric patients (infant through 12 years) are physically discharged from the facility? Yes No help ensure that patients are cared for by adequately trained physicians, are those physicians who are thorized to perform procedures at your facility board certified or board eligible? All are board certified or board eligible (100%)
7. * To	ediatric patients (infant through 12 years) are physically discharged from the facility? Yes No help ensure that patients are cared for by adequately trained physicians, are those physicians who another interest to perform procedures at your facility board certified or board eligible? All are board certified or board eligible (100%) Most are board certified or board eligible (>=75%)
7. * To	ediatric patients (infant through 12 years) are physically discharged from the facility? Yes No help ensure that patients are cared for by adequately trained physicians, are those physicians who are athorized to perform procedures at your facility board certified or board eligible? All are board certified or board eligible (100%) Most are board certified or board eligible (>=75%) Some are board certified or board eligible (>=50%)
7. * To	ediatric patients (infant through 12 years) are physically discharged from the facility? Yes No help ensure that patients are cared for by adequately trained physicians, are those physicians who another interest to perform procedures at your facility board certified or board eligible? All are board certified or board eligible (100%) Most are board certified or board eligible (>=75%)
7. * To	ediatric patients (infant through 12 years) are physically discharged from the facility? Yes No help ensure that patients are cared for by adequately trained physicians, are those physicians who are at the perform procedures at your facility board certified or board eligible? All are board certified or board eligible (>=75%) Some are board certified or board eligible (>=50%) Few are board certified or board eligible (<50%)
7. * To at a a	ediatric patients (infant through 12 years) are physically discharged from the facility? Yes No help ensure that patients are cared for by adequately trained physicians, are those physicians who an athorized to perform procedures at your facility board certified or board eligible? All are board certified or board eligible (>=75%) Some are board certified or board eligible (>=50%) Few are board certified or board eligible (<50%)
7. * To at a a	ediatric patients (infant through 12 years) are physically discharged from the facility?) Yes) No o help ensure that patients are cared for by adequately trained physicians, are those physicians who are atthorized to perform procedures at your facility board certified or board eligible?) All are board certified or board eligible (100%)) Most are board certified or board eligible (>=75%) 1 Some are board certified or board eligible (>=50%) 1 Few are board certified or board eligible (<50%) None are board certified or board eligible (>initiation in the procedure of th
7. * To at a a	ediatric patients (infant through 12 years) are physically discharged from the facility?) Yes) No o help ensure that patients are cared for by adequately trained physicians, are those physicians who are atthorized to perform procedures at your facility board certified or board eligible?) All are board certified or board eligible (100%)) Most are board certified or board eligible (>=75%) 1 Some are board certified or board eligible (>=50%) 1 Few are board certified or board eligible (>50%) None are board certified or board eligible 1 help ensure that patients are cared for by adequately trained anesthesiologists and/or certified gistered nurse anesthetists, are those providing anesthesia at your facility board certified or board gistered nurse anesthetists, are those providing anesthesia at your facility board certified or board gistered nurse anesthetists, are those providing anesthesia at your facility board certified or board gistered nurse anesthetists.
7. * To at a a	ediatric patients (infant through 12 years) are physically discharged from the facility?) Yes) No o help ensure that patients are cared for by adequately trained physicians, are those physicians who are atthorized to perform procedures at your facility board certified or board eligible?) All are board certified or board eligible (100%) Most are board certified or board eligible (>=75%) Some are board certified or board eligible (<50%) Few are board certified or board eligible (<50%) None are board certified or board eligible (stown) None are board certified or board eligible (stown) whelp ensure that patients are cared for by adequately trained anesthesiologists and/or certified gistered nurse anesthetists, are those providing anesthesia at your facility board certified or board gible? All are board certified or board eligible (100%)
7. * To at a a	ediatric patients (infant through 12 years) are physically discharged from the facility?) Yes) No o help ensure that patients are cared for by adequately trained physicians, are those physicians who are atthorized to perform procedures at your facility board certified or board eligible?) All are board certified or board eligible (100%) Most are board certified or board eligible (>=75%) I Some are board certified or board eligible (>50%) Few are board certified or board eligible (<50%) None are board certified or board eligible (section) of help ensure that patients are cared for by adequately trained anesthesiologists and/or certified gistered nurse anesthetists, are those providing anesthesia at your facility board certified or board gible? All are board certified or board eligible (100%) Most are board certified or board eligible (>=75%)

Section 2 Affirmation

Affirmed By: Shannon Magro

Title: ANDOCHICK SURGICAL CENTER, DBA:PYSICIANS SURGERY CENTER OF F

Date: 07/31/2021

Section 3

VOLUME AND SAFETY OF PROCEDURES

3A

VOLUME OF PROCEDURES

1. * 12-month reporting time period used: 01/01/2019 - 12/31/2019 01/01/2020 - 12/31/2020 07/01/2020 - 06/30/2021
2. * During the reporting period, were one or more of the following gastroenterology procedures performed at your facility on <u>adult</u> or <u>pediatric</u> patients:
 Upper Gl endoscopy Other upper Gl procedures Small intestine and stomal endoscopy Lower Gl endoscopy
Yes Yes, but no longer performs these procedures No
3.* During the reporting period, were one or more of the following general surgery procedures performed at your facility on <u>adult</u> or <u>pediatric</u> patients:
 Cholecystectomy and common duct exploration Hemorrhoid procedures Inguinal and femoral hernia repair Other hernia repair Laparoscopy Lumpectomy or quadrantectomy of breast Mastectomy
Yes Yes, but no longer performs these procedures No

4. * During the reporting period, were one or more of the following ophthalmology procedures performed at your facility on <u>adult</u> or <u>pediatric</u> patients:
 Anterior segment eye procedures Posterior segment eye procedures Ocular adnexa and other eye procedures
Yes
Yes, but no longer performs these procedures
O No
5. * During the reporting period, were one or more of the following orthopedic procedures performed at your facility on <u>adult</u> or <u>pediatric</u> patients:
 Finger, hand, wrist, forearm, and elbow procedures Shoulder procedures Spine procedures
Hip procedures
Knee proceduresToe, foot, ankle, and leg procedures
General orthopedic procedures
Yes
Yes, but no longer performs these procedures
O No
6. * During the reporting period, were one or more of the following otolaryngology procedures performed at your facility on <u>adult</u> or <u>pediatric</u> patients:
Ear procedures
 Mouth procedures
Nasal/sinus proceduresPharynx/adenoid/tonsil procedures
Yes Ves hart male and a control of the control of t
Yes, but no longer performs these procedures No

7. * During the reporting period, were one or more of th facility on <u>adult</u> or <u>pediatric</u> patients:	e following urology procedures performed at your
 Circumcision Cystourethroscopy Male genital procedures Urethra procedures Vaginal repair procedures 	
Yes Yes, but no longer performs these procedures No	
8.* During the reporting period, was the following derm adult patients:	natology procedure performed at your facility on
Complex skin repairs	
Yes Yes, but no longer performs this procedure No	
9. * During the reporting period, was the following neuro on <u>adult</u> patients:	ological surgery procedure performed at your facility
Spinal fusion procedures	
Yes Yes, but no longer performs this procedure	
No	
10. * During the reporting period, were one or more of the performed at your facility on <u>adult</u> patients:	e following obstetrics and gynecology procedures
Cervix proceduresHysteroscopyUterus and adnexa laparoscopies	
Yes	
Yes, but no longer performs these procedures No	

 Breast ro 			
• Skin graf	epair or reconstruct ft/reconstruction pr	ion ocedures	
(Yes			
	nger performs these pro	ocedures	
○ No			
troenterology			
12. Based on your pre			*****************
IZ. Based on your pre	evious answers, you do	not need to answer this questio	n.
13. Total adult and facility during th	or pediatric volum he reporting period.	e for each of the following (a) Adult Volume	applicable procedures performed at your (b) Pediatric Volume
Chaleavstectomies	s and common duct		(b) Pediatric Volume
explorations		0	
	dures	0	
explorations	1.00	0	· · · · · · · · · · · · · · · · · · ·
explorations Hemorrhoid proced	ral hernia repairs	0	0 0
explorations Hemorrhoid procec Inguinal and femor	ral hernia repairs	0	0
explorations Hemorrhoid proced Inguinal and femore Other hernia repairs	ral hernia repairs s	0 0 0	0
explorations Hemorrhoid proced Inguinal and femor Other hernia repairs Laparoscopies Lumpectomies or q	ral hernia repairs s	0 0 0 0	0
explorations Hemorrhoid proced Inguinal and femore Other hernia repairs Laparoscopies Lumpectomies or quality breast procedures Mastectomies	ral hernia repairs s	0 0 0 0	0
explorations Hemorrhoid proced Inguinal and femor Other hernia repairs Laparoscopies Lumpectomies or q breast procedures Mastectomies halmology 4. Total adult and/o	ral hernia repairs s quadrantectomy of or pediatric volume	0 0 0 0 0 2	0
explorations Hemorrhoid proced Inguinal and femore Other hernia repairs Laparoscopies Lumpectomies or quality breast procedures Mastectomies halmology 14. Total adult and/o	or pediatric volume e reporting period.	0 0 0 0 0 2	

30

Orthopedics

Procedures

Posterior segment eye procedures Ocular Adnexa and Other Eye

The second of th

0

	(a) Adult Volume	(b) Pediatric Volume
Finger, hand, wrist, forearm, and elbow procedures	783	14
Shoulder procedures	169	9
Spine procedures	0	0
Hip procedures	0	0
Knee procedures	195	5
Toe, foot, ankle, and leg procedures	2	0
General orthopedic procedures	12	6

Otolaryngology

16. Based on your previous answers, you do not need to answer this question.

Urology

17. Based on your previous answers, you do not need to answer this question.

Dermatology

18. Total adult volume for the following procedure performed at your facility during the reporting period.

(a) Adult Volume

(b) Pediatric Volume

Complex skin repairs

148

Neurological Surgery

Based on your previous answers, you do not need to answer this question.

Obstetrics and Gynecology

20. Based on your previous answers, you do not need to answer this question.

Plastic and Reconstructive Surgery

	reporting period.	(a) Adult Volume	(b) Pediatric Volume
	Breast repair or reconstructive		(b) Pediatric volume
	procedures	77	
	Skin Graft/Reconstruction Procedure	es 2	
		3B	
	F	ACILITY AND SURGEON	VOLUME
1. *	12-month or 24-month reporting 01/01/2019 – 12/31/2019 (12-mon		
	01/01/2018 - 12/31/2019 (24-mon		
:	01/01/2020 - 12/31/2020 (12-mon	• ,	
İ	01/01/2019 - 12/31/2020 (24-mont		
	07/01/2020 - 06/30/2021 (12-mont	th count)	
(07/01/2019 - 06/30/2021 (24-mont	h annual average)	
2. * [[Check all procedures that your fa Total Knee Replacement Total Hip Replacement None of the above	acility performs?	
3. * T	Total facility volume for each selected to the control of the cont		procedures selected in question #2 reporting period:
٧	Does your facility's privileging provolume standard listed below?		neeting or exceeding the minimum surgeon
			•

and the state of the first of the state of t

ð. ^	Does your facility have <u>appropriateness criteria</u> for <u>any</u> of the following procedures: Total knee replacement
	Total hip replacement
	None of the above
5b. ³	Did your facility do <u>any</u> of the following in developing the appropriateness criteria:
	Use the latest evidence and clinical guidelines
	Solicit input from employed surgeons, and if applicable, non-employed surgeons
	Incorporate relevant Choosing Wisely lists
	Review, and if appropriate, update the criteria on an annual basis
	None of the above
b. *	Does your facility have processes or structures in place to promote ongoing adherence to the appropriateness criteria for <u>any</u> of the following procedures:
	Total knee replacement
	Total hip replacement
	None of the above
uncolour consul twister	
7. *	Does your facility conduct regular retrospective reviews of surgical cases to evaluate the extent to which your appropriateness criteria are met or not met by each surgeon for <u>any</u> of the following procedures: Total knee replacement Total hip replacement None of the above

	Does your facility have a process in place for communicating with surgeons, surgical leadership, and administrative leadership when a surgeon's trend or pattern suggests challenges to adhering to your appropriateness criteria and work to understand potential barriers to meeting the criteria for <u>any</u> of the following procedures: Total knee replacement
	Total hip replacement
	None of the above
	Does your facility report annually to its governance and leadership the findings from the retrospective reviews and plans to improve adherence to the appropriateness criteria for <u>any</u> of the following procedures:
	▼ Total knee replacement
	Total hip replacement
	None of the above

3C

PATIENT FOLLOW-UP

2. * Where does your facility document patient complications? Paper Medical Record Electronic Health Record Both 3. * When documenting complications among those patients undergoing the procedures listed in Section 3A within 30 days of discharge, what types of complications are included: Surgical site infections Excessive bleeding Wound dehiscence Wound hematoma Excessive pain Deep Vein Thrombosis (DVT) Other None of the above 4. * What percentage of patients undergoing any one of the procedures in Section 3A have a documented complication (listed in question #3) within 30 days of discharge? • \$% \$ \$ 5%, but < 10% \$ \$ 10%, but < 25% \$ > 10%, but < 25% \$ > 25%		1.* Does your facility use an electronic surveillance system or have a formal process in place for facility staff to follow up with physicians who perform any one of the procedures in Section 3A to document complications (e.g., surgical site infections, excessive bleeding, ER admissions, return to OR, etc.) among those patients undergoing procedures within 30 days of discharge? Yes
 Paper Medical Record Electronic Health Record Both 3. * When documenting complications among those patients undergoing the procedures listed in Section 3A within 30 days of discharge, what types of complications are included: ✓ Surgical site infections ✓ Excessive bleeding ✓ Wound dehiscence ✓ Wound hematoma ✓ Excessive pain ✓ Deep Vein Thrombosis (DVT) ✓ Other None of the above 4. * What percentage of patients undergoing any one of the procedures in Section 3A have a documented complication (listed in question #3) within 30 days of discharge? ✓ 5% ✓ > 5%, but < 10% ✓ > 10%, but < 25% 		
 Beth When documenting complications among those patients undergoing the procedures listed in Section 3A within 30 days of discharge, what types of complications are included: Surgical site infections Excessive bleeding Wound dehiscence Wound hematoma Excessive pain Deep Vein Thrombosis (DVT) Other None of the above 4. * What percentage of patients undergoing any one of the procedures in Section 3A have a documented complication (listed in question #3) within 30 days of discharge? <5% >5% but < 10% >10% but < 25% 		2. * Where does your facility document patient complications?
3. ★ When documenting complications among those patients undergoing the procedures listed in Section 3A within 30 days of discharge, what types of complications are included: Surgical site infections Excessive bleeding Wound dehiscence Wound hematoma Excessive pain Deep Vein Thrombosis (DVT) Other None of the above 4. ★ What percentage of patients undergoing any one of the procedures in Section 3A have a documented complication (listed in question #3) within 30 days of discharge? State 10% > 5%, but < 10% > 10%, but < 25%	:	
3. * When documenting complications among those patients undergoing the procedures listed in Section 3A within 30 days of discharge, what types of complications are included: ✓ Surgical site infections ✓ Excessive bleeding ✓ Wound dehiscence ✓ Wound hematoma ✓ Excessive pain ✓ Deep Vein Thrombosis (DVT) ✓ Other None of the above 4. * What percentage of patients undergoing any one of the procedures in Section 3A have a documented complication (listed in question #3) within 30 days of discharge? <5% >5%, but < 10% >10%, but < 25% 	1	
Within 30 days of discharge, what types of complications are included: ✓ Surgical site infections ✓ Excessive bleeding ✓ Wound dehiscence ✓ Wound hematoma ✓ Excessive pain ✓ Deep Vein Thrombosis (DVT) ✓ Other None of the above 4. * What percentage of patients undergoing any one of the procedures in Section 3A have a documented complication (listed in question #3) within 30 days of discharge? ✓ <5% ✓ >5%, but < 10% > 10%, but < 25%		O Both
Within 30 days of discharge, what types of complications are included: ✓ Surgical site infections ✓ Excessive bleeding ✓ Wound dehiscence ✓ Wound hematoma ✓ Excessive pain ✓ Deep Vein Thrombosis (DVT) ✓ Other None of the above 4. * What percentage of patients undergoing any one of the procedures in Section 3A have a documented complication (listed in question #3) within 30 days of discharge? ✓ <5% ✓ >5%, but < 10% > 10%, but < 25%	,-1: 11:11:-11:-11:-11:-11:-11:-11:-11:-1	3. * When documenting complications among those patients undergoing the procedures listed in Section 24
 ✓ Excessive bleeding ✓ Wound dehiscence ✓ Wound hematoma ✓ Excessive pain ✓ Other None of the above 4. * What percentage of patients undergoing any one of the procedures in Section 3A have a documented complication (listed in question #3) within 30 days of discharge? < 5% > 5%, but < 10% > 10%, but < 25% 		within 30 days of discharge, what types of complications are included:
 ✓ Wound dehiscence ✓ Wound hematoma ✓ Excessive pain ✓ Deep Vein Thrombosis (DVT) ✓ Other None of the above 4. * What percentage of patients undergoing any one of the procedures in Section 3A have a documented complication (listed in question #3) within 30 days of discharge? < 5% > 5%, but < 10% > 10%, but < 25% 		WARRING TO THE PROPERTY OF THE
 ✓ Wound hematoma ✓ Excessive pain ✓ Deep Vein Thrombosis (DVT) ✓ Other None of the above 4. * What percentage of patients undergoing any one of the procedures in Section 3A have a documented complication (listed in question #3) within 30 days of discharge? < 5% > 5%, but < 10% > 10%, but < 25% 		**************************************
Excessive pain Deep Vein Thrombosis (DVT) Other None of the above 4. * What percentage of patients undergoing any one of the procedures in Section 3A have a documented complication (listed in question #3) within 30 days of discharge? 5% >5% >5%, but < 10% >10%, but < 25% 		
Deep Vein Thrombosis (DVT) Other None of the above 4. * What percentage of patients undergoing any one of the procedures in Section 3A have a documented complication (listed in question #3) within 30 days of discharge? • < 5% > 5%, but < 10% > 10%, but < 25%		Nanocard .
Other None of the above 4. * What percentage of patients undergoing any one of the procedures in Section 3A have a documented complication (listed in question #3) within 30 days of discharge? < 5% > 5%, but < 10% > 10%, but < 25% 		Street
A. * What percentage of patients undergoing any one of the procedures in Section 3A have a documented complication (listed in question #3) within 30 days of discharge? < 5% > 5%, but < 10% > 10%, but < 25% 		Material Control
 Complication (listed in question #3) within 30 days of discharge? < 5% > 5%, but < 10% > 10%, but < 25% 		
 Complication (listed in question #3) within 30 days of discharge? < 5% > 5%, but < 10% > 10%, but < 25% 		
> 10%, but < 25%	4	corriplication (listed in question #3) within 30 days of discharge?
		> 5%, but < 10%
> 25%		> 10%, but < 25%
		> 25%
	······································	

 5. * In addition to documenting complications among those patients undergoing the procedures listed in Section 3A, which of the following does your facility document within 30 days of discharge: ER admission OR admission Other hospital admission Urgent care visit Other None of the above
6. * What percentage of patients undergoing any one of the procedures in Section 3A have a documented
admission or clinical visit (listed in question #5) within 30 days of discharge? < 5% > 5%, but < 10% > 10%, but < 25% > 25%
3D PATIENT SELECTION AND CONSENT TO TREAT
Patient Selection
 1. * Does your facility have a standard, written screening protocol to determine whether a patient's procedure can safely be performed at the facility? Yes
○ No
O to Which of the falls wing appropriate are included in your facility's standard written acrossing protocol:
2. * Which of the following components are included in your facility's standard, written screening protocol:History of difficult intubation
Difficult airway/aspiration risk
Body Mass Index (BMI)
American Society of Anesthesiologists (ASA) Physical Status Classification
Recent Medical History (within 30 days of scheduled procedure)
Cognitive Assessment
Sleep Apnea Assessment
Availability of transportation following discharge Availability of a caregiver following discharge

2021 ASC Survey

3.	* Who completes the standard, written screening protocol to determine whether a patient's procedure can safely be performed at the facility?
	✓ Anesthesiologist
	Certified Registered Nurse Anesthetist (CRNA)
j ·	Physician Physician
	Nurse (RN or MSN)
	Physician Assistant (PA)
1	Nurse Practitioner (NP)
	Other
4. 7	When patients are identified through your facility's screening protocol as high-risk, does an anesthesiologist, certified registered nurse anesthetist, or Medical Director complete an additional medical review to determine whether the patient's procedure can safely be performed at the facility? Yes
A Company of the Comp	○ No
Patient	Consent to Treat
5. *	To help ensure that patients and their families have adequate time to review and ask questions about written surgical consent materials, it's our facility's policy to provide these materials to patients: At least 3 days prior 1-3 days prior Same day
	O Not at all
6. *	To help ensure that patients and their families have adequate time to review and ask questions about written anesthesia consent materials, it's our facility's policy to provide these materials to patients:
	At least 3 days prior
	1-3 days prior
(Same day
(Not at all
	25
	3E
	SAFE SURGERY CHECKLIST
	What is the latest 3-month reporting period for which your facility is submitting responses to this section? 3-month reporting time period ending: 05/2021 (format: mm/yyyy
	отнастинуууу

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2. * Does your facility utilize a safe surgery checklist on <u>every</u> patient, <u>every</u> time one of the applicable procedures reported on in Section 3A is performed? Yes
○ No
3. * Before the induction of anesthesia, is a safe surgery checklist that includes all of the following elements read aloud in the presence of the anesthesia professional and nursing personnel:
 Patient ID Confirmation of procedure Patient consent Site marked, if applicable Anesthesia/medication check Pulse ox functioning Allergies assessed Difficult airway/aspiration risk Risk of blood loss, if applicable Availability of devices on-site, if applicable?
Yes No
4. * Who leads the checklist before the induction of anesthesia?
Anesthesiologist Certified Registered Nurse Anesthetist (CRNA)
Physician
Nurse (RN or MSN)
Physician Assistant (PA)
Nurse Practitioner (NP)
Surgical Technician
First Assist
5. * Before the skin incision and/or before the procedure begins, is a safe surgery checklist that includes all of the following elements read aloud in the presence of the whole surgical team:
 Clinical team introduction Confirmation of patient name, procedure, and, if applicable, surgical/incision site
 Antibiotic prophylaxis, if applicable Anticipated Critical Events (non-routine steps, length of procedure, blood loss, patient-specific concerns, sterility) Equipment check/concerns Essential imaging available, if applicable
Device representative in the OR, if applicable? Van
(Yes

Section 3 Affirmation

Affirmed By: Shannon Magro

Title: ANDOCHICK SURGICAL CENTER, DBA:PYSICIANS SURGERY CENTER OF F

Date: 08/13/2021

Section 4

PATIENT SAFETY PRACTICES

4A

MEDICATION SAFETY

1. *	12-month reporting time period used:
	01/01/2019 - 12/31/2019
	01/01/2020 - 12/31/2020
gaa. 3 taa 6 6 1 aw 1 1 w 1 1 1	07/01/2020 - 06/30/2021
2. *	Did your facility perform an audit of clinical records for all patients (or a sufficient sample of them) discharged for the reporting period selected and measure adherence to medication documentation guidelines regarding home medications, medications ordered during the visit, and medication allergies? Yes No
	Yes, but there were fewer than 30 patients discharged for the reporting period
3. *	Number of cases measured (either all cases or a sufficient sample of them). 103
4. *	Number of cases in question #3 with a list of all home medication(s) , including dose, route, and frequency, documented in the clinical record. 103
	Number of cases in question #3 with a list of all medication(s) prescribed or administered during the visit , including the strength, dose, route, date, and time of administration, documented in the clinical record. 103
	Number of cases in question #3 with a list of all medication allergies and adverse reaction(s) documented in the clinical record. 103
7. *	Do the responses in questions #3-6 represent a sample of cases? (a) Yes

Opioid Prescribing

	who are authorized to prescribe scheduled drugs are registered for access to your state or regional Prescription Drug Monitoring Program (PDMP)? (a) Yes
	○ No
	Not applicable
•	
	9. * Does your facility ensure, through tracking or as a requirement of privileging, that <u>all</u> licensed prescribe who are authorized to prescribe scheduled drugs, query and assess the PDMP prior to prescribing an opioid pain medication to a patient consistent with state medical board and/or PDMP requirements? Yes
	○ No
	Not applicable; state law prohibits facility access to PDMP
*******	10 * How does your facility track that all licensed and the
	10. * How does your facility track that <u>all</u> licensed prescribers, who are authorized to prescribe scheduled druggery and assess the state or regional PDMP prior to prescribing an opioid pain medication to a patient consistent with state medical board and/or PDMP requirements?
	EHR-generated report
	Request report from PDMP
	Not applicable; state law prohibits facility access to PDMP
	Not applicable; do not track
·····	Other:
1	* Does your facility retain copies of all discharge instructions, including medications prescribed at
	discharge, for all patients who underwent one or more of the procedures included in Section 3A? All patients (100%)
	Most patients (>=75%)
	Some patients (>=50%)
	Few patients (<50%)
	Discharge instructions are not retained for any patients
15	2 * Does your facility require that all liggrand and all liggrand
12	 2. * Does your facility require that <u>all</u> licensed prescribers, who are authorized to prescribe scheduled drugs, adhere to national, evidence-based <u>Surgical Opioid Guidelines</u> for new prescriptions at discharge? Yes
	O No
	Not applicable; do not perform any of the procedures included in the guidelines

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	which they adhere to the <u>Surgical Opioid Guidelines</u> ? () Yes
	No
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.,	
14.	Does your facility have a process in place for communicating with licensed prescribers, as well as leadership, when a licensed prescriber's trend or prescribing pattern suggests challenges to adhering to the <u>Surgical Opioid Guidelines</u> to understand barriers and improve adherence? Yes No
	4B NHSN OUTPATIENT PROCEDURE COMPONENT MODULE
1. *	What is the latest 6-month reporting period for which your facility is submitting responses to this section 6-month reporting time period ending: 06/2021 Format: mm/yyyy
a	
2. *	Does your facility participate in NHSN's Outpatient Procedure Component (OPC) Module? Yes No
3.*	Did your facility complete the 2020 Outpatient Procedure Component – Annual Facility Survey? Yes No

4. *	During the reporting period, did your facility participate in the Same Day Outcome Measures (SDOM) Module within NHSN? Yes No
·······	
5. *	For how many months during the reporting period did your facility report data to the Same Day Outcome Measures (SDOM) Module in NHSN? 6

	* During the reporting period, did your facility perform breast surgeries? O No
7. *	During the reporting period, did your facility report data to NHSN on the Breast Surgery (BRST) Procedu SSI Outcome Measure? Yes No
8.	Based on your previous answers, you do not need to answer this question.
9. *	During the reporting period, did your facility perform herniorrhaphy procedures? Yes No
10.	e a a a a a a a a a a a a a a a a a a a
11.	Based on your previous answers, you do not need to answer this question. Based on your previous answers, you do not need to answer this question. Based on your previous answers, you do not need to answer this question. During the reporting period, did your facility perform knee prosthesis procedures? Yes No
11. 12. *	Based on your previous answers, you do not need to answer this question. During the reporting period, did your facility perform knee prosthesis procedures? Yes

Infrastructure

4.	* Does your facility have a process in place to ensure that all of the following are done, as necessary, and quarterly audits are conducted on a sample of dispensers to ensure that the process is followed?
	 Refill paper towels, soap dispensers, and alcohol-based hand sanitizer dispensers when they are empty or near empty Replace batteries in automated paper towel dispensers, soap dispensers, and alcohol-based hand sanitizer dispensers (if automated dispensers are used in the facility)
	YesNo
5.	* Do all rooms and bed spaces in your surgical and treatment areas have
	 an alcohol-based hand sanitizer dispenser located at the entrance to the room or bed space; and alcohol-based hand sanitizer dispenser(s) located inside the room or bed space that are equally accessible to all patients?
	Yes No
6.*	Does your facility conduct audits of the volume of alcohol-based hand sanitizer that is delivered with eac activation of a wall-mounted dispenser (manual and automated) on a sample of dispensers in your patiencare units at all of the following times:
	 upon installation; whenever the brand of product or system changes; and whenever adjustments are made to the dispensers;
	OR
	Has your facility conducted an audit of the volume of alcohol-based hand sanitizer that is delivered with each activation of a wall-mounted dispenser (manual and automated) on a sample of your facility's existing dispensers if there have been no recent changes to any dispensers? Yes No
	Does not apply, wall-mounted dispensers are not used
7. *	Do all of the audited dispensers deliver, with one activation, a volume of alcohol-based hand sanitizer that
	covers the hands completely and requires 15 or more seconds for hands to dry (on average)? Yes
I	

 8. * Does your facility collect hand hygiene compliance data on at least 200 hand hygiene opportunities, or at least the number of hand hygiene opportunities outlined in Table 1, each month? Yes, using only an electronic compliance monitoring system throughout the facility 	
Yes, using an electronic compliance monitoring system throughout some areas and only direct observation in all other areas	
Yes, using only direct observation throughout the facility	
○ No	
9. Based on your previous answers, you do not need to answer this question.	***
4 5 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	9 4
10. * Does your facility use hand hygiene coaches or compliance observers to provide individuals who touch patients or who touch items that will be used by patients with feedback on both when they are and are not compliant with performing hand hygiene? Yes	
○ No	3
Direct Monitoring – Electronic Compliance Monitoring System: If "yes, using only an electronic compliance monitoring system throughout the facility" or "yes, using an electronic compliance monitoring system throughout some areas and only direct observation in all other areas" to question #8 or question #9, answer questions #11-12 based on the surgical or treatment areas that use an electronic compliance monitoring system.	***************************************
11 Based on your previous answers, you do not need to answer this question.	9

12. Based on your previous answers, you do not need to answer this question.

Direct Monitoring – Direct Observation: If "yes, using an electronic compliance monitoring system throughout some areas and only direct observation in all other areas" or "yes, using only direct observation throughout the facility" to question #8 or question #9, answer questions #13-14 based on the surgical or treatment areas that do NOT use an electronic compliance monitoring system.

the di	irect observations meet all of the following criteria?
	Observations identify both opportunities for hand hygiene and compliance with those opportunities of the observations determine who practiced hand hygiene, verify when they practiced it, and whether the technique was correct observations are conducted weekly or monthly across all shifts and on all days of the week proportional to the number of individuals who touch patients or who touch items that will be used patients on duty for that shift observations are conducted to capture a representative sample of the different roles of individual who touch patients or who touch items that will be used by patients (e.g., nurses, physicians, techenvironmental services workers)
Yes No	
	our facility have a system in place for both the initial and recurrent training and validation of hand be compliance observers?
) 110	
dback	
dback 15. * Are ha	nd hygiene compliance data fed back to <u>individuals who touch patients or who touch items that w</u> d by patients at least monthly for improvement work?
dback 15. * Are habe use Yes	
dback 15. * Are had be use Yes No 16. * Are hare	
dback 15. * Are ha. be use yes No	d by patients at least monthly for improvement work?
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dback 15. * Are han be use Yes No 16. * Are har Yes No 17. * Is regul trends of	d by patients at least monthly for improvement work? Ind hygiene compliance data used for creating action plans? Iar (at least every 6 months) feedback of hand hygiene compliance data, with demonstration of over time, given to: SC leadership; and

 18. * If "yes" to question #17, is ASC leadership held directly accountable for hand hygiene performance throuperformance reviews or compensation? Yes No No 19. * Are patients and visitors invited to remind individuals who touch patients or who touch items that will be used by patients to perform hand hygiene? Yes No 20. * Has ASC leadership demonstrated a commitment to support hand hygiene improvement in the last year (e.g., a written or verbal commitment delivered to those individuals who touch patients or who touch item that will be used by patients)? Yes No No ditional Questions (Fact Finding Only) 21. * Do all rooms and bed spaces in your surgical and treatment areas have a sink for hand washing within 2 feet of the patient's bed that is easily accessible to individuals who touch patients or who touch items the will be used by patients? 		
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Yes		
O No		
4D		
NATIONAL QUALITY FORUM (NQF) SAFE PRACTICES		

NQF Safe Practice #1 - Culture of Safety Leadership Structures and Systems

	Within the last 24 months, in regard to raising the awareness of key stakeholders to our facility's efforts to improve patient safety, the following actions related to the identification and mitigation of risks and hazards have been taken:
(a. governance meeting minutes reflect regular communication regarding all three of the following:
	 risks and hazards (as defined by Safe Practice 4, Identification and Mitigation of Risks and Hazards);
	 culture measurement (as defined by Safe Practice #2, Culture Measurement, Feedback, and Intervention); and,
	 progress towards resolution of safety and quality problems. (p. 75)
9	b. steps have been taken to report ongoing efforts to improve safety and quality in the facility and the results of these efforts to the community. (p.75)
(c. all staff and independent practitioners were made aware of ongoing efforts to reduce risks and hazards and to improve patie safety and quality in the facility. (p.75)

	 Within the last 24 months, in regard to holding governance and leadership directly accountable for results related to identifying and reducing unsafe practices, the facility has done the following:
	 a. an integrated patient safety program has been in place for the entire reporting period providing oversight and alignment of saf practice activities. (p.76)
	b. a Risk Manager or Quality Coordinator has been appointed and communicates regularly with governance and leadership; the Risk Manager or Quality Coordinator is the primary point of contact of the integrated patient safety program. (p.76)
	c. performance has been documented in performance reviews and/or compensation incentives for leadership and ASC-employed caregivers. (p.76)
	 d. the patient safety team, Risk Manager, or Quality Coordinator communicated regularly with leadership regarding both of the following and documented these communications in meeting minutes (pp. 76-77). progress in meeting safety goals; and provide team training to caregivers.
	e. the facility reported adverse events to external mandatory or voluntary programs. (p.77)
1.3	Within the last 24 months, in regard to implementation of the patient safety program, governance and
	leadership have provided resources to cover the implementation, as evidenced by: a. dedicated patient safety program budgets to support the program, staffing, and technology investment. (p.77)
	taking direct action, as evidenced by:
	 a. leadership is personally engaged in reinforcing patient safety improvements (e.g., holding patient safety meetings and reporting to governance). Calendars reflect allocated time. (p.78) b. facility has established a structure for input into the patient safety program by licensed independent practitioners and the organized medical staff and physician leadership. Input documented in meeting minutes or materials. (p.79)
NATIONAL CONTINUES AND AND AND AND AND AND AND AND AND AND	 a. leadership is personally engaged in reinforcing patient safety improvements (e.g., holding patient safety meetings and reporting to governance). Calendars reflect allocated time. (p.78) b. facility has established a structure for input into the patient safety program by licensed independent practitioners and the
1.5.	 a. leadership is personally engaged in reinforcing patient safety improvements (e.g., holding patient safety meetings and reporting to governance). Calendars reflect allocated time. (p.78) b. facility has established a structure for input into the patient safety program by licensed independent practitioners and the
······································	 a leadership is personally engaged in reinforcing patient safety improvements (e.g., holding patient safety meetings and reporting to governance). Calendars reflect allocated time. (p.78) b. facility has established a structure for input into the patient safety program by licensed independent practitioners and the organized medical staff and physician leadership. Input documented in meeting minutes or materials. (p.79) *Review of this Safe Practice is complete.
F Saf	 a. leadership is personally engaged in reinforcing patient safety improvements (e.g., holding patient safety meetings and reporting to governance). Calendars reflect allocated time. (p.78) b. facility has established a structure for input into the patient safety program by licensed independent practitioners and the organized medical staff and physician leadership. Input documented in meeting minutes or materials. (p.79) *Review of this Safe Practice is complete. Practice #2 - Culture Measurement, Feedback, and Intervention *Does your facility currently have 20 or more employees?
F Saf	 a. leadership is personally engaged in reinforcing patient safety improvements (e.g., holding patient safety meetings and reporting to governance). Calendars reflect allocated time. (p.78) b. facility has established a structure for input into the patient safety program by licensed independent practitioners and the organized medical staff and physician leadership. Input documented in meeting minutes or materials. (p.79) *Review of this Safe Practice is complete. Practice #2 - Culture Measurement, Feedback, and Intervention

	2.2. Within the last 36 months, in regard to culture measurement, our facility has done the following: a. Administered one of the following culture of safety surveys to employees:				
	a. Administered one of the following culture of safety surveys to employees. AHRQ Survey on Patient Safety (SOPS),				
	• Glint Patient Safety Pulse, or				
	Press Ganey Safety Culture Survey				
	b. benchmarked results of the culture of safety survey against external organizations, such as "like" ASCs or other comparable facilities within the same health system.				
	c. Risk Manager, Quality Coordinator, or leadership used the results of the culture of safety survey to debrief staff using semi-structured approaches for the debriefings and presenting results in aggregate form to ensure the anonymity of survey respondents.				
9 9 9 8 5					
2.3.	Based on your previous answers, you do not need to answer this question.				
9 9 4 9 9					
2.4.	Based on your previous answers, you do not need to answer this question.				
3 3 4 3 3					
* * * * *					
2.5. * * * *	2.5. Based on your previous answers, you do not need to answer this question.				
2.6.	*Review of this Safe Practice is complete. ☑				
dition	al Question (Fact Finding Only)				
2.7.	Based on your previous answers, you do not need to answer this question.				

	4E				
	NEVER EVENTS POLICY				
	We <u>apologize to the patient</u> and/or family affected by the <u>never event</u> .				
1.*	We applied to the patient and/or faithly affected by the never event.				
1.*	Yes				
1.*					

2. * We report the event to at least one of the following <u>external agencies</u> within 15 business days of become aware that the <u>never event</u> has occurred:
 State reporting program for medical errors Patient Safety Organization (as defined in The Patient Safety and Quality Improvement Act of 2005 Accreditation Organizations (i.e., TJC, AAAHC, AAAASF, HFAP, etc.)
Yes No
2 * Wo perform a rest square and six distribution
 3. * We perform a <u>root cause analysis</u>, which at a minimum, includes the elements required by the chosen external reporting agency. Yes No
 4. * We waive all costs directly related to the <u>never event</u>. Yes No
5 * We make a copy of this policy available to action to the second of this policy available to action to the second of this policy available to action to the second of this policy available to action to the second of this policy available to action to the second of this policy available to action to the second of this policy available to action to the second of this policy available to action to the second of this policy available to action to the second of this policy available to action to the second of this policy available to action to the second of this policy available to action to the second of this policy available to action to the second of this policy available to the second of this policy available to the second of this policy available to the second of this policy available to the second of the second of this policy available to the second of th
 5. * We make a copy of this policy available to patients, patients' family members, and payers upon request. No
6 * Wo interview notice to and the feet the
 6. * We interview patients and/or families who are willing and able, to gather evidence for the root cause analysis. Yes No
7. * We inform the patient and/or the patient's family of the action(s) that our facility will take to prevent future recurrences of similar events based on the findings from the root cause analysis. No
 8. * We have a protocol in place to provide support for caregivers involved in never events and make that protocol known to all caregivers and affiliated clinicians. Yes No

	We perform an annual review to ensure compliance with each element of Leapfrog's Never Events Polic for each <u>never event</u> that occurred. (Yes
	No
	4F
	NURSING WORKFORCE
ortio	on of Nurses that are BSN-Prepared
1. *	Total number of employed RN nursing staff at the ASC with direct patient care responsibilities 19
	Total number of employed RN nursing staff at the ASC with direct patient care responsibilities who have BSN degree or higher (e.g., MSN, DNP, or PhD). 8
	Section 4 Affirmation
Affirm	ed By: Shannon Magro Title: ANDOCHICK SURGICAL Date: 08/13/2021 CENTER, DBA:PYSICIANS SURGERY CENTER OF F
	Section 5
	PATIENT EXPERIENCE (OAS CAHPS)
	What is the latest 12-month reporting period for which your facility is submitting responses to this section? 12-month reporting time period ending:
i	Format: mm/yyyy
	Did your facility have at least 300 <u>eligible discharges</u> during the 12-month period referenced above? Did your facility have at least 300 <u>eligible discharges</u> during the 12-month period referenced above?
(No No

 Has your facility administered, or started to administer, the entire OAS CAHPS Survey during the reporting period? Yes
● No
4. Based on your previous answers, you do not need to answer this question.
5. Based on your previous answers, you do not need to answer this question.
In questions #6-9, report your facility's Top Box Score (rounded to the nearest whole number) from each of the following patient experience domains from your 12-month vendor report that matches the reporting period selected in question #1.
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3
7. Based on your previous answers, you do not need to answer this question.
Based on your previous answers, you do not need to answer this question.

Based on your previous answers, you do not need to answer this question.
In questions #10-12, report your facility's Top Box Score (rounded to the nearest whole number) from each of the following patient experience questions from your 12-month vendor report that matches the reporting period selected in question #1.
10. Based on your previous answers, you do not need to answer this question.
11. Based on your previous answers, you do not need to answer this question.
12. Based on your previous answers, you do not need to answer this question.
Section 5 Affirmation
Affirmed By: Shannon Magro Title: ANDOCHICK SURGICAL Date: 07/31/2021 CENTER, DBA:PYSICIANS SURGERY CENTER OF F



Shannon.Magro physicianssurgerycenter.net				
From: Sent: To: Subject:	Mariama Gondo1 -MDH- <mariama.gondo1@maryland.gov> Monday, May 24, 2021 11:46 AM Shannon.Magro physicianssurgerycenter.net Re: Maryland Quality Reporting and Freestanding Ambulatory Surgical Facility (FASF) Survey</mariama.gondo1@maryland.gov>			
Hi Shannon,				
You are correct and I app will not be a 2020 survey and be well.	reciate taking the initiative to ensure not miss any of the reporting deadlines. There in total because of the pandemic. I will be in touch about future surveys. Take care			
On Fri, May 21, 2021 at 4 <shannon.magro@physici< th=""><th>1:36 PM Shannon.Magro physicianssurgerycenter.net ianssurgerycenter.net> wrote:</th></shannon.magro@physici<>	1:36 PM Shannon.Magro physicianssurgerycenter.net ianssurgerycenter.net> wrote:			
Thank you for confirming. I saw the statement in the letter, but was not sure if it would be permanent or updated as COVID wanes. Thank you for the clarification. I did not want to miss reporting for 2020 if anything had changed as the nationwide situation improves. Can't wait until it is over!				
I will wait to hear from you regarding this matter in 2022.				
Sincerely,				
Shannon Magro				
From: Mariama Gondo1 -MDH- < <u>mariama.gondo1@maryland.gov</u> > Sent: Friday, May 21, 2021 4:32 PM To: Shannon.Magro <u>physicianssurgerycenter.net</u> < <u>shannon.magro@physicianssurgerycenter.net</u> > Subject: Re: Maryland Quality Reporting and Freestanding Ambulatory Surgical Facility (FASF) Survey				
Good afternoon Shannon,				

I was saying in my initial email that I will not be collecting data for the 2020 reporting year due to the COVID-19 pandemic. I will be in touch in the spring of 2022 to start discussing the reporting of the 2021 calendar year. My goal is to start requesting data in August of each year so that the survey closes in September of that year.

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		(
		(

My state regulations require me to allow 45 days to collect the data once administrators have their password. I hope this information helps, but please let me know if you have any additional questions.

On Fri, May 21, 2021 at 3:12 PM Shannon. Magro physicianssurgerycenter.net	
<shannon.magro@physicianssurgerycenter.net> wrote:</shannon.magro@physicianssurgerycenter.net>	

Heilo,

When can we start submitting 2020 data? Also, when is the 2020 data completion due date?

Thank you,

Shannon Magro

From: Mariama Gondo1 -MDH- <mariama.gondo1@maryland.gov>

Sent: Monday, April 26, 2021 12:34 PM

Cc: Theressa Lee -MDH- < theressa.lee@maryland.gov

Subject: Maryland Quality Reporting and Freestanding Ambulatory Surgical Facility (FASF) Survey

Good afternoon,

I hope you and your family are doing well as possible during this pandemic. Please find the attached letter announcing the Commission's launching of the redesigned consumer website, along with information about the 2020 reporting year of the FASF survey. Please let me know if you have any questions. For your convenience, the letter is also embedded in the email below to minimize potential issues with downloading the attachment (hyperlinks do not work in the image below, but are accessible in the letter).

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			Ċ

STATE OF MARYLAND

Ben Steffen Executive disector



MARYLAND HEALTH CARE COMMISSION

4160 PATTERSON AVENUE - BALTIMORE, MARYLAND 21215 TELEPHONE: 410-764-3460 FAX: 410-358-1236

Background

The Maryland Health Care Commission (MHCC) recently launched the new and improved <u>Maryland Outlity Reporting</u> consumer website. For the first time, the site provides access to health care quality information for nursing homes, hospitals, commercial health plans, outpatient surgery centers and many other health care settings in one, convenient location. The Quality Reporting website redesign effort incorporates input from consumer focus groups and industry experts. The updated website displays data from trusted state and national sources, including the Centers for Medicare & Medicaid Services, Centers for Disease Prevention and Control, and data from inhouse surveys administered by the MHCC.

What's New

For the first time, the redesigned website showcases select data elements collected from the Freestanding Ambulatory Surgical Facility (FASF) Survey that you complete annually. This easy-to-use website allows consumers to compare up to five facilities at a time. Other new features include:

- Urgent Care Directory The website includes a comprehensive listing of usgent care facilities across the state.
- Translate Feature-The website is translatable to over 100 languages.
- Health Disparities- A section of the website dedicated to providing consumers with more knowledge, resources, and a platform to synthesize health disparities initiatives within the state.
 - Fact Sheets, Checklists, and Guides- The site offers additional resources to inform consumers about hot topics in health care and take deeper dives into topics of interest to you.

I encourage you to view your facility on the website and to contact me (marianta.gondol@maryland.gov) if you have any feedback. The website displays data from the 2018 FASF Survey reporting year but will be updated with the 2019 survey results in the coming months.

Quality Reporting Consumer Website: www.healthcarequality.mhcc.maryland.gov

Freestanding Ambulatory Surgical Facility Survey - 2020 Reporting Year

Due to the COVID-19 pandemic and the moratorium the federal government placed on elective surgical procedures in March 2020; freestanding ambulatory surgical facilities will not be required to complete the FASF survey for the 2020 reporting year. Should additional information be required, I will reach out to you.

Respectfully,

Mariama H. Gondo, MPH
Chief, Outpatient Quality Reporting Initiatives
Maryland Health Care Commission
4160 Patterson Avenue
Bultimore, MD 21215
gnariama gondo liftmaryland.gov

TOLL FREE 1-877-245-1762 TDD FOR DISABLED MARYLAND RELAY SERVICE 1-800-735-2258

		(
		(
		· (

Shannon. Magro physicians surgery center. net

From:

Mariama Gondo1 -MDH- <mariama.gondo1@maryland.gov>

Sent: To:

Monday, May 24, 2021 11:46 AM

Subject:

Shannon.Magro physicianssurgerycenter.net

Re: Maryland Quality Reporting and Freestanding Ambulatory Surgical Facility (FASF) Survey

Hi Shannon,

You are correct and I appreciate taking the initiative to ensure not miss any of the reporting deadlines. There will not be a 2020 survey in total because of the pandemic. I will be in touch about future surveys. Take care

On Fri, May 21, 2021 at 4:36 PM Shannon.Magro physicianssurgerycenter.net <shannon.magro@physicianssurgerycenter.net> wrote:

Thank you for confirming. I saw the statement in the letter, but was not sure if it would be permanent or updated as COVID wanes. Thank you for the clarification. I did not want to miss reporting for 2020 if anything had changed as the

I will wait to hear from you regarding this matter in 2022.

Sincerely.

Shannon Magro

From: Mariama Gondo1 -MDH- < mariama.gondo1@maryland.gov >

Sent: Friday, May 21, 2021 4:32 PM

To: Shannon.Magro <u>physicianssurgerycenter.net</u> < <u>shannon.magro@physicianssurgerycenter.net</u> > Subject: Re: Maryland Quality Reporting and Freestanding Ambulatory Surgical Facility (FASF) Survey

Good afternoon Shannon,

I was saying in my initial email that I will not be collecting data for the 2020 reporting year due to the COVID-19 pandemic. I will be in touch in the spring of 2022 to start discussing the reporting of the 2021 calendar year. My goal is to start requesting data in August of each year so that the survey closes in September of that year.



My state regulations require me to allow 45 days to collect the data once administrators have their password. I hope this information helps, but please let me know if you have any additional questions.

On Fri, May 21, 2021 at 3:12 PM Shannon.Magro <u>physicianssurgerycenter.nets</u> wrote:
--

Hello,

When can we start submitting 2020 data? Also, when is the 2020 data completion due date?

Thank you,

Shannon Magro

From: Mariama Gondo1 -MDH- < mariama.gondo1@maryland.gov>

Sent: Monday, April 26, 2021 12:34 PM

Cc: Theressa Lee -MDH- < theressa.lee@maryland.gov>

Subject: Maryland Quality Reporting and Freestanding Ambulatory Surgical Facility (FASF) Survey

Good afternoon,

I hope you and your family are doing well as possible during this pandemic. Please find the attached letter announcing the Commission's launching of the redesigned consumer website, along with information about the 2020 reporting year of the FASF survey. Please let me know if you have any questions. For your convenience, the letter is also embedded in the email below to minimize potential issues with downloading the attachment (hyperlinks do not work in the image below, but are accessible in the letter).



Andrew N. Pollak, MD CHARMAN STATE OF MARYLAND

Ben Stetten Executive Director



MARYLAND HEALTH CARE COMMISSION

4160 PATTERSON AVENUE – BALTIMORE, MARYLAND 21215 TELEPHONE: 410-764-3450 FAX: 410-358-1236

Background

The Maryland Health Care Commission (MHCC) recently launched the new and improved <u>Maryland Quality Reporting</u> consumer website. For the first time, the site provides access to health care quality information for nursing homes, hospitals, commercial health plans, outpatient surgery centers and many other health care settings in one, convenient location. The Quality Reporting website redesign effort incorporates input from consumer focus groups and industry experts. The updated website displays data from trusted state and national sources, including the Centers for Medicare & Medicaid Services, Centers for Disease Prevention and Control, and data from inhouse surveys administered by the MHCC.

What's New

For the first time, the redesigned website showcases select data elements collected from the Freestanding Ambulatory Surgical Facility (FASF) Survey that you complete annually. This easy-to-use website allows consumers to compare up to five facilities at a time. Other new features include:

- Urgent Care Directory The website includes a comprehensive listing of urgent care facilities across the state.
- Translate Feature- The website is translatable to over 100 languages.
- Health Disparities- A section of the website dedicated to providing consumers with more knowledge, resources, and a platform to synthesize health disparities initiatives within the state.
- Fact Sheets, Checklists, and Guides-The site offers additional resources to inform consumers about hot topics in health care and take deeper dives into topics of interest to you.

I encourage you to view your facility on the website and to contact me (<u>mariama gondol@maryland.gov</u>) if you have any feedback. The website displays data from the 2018 FASF Survey reporting year but will be updated with the 2019 survey results in the coming months.

Quality Reporting Consumer Website: www.healthcarequality.mhcc.maryland.gov

Freestanding Ambulatory Surgical Facility Survey - 2020 Reporting Year

Due to the COVID-19 pandemic and the moratorium the federal government placed on elective surgical procedures in March 2020; freestanding ambulatory surgical facilities will not be required to complete the FASF survey for the 1020 reporting year. Should additional information be required, I will reach out to you.

Respectfully,

Mariama H. Gondo, MPH
Chief, Outpatient Quality Reporting Initiatives
Maryland Health Care Commission
4160 Patterson Avenue
Baltimore, MD 21215
mariama_condo1@maryland.gov

TOLL FREE 1-877-245-1762

TDD FOR DISABLED MARYLAND RELAY SERVICE 1-800-735-2258



Respectfully,

Mariama Gondo, MPH

Chief - Outpatient Quality Initiative

Center for Quality Measurement & Reporting

Maryland Health Care Commission

mariama.gondo1@maryland.gov

(410) 764-3377

FAX: 410-358-1236

4160 Patterson Ave.

Baltimore, MD 21215

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Respe	ectfully,
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Mariama Gondo, MPH

Chief - Outpatient Quality Initiative

Center for Quality Measurement & Reporting

Maryland Health Care Commission

mariama.gondol@maryland.gov

(410) 764-3377-

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Respectfully,

Mariama Gondo, MPH
Chief - Outpatient Quality Initiative
Center for Quality Measurement & Reporting
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MARYLAND HEALTH CARE COMMISSION

4160 Patterson Avenue Baltimore, Maryland 21215 Telephone: (410)-764-3583 FAX: (410)-358-1311

2019 MARYLAND FREESTANDING AMBULATORY SURGICAL FACILITY SURVEY

The 2019 Maryland Freestanding Ambulatory Surgical Facility Survey is conducted by the Maryland Health Care Commission under the authority of COMAR 10.24.04. which requires that all freestanding ambulatory surgical facilities that were licensed and operated report data necessary to support planning and policy development to the Commission.

FACILITY CONTACT INFORMATION The Facility Contact Information page is designed to collect the most up-to-date contact and demographic information about your Facility ID: 10A1340 Facility Name: Physicians Surgery Center of Frederick Address: 81 Thomas Johnson Court Suite/Room Number: Suite B City: Frederick State: MD Zipcode: 21702 CONTACT INFORMATION Did your facility change its name? OYes ●No If Yes, Please indicate your facility's current name. Indicate the business name (d/b/a) if different than the legal ANDOCHICK SURGICAL CENTER, DBA: PYSICIANS SURGERY Facility Telephone #: 2402153070 Facility Fax #: 2402153071 Facility Website: ☐ No Website Available www.physicianssurgctr.com **Facility Contact Person** Person responsible for answering questions about the information on the survey Contact First Name: Shannon Contact Last Name: Magro Contact Title: Administrator NOTE: All official correspondence related to the survey will be sent to this email address shannon.magro@physicianssurgerycenter.net PART 1: FACILITY CERTIFICATION, OWNERSHIP AND OPERATIONAL STATUS 1. Report your CMS Certification Number (CCN) as of December 31, 2019 2. Report your organization's Nation's Provider Identity (NPI) as of December 31, 2019 21C000 1340 J. Report your Center's legal structure as of December 31st, 2019 1710952841 3a If Other, please specify Limited Liability Company V 3b. Report the month and year your facility first opened 12593679F(2548)44534 4. Report whether any of the following entities have direct or indirect ownership interest, greater than or equal to 5%, in this

https://mhcc.maryland.gov/surveys/amsurg_surv_2019/PrintSurvey?facid=10A1340

/2021	reestanding Ambulatory Surgery Survey - Print ity and the percentage of ownership. You	Survey Report can enter as many owners as
required to provide complete information.	,ad by	that entity if it is 5% or more
NOTE: If you check yes, enter the name of	the entity and the percentage owned by	OYes No
Hospital		○Yes No
Hospital/Health Care System		
		○Yes No
Insurance Company		○Yes No
Corporate Chain		● Yes ○No
Physicians ID	lender year 2019 argery Center during calendar year 2019 elow, you will be redirected to the cert	 ○ Yes No ○ Yes No ③ Yes No and submit ○ Yes No (mm/dd/yyyy)
PART 2: SERVICES AND STAFFING	the cater in calendar year 2019.	
Report if this facility was a single or multip	le specialty center in caronata your	
 Single Specialty Multi-Specialty Report the specialties of the physicians or compared to the special		ures at this facility during calendar year estion, only mark one specialty.
Select All that apply:		Podiatry
☐ Cardiology	Oral Surgery	Spine
Dermatology	Orthonaedic Surgery	Total Joint Replacement
☐ Gastroenterology/Colon/Rectal Surger	(excluding Total Joint Replacement)] Urology
☑ General Surgery	Otolaryngology	Vascular Surgery
☐ Interventional Radiology	Pain Management	Other (Specify)
Obstetrics / Gynecology / Infertility	Plastic / Cosmenc Burgory	• -
7a. If other was selected, please specify: Occ	culoplastic	edures at this facility, during calendar year
 7a. If other was selected, please specify: Occ 8. Report the hospitals at which one or more 2019, maintained staff privileges. Adventist HealthCare Shady Grove 	Adventist Healthcare White Oal	Anne Arundel Medical Center
Medical Center	Medical Center	CalvertHealth Medical Center
Atlantic General Hospital	☐ Grace Medical Center ☐ Doctors' Community Hospital	☐ Edward W. McCready Memorial Hospital

Carroll Hospital Center

	1/29/2021 Maryl	land Freestanding A	
		land Freestanding Ambulatory Surgery Survey - Pri	int Survey Report
	Medical Center Greater Baltimore Medical Center Inc	round Hospital	☐ Garrett County Memorial Hospital
,		Holy Cross Germantown Hospital	☐ Holy Cross Hospital
(☐ Howard County General Hospital	☐ Johns Hopkins Bayview Medical Center	☐ MedStar Franklin Square Hospital Center
	☐ MedStar Good Samaritan Hospital ☐ MedStar Southern Maryland Hospital	☐ MedStar Harbor Hospital	☐ MedStar Montgomery Medical Center
	Center Mercy Medical Center	☐ MedStar St. Mary's Hospital	☐ MedStar Union Memorial Hospital
	Peninsula Regional Medical Center	Meritus Medical Center	Northwest Hospital Center
	Suburban Hospital Inc	☐ Sinai Hospital	St. Agnes Hospital
	UM Baltimore Washington Medical	The Johns Hopkins Hospital	Union Hospital of Cecil County
	Center Washington Medical	UM Charles Regional Medical Center	There are a second county
	UM Laurel Regional Hospital	University of Maryland Medical	
	UM Rehabilitation and Orthopaedia	Center	☐UM Medical Center Midtown Campus
	Institute UM Shore Medical Center at Dorchester	UM Prince George's Hospital Center	UM Shore Medical Center at Chestertown
	UM Upper Chesapeake Medical Center	UM Shore Medical Center at Easton	UM St. Joseph Medical Center
	Please report the number of operating and produced the fields have been said to the fields have been sa	cedure rooms at this address I	
	These fields have been prefilled using data pre NOTE: You must certify that the number of enable the room information button. Operating and Procedure Room Definitions: Operating Room means a sterile room used for Procedure Room means a non-sterile room used laser procedures. May include treatment rooms Development of additional operating rooms a you do not have specific written approval for immediately. If you would like more informat Health Care Commission at (410)-764-3276.	r surgical and other types of procedures. ed to perform various types of procedures, if they are located in surgery area and used	ncluding endoscopy, cystoscopy or for surgical cases.
	Operating Rooms		
	Number of Rooms as of December 31,2019	2	eranie v
: :]	Procedure Rooms Number of Rooms as of December 31, 2019	1	
10. a	☐ Check here if you changed either option above to you certify that the number of operating and p ddress, as of December 31, 2019? ② Yes ○ No	e procedure rooms, as reported above, are con	rect by type of room, for this
P pr th	lease complete a descriptive form for each operate filled for facilities that have previously comple is section.	ting room and procedure room at your facil ted this section. Facilities that opened in 20	ity. Room Information is 19 are required to complete
Pz	ART 2: QUESTION 10 CONTINUED - ROOM	M INFORMATION	

Please complete this descriptive form for Room Number 1

1/29/2021

1. Room Location	
Inside restricted/sterile area	
Outside restricted/sterile area	
○ No restricted/sterile area available	
2. Room Size	
Please enter the room's size, in gross square feet. The gross square footage can be calculated by multiplying the length of the room by its width.	
Gross Square Feet: 400	
3. Special air handling system built in:	
● Yes ○ No	
4. Piped gasses built in:	
● Yes ○ No	
5. Portable gasses available:	
● Yes ○ No	
6. Most common use (select the one most appropriate response):	(
• Major surgical procedures that require general or regional block anesthesia and support of vital bodily fluids. • Major surgical procedures that require general or regional block anesthesia and support of vital bodily fluids.	r
O Major and minor surgical procedures, usually using orar, parenteral of made and minor surgical procedures, usually using orar, parenteral of made and minor surgical procedures, usually using orar, parenteral of made and minor surgical procedures, usually using orar, parenteral of made and minor surgical procedures, usually using orar, parenteral or made and minor surgical procedures, usually using orar, parenteral or made and minor surgical procedures, usually using orar, parenteral or made and minor surgical procedures, usually using orar, parenteral or made and minor surgical procedures, usually using orar, parenteral or made and minor surgical procedures.	į.
O Minor surgical procedures for which a facility fee may be charged, performed under topical,	
O Minor procedures which would not be eligible for a facility fee.	
Other	
If Other, please explain:	
7. The procedures performed in this room are eligible for a facility fee (check one):	
○ Never	
○ Seldom	
○Usually	
○ Almost Always	
● Always	,,

Please comp

- , 1. Room Location
 - Inside restricted/sterile area
 - Outside restricted/sterile area

Maryland Freestanding Ambulatory Surg	PRV Suprov. Trains o
ONo restricted/sterile area available	Gry Survey - Print Survey Report
2. Room Size	
Please enter the room's size, in gross square feet. The gross square of the room by its width.	footage can be calculated by multiplying the least
Gross Square Feet: 315	y
3. Special air handling system built in:	
● Yes ○ No	
4. Piped gasses built in:	
● Yes ○No	 .
5. Portable gasses available:	
● Yes ○ No	
6. Most common use (select the one most appropriate response):	
Major surgical procedures that require general or regional block an Major and minor surgical procedure.	esthesia and support of vital bodily fluids
dissociative unigs.	Of intravenous sedation or under a decident
O Minor surgical procedures for which a facility fee may be charged, anesthesia without preoperative sedation.	performed under tonical local or racional
Of Minor procedures which would not be eligible for a facility fee.	septem, total of regional
Other	
If Other, please explain:	
7. The procedures performed in this room are eligible for a facility fee (check one):	
O Never	to the contract of the contrac
OSeldom	
O Usually	
O Almost Always	
Always	
ease complete this descriptive form for Room Number 3	and the second s
1. Room Location	
O Inside restricted/sterile area	
Outside restricted/sterile area	
O No restricted/sterile area available	
2. Room Size	
·-	

021	Maryland Freestanding Ambdiatory ourger, be calculated by multiplying the length
.021	Maryland Freestanding Ambdiatory outger, the calculated by multiplying the length Please enter the room's size, in gross square feet. The gross square footage can be calculated by multiplying the length
	of the room by its width.
	Gross Square Feet: 216
	Gross Square reet. 210
	3. Special air handling system built in:
	-
	● Yes ○ No
	4. Piped gasses built in:
	● Yes ○No
	© 165 C 1.0
	5. Portable gasses available:
	6. Most common use (select the one most appropriate response):
	6. Most common use (select the selection of the selection
	O Major surgical procedures that require general or regional block anesthesia and support of vital bodily fluids.
	 Major surgical procedures that require general or regional block and anothers. Major and minor surgical procedures, usually using oral, parenteral or intravenous sedation, or under analysesic or
	dissociative drugs.
	dissociative drugs. O Minor surgical procedures for which a facility fee may be charged, performed under topical, local or regional
	anesthesia without preoperative sedation. O Minor procedures which would not be eligible for a facility fee.
	○ Other
	If Other, please explain:
	7. The procedures performed in this room are eligible for a facility fee (check one):
	O Never
	○ Seldom ○ Usually
	Osuany O Almost Always
PAR	T 3: UTILIZATION
	Contact Include any cases for which a
,4,1	For calendar year 2019, please enter the total number of cases performed in your Center. Include any cases for which a facility fee is billable. A "case" is defined as one discrete visit by a patient who undergoes one or more procedures facility fee.
	facility foe is hillanic. A "case is defined as
11.	identified by CPT-4/G procedure codes.
	Total Cases in 2019: 2486
	In the chart below, please enter the total number of cases (provided in Question 17)
11a	procedure rooms), and the corresponding harms
	Operating Rooms
	Total Cases 2471 Hours of Use: 2055
	Procedure Rooms Total Cases 15 Hours of Use: 15
	Total Cases 15 Hours of Use: 15

Operating room hours and procedure room hours are calculated by determining the difference between starting time and ending time, defined as follows:

Start time is the beginning when anesthesia is administered in the operating room, or the beginning of surgery if anesthesia is not administered, or if anesthesia is administered in a location other than the operating room.

End time is the end of anesthesia administration or the end of surgery if anesthesia is not administered. Do not include set up or

11b. Please provide the number of cases (as reported above) by specialty.

G 11:	Orted above) b
Cardiology:	orted above) D
Dermatology:	
Gastroenterology/Colon and Rectal Surger	
General Surgery:	
Interventional Radiology:	60
Obstetrics/Gynecology/Infertility:	0
Ophthalmology:	0
Oral Surgery:	746
Orthopaedic Surgery (excluding Total Joint Replacement):	1342
Otolaryngology:	
Pain Management:	0
Plastic/Cosmetic Surgery:	0
Podiatry:	315
Spine:	0
Total Joint Replacement:	0
Urology:	19
Vascular Surgery:	0
Other:	0
Total Specialty Cases:	4
Please provide the 20 mars a	2486

Please provide the 30 most frequently occurring principal CPT-4/G codes for cases performed in 2019, and the number of

	D	CPT Code (Do not inclu	Patient Cases
1	66984	606	Cases
2	29848	388	
3_	29881	107	-
4	29827	88	
5_	26055	73	**************************************
6	20680	50	
7	29880	42	
8	66982	40	<u> </u>
9	26160	40	
10	19380	35	
1	25111	32	
2	65756	30	
3	64718	27	
4	64718	27	
5	25447	25	
6	19318	24	
7	64721	23	· · · · · · · · · · · · · · · · · · ·
3	65426	22	
)	24342	19	
)	26123	17	
	1	/evs/amsura_sup_ 2040/D	

	, viai yiaii = 1
26540	17
26952	16
26952	16
	15
	15
29888	15
	15
13121	15
29806	14
13132	14
	14
	13
	13
26418	13
	26952 29888 29888 29888 13160 13121 29806 13132 13151 29877 25000

13. Provide the cases by ZIP code during calendar year 2019.

The sum of the cases for each ZIP code area should equal the total number of cases reported in Question 11.

Enter the Maryland ZIP codes for patients treated for calendar year 2019. For out of state patients, use the following codes to reflect their state of residence:

District of Columbia (D.C.) = 00002 Delaware = 00003 Pennsylvania = 00004 Virginia = 00005 West Virginia = 00006 Unknown = 99999

D	Patient Residence Zip code	Patient Cases
112		1
155		1
170		3
172		2
172		2
172		1
7 172		1
	225	7
- I	236	1
	257	1
^ L	268	22
	268	1
~	304	1
	320	17
	325	3
	7331	2
	7340	2
I	7340	2
l	3969	1
	9968	1
I I	0134	1
	1762	3
	0180	8
	0646	1
,	0735	1
	0778	1

1	/29	120	121

1	Maryland Freestanding Ambu
27 20783	
28 20817	5
29 20817	5
30 21701	315
31 21702	317
32 21703	205
33 21704	85
34 21740	99
35 21742	89
36 21769	85
37 21771	174
38 21788	99
39 21793	100
40 21710	33
41 21713	27
42 21716	28
43 21727	23
44 21740	99
45 21742	89
46 21755	47
47 21758	36
48 21770	41
49 21773	37
50 21774	75
51 21795	22
52 21798	23
53 25419	33
54 17268	22
55 20872	28
56 20874	13
57 20871	21
58 99999	121

14.	Please enter the number of patients, if any, transferred to a hospital from this Ambulatory Surgery Center during calendar year 2019 due to surgical complications. Enter the number of transfers by the categories listed below.
	Complications Prior to Complication Prior to C

Complications Prior to Surgery:	<u></u>
Complications During Surgery:	1
Complications Post-surgery:	0
Other Complications (describe below):	[0]
Describe other complications below	[0

PART 4: FINANCING

NOTE: The Commission reserves the right to request documentation to support your responses to the following questions

The information you provide will be considered confidential. This information will be reported in aggregate form only.

If an Audited Financial Statement is available for your facility that provides a breakdown of itemized revenues for surgical services as listed below, please use the most recent statement to respond to this question. If an audited financial statement is not available, please state the source of your response.

15. Is the data provided in this section based on an audited financial statement?

● Yes ○ No

	Suzz the Operation 15. Please provide the ending date of the
	You responded with an answer of "Yes" to Question 15. Please provide the ending date of the audited financial statement
150	Tot toop on the same of the sa
ιJa.	audited financial statement

12/31/2019

Total Revenue, Total Payer Source, and Total Uncompensated Care are updated when you click on Save Part 4 Please provide the following information regarding the surgery center's charges and revenue. Please round numbers to the nearest whole dollar.

16. Revenues (surgical services revenue)

- 1. Total billed charges for all surgical services:
- 2. Adjustments to total billed charges (contractual adjustments / charity care / bad debt, etc.):

35772156	
31152942	
4619214	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

3. Total actual net revenue for all surgical cases (line 1 minus line 2):

17. Report the distribution of NET Revenue by Payer Source or total payments generated in fiscal year 2019 by payer source.

Payer Source	Net Revenue for Fiscal Year 2019
Medicare (Non-HMO):	1020741
Medicare (HMO):	14992
All CareFirst (All Blue Cross Blue Shield):	1080610
Worker's Compensation:	206708
Self-pay:	418663
Maryland Medicaid (HMO):	0
Maryland Medicaid (Non-HMO):	119108
Medicaid (Other States):	0
Commercial Insurance HMO/ PPO (Excluding Medicare and Medicaid):	1693017
CHAMPUS / Other Government Programs	63434
All Other Plans:	1941
Cotal	4619214

Bad Debt: Report the amount of your normal facility fee charges for services rendered for which, at the time of service, payment was anticipated and credit was extended to the patient, but was not received.

Charity Care: Includes only unpaid facility fee charges for services rendered for which payment is not anticipated. Charity care results from an entity's policy to provide health care services free of charge or discounts, to individuals who meet certain financial criteria. Report the amount that would have been received under full facility fee charges.

Uncompensated Care Total: The combination of bad debt and charity care.

Total Uncompensated Care, Fiscal Year 2019 Total Facility Bad Debt: Total Facility Charity Care: Uncompensated Care Total: 8000 82268

PART 5: PATIENT SAFETY ACTIVITIES

Please provide the information requested below regarding patient safety activities including seasonal flu vaccination of employees at your center. The information collected through this section of the survey will be reported on the Commission's <u>Maryland</u> <u>Health Care Quality Reports website</u>.

Does your facility maintain an antimicrobial stewardship program (ASP) that aligns with <u>CDC</u> or <u>AHRQ</u> guidelines (i.e. 18, core elements)?

Yes ONo

19. Does your facility administer a patient satisfaction survey?

	1/29/2021	Maryland Freestanding Ambuloten	0			
	Yes ○No	Ambulatory	Surgery Survey - Print Survey Report			
	ţ					
			After each surgery			
(O Quarterly			
	19a. If yes, how frequently is the survey administered?	w frequently is the survey administered?	O Annually			
			Other			
		•	Please specify:			
	19b. If yes, what medium does your facility use to gather responses	© Electronic				
			○ Paper			
		O Telephone				
		Other				
	Does vour facilit	Please specify: Does your facility participate in the CDC National Healthcare Safety Network (NHSN) surveillance system for reporting				
	20. infections? • Yes O No	y participate in the CDC National Healthcare Safety I	Network (NHSN) surveillance system	for reporting		
		coredited by any Cut. Out.				
	10 your facility at	ccredited by any of the follow organizations (check all	that apply)?			
	Accreditation	Association for Ambulatory Health Care (AAAHC)				
American Association for Accreditation of Ambulators (Supplemental Ambulators Supplemental Ambulators Supplemental Supplem						
	Other	nt Commission on Accreditation of Healthcare Organizations (JCAHO)				
	- Cuitor	f Other, specify:				
	22 Other, specify.					
Se N(20	asonal Influenza Va DTE: This question 19 - March 31, 2020	accination (Excluding Novel H1N1) for Ambulator is asking for information on vaccinations during t).	y Surgery Center Health Care Wor he 2019 flu season which runs from	kers October 1,		
	Number of full tir	ull-time and part-time ambulatory surgery center emp	loyees as of March 31, 2020:	32		
22	influenza shot on-	site or off-site between (October 1, 2019, Morely 21	s who received FluMist or a seasonal			
	Number of full-time and part-time ambulatory a		2020):	30		
Number of full-time and part-time ambulatory surgery center employees who did not receive FluMist or a seasonal influenza shot on-site or off-site between October 1, 2019 and March 31, 2020 due to medical						
	after a previous do	including a severe egg allergy, severe allergy to any vector of Guillain Page 19	raccine component, severe reaction	[1]		
	Number of full-time	ne and part time ambulate	syndrome):			
22d	. seasonal influenza	ne and part-time ambulatory surgery center employees shot on-site or off-site between October 1, 2019 and	who did not receive FluMist or a			
	objections:	and 20100ci 1, 2019 and	March 31, 2020 due to religious	1		
22e	Number of full-tim	e and part-time ambulatory surgery center employees shot on-site or off-site between and due to other objects	Who did not receive El a C			
72	Influenza	shot on-site or off-site between and due to other objection.	ections:	0		
43.	Influenza Vaccina	tion Policy				
	For the purpose of this survey, a mandatory influenza vaccination policy is defined as a policy that requires health care workers to be vaccinated as a condition of employment. Mandatory policies may exact the					
	contraindications P	kers to be vaccinated as a condition of employment. Mandatory policies may exclude employees with medical traindications. Please select the statement below that best describes the facility.				
contraindications. Please select the statement below that best describes the facility's current statement below that best describes the facility's current statement below that best describes the facility's current statement below that best describes the facility's current statement below that best describes the facility of the facil			e facility's current status relative to m	andatory		
		- *		<i>J</i>		
	OThe facility has	implemented a mandatory employee influenza vaccin	ation moline			
	The facility does	not have a mandatory employee influenza vaccination	m == 1!			
	O The facility has a	no immediate plans to implement a mandatory employ	ar portey			
://ml	nce manyland goviewn	- Promont a manuatory employ	yee influenza vaccination policy			

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ASC Data Form

Exported 4/20/2021 11:53 AM

ANDOCHICK SURGICAL CENTER LLC

National Provider Identification: 1710952841

Submission Period: 01/01/2021 - 05/17/2021

With Respect to Reporting Period: 01/01/2020 - 12/31/2020

Last Updated: 4/20/2021 11:51 AM.

ASC



All Measures Successfully Submitted!

Measure	Submission Status	Last Updated
ASC-9	Submitted	4/1/2021 2:00 PM
ASC-11 (Voluntary)	Submitted	4/20/2021 11:51 AM
ASC-13	Submitted	4/19/2021 3:44 PM
ASC-14	Submitted	4/19/2021 3:52 PM

ASC-9

Patients who had a recommended follow-up interval of at least 10 years for repeat colonoscopy documented in their colonoscopy report.

0

All patients aged 50 to 75 years of age receiving screening colonoscopy without biopsy or polypectomy.

0

What was your facility's Total Population?

What was your facility's sample size?

What was your facility's sampling frequency?

N/A

Score for this measure



0 Denominator

Higher score is better

ASC Data Form

Exported 4/20/2021 11:53 AM

Patients 18 years and older who had improvement in visual function achieved within 90 days following cataract surgery, based on completing both a pre-operative and post-operative visual function instrument.

480

All patients aged 18 years and older who had cataract surgery and completed both a preoperative and post-operative visual function survey.

480

What was your facility's Total Population?

2083

What was your facility's sample size?

480

What was your facility's sampling frequency?

Monthly

Score for this measure

100% 480 480 Denominator

Higher score is better

ASC-13

Surgery patients with a body temperature equal to or greater than 96.8 Fahrenheit/36 Celsius recorded within fifteen minutes of Arrival in PACU.

597

All patients, regardless of age, undergoing surgical procedures under general or neuraxial anesthesia of greater than or equal to 60 minutes duration.

613

What was your facility's Total Population?

2083

What was your facility's sample size?

2083

What was your facility's sampling frequency?

Quarterly

Score for this measure

97% 1557 613 Denominator

Higher score is better

Exported 4/20/2021 11:53 AM

ASC-14

All cataract surgery patients who had an unplanned anterior vitrectomy.

All cataract surgery patients.

480

Score for this measure

Numerator Denominator

Lower score is better

((1

4/20/2021

Influenza Vaccination Summary

Mandatory fields marked with *

Record the cumulative number of healthcare personnel (HCP) for each category below for the influenza season being tracked.

Facility ID*: Andochick Surgical Center dba: Physicians Surgery Center of Frederick (40286)

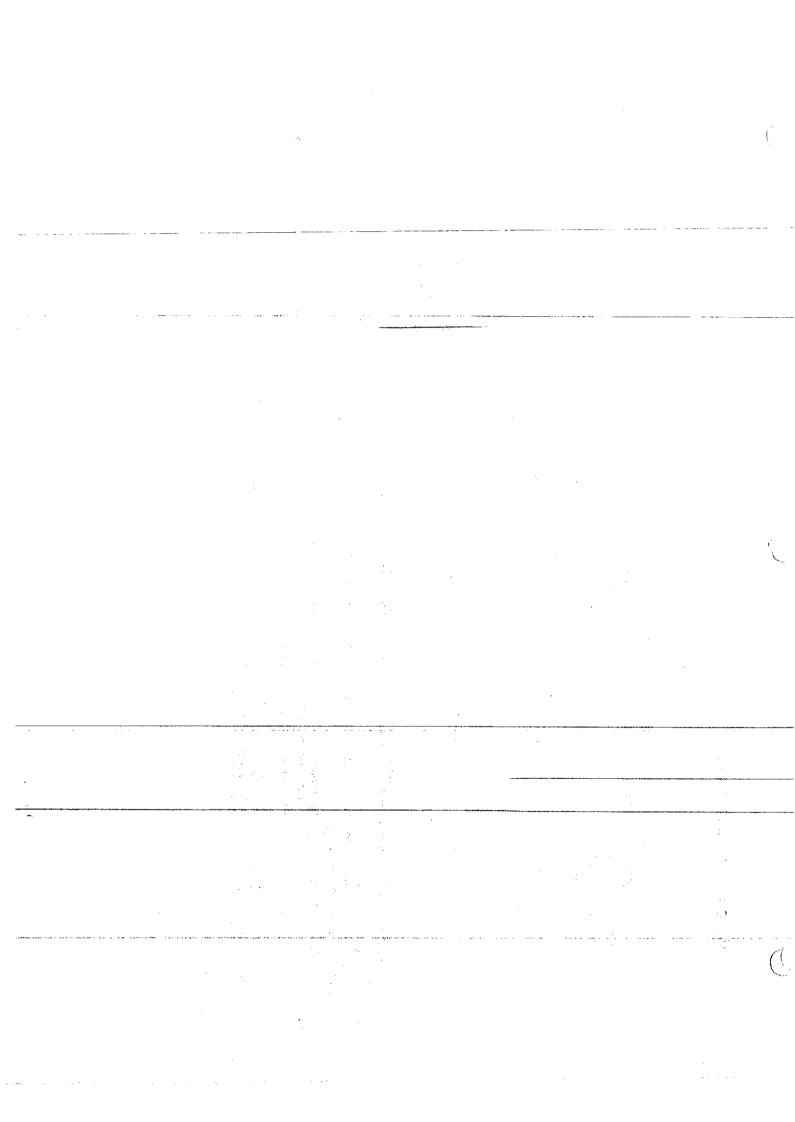
Vaccination type*: Influenza

Influenza subtype*: Seasonal

Flu Season*: 2019/2020

04/20/2021	
lodified:	
te Last M	
Da	

	Employee HCP	,	Non-Employee HCP	J.
HCP categories	Employees (staff on facility payroll)*	Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants*	Adult students/ trainees & volunteers*	Other Contract Personnel
1. Number of HCP who worked at this healthcare facility for at least 1 day between October 1 and March 31	32	23	0	0
2. Number of HCP who received an influenza vaccine at this healthcare facility since influenza vaccine became available this season	0	0	0	0
3. Number of HCP who provided a written report or documentation of influenza vaccination outside this healthcare facility since influenza vaccine became available this season	25	20	0	0
14. Number of HCP who have a medical contraindication to the influenza vaccine		0	0	0
i. Number of HCP who declined to receive the influenza vaccine	9	0	0	0
3. Number of HGP with unknown vaccination status (or criteria not met for questions 2-5 above)	0	3	0	0
Sustom Fields				
HCP NURSES:				
MIB 23	111111111111111111111111111111111111111			
IT		- No. 1784		



	All		<u>T</u>	1		<u> </u>	1	PSCF Flu
Facility	Procedure	Transfers Due To	1 '	Procedure		Facility	PSCF	Vaccinat
33rd Street Surgery Center, LLC	686	Complications 0	Rooms 1	Rooms	Vaccination Rates		transfer rate	
9106 Philadelphia Road Ambulatory Surgery Center, LLC	199	0		_				87
ASC Development Company , LLC- Germantown	1961	0						
ASC Development Company, LLC - Baltimore	1685	0						
ASC Development Company, LLC - Bel Air	5511	0				0		
ASC Development Company, LLC - Bowie	2697	0				0		
ASC Development Company, LLC - Columbia	2832	0				Ö		
ASC Development Company, LLC - Frederick	2763	0	0			ō		
ASC Development Company, LLC - Glen Burnie	3794	0	0	2		0		
ASC Development Company, LLC - Greenbelt	1414	0	0	2	83,33	0		
ASC Development Company, LLC - Hagerstown	4220	0	0	2	100	0	_	
ASC Development Company, LLC - Pikesville	2676	0	. 0	2	100	0		
ASC Development Company, LLC - Rockville	2085	0	0	_		. 0		
ASC Development Company, LLC - Silver Spring	1490	0	0	2	100	0		
ASC Development Company, LLC - Waldorf	3514	0	0	1	100	0		
ASC at Waugh Chapel	141	0	1	. 0	100	0		
Abingdon Surgical Center	66	0	1	0	100	0		
Advanced Center for Plastic Surgery, LLC	282	0	1	3		0		
Advanced Endoscopy Center of Howard County, LLC	1326	0	0	2		0		
Advanced Surgery Center of Bethesda, LLC	1888	1	1	1		0.052		
Advanced Surgery Center, LLC	6949	22	0	3	84.38	0.31		
Adventist HealthCare Fort Washington Medical Center	1336		3	2	97.04	. 0		
Adventist HealthCare Shady Grove Medical Center	11722		16	3	99.4	0		
Adventist HealthCare White Oak Medical Center	4016		11	2	98.32	0		
Allegany Ambulatory Surgery Center, LLC	520	0	1	1	40	0		
Amber Meadows Surgery Center, LLC	150	0	0	1	100	0		
Ambulatory Center for Aesthetic and Reconstructive Surgery	858	0	0	1	66.67	0		
Ambulatory Endoscopy Center of Maryland	6040	29	0	3	44.68	0.48		
Ambulatory Foot and Ankle Center, Inc.	42	0	1	0	100	0		
Ambulatory Plastic Surgery Center	582	0	1	1	87.5	0		
Ambulatory Surgery Center for Pelvic Neuro Sciences, LLC.	442	0	0	1	100	. 0		
Ambulatory Surgery Center of Bethesda, LLC	264	. 0	1	1	100	0		
Ambulatory Urology Surgical Center, LLC	2557	4	1	2	62.07	0.15		
American Access Care of Baltimore	1004	7	1	0	100	0.69		
American Access Care of Towson	1080	4	1	1	100	0.37		
Annapolis ENT Surgical Center, LLC	1548	0	1	0	100	0		
Anne Arundel Digestive Center Anne Arundel Medical Center	3253	3	0	2	66.67	0.09		
Anne Arundel Urological Surgery Center, LLC	20513		26	4	94.99	0		
2	7860	4	1	7	100	0.05		
Antietam Urosurgical Center LLC, ASC Arundel Ambulatory Surgery Center	3510	3	1	2	100	80,0		
Arundel Mills Surgery Center, Inc.	1045	2.	2	0	88.89	0.19		
Atlantic General Hospital	105	0	1	1	100	0		
Azar Eye Surgery Center, LLC	7348		4	4	99.04	0		
Baltimore Ambulatory Center for Endoscopy	2000 5177	0	0	1	100	0		
Baltimore Columbia Surgery Center, LLC				1	100	0		
Baltimore Eye Surgical Center, LLC	3119	0	1	1	100	0	<u> </u> .	
Baltimore Harford Surgical Centers, LLC	1810	0		2	90	0		
Baltimore Podiatry Group Ambulatory Surgical Center	1810	0	0	1	100	0		
Baltimore Washington Eye Center	1741	1	1	3	100 75	0		
Bel Air Ambulatory Surgical Center, LLC	2087	0	2	2	88.89	0.05		
Beicrest Surgery Center, LLC	33	0	1	0	100	0		
Belmont Surgery Center, LLC	235	0	1	2	100	0		
Beltsville Ambulatory Surgery Center, Inc.	42	0	1	0	100			
Bethesda Chevy Chase Surgery Center, LLC	2633	0	2	1	100	0		
Bethesda Endoscopy Center	8765	1	0	3	100	0.011		
Bethesda Surgery Center, LLC	788	0	3	0	0	0,011		
Box Hill Surgery Center, LLC	827	0	1	0	100	0		
CEC Surgical Services, LLC	1739	1	1	1	100	0.055		
Calvert Ambulatory Foot Surgery Center	53	0	1	0	100			
Calvert Digestive Disease Asso Endoscopy and Surgery	1140	0	0	1	100	0		
CalvertHealth Medical Center	5988	<u> </u>	6	8	99.01	0		<u> </u>
Capital Children's Health Care LLC	647	0	1	0	100	0		
Capital Endoscopy & Surgery Center	4949	3	1	3	66.67	0.06		
apital Surgical Center, LLC	4613	2	0	2	100	0.043		
arroll County Ambulatory Surgery Center, LLC	785	2	1	2	100	0.043		
arroll County Eye Surgery Center, LLC	2054	0	1	2	83.33	0.25		
arroll Digestive Disease Center	6549	4	0	2	70,83			
arroll Hospital	5725	*	10	3	98.84	0,061		
ascades Endoscopy Center	2115	0	0	1	100	0	-	
enter for Eyelid and Facial Plastic Surgery, LLC	208	0	0					
circui for Eyenu anu Facial Flastic Surgery, EEC	208		<u> </u>	1	60	0	·	

Central Maryland Endoscopy, LLC	2690	Ö	0				·
Checkerspot Surgery Centers, LLC	1428	0	0	1	87.5	. 0	
Chesapeake Ambulatory Surgery Center, LLC	165	0	1	1	100	0	
Chesapeake Eye Surgery Center	4777	3	2	2	56.25	0.062	
Chesapeake Pain Center	288	0	. 0	2	100	0	
Chevy Chase Endoscopy Center	6568	4	0	4	63.16	0.06	
Children's Ambulatory Surgery Center at Montgomery Count	 	2	2	0	100	0.083	
Clearway Surgery Center of Annapolis	1673	2	0	·	90	0.12	
Clearway Surgery Center of Germantown	1005	2	0		75	0.19	
Clearway Surgery Center of Glen Burnie	1915	2	0		100	0.1	
Clearway Surgery Center of Kent Island	1204	5	, 0		90	0.41	
Clearway Surgery Center of Owings Mills	3864	3	` 0		100	0.077	
Clearway Surgery Center of Waldorf	1420	3	0		100	0.21	
Clearway Surgery Center of White Marsh	4233	4	0		100	0.09	
Clinical Associates ASC	2798	1	0		100	0.035	
	706	0	0		87.5	0.033	
College Park Surgery Center, LLC				1		0	
Columbia Surgical institute, LLC	3039	0	2	 	0		
Comprehensive Pain Management Center, Ltd.	1053	0	0		100	0	
Congressional Ambulatory Surgery, LLC	159	0	. 0		100	0	
Cosmetic Plastic Surgery Center	133	0	1	1	85.71	0	
Cosmetic Surgery Facility, LLC	282	0	1	1	50	0	
Cosmetic SurgiCenter of Maryland	863	3	2	2	100	0.34	
Court Endoscopy Center of Frederick	1466	2	0	2	88.89	0.11	
Crossroads Podiatric Surgery Center	141	0	1	0	100	0	
Cumberland Valley Surgery Center, LLC	1695	2	1		73.33	0.11	
Deer Pointe Surgical Center, LLC	3076	1.1	1	2	86.96	0.35	
Delmar Surgical Center	1456	0	1	1	57.14	0	
Dialysis Access Services, LLC	1048	4	0	2	90	0.095	
Dialysis Access Services, LLC-Arbutus	1117	10	0	2	100	0,89	
Doctors Community Hospital	6683		12	4	91.99	0	
Downtown Baltimore Surgery Center, LLC	500	0	1	1	σ	0	
Dulaney Eye Institute, LLC	5357	7	4	1	92.86	0.13	
Eastern Shore Endoscopy, LLC	6717	13	0	4	97.3	0.014	
Elkridge ASC, LLC	0	0	1	1	100	0	
Ellicott City Ambulatory Surgery Center, LLP	2593	2	4	1	88.24	0.077	
EndoCentre at Quarterfield Station	5490	13	0	3	90.91	0.23	
EndoCentre of Baltimore	7794	8	0	4	81.82	0.1	
Endoscopic Surgical Centre of Maryland	5582	2	0	2	96.43	0.035	
Endoscopic Surgical Centre of Maryland - North	6417	1	0	3	97.02	0,015	
Endoscopy Center at Robinwood, LLC	6913	13	0	3	92.86	0.18	
Endoscopy Center of Essex, LLC	156	0	0	1	100	0.10	
Endoscopy Center of Lister, ELC	7263	8	0	2	69.23	0.11	
Eye Surgery Center of White Marsh, LLC	1044	0	1	1	100	0.11	
Facial Plastic Surgery, Ltd.	723	3	1	1	100	0.41	
0 11	31	0	0	1	100	0.41	
Fallsgrove Surgery Center			0	1		0	
Family Footcare Dundalk Ambulatory Surgical Center	18	0			100		
Femi-Care Surgery Center, LLC	585	0	1	1	100	0	
Fertility Center of Maryland	382	0	1	1	100	0	
Foot & Ankle Center at the Burkland Medical Center, Inc.	50	0			100		
Four Corners Ambulatory Surgical Center, LLC	59	0	1	0	40	0	
Frederick Endoscopy Center, LLC	6422	6	0	4	94.44	0.09	
Frederick Foot & Ankle ASC, LLC	473	0	0	1	58.33	0	
Frederick Health Hospital	5839		1.1	4	95,02	0	
Frederick OB/GYN Ambulatory Surgery Center	564	0	0	1	100	0	
Frederick Surgical Center, LLC	6084	4	4	4	89.47	0.06	
GI Wellness Center of Frederick, LLC	2205	1	0	4	93,33	0.04	
Gaithersburg Ambulatory Surgery Center	4661	4	3	0	100	0.085	
Gaithersburg Foot and Ankle Surgery Center, LLC	3	0	1	0	100	0	
Garrett Regional Medical Hospital	3159		3	1	95.27	0	
Gastrointestinal Diagnostic Center	5752	10	0	3	82.35	0.17	
Gastrointestinal Endoscopy Associates	9464	18	0	5	93.1	0.19	
George Thomas Grace, M.D. Surgery Center	558	0	0	1	100	0	1
Glen Echo Surgery Center, LLC	1331	ō.	1	2	86.67	0	
Grace Medical Center	632	Ť	5	3	94.52	ő	
Greater Baltimore Medical Center	23720		30	13	98,3	ol	
Green Spring Station Endoscopy, LLC	5168	5	0	2	94.74	0.096	
Greenbelt Endoscopy Center	8225	11	0	4	60	0.030	
Greenbelt Urology Institute, LLC	2125	0	1	1	83,33	0,13	
Greenspring Surgery Center, LLC	3111	8	1	2	64.29	0.25	
······	1473	0	1		92,31	0,25	-
Gynemed Surgical Center				2			
Hagerstown Surgery Center, LLC	3285	0	1	2	95.46	0	
Hanover Parkway Surgery Center	1637	0	1	1	100	0	
Harbor Heights Surgery Center, LLC	1151	2	1	2	100	0.17	
Harbor Surgery Center, LLC	367	1	1	1	88.89	0.27	

Harborside Surgery Center	2332		2	1	2 88.5	7 0.08	
Harford County Ambulatory Surgery Center	1607	9)			0.56	
Harford Endoscopy Center	8872	19)		3 88.89		
Harford Podiatric Surgery Center, Inc.	35				1 50		
Hendi Ambulatory Surgery Center, PC	1040				5 100		
Hickory Ridge Surgery Center	1308						
Holy Cross Germantown Hospital			 		1 1.00		
Holy Cross Hospital	2413			5 4		3 0	
	10993			4 11	95.92	0	
Howard County GastroIntestinal Diagnostic Center, LLC	7149	14		0 3	92,31	0.19	
Howard County General Hospital	8899		1	3 14	96.52		
Innovations Surgery Center Tower Oaks, P.C.	1003	6		1 1	83.33		
Innovative Surgery Center,LLC	701	O	 -	0 1			·
JEV Surgery Center	180	0		1 1			
Jeffrey L. Bober, DPM, ASC	40	- 0	<u> </u>				
Jessco, LLC	846	0		- ,			
Johns Hopkins Bayview Medical Center	21082			0 1		0	
Johns Hopkins Health Care and Surgery Center-Bethesda			1			0	
	1955	1		1	100	0.051	
Johns Hopkins Hospital	54233		6:	1 23	95.96	0	
Kenilworth Surgery Center, LLC	1688	0		l 4	100	0	
Kensington Medical Center ASC	1144	1		2 0			
Kirurgs, LLC	3475	0) 1	80	0.087	
Knoll North Surgery Center	3260	1		2			
LaPlata Ambulatory Surgery Center	199	0			95,65	0.03	
Lakeforest Ambulatory Surgery Center	169	0			25	. 0	
Lakeview Surgery Center			1		57.14	0	
Largo Ambulatory Surgery Center	355	2	1		58.33	0,84	
	6354	17			100	0.26	
aser Surgery Center, Inc.	58	Ō	2	4	100	0	- -
aurel Foot and Ankle Surgery Center, Inc.	37	0	1	1	75	0	
eonardtown Surgery Center, LLC	2356	1	1		100	0.042	
isa Renfro Surgery Center, LLC	2589	0	0		100		
ockwood Ambulatory Surgery Center, LLC	320	0	0			0	
udwick Laser & Surgery Center	1208	1		+	100	0	
utherville SurgiCenter, LLC	2862		1	0	36.36	0.082	
uxxery Corporation of Maryland		3	2	0	94.74	0.1	
AD Laser Surgery Center, LLC	203	0	0		100		
	179	0	0	1	100	0	
ASC Ambulatory Surgical Center, LLC	948	. 0	1	1	83.33	0	
ASC Ambulatory Surgical Center, LLC	549	0	0	2	83.33	0	
Aaple Lawn Surgery Center, LLC	2214	1	1		86.96	0.045	
Maple Springs Ambulatory Surgical Center	83	0	1	0	100	0.043	
Maryland Aesthetic & Reconstructive ASC, LLC	449	0	1	0			
laryland Diagnostic and Therapeutic Endo Center, LLC	5148	2			100	0	
Maryland Endoscopy Center, LLC			0	3	90.7	0.038	
Maryland Plastic Surgery, LLC	5281	5	0	3	72.73	0.094	
	383	. 0	. 1	1	75	0	
laryland Podiatry Center, LLC	27		1	٥	100	0	
laryland Specialty Surgery Center, LLC	1172	3	1	2	0	0.25	
laryland Spine and Sports Surgi-Center, LLC	1637	0	0	2	80	0	" " " " " " " " " " " " " " " " " " "
laryland Surgeons Center of Columbia, LLC	826	2	1	1	100	0.24	
aryland Surgery Center, LLC	3801	7	1.	5			
assachusetts Avenue Surgery Center, LLC1	4341	0	3		96.55	0.18	
echanicsville Ambulatory Surgery Center, LLC	506			1	83.33	0	
edStar Endoscopy Center at Lutherville		0	1	1	85.71	0	
	1667	5	0	2	100	0,29	
edStar Franklin Square Medical Center	12362		16	5	97.93	0	
edStar Good Samaritan Hospital	9236		11	5	97.97	0	
edStar Harbor Hospital	2940		9	4	97.56	0	
edStar Medical Group-Southern Maryland, LLC (Hollywood)	7616	o	0	2	100	o o	
edStar Montgomery Medical Center	3776		6	3	98.09		
edStar Shah Medical Group - Prince Frederick	2292	4	0				
edStar Shah Medical Group - Waldorf	2916	- 5		1	100	0.17	
edStar Southern Maryland Hospital Center	4188		0	1	100	0.17	
edStar St. Mary's Hospital			10	3	97,97	0	
	5343		. 6	2	97.74	0	
edStar Surgery Center at Timonium	3427	2	2	1	85,71	0.029	
edStar Union Memorial Hospital	8039		21	4	97.9	0	" "
edSurg Foot Center	39	0	1	1	100	0	
edstar Surgery Center at Brandywine	882	1	2	1	75	0.11	
ercy Medical Center	30404		22	8			
eritus Medical Center	8110			_ 0	99.11	0	
etro Ambulatory Surgical Center					99.13	0	
d-Atlantic Neurosurgical Associates Pain Center	213	2	1	0	1.00	0.93	
	0	0	0	1	100	0	
d-Atlantic Surgery Pavilion	2344	2	1	1	86,36	0.085	
dshore Surgical Eye Center	1199	0	1	1	76.19	0	
tchell A. Barber, DPM, ASC, LLC	24	2	1	0	100	8.3	
hs and Skin Surgery Center	1685	0	0	3	100		-
						. 0	
nocacy Surgery Center, LLC	1086	1	1	2	100	0.092	

	T			1 -	4.5 =	A 22-	
Montgomery Surgery Center	3511	3	0	0	100 62.5	0,085 0.077	
Newbridge Surgery Center at Frederick, LLC	1295 1650	0		 	62.5	0.077	
Newbridge Surgery Center at Prince Frederick, LLC Newbridge Surgery Center at Waldorf, LLC	2214	0		1	57.14	0	
Northern Baltimore Surgery Center, LLC	2027	1	ļ	1	100	0.049	
Northwest Hospital	8204				96.96	0	
Olney Endoscopy Center,LLC	352	0	o	1	100	0	
Ophthalmology Associates	1844	1	2		100	0,054	
Ophthalmology Associates, LLC	3889	0		1	100	0	
Orthopedic Wellness Surgery Center	585	0			100	0	
Orthopedic Wellness Surgery Center	936	0		1	100	0	
Orthopedics Associates of Frederick, ASC	2299	0			100 44,44	0	
Oxon Hill Urology Surgery Center	767 303	0			100	0	
Palisades Eye Surgery Center	8503	1	3	2	54.29	0.011	
Parkway Surgery Center, LLC	5390	9		2	50	0.166	
Peninsula Cataract & Laser Center	1789	0		1	59.09	0	
Peninsula Endoscopy Center, LLC	4272	4	0	3	81.25	0.046	
Physicians Surgery Center	2658	0	1	2	78,57	0	
Physicians Surgery Center of Frederick	2075	2	2	1	87.5	0.096	1996
Piccard Surgery Center, LLC	3610	0	1	2	64	0	
Piney Orchard Surgery Center, LLC	1797	1	2	0	100	0.05	
Plastic Surgery Specialists, PC	2266		2	2	80	0	
Plaza Ambulatory Surgical Center, Inc.	168	1	1	2	100	0.59	
Podiatry Associates Ambulatory Surgical Center, LLC	144	1	1	0	83,33 83,33	0,69	
Podiatry Associates Ambulatory Surgical Center, LLC	84 389	0	1	0	83,33 83,33	0,25	
Podiatry Associates Ambulatory Surgical Centers, LLC Podiatry Associates Ambulatory Surgical Centers, LLC	57	0		0	83,33	0,23	
Podiatry Associates Amburatory Surgical Centers, LCC Podiatry Group of Annapolis Ambulatory Surgical Center	14	0	1	0	100	0	
Point of Rocks Surgery Center, LLC	1135	0		1	100	0	
Poole Endoscopy Center, ASC	454	0		1	0.	0	
Potomac View Surgery Center, LLC	1139	0		2	78,57	0	
Premier Surgical Pavilion of Oxon Hill	232	2	1	1	100	0.86	
Prince Frederick Surgery Center, LLC	1266	0	1	2	0	0	
Prince George's Multispecialty Surgery Center	51	0		0	100	0	
Private Surgical Suite, LLC	1230	0		1	100	0	
Quince Orchard Surgery Center, LLC	398	0		1	100	0	
Riva Road Surgery Center	6366	4	2	1	100	0.062	
River Road Surgery Center, LLC	1242 31	6 0	1	3	90.91 100	0.48	
Riverside Ambulatory Surgery Center, LLC	721	0	0	2	100	0	
Rockledge Surgery Center, Inc. Rockville Ambulatory Surgery, LLP	832	0	0	1	28.57	0	
Rockville Surgical Suites, LLC	87	1	1	0	100	1.1	
Ruxton SurgiCenter	6681	0	2	2	80	0	
SGFC Surgery Center, LLC	3804	0	1	3	100	0	
Saint Agnes Hospital	7017		19	1	97.93	0	
Shady Grove Fertility Center	11647	0	2	7	100	0	
Shore Health System Surgery Center	2750	2	1	2	93,33	0.072	
Silver Spring Ophthalmology, LLC	1601	0			100	0	
Silver Spring Podlatry	100	0		0	71.43	0	
Silver Spring Surgery Center, LLC	383	0		0	28.57	0	
Simcare ASC, LLC	967 17263	0	0 25	1 6	100 94.84	0	
Sinai Hospital of Baltimore Skin Cancer Treatment Center, LLC	2086	0			100	0	
Slade ASC, LLC	288	0			57.14	0	
Snowden River Surgery Center, LLC	3213	3			100	0,093	
South Baltimore County Medical Center ASC	3486	5	3		100	0.14	
South River Ambulatory Surgery Center	59	0	0	1	56.67	0	
Southern Maryland Endoscopy Center, LLC	2600	5	0	2	88.89	0,19	
St. Mary's Multispecialty Surgery Centre	184	0		1	85.71	0	
Suburban Hospital	4738		15	3	99.6	0	
Summit Ambulatory Surgery Center, LLC - Park Potomac	8869	0		1	66.67	0 025	
Summit Ambulatory Surgical Center, LLC - Bel Air	3752	1	1	1	70	0,026	
Summit Ambulatory Surgical Center, LLC - Brandywine	3339	3	1	2	55.56 64.71	0.089 0,052	
Summit Ambulatory Surgical Center, LLC - Columbia	5389 5756	<i>خ</i> 6		2	69.23	0,052	
Summit Ambulatory Surgical Center, LLC - Franklin Square Summit Ambulatory Surgical Center, LLC - GBMC/Towson	1024	7	0	1	70	0.68	
Summit Ambulatory Surgical Center, LLC - Galvic, Towson Summit Ambulatory Surgical Center, LLC - Hanover	4275	14	1	3	50	0.32	
Summit Ambulatory Surgical Center, LLC - Harrovel Summit Ambulatory Surgical Center, LLC - Havre De Grace	922	0	0	1	100	0.52	
Summit Ambulatory Surgical Center, LLC - Maple Lawn	2568	3	1	1	66,67		
Summit Ambulatory Surgical Center, LLC - Owings Millis (Cros		2		2	75	0.08	
Summit Ambulatory Surgical Center, LLC - Salisbury	1296	0			66.67	0	
Summit Ambulatory Surgical Center, LLC - Silver Spring	4790	2		2	60	0.04	
Summit Ambulatory Surgical Center, LLC - St. Agnes	2596	1	1	2	75	0.038	

SurgCenter of Towson SurgCenter of Western Maryland, LLC	21		0	1			100	0	
SurgCenter of the Potomac, LLC	347		3	1			.43 0.0	86	
Surgoenter of White Marsh, LLC	120		0	1			100	0	
Surgery Center of Annapolis, LLC	145		5	_1				34	
Surgery Center of Potomac, LLC	54		2	1			100	0	
SurgiCenter of Baltimore, LLP	252		7	2				36	
Surgical Center of Greater Annapolis, Inc.	129		0	5 1			00 0.		
Surgical Specialty Center of Mid Atlantic,LLC	113		0	1		1 84. 2 1		0	
Surgical Specialty Suites, Inc.	119		0	2			.00	0	
Synergy Surgery Center, LLC		2	 	0		 	00	0	
The Center for Aesthetic Surgery, LLC	75	2	0	1			00	0	
The Endoscopy Center at Bel Air, LLC	144		4	0			00	0	
The Eye Surgery Center, LLC	228	1	2	1			80 0.:		
The Friendship Ambulatory Surgery Center, P.C.	599		1	4		 			
The Galleria Surgery Center	500)	0	1			33 0.0: 00		
The Maryland Center for Digestive Health, LLC (MCDH, LLC)	1487		5	0				0	
The Surgery Center	748		0	1					
The Surgery Center of Chevy Chase	5489)	0	4		- 7		0	
The Surgery Center of Easton	1405		3	1				0	
Thomas Johnson Surgery Center	1915		3	2					
idalHealth McCready Hospital	530		-	2					
idalHealth Peninsula Regional	10473		 "	13				0	
IdalHealth Surgery Center LLC	2455		0	2				0	
imonium Surgery Center	2743		16	1	1			0	
otal Foot Care Surgery Center, Inc.	52		0	2				$\overline{}$	
owson Surgical Center, LLC	2069		5	2	1	+ 	-	0	
win Arch Surgical Center, Inc.	110		0	1					
JPMC Western Maryland	6513			14	1			0	
Inion Hospital	5004		- 	4	5	·		0	i
Iniversity of Maryland Baltimore Washington Medical Center	8950		 	16	7			2	
Iniversity of Maryland Capital Region Surgery Center	3262	1	1	3				<u> </u>	
niversity of Maryland Charles Regional Medical Center	4080			4	3				
niversity of Maryland Harford Memorial Hospital	1136		 	4	7			<u> </u>	
niversity of Maryland Laurel Medical Center	2492	 -	 	7	3			<u> </u>	
niversity of Maryland Medical Center	16953		-	36					
niversity of Maryland Medical Center Midtown Campus	7219			10	8				
niversity of Maryland Prince George's Hospital Center	1316			_	8		+		
niversity of Maryland Rehabilitation & Orthopaedic Institute	5815		·	10	3			·	
niversity of Maryland Shore Medical Center at Chestertown	2310	-	 	6	1	99.4			
niversity of Maryland Shore Medical Center at Dorchester	371		 	3	1	99.2			
niversity of Maryland Shore Medical Center at Easton	4053			4	2	98.6	 		
niversity of Maryland Shore Surgery Center at Queenstown,	153			6	1	98.7			
niversity of Maryland St. Joseph Medical Center	8779	 :		1 19	3	100			
niversity of Maryland Surgery Center	670				6	98.74			
niversity of Maryland Upper Chesapeake Medical Center	10606			1	2	100			
niversity of Maryland Urological Surgery Center	625			1	2	97.83			
oper Bay Surgery Center	2862			0	2	100	·		
bana GI Endoscopy Center, LLC	2242			1	1	46.15			
aldorf Endoscopy Center	6206			0	2	78.95			
est Annapolis Surgery Center, LLC	480			0	4	52.63			
estern Maryland Eye Surgical Center	442			1	1	100	 		
estern Maryland Surgicenter, LLP	481			1	1	76.92			
estminster Surgery Center, LLC	3620	0		1	0	100			
hite Flint Surgery, LLC	501	9	 _ _ _ _ 	1	2				
nite Marsh Foot and Ankle Surgery Center, LLC	501	0		1	2	100			
nite Marsh Surgery Center Series	6026	0		0	1	100			
ndsor Mill Surgery Center, LLC		36		1	2	100			
n Ambulatory Center, LLC	1477	3		1	2	77.27	0.2		
,,	711	. 0		0	1	100	0		
									
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			Summary			-	Transfer rate		
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PhysID	PhysName	BirthDate	Status	Specialty
286	Kim, Alisa	5/3/1973		OPH - Ophthalmology
238	Thadani, Sunil M	11/25/1973	А	OPH - Ophthalmology
295	Evans, Korboi	5/27/1981	Р	ORT - Orthopaedics
265	Gupta, Rishi R	6/20/1978	Α	ORT - Orthopaedics
283	Horton, Steven A	12/28/1983	Р	ORT - Orthopaedics
257	Levine, Matthew J	5/3/1972	А	ORT - Orthopaedics
116	Nesbitt Silon, Kristin	3/31/1972	Α	ORT - Orthopaedics
293	Petruccelli, Gabriel	10/1/1978	Р	ORT - Orthopaedics
294	Sanders, Samuel	3/14/1977	P	ORT - Orthopaedics
112	Steinberg, James M	1/25/1968	A	ORT - Orthopaedics
277	Walsh, Cory T	10/22/2018		ORT - Orthopaedics
104	Andochick, Scott E	8/7/1958		PLS - Plastics/Reconstructive
103	Mecinski, Adam M	1/7/1967		PLS - Plastics/Reconstructive



12 - Physicians Surgery Center of Frederick

Report ID: CL2002 - Surgery Time Log

Printing Selection: From Date of Service=1/1/2019 To Date of Service=12/31/2019 Display times in military format?=No Hide Detail?=Yes Highlight late antiblotic start=No 23 Hour Stay

Run Date: 10/11/2021 6:17 F Page: 1 o:

Group By: Physician ID

1 7 2 .	14								
Pt ID/ Visit DOS	Sched Pt Phys Phys Primary 23 Hr. PACU Time Arr ID Arr Procedure Stav2 Tamp	Registr.	A 41h : - 41	B 0					
Total Cases: 440	Phys: 103 - Mecinski, Adam M	Start Min Antibiotic		PreOp Start Min	Anes Start Min	OR Start Min		Recovery Start Min	Step Dowr Start Min
Total Cases: 64	Phys: 104 - Andochick, Scott E		1817	20776	16296				
Total Cases: 241	Phys: 112 - Steinberg, James M		483	3946	14275	14074	10702	5567	0
Total Cases: 798	Phys: 116 - Nesbitt Silon, Kristin		1813	14469	17126	16343	9283	13976	0
Total Cases: 27	Phys: 167 - Henry, J. Christopher		1234	55643	35597	33916	15861	29131	0
Total Cases: 658	Phys: 238 - Thadani, Sunii M		0	1328	1437	1289	943	1001	0
Total Cases: 174	Phys: 257 - Levine, Matthew J		0	38667	18293	16018	10707	16580	0
Total Cases: 7	Phys: 265 - Gupta, Rishl R		1502	12886	18095	17492	9651	10681	0
Total Cases: 62	Phys: 271 - Pillar Topalogiu, Angelique J		44	501	606	637	381	745	0
Total Cases: 15	Phys: 277 - Walsh, Cory T		0	4756	2896	2650	1902	2942	0
'বা Cases: 2486			151	772	943	886	482	760	0
			7044	153744	125564	123343	72098	97115	0



12 - Physicians Surgery Center of Frederick

Report ID: CL2002 - Surgery Time Log

Printing Selection: From Date of Service=1/1/2020 To Date of Service=12/31/2020 Display times in military format?=No Hide Detail?=Yes Highlight late antibiotic start=No 23 Hour Stay

Run Date: 10/11/2021 6:17 I Page: 1 o

iy. i ilyanolari	. 14												•		raye. It
Pt ID/ Visit DOS		Pt Arr	Phys ID		23 Hr.	PACU	Registr.								ļ
Total Cases: 333				Arr Procedure 3 - Mecinski, Adam	Slave	Temp	Start Min	Antiblotic	Antibiotic Start Min		Anes Start Min	OR Start Min	Surgery Start Min	Recovery	
Total Cases: 69				4 - Andochick, Scot					1489	13788					
Total Cases: 239				2 - Steinberg, James					1067	2553	•		0021	7.020	,
Total Cases: 653				6 - Nesbitt Silon, Kri					2236	13980	17461		4500		
Total Cases: 8				7 - Henry, J. Christo					1522	38436	31024		0-100		•
Total Cases; 516				- Thadani, Sunii M					0	516	396	428			J
Total Cases: 166				- Levine, Matthew					0	25921	13464	11930		00	0
Total Cases: 5				- Gupta, Rishi R					1728	11737	18119	17398		10735	0
Total Cases: 14				- Pillar Topalogiu, A	Angeligur	a,j			20	352	384	359	219	394	0
Total Cases: 20				- Walsh, Cory T					0	961	755	650	505	679	0
vial Cases: 1				- Harris, Christine K	к				137	846	1347	1247	741	1227	0
. otal Cases: 59				- Horton, Steven A					0	54	397	389	342	158	0
Total Cases: 2083									734	3833	4525	4292	2792	2626	0
									8933	112977	111843	108883	65955	80261	



12 - Physicians Surgery Center of Frederick

Page: 1 of

Report ID: CL2002 - Surgery Time Log

Printing Selection: From Date of Service=1/1/2021 To Date of Service=12/31/2021 Display times in military format?=No Hide Detail?=Yes Highlight late antibiotic start=No 23 Hour Stay Run Date: 10/11/2021 6:18 P

Group By: Physician ID

Sched Time Pt ID/ Visit DOS Phys Phys Primary Arr Procedure 23 Hr. PACU Stay? Temp Registr. Start Min Antibiotic Start Min PreOp Anes Start Min Start Min OR Start Min Surgery Recovery Start Min Start Min Step Down Start Min Antiblotic Total Cases: 323 Phys: 103 - Mecinski, Adam M Total Cases: 32 Phys: 104 - Andochick, Scott E O Total Cases: 223 Phys: 112 - Steinberg, James M Total Cases: 630 Phys: 116 - Nesbitt Sllon, Kristin Total Cases: 18 Phys: 167 - Henry, J. Christopher Total Cases: 613 Phys: 238 - Thadani, Sunil M Total Cases: 142 Phys: 257 - Levine, Matthew J Total Cases: 6 Phys: 265 - Gupta, Rishi R Total Cases: 8 Phys: 277 - Walsh, Cory T Total Cases: 204 Phys: 283 - Horton, Steven A rtal Cases: 11 Phys: 293 - Petruccelli, Gabriel otal Cases: 13 Phys: 294 - Sanders, Samuel Total Cases: 9 Phys: 295 - Evans, Korboi Total Cases: 2232 ō



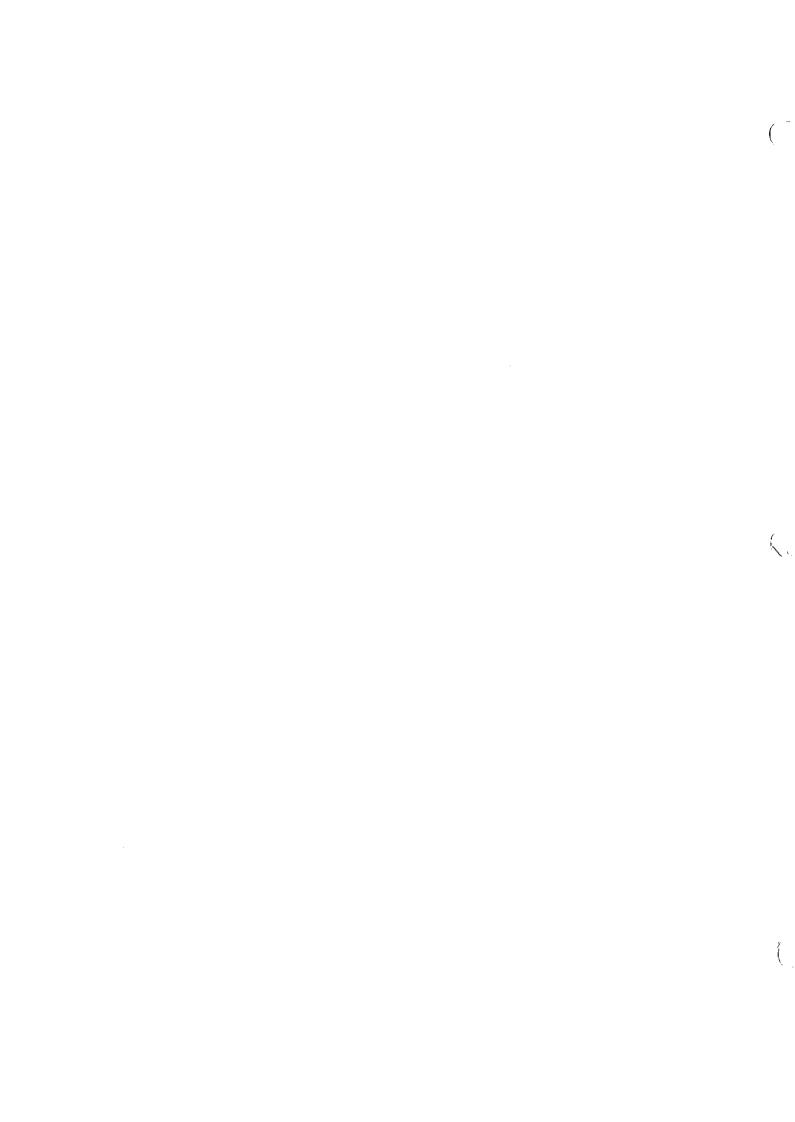
TABLE E. PROJECT BUDGET

INSTRUCTION: Estimates for Capital Costs (1.a-e), Financing Costs and Other Cash Requirements (2.a-g), and Working Capital Startup Costs (3) must reflect current costs as of the date of application and include all costs for construction and renovation. Explain the basis for construction cost estimates, renovation cost estimates, contingencies, interest during construction period, and inflation in an attachment to the application.

: Inflation should only be included in the Inflation allowance line A.1.e. The value of donated land for the project should be included on Line A.1.d as a use of funds and on line B.8 as

	Hospital Building:Landlord liability	See Attached Explanation of Budget for PSCF llability for Internal build and renovation: 12287sf	Total
USE OF FUNDS			
1. CAPITAL COSTS			
a. New Construction			
(1) Building (2) Fixed Equipment	\$1,684,401	\$1,907,000	
(3) Site and Infrastructure	\$0 \$220,000	\$50,000	+00,00
(4) Architect/Engineering Fees	\$220,000 \$154,500	\$(\$120.500	
(5) Permits (Building, Utilities, Etc.)	\$21,000	\$130,500 \$24,000	
SUBTOTAL		\$2,111,500	
b. Renovations	42,0,001	φ ω, ετι 13000	7 THE STATE OF THE
(1) Building	\$0	\$127,800	\$127,80
(2) Fixed Equipment (not included in construction)	\$0	\$0	
(3) Architect/Engineering Fees	\$0	\$35,000	_ _
(4) Permits (Building, Utilities, Etc.)	\$0	\$5,000	
SUBTOTAL	\$0	\$167,800	
c. Other Capital Costs			
(1) Movable Equipment	\$0	\$300,000	
(2) Contingency Allowance	\$95,000	\$105,000	\$200,00
(3) Gross interest during construction period (4) Other (Specify/add rows if needed)			\$
SUBTOTAL			\$
TOTAL CURRENT CAPITAL COSTS		\$405,000	
d. Land Purchase	\$2,174,901	\$2,684,300	
e. Inflation Allowance	\$375,000		\$375,00
TOTAL CAPITAL COSTS	\$2,549,901	udated stock of the control of	S CONTROL OF STREET OF STR
2. Financing Cost and Other Cash Requirements		\$2,684,300	
a. Loan Placement Fees			The state of the s
b. Bond Discount			\$ \$
c CON Application Assistance	\$6,199	And the second section of	\$6,19
c1. Legal Fees		of sales with the control seeks to the	\$ \$
c2. Other (Specify/add rows if needed)		4 (1 (2) 3 (3) (4) (4) (4) (4) (4)	
d. Non-CON Consulting Fees		Pharmad Parks	Astronomic National States (States and States (States and States and States and States and States and States a
d1. Legal Fees	of the control of the property	net a sign at a constitue of sign and s	\$
d2. Other (Specify/add rows if needed)	1000年美術學學學學學學	HES THE STORY OF THE STORY OF THE	\$
Debt Service Reserve Fund Other (Specify/add rows if needed) Construction Financing	111-11 人名英格兰斯特特特特特特特特特特	7届6年4日1日中国1865年11日中日	\$
f Other (Specify/add rows if needed) Construction Financing g. Start Up operations	\$18,900	\$7,000	\$25,90
SUBTOTAL	\$0 \$25,099	\$8,700	\$8,700
3. Working Capital Startup Costs	720,000	\$15,700	\$40,79
TOTAL USES OF FUNDS			\$(
Sources of Funds		\$2,700,000	\$5,275,000
1. Cash (PSCF-500,000/SEA 500,000)		\$500,000	\$1,000,000
2. Philanthropy (to date and expected)		1477 C1887 C18 (8 12 14	\$1,000,000
3. Authorized Bonds	and the second and the second	General Service Company and Co	\$(
4. Interest Income from bond proceeds listed in #3	and the second second second second		\$0
5. Mortgage		e in is entire in entrick to have	\$0
6. Working Capital Loans (two notes up to 2.2M each over 20years a	t 4% \$1,700,000	\$2,200,000	\$3,900,000
7. Grants or Appropriations	e di Paris de la Calenda de La Servicia del Servicia de la Servicia del Servicia de la Servicia del Servicia del Servicia de la Servicia de la Servicia del Servicia de	n garage and finding of the states of the	
a. Federal b. State	71 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A		\$0
		AGE 33 UP G-17 AC 1696 31	\$0
B. Other (Specify/add rows if needed)	THE CONTRACTOR STATES OF THE CONTRACTOR OF THE C		\$(
Owner Contribution of Land \$375,000	The state of the s		\$0
TOTAL SOURCES OF FUNDS	\$375,000 \$2,575,000	\$2,700,000	\$375,000
	#2,375,000 Hospital Building	\$2,700,000 Other Structure	\$5,275,000
al Lease Costs (if applicable)		Omer Structure	Total
1. Land			
2. Building			\$0
3. Major Movable Equipment			\$0
Minor Movable Equipment Other (Specify/add rows if needed)Recommended Contingency			φ. O

^{*} Describe the terms of the lease(s) below, including information on the fair market value of the item(s), and the number the lease.



CoreLogic - SwiftEstimator Commercial Estimator - Summary Report

General Information

-	4 .	ate	
	TIM	ヘギヘ	

2035.01 Andochick

Date Created:

07-08-2021

Property Owner:

Properties 1 Andochick Properties

81 Thomas Johnson Court Date Calculated:

07-08-2021

Property Address:

Frederick, MD 21702

Date Updated:

09-29-2021

Local Multiplier:

.95 7%

Cost Data As Of:

using report date

Architects Fee:

Report Date:

09-2021

Section 1

Area

Stories in Section Stories in Building 11222

Overall Depreciation % Physical Depreciation % Functional Depreciation % External Depreciation %

Shape Perimeter

Effective Age

rectangular (auto-calc)

Occupancy Details				Control of the Contro
Occupancy	%	Class	Height	Quality
431 Outpatient Surgical Center	100	D	18	3.0
Occupancy Total Percentage	100			

System : Exterior Walls				
882 Exterior Walls : Stud -Brick Veneer Total Percent for Exterior Walls:	%/Units 85 85	Quality 3.0	Depr %	Other

System: HVAC (Heating)

613 HVAC (Heating): Hot and Chilled Water

Total Percent for HVAC (Heating):

%/Units Quality Depr % 100 Occ. 100

Quality

Occ.

Other

System: Land and Site

62 Land and Site: Site Improvements

%/Units 220000

Quality Depr % Occ.

Other

System: Sprinklers

681 Sprinklers: Sprinklers

Total Percent for Sprinklers:

%/Units 100 100

Depr %

Other

Calculation Information (All Sections)

Units Unit Cost Total Less	Total Cost
Cost New Depreciation De	Jenreciated
Basic Structure	opi colatea
Base Cost 11,222 \$309.12 \$3,468,945	\$3,468,945
Exterior Walls 9,539 \$34.15 \$325,757	\$325,757
Heating & Cooling 11,222 \$38.75 \$434,852	\$434,852
Sprinklers 11,222 \$6.05 \$67,893	\$67,893
Basic Structure Cost 11,222 \$382.95 \$4,297,447 \$0 \$	\$4,297,447
Extras	
Site Improvements - Depreciated \$220,000	\$220,000
Replacement Cost New 11,222 \$402.55 \$4,517,447	•

EXHIBIT

Cost data by CoreLogic, Inc.

Except for items and costs listed under Addition Details, this SwiftEstimator report has been produced utilizing current cost data and is in compliance with the Marshall & Swift Licensed User Certificate. This report authenticates the user as a current Marshall & Swift user.





TABLE C. CONSTRUCTION CHARACTERISTICS

INSTRUCTION: If project includes non-hospital space structures (e.g., parking garges, medical office buildings, or energy plants), complete an additional Table C for each structure.

3-4	NEW CONSTRUCTION	RENOVATION
BASE BUILDING CHARACTERISTICS	Check if a	
Class of Construction (for renovations the class of the		
building being renovated)*		
Class A	<u> </u>	<u> </u>
Class B		
Class C		
Class D		
Type of Construction/Renovation*		
Low		
Average		
Good		\checkmark
Excellent		
Number of Stories	1	1
*As defined by Marshall Valuation Service		
PROJECT SPACE	List Number of Fe	
Total Square Footage	Total Squ	are Feet
Basement	0	
First Floor	11,222	1,065
Second Floor	0	
Third Floor	0	
Fourth Floor	0	C
Average Square Feet	11,222	
Perimeter in Linear Feet	Linear	Feet
Basement	0	(
First Floor	443'-6"	753'-3"
Second Floor	0	
Third Floor	0	C
Fourth Floor	0	(
Total Linear Feet	443'-6"	753'-3''
Average Linear Feet		753'-3"
Wall Height (floor to eaves)	Fee	
Basement First Floor	0 10'-0"	10'-0"
Second Floor	10-0	10-0
Third Floor		
Fourth Floor		
Average Wall Height	10'-0"	10'-0"
OTHER COMPONENTS	10-0	10-0
Elevators	List Nu	mhor
Passenger	0	inber 0
Freight	Ŏ	0
Sprinklers	Square Fee	
Wet System	11,222	1,065
Dry System Attic	11,222	1,065
Other *See attached note	Describe	· · · · · · · · · · · · · · · · · · ·
Other Oce attached note	Dedicated units conforming to	
Type of HVAC System for proposed project	air exhanges	ASTRUME TO INCOMPRISE
Type of Exterior Walls for proposed project	Studs Sheathing Brick Venner	

Studs Sheathing Brick Venner





October 8, 2021

Dr. Scott Andochick Andochick Surgical Center, LLC 81 Thomas Johnson Ct Frederick, MD 21702

Dear Dr. Andochiek:

Thank you for contacting FCB Bank, A division of ACNB Bank ("Bank") to determine your ability to finance the construction for an addition to your current office building/surgical center. Based upon the initial credit information you provided and other information we obtained with your permission, you are prequalified for a \$2,200,000 commercial construction permanent mortgage loan.

Please be advised that this letter does not constitute an approval or commitment by FCB Bank, A division of ACNB Bank for a mortgage loan. Neither does this letter obligate you to obtain a mortgage loan from the Bank. Also, any misrepresentation in the loan application or adverse change in your financial position may void this pre-qualification letter.

<u>Please note this prequalification expires in 30 days from the date of this letter.</u> We will need the contract of sale if the seller accepts your offer.

Please note that the loan amount will not exceed the lesser of \$2,200,000 or 75% of the "as completed" appraised value of the underlying collateral.

If you have any questions or need more information, please do not hesitate to call me at (240)-529-1568.

Sincerely,

Harry Weetenkamp Senior Vice President

Financing Proposal For Dr. Scott Andochick October 11, 2021

Presented by:

Harry Weetenkamp

Senior Vice President

Commercial Lender

BORROWER:

Andochick Properties, LLC or anew entity to be formed

PURPOSE:

To construct an addition to the office building/surgical center located at 81 Thomas Johnson Court, Frederick, MD 21702 and the adjacent parcel located at 83 Thomas Johnson Ct., Frederick, Md.

TERM:

Up to 240 months

INTEREST RATE:

Option 1: 5 years fixed at 3.57%, followed by a floating rate of Prime + 1% with a floor of 4.50% or a new fixed rate to be negotiated.

Option 2: 7 years fixed at 3.87%, followed by a floating rate of Prime + 1% with a floor of 4.50% or a new fixed rate to be negotiated.

Option 3: 10 years fixed at 4.10%, followed by a floating rate of Prime + 1% with a floor of 4.10% or a new fixed rate to be negotiated.

AMORTIZATION:

Up to 240 months

LOAN AMOUNT:

The loan amount shall be the lesser of \$2,200,000 or 75% of the "as completed" appraised value of the subject property.

GUARANTORS:

Scott E. Andochick MD PA

Scott E. Andochick, Individually

Andochick Properties, LLC (if borrower is a different entity)

A A & M Properties, LLC (Limited Guarantee)

COLLATERAL:

The guarantee of Andochick Properties, LLC shall be secured by a 2nd lien DOT (behind FCB Bank a Division of ACNB Bank) on real estate and improvements located at 81 Thomas Johnson Court, Frederick, MD

21702;

The limited guarantee of A A & M Properties, LLC shall be secured by a 2nd lien DOT (behind FCB Bank a Division of ACNB Bank) on $^\sim$ 1.00 acres unimproved commercially zoned building lot located at 83 Thomas Johnson Court, Frederick, MD 21702

Assignment of Rents

FEES:

TO COINCIDE WITH TYE ABOVE REFERENCED INTEREST RATES:

Option 1: .25% of the loan amount to coincide with the above interest rate option

Option 2: .35% of the loan amount to coincide with the above interest rate option

Option 3: .50% of the loan amount to coincide with the above interest rate option

Construction Loans:

- Borrower shall furnish the Bank with all construction contracts, plans, specs, Municipal approval(s) and permits prior to any construction loan advances.
- 2. Borrower shall furnish the Bank with a copy of the occupancy permit upon completion of construction.
- All disbursements under this facility shall be made at the Bank's sole discretion pursuant to the terms of a construction loan agreement and independent inspections of the property.
- 4. Borrower shall assign all agreements affecting the real estate to the Bank including the construction contract.
- 5. The General Contractors proposal must meet approval by the Bank, or choose one of the draw schedules from the Construction Draw Schedule Options and return to the Bank prior to closing.
- 6. Funds will be disbursed upon receipt of, and as authorized by the Architect on this project, under an Application and Certificate of Payment/AIA Document G702.
- Borrower(s) will also provide the Bank with a copy of the contractors Builders Risk insurance policy.

PREPAYMENT:

2% for the term of the loan. The loan will **not** be subject to a prepayment premium if the prepayment is made via cash flow generated from normal business operations or by reason of sale of the subject property.

CONDITIONS:

- Receipt of annual Financial information from Borrower.
- Receipt of annual Financial information from Guarantors.
- All expenses associated with documenting this facility will be the responsibility of the Borrower.
- A flood plain certification is required.
- Property is subject to a satisfactory Phase 1 Environmental Site Assessment of the collateral real estate indicating said property is free from all environmentally hazardous materials.
- A lender's title insurance policy satisfactory to the Bank in an amount equal to the amount of the mortgage is required insuring a good title to the collateral real estate free and clear of any liens or encumbrances.
- Satisfactory fire and hazard insurance is required naming FCB Bank, a division of ACNB Bank as mortgagee and payeeproval of proposed facility subject to completion of final due diligence by Bank
- Subject to the satisfactory review of the financial information required by Bank.

It is hereby expressly acknowledged and understood that the terms and conditions outlined herein are for discussion purposes only and not constitute final loan approval. Rather, if the foregoing terms and conditions as contained in the **Proposal** are acceptable to you, FCB Bank, A Division of ACNB Bank will seek approval and, **if approved**, will present to Borrower a formal commitment letter which will further detail the terms and conditions of the contemplated loan.

On behalf of FCB Bank, a division of ACNB Bank, I thank you for the opportunity to present this financing proposal.

Harry Westenkamp

Harry Weetenkamp, Senior Vice President

If the terms of this proposal are acceptable to you, please execute a copy of the proposal and return to the undersigned. Upon acceptance, and if approved by FCB Bank, a Division of ACNB Bank, a closing date would be set not to exceed thirty days from acceptance unless date is agreed upon by the parties, due to receipt of appraisals or other documents.

Accepted by:	Date:

Option: 1	Option:2	Option:3	
		·	



Statistical History and Projections per Specialty. The number of surgical cases projected for the facility and for each physician and practitioner specialty:

Surgeon	Specialty	2020	2021	2022	2023	2024	0005
Andochick	Cosmetic and Reconstruction	69	95	100	120	150	2025 180
Mecinski	Cosmetic and Reconstruction	333	375	400	430	475	500
Steinberg	Orthopedic	229	290	350	365	000	
Nesbitt	Orthopedic	643	675	725		380	400
Levine	Orthopedic	166	215	300	740	780	800
Thadani	Ophthalmic	513	675	700	335	375	400
Horton	Orthopedic	59	285		730	800	825
Walsh	Orthopedic	20	140	360	415	490	600
Henry	Orthopedic	8		175	200	225	275
Gupta	Orthopedic	5	15	30	50	75	95
Other(New	Orthopedic	15	0	10	40	80	100
Surgeons) 3:orthopedic	Onthopedic	15	100	225	275	345	400
New Opth	Ophthalmic			 		<u> </u>	
Tetal O		(COVID)	Increase post COVID				
Total Cases	In Vegre of historie	2060	2865	3275	3700	4175	4575

A minimum of two years of historic surgical case volume data for each physician or practitioner, identifying each facility at which cases were performed and the average operating room time per case. Calendar year January through December.

Surgeon	2019	Ave. time per case min.	2020	Ave. time per case	2021	Ave. time per case
Andochick	64	240	60	160	95	
Mecinski	440	60	323	47	375	259
Steinberg	241	90	239	67	290	45 68
_Nesbitt	798	60	653	44.5	075	
Levine	174	120	166	105	675	44
Thadani	658	45	516	23	215	106
Horton	0	 	59		675	26
Walsh	15	120		73	285	70
Henry	27	60	20	63	140	56
Gupta	7	180	8	54	15	54
Other(New	62		5	72	0	0
Surgeons) 3: orthopedic 1: Ophth	02	60	14	60	100	60
	 		(00)(10)	 		
Total Cases	2486	Ava 100 5:	(COVID)			
, ciui Cases	<u></u>	Ave. 103.5 min	2060	Ave. 70 min	2865	Ave. 79 min.



ins net of re 2019	Collectio 2018	2021	Collections net of refunds 2020 2021 2018 2019 2	2021
272,873	324,287	2 193 324,287	,	,
346,920	329,901	5 189 329,901	.,	.,
370,402	297,378	3 219 297,378	14	14
362,607	278,606	2 225 278,606	(4	(4
394,222	346,906	346,906	76 346,906	250 76 346,906
358,378	320,685		208 320,685	
400,326	269,569		220 269,569	
378,387	377,603		188 377,603	
398,754	292,618		204 292,618	
425,388	417,610		213 417,610	
349,802	419,213		172 419,213	
448,458	276,542		232 276,542	
4,506,517 4,170,270 1,744,70		826 3,950,918		826 3,950,918
375,543	329,243	207		207
14%		20%	-17%	-17%
1,813	1,904	1,904		AVERAGE COLLECTIONS PER CASE RATIO 1,904

February 2020- Closed 2 weeks for HVAC Covid-19 Closure: March 20 - May 18. Only emergent cases performed

	400	350	300	250	aiT el 200 	150	100	50	0	Year	
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PROJECTION OF CASES AND REVENUE	

都度		3000	2	8	ı			8	3
		0,0	1	10.065.000				טטר נ	7,2
		707	- 70-	.080,625				2175	-
		2023		955,000 9,				2.150	
	of refunds	2022	1 000	43,000 7,				2,120	
	Collections net o	2021	NEW FACE	731,343 6,5	436,176	,	%q7	2,112	
	3	2020	0 2 055 05	1,0,2,0	347,523 4	70,	٠/%	2,024	
	A STATE OF THE STA	2019	506 517 4 1	3080,6 000,325,000 7,955,000 9,080,625	375,543 3	170%	747	1,813	!
	-	2018	3.950.918 4		329,243			1,904	
	3000	2023	4,575						
	አር ስ ር		4,175						
	7073		3,700						
Cases	2022	755	2,2,5						
lumber of C	2021	3 925	2,000	207	, job	20%			
	2020	7.060	2,000	172	7207	R/T			
	2019	7.486	201 (-	202	30%		CASE		•
	2018	2.075		173			ECTIONS PER (
	Year	TOTAL		AVERAGE	INCREASE	100000	AVERAGE COLLECTIONS PER CASE		

February 2020- Closed 2 weeks for HVAC Covid-19 Closure: March 20 - May 18. Only emergent cases performed



TABLE L. WORKFORCE INFORMATION

INSTRUCTION: Use the facility's exist be calculated on the basis of 2, one in this table are consistent	080 paid hours with expenses	per year equal provided in unli	is one FTE, In an a nflated projections	tlachment to the in Tables F an	jor job categories he application, exp id G.	under each headin lain any factor use	g provided d in conven	in the table. The ting paid hours	number of Fu to worked hou	ill Time Equi rs. Please e	valents (FTE nsure that th
	cu	RRENT ENTIR	E FACILITY	I IHEPROP	TED CHANGES A POSED PROJECT AR OF PROJECT DOLLARS)	THROUGH THE YON (CURRENT	OPERAT	R EXPECTED OF FIONS THROUGH F PROJECTION DOLLARS	GH THE LAST N (CURRENT	FACILIT LA: PROJEC	ECTED ENT Y THROUGH ST YEAR OF TION (CURI OLLARS) *
Job Category	Current Year FTEs	Average Salary per FTE	Current Year Total Cost	FTEs	Average Salary per FTE	Total Cost (should be consistent with projections in Table G, If	FTEs	Average Salary per FTE	Total Cost	FTEs	Total C (should consisten projection Table (
Regular Employees Administration (List general						submitted).					
categories, add rows if needed)											
BOS/BOM_	1.0	\$57,581	\$57,581	0.0							
Billing	1.0	\$52,563	\$52,563	0.0 1.0		250.45			\$0	1.0	\$5
BOS	2.0	\$69,220	\$69,220	1.5		\$53,165			\$0	2.0	\$10
Administrator	1.0	\$117,653	\$117,653	0.0		\$103,830			\$0	3.5	\$17
Clinical Coordinator	1.0	\$77,987	\$77,987	1.0		\$90,000			\$0	1.0	\$11
Total Administration Direct Care Staff (List general	n 60		\$375,004	3.5		\$246,995	A CONTRACTOR	10.00 (S. C.	sing state of the	2.0	\$16
categories, add rows if needed)					on the same of the same of	1000000 B	ini/and (Maile) (Will de la Company	P-2000 \$0	运送上9. 5	\$62
RN	0.0										
RN	0.6	\$68,171	\$68,171	1.0	\$68,952	\$68,952					À
RN	0.8	\$78,145	\$78,145						\$0	1.6 0.8	\$13
RN	1,0	\$71,318 \$47,060	\$71,318	1.0	\$72,134	\$72,134			φυ	2.0	\$7
RN	0.6	\$29,366	\$47,060	1.0	\$47,599	\$47,599				1.6	\$14: \$94
re-Operative Screening RN	0.8	\$58,453	\$29,366	- ;=					···	0.6	\$29
IN	0.6	\$42,692	\$58,453 \$42,692	1.0	\$59,122	\$59,122	T		\$0	1.8	\$11
RN	1.0	\$63,750	\$63,750	1.0	\$70,720	\$70,720				1.6	\$113
IN	1.0	\$86,371	\$86,371	1.0	\$64,480 \$87,360	\$64,480				2.0	\$128
RN staff total	1.0	\$82,258	\$82,258	1.0	\$83,200	\$87,360				2.0	\$173
IN .	1.0	\$86,371	\$86,371	1.0	\$87,360	\$83,200 \$87,360				2.0	\$165
echnician echnician	0.8	\$42,569	\$42,569	1.0	\$53,820	\$53,820				2.0	\$173
ochnician	1.0	\$63,750	\$63,750	1.0	\$64,480	\$64,480				1.8	\$96
Ycian	0.6	\$33,561	\$33,561	1.0	\$40,000	\$40,000				2.0	\$128
nician	0.4	\$21,880	\$21,880							1.6	\$73
ecř	0.8	\$46,986	\$46,986	1.0	\$58,733	\$58,733				1.8	\$21
N -	0.8	\$36,917 \$39,547	\$36,917	1.0	\$46,146	\$46,146				1.8	\$105
N T	1.0	\$74,032	\$39,547							0.5	\$83 \$39
Total Direct Care	14.9		\$74,032 \$1,073,197	1.0	\$74,032	\$74,032			\$0	-0.0	\$148
upport Staff (<i>List general</i> i	- 14 m (c-5) - 10.	THE PARTY OF THE WATER	AND CLUBS IN A	enias Joi U		\$978 137			\$0		\$2,051
ategories, add rows if needed)											
PD Technician	1.0	\$44,049	\$44,049	1.0	\$44,554	\$44,554					
edical Assistant edical Assistant	0.2	\$5,758	\$5,758	2.0	\$58,240	\$58,240			\$0	2.0	\$88
edical Assistant	1.0	\$35,782	\$35,782	1.0	\$36,192	\$36,192				2.2	\$63
DVID 19 Screening	1.0	\$28,790	\$28,790	1.0	\$29,120	\$29,120				2.0	\$71,
edical Assistant	1.0	\$27,680	\$27,680			VIII.	-+			2.0	\$57,
Total Cumport		The second second		1.0	\$37,500	\$37,500	- +			1.0	\$27,
Total Support GULAR EMPLOYEES TOTAL	05 4		\$142,059	6.0	diam'r	\$205,606			\$0	1.0	\$37,
Contractual Employees ministration (List general legories, add rows if needed)			61,590,260	24.5		\$205,606 \$1,430,788			\$4.2.\$0.2	49.6	\$3,020
nical Coordinator	$ \Box$ \Box		\$87,360	1.0		\$87,360	7		4.1		
nical Coordinator OR			\$0	1.0		\$87,360			\$0	1.0	\$174,
			\$0			\$0	- -		\$0	1.0	\$87,3
Total Administration		Maria de la como	\$0						\$0 \$0	0.0	
Total Administration oct Care Staff (List general	47.6000000000000000000000000000000000000	Tringing Ma	\$0			\$ 02.280	1200	10.00	\$ 25.50		
egories, add rows if needed)									mary party		er en state de la company
			\$0								
	+		\$0 \$0			\$0	$-\bot$		\$0	0.0	
			\$0			\$0	_		\$0	0.0	***
			\$0			\$0	—		\$0	0.0	
Total Direct Care Staff	a paragraphic and the			2000 00 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	tige statum has	\$0 \$ 0	Mariera Cara	(1951) (OLUMBIA SILA	\$0	0.0	
port Staff (List general			20 10000	- NAC 19450				a 用型器 高数	\$0 5	0.0	
egories, add rows if needed)											
			\$0			\$0			eni	0.01	
	_		\$0			\$0			\$0	0.0	
	_		\$0			\$0			\$0	0.0	
Total Suprem Ox. 2017	BOOKS AND A STREET	S A Troppe .	\$0						\$0 \$0	0.0	
Total Support Staff			\$0			- \$0			\$0 4.80	Contraction Contract	(
efits (State method of	AL MIL	编域。集份	\$0				Standard All Conduction	Married States II and the	\$0 so	=0.0 =0.0	
ulating benefits below) :						- 1- 1		and the second second	and 20 10 10 10 10 10 10 10 10 10 10 10 10 10	WIND STREET	
AL COST	25.1	Total Control	1,049,383			430,738					



' 'ear	2016	2017	2018	2019	2020	2021	1 2022	10000		
penses	3192181.8	3299538.3	3783991.6	3805413.9	4017706	4417548	2022 4762856	2023 552121	2024	2025
Charity	\$3,847.00	\$5500.00	\$9905.00	9			1702550	3	609012 5	654185
Care			_ \$5505.00	\$8000.00 	0 pandemic	16000	24000	32000	40000	45000
% Charity Care	.10	.16	.26	.20	0	.36	.48	.57	.65	.68-1.0
						<u></u>	<u> </u>			

REVENUES AND EXPENSES - ENTIRE FACILITY (including proposed project)

a. Inpatient services 4,506,517 4,170,269 6,051,543 6,943,000 7,955,000 9,080,625 10,065,000 b. Outpatient services 4,506,517 4,170,269 6,051,543 6,943,000 7,955,000 9,080,625 10,065,000 c. Gross Patient Services Revenue 8,000,00 0 16,000 24,000 32,000 40,000 45,000 f. Charity Care 8,000,00 0 16,000 24,000 32,000 40,000 45,000 g. Net Patient Services Revenue 4,506,517 4,170,269 6,051,543 6,943,000 7,955,000 9,080,625 10,065,000 h. Other Operating Revenue 4,527,313 4,182,054 6,066,543 6,958,000 7,970,000 9,095,625 10,065,000 n. Net Operating Revenue 1,251,755 1,299,693 1,815,463 2,082,900 2,386,500 2,724,188 3,019,500 a. Salaries, Wages, and Professional Fees, (including fringe benefits) 1,251,755 1,299,693 1,815,463 2,082,900 2,386,500 2,724,188 3,019,500 b. Contractual Services 1,178,282 17,217 15,003 10,030 5,013 </th <th>TABLE</th> <th>Actual two ended rec 2019</th> <th>ent years</th> <th>Current Year Projected 202</th> <th></th> <th>ith first full y</th> <th>ear at full utiliz 3 2024</th> <th>•</th>	TABLE	Actual two ended rec 2019	ent years	Current Year Projected 202		ith first full y	ear at full utiliz 3 2024	•
Section Sect	b. Outpatient servicesc. Gross Patient Service Revenued. Allowance for Bad Debte. Contractual Allowance	•	,,	, ,	, ,	, ,		
Net Operating Revenue	g. Net Patient Services Revenue		_			•	,	
A, Service Operating Revenue 4,527,313 4,182,054 6,066,543 6,958,000 7,970,000 9,095,625 10,080,000 a. Salaries, Wages, and Professional Fees, (including fringe benefits)		20,796	11,785		, ,	,,		
a. Salaries, Wages, and Professional Fees, (including fringe benefits) b. Contractual Services c. Interest on Current Debt d. Interest on Project Debt e. Current Depreciation f. Project Depreciation g. Current Amortization h. Project Amortization i. Supplies j. Other Expenses (Facility Exp) j. Other Expenses (Misc) b. Total Operating Expenses A income from Operation c. Income from Operation represedant in the service of th	i. Net Operating Revenue	4,527,313	4,182,054	6,066,543				
d. Interest on Project Debt 0 0 0 0 17,217 15,003 10,030 5,013 1,610 815 e. Current Depreciation 117,802 278,758 150,000 100,000 75,000 50,000 50,000 f. Project Depreciation 30,958 13,922 13,900 3,632,250 4,026,000 4,026,000 70,042,500 705,400 719,400 742,500 719,400 742,500 719,400 742,500 719,400 742,500 742,500 721,900 634 126 723,113 7,978,185 <td>Professional Fees, (including fringe benefits) b. Contractual Services</td> <td>1,251,755</td> <td>1,299,693</td> <td>1,815,463</td> <td>2,082,900</td> <td>2,386,500</td> <td></td> <td></td>	Professional Fees, (including fringe benefits) b. Contractual Services	1,251,755	1,299,693	1,815,463	2,082,900	2,386,500		
d. Interest on Project Debt e. Current Depreciation 117,802 278,758 150,000 100,000 75,000 41,000 36,000 f. Project Depreciation g. Current Amortization 30,958 13,922 13,900 13,	c. Interest on Current Debt	20,295	17 217	15.003	10.000	5.040		
e. Current Depreciation f. Project Depreciation g. Current Amortization h. Project Amortization h. Project Amortization i. Supplies j. Other Expenses (Facility Exp) j. Other Expenses (Misc) f. Other Expenses (Misc) f. Total Operating Expenses (Misc) f. Total Operating Expenses (Misc) f. Total Operating Income from Operation c. Subtotal f. Subtotal f. Project Amortization i. Supplies 1,728,824 1,775,345 2,420,617 2,777,200 3,182,000 3,632,250 4,026,000 742,50	d. Interest on Project Debt		•	10,000	10,030			
h. Project Amortization i. Supplies j. Other Expenses (Facility Exp) j. Other Expenses (Misc) j. Other Expenses (Misc) k. Total Operating Expenses b. Non-Operation b. Non-Operation b. Non-Operation c. Subtotal d. Income Taxes c. Net Income (Loss) 30,958 13,922 13,900 14,010 14,010 14,010 14,010 14,010 14,010 14,010 14,010 14,010 14,010 14,010 14,010 14,010 14,010 14,010 14,010 14,010 14,010	f. Project Depreciation	117,802	_	150,000	100,000	75,000	50,000	•
j. Other Expenses (Facility Exp) j. Other Expenses (Administrative) j. Other Expenses (Misc) k. Total Operating Expenses a. Income from Operation b. Non-Operating Income c. Subtotal d. Income Taxes e. Net Income (Loss) 1,725,824 1,775,345 2,420,617 2,777,200 3,182,000 3,632,250 4,026,000 719,400 742,500 741,680 741,385 741,300 742,500 741,680 741,580 741,680 741,680 741,681 741,7840 741,885 741,900 742,500 741,681 741,7840 742,500 742,500 741,680 741,680 741,680 741,681 741,7840 741,885 741,900 741,689 741,900 742,500 741,680 7	h. Project Amortization	30,958	13,922	13,900	13,900	•		
j. Other Expenses (Facility Exp) 372,885 378,331 392,356 399,806 705,400 719,400 742,500 (Administrative) 282,260 254,314 363,093 416,580 477,300 544,838 603,900 k. Total Operating Expenses 3,805,413 4,017,706 5,170,432 5,800,416 7,238,113 7,978,185 8,618,615 a. Income from Operation 721,900 164,348 896,111 1,157,584 731,887 1,117,440 1,461,385 b. Non-Operating Income 0 454,671 c. Subtotal 721,900 619,019 896,111 1,157,584 731,887 1,117,440 1,461,385 d. Income Taxes 50,700 71,689 92,607 58,551 89,395 116,911 e. Net Income (Loss) 721,900 568,319 824,423 1,004,077 200,000 705,400 719,400 742,5		1,728,824	1,775,345	2.420.617	2.777 200	3 182 000	2 620 050	4 000 000
(Administrative) 282,260 254,314 363,093 416,580 477,300 544,838 603,900 k. Total Operating Expenses 3,805,413 4,017,706 5,170,432 5,800,416 7,238,113 7,978,185 8,618,615 3,805,413 4,017,706 5,170,432 5,800,416 7,238,113 7,978,185 8,618,615 a. Income from Operation b. Non-Operating Income 0 454,671 c. Subtotal 721,900 619,019 896,111 1,157,584 731,887 1,117,440 1,461,385 d. Income Taxes 50,700 71,689 92,607 58,551 89,395 116,911 e. Net Income (Loss) 721,900 568,319 824,422 1,004,077 575,551 89,395 116,911	j. Other Expenses (Facility Exp)	372,885	378,331			-		
a. Income from Operation b. Non-Operating Income c. Subtotal d. Income Taxes D. Net Income (Loss) 721,900	(Administrative) j. Other Expenses (Misc)		254,314	•		,		•
a. Income from Operation 721,900 164,348 896,111 1,157,584 731,887 1,117,440 1,461,385 b. Non-Operating Income 0 454,671 721,900 619,019 896,111 1,157,584 731,887 1,117,440 1,461,385 d. Income Taxes 50,700 71,689 92,607 58,551 89,395 116,911 e. Net Income (Loss) 721,900 568,319 834,423 1,004,077 375,577	k. Total Operating Expenses	3,805,413	4,017,706	5,170,432	5,800,416	7.238.113	7 078 185	0.610.645
b. Non-Operating Income 0 454,671 c. Subtotal 721,900 619,019 896,111 1,157,584 731,887 1,117,440 1,461,385 d. Income Taxes 50,700 71,689 92,607 58,551 89,395 116,911						1,200,110	7,970,100	0,018,015
d. Income Taxes 50,700 71,689 92,607 58,551 89,395 116,911 6. Net Income (Loss) 721,900 568 319 824 423 1 004 077 077 077 078 078 078 078 078 078 078	 b. Non-Operating Income 	0	454,671	896,111	1,157,584	731,887	1,117,440	1,461,385
e. Net Income (Loss) 721,900 568 319 824 422 1 004 077 58,551 89,395 116,911		721,900		896,111	1,157,584	731.887	1,117,440	1 461 395
5. Net income (Loss) 721.900 568.319 824.422 1.004.077 070.000		701.55-						
	(LOSS)	/21,900	568,319	824,422	1,064,977	673,336		



TABLE 1: STATISTICAL PROJECTIONS - ENTIRE FACILITY

TABLE 1. STATISTIC		st Actual	Current Year Projected	Projecte		ll year at ful	utilization)
CY or FY (Circle)	2019	2020	2021	2022	2023	2024	2025
a. Number of operating rooms (ORs)	2	2	2	4	4	4	4
Total Procedures in ORs	2486	2060	2865	3275	3700	4175	4575
Total Cases in ORs	2486	2060	2865	3275	3700	4175	4575
Total Surgical Minutes in ORs**	123343	108883	151845	196500	222000	250500	274500
b. Number of Procedure Rooms (PRs)	1	1	1	1	2	2	2
Total Procedures in PRs	15	59	100	150	190	230	270
Total Cases in PRs	15	59	100	150	190	230	270
• Total Minutes in PRs**	435	2100	3559	5250	6650	8050	9450

^{*}Number of beds and occupancy percentage should be reported on the basis of licensed beds.
**Do not include turnover time.

TABLE 2: STATISTICAL PROJECTIONS - PROPOSED PROJECT

	Projected Y		t full utilization)	
CY or FY (Circle)	2022	2023	2024	2025
a. Number of operating rooms (ORs)	2	2	2	2
Total Procedures in ORs	1310	1480	1670	1830
Total Cases in ORs	1310	1480	1670	1830
Total Surgical Minutes in ORs**	78600	88800	100200	109800
b. Number of Procedure Rooms (PRs)	1	1	1	1
Total Procedures in PRs	75	80	115	135
Total Cases in PRs	75	80	115	135
• Total Minutes in PRs**	2625	2800	4025	4725

^{*}Do not include turnover time





October 8, 2021

To whom it may concern:

Re: Dr. Scott Andochick

Dr. Scott Andochick and Andochick Surgical Center, LLC T/A Physicians Surgery Center, of Frederick (PSCF) are both long time customers of the Bank. All their loans are handled in a satisfactory manner. Dr. Andochick and affiliated parties maintain aggregate deposit balances well in excess of \$500,000 with the Bank. All deposit accounts are handled in a satisfactory manner.

There has been some conversations /meetings with Dr. Andochick to discuss the build out project for the expansion of the surgical center.

Sincerely

Hafry Weetenkamp Senior Vice President

FCB Bank a Division of ACNB Bank

		(



July 7, 2021

To whom it may concern:

Re: Physicians Surgery Center of Frederick (PSCF)

Andochick Surgical Center, LLC T/A Physicians Surgery Center of Frederick (PSCF) is an existing customer of the Bank. Their term loan has been handled in a satisfactory manner. They maintain a six-figure deposit relationship with the bank. The deposit account has been handled in a satisfactory manner.

There has been some preliminary conversations /meetings with Dr. Andochick to discuss the build out project for the expansion of the surgical center.

Sincerely,

Harry Weetenkamp Senior Vice President

FCB Bank a Division of ACNB Bank





July 7, 2021

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Sincerely,

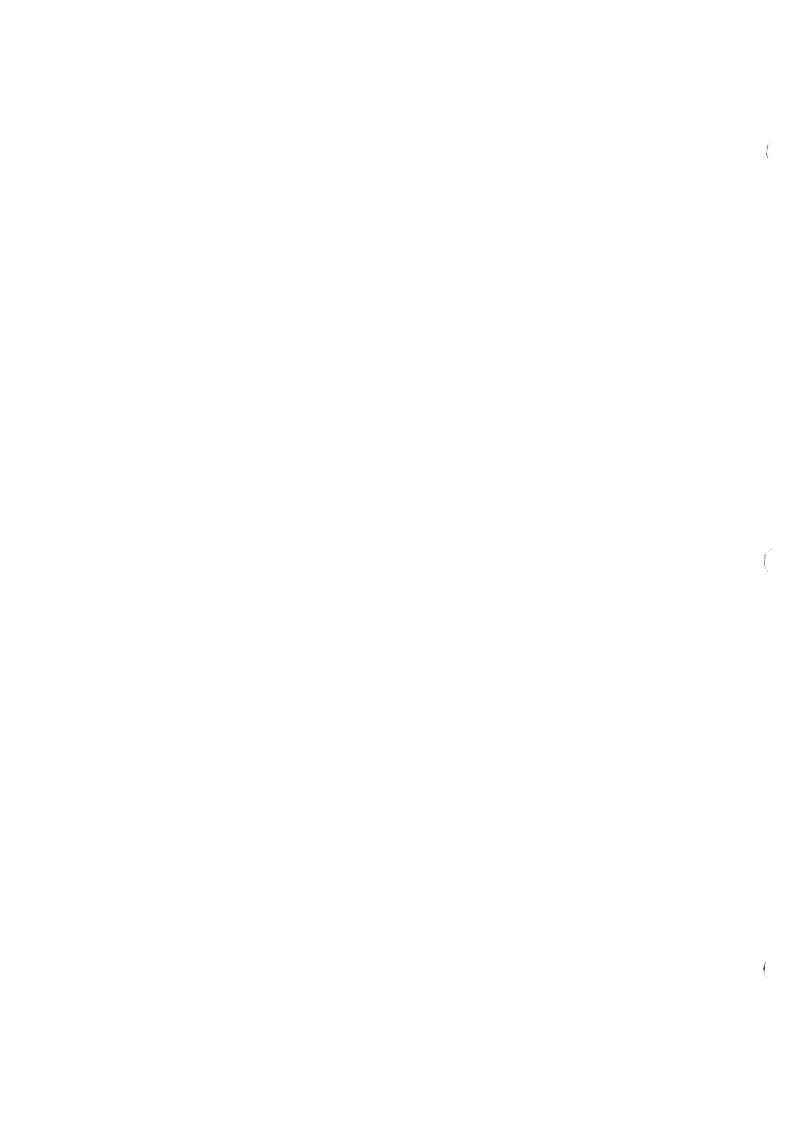
Harry Weetenkamp Senior Vice President

FCB Bank a Division of ACNB Bank

(

Month/Year:___ Topic/Issue Resolved Summary Y/N Y/N **Business Office** Meeting Charity Care Review Y/N Policy and Y/N **Procedures** Contracting Y/N HR Y/N Front Desk Y/N Billing Y/N P&L Y/N Other Y/N Y/N Y/N Y/N Y/N Y/N Y/N Y/N Y/N Y/N Date Submitted to Performance Improvement Committee: Signature

Business Office: Monthly Summation Performance Improvement Report



Performance Improvement Meeting May 2021 Meeting date June 4, 2021 1400-1500 Agenda Topics:

Members Present: Shannon Magro RN, Scott E. Andochick, MD, Jennifer Terry, RN,

Members Absent: None

S. Magro RN called the meeting to order at 1400.

- Review and Approve minutes from the meeting held May 3, 2021 ensued. All present approved minutes as written and no changes recommended at this time.
- Risk Management Checklist Review:

The monthly RM Checklist report for May as completed on June 1, 2021 reveals the following: No problems reported for the month of May 2021.

- PSCF is considering expansion plans as our operating rooms have reached capacity. This will be further
 discussed at subsequent meetings and as approved by the Board of Directors. Application for CON is in
 progress. Due date to MHCC is July 9. As we progress with the process, this topic will be addressed as
 indicated and directed by the Board of Directors. Current work with the architect continues and
 proposed floor plans will be shared when finalized. All present recommends that the process continue to
 proceed.
- Review of PI and Incident Reports: Review of PI reports submitted last month was conducted as noted below
- PI Reports for the month of April 2021: None reported this month.

Date	Location	Description of Event	Action Taken	Outcome
4/7/2021	SPD	Questionable damp set	Surgeon aware and approved after consultation with SPD and peer surgeons in addition to Steris. Monitored closely.	Too many towels under tray. Process changed to one only. Instruments not damp and no negative outcome reported to date 4.26.2020 Will continue to monitor and track. Isolated event
4/29/2021	PACU/OR	Returned to OR	Exploration of Right Breast and evacuation of Hematoma and resolution of source of bleeding	Returned to Recovery Room and recovered without event, discharged home in stable condition. No bleeding noted. Appropriate return to the OR to insure patient safety. Not negative trend noted at this time. Will monitor on a continual basis

Follow up Reports:

a. All issues reviewed as reported in May 2021 revealed no long-term negative outcomes. All issues resolved and no Peer Review concerns reported.

Steris recommendation and reviews followed. No break in technique or problems regarding infection control reported.

All Return to Operating Room events are monitored on a continual basis. This event was isolated, resolved and no negative trend reported.

• <u>Patient Satisfaction</u>: PSCF overall Score increased in the month May dipped slightly to 0.3 percent below national average and compared to March. See attached report. The three top decliners were discussed: 1. Instructions Prior to Surgery, 2. Recommend facility, 3. Wait time. All were encouraged to assist staff in improving in all of these areas and to support Simple Admit with preoperative education of the patient. All present agreed and will be monitored for Improvement.

May report has been shared with all staff to raise awareness and promote improvement.

Becky Edland, RN continues managing patient complaints or issues of concern via CTQ Solutions for
prompt resolution, and reports monthly progress to the PI committee. See attached Quality Intelligence
report for May 2021. One issue was escalated in CTQ Solutions due to patient concerns over the
weekend. The situation has been resolved and all appropriate actions were taken to keep the patient
notified, educated and safe. Dr. Horton declines having staff contact patients over weekend and states
he will do so himself as needed.

We will monitor this closely in the coming months and make adjustments if indicated. All issues have been resolved.

PSCF will participate in the Leapfrog Survey due July 31, 2021.

- <u>Infection Control/Complications</u>: No infections or complications reported for the month of May 2021. Survey return remains high.
- Patients are to quarantine after being texted for Covid or may be rescheduled by anesthesia services. All staff are required to work as if all patients are positive to protect themselves and all who we serve 100% of the time along with use of proper PPE, N95 mask, enhanced infection control practice, high-level awareness and monitoring the ever-changing coronavirus. This also enables them to mitigate unknown spread until further guidelines and regulatory bodies develop recommendations...
- Periodic ongoing education and training offered to all staff regarding proper us, donning and removal of PPE in addition to quarantine guideline review. Hand Hygiene/Glove Observation study in progress.
 Compliance remains very high. See attached documentation tool.

Handwashing, PPE utilization and disinfection Surveillance audits reveal good compliance at this time. Surveillance remains ongoing and continual. Compliance was good during the month of Mayl. See attached audit topics with staff engaged in the process.

Turn Over Infection control study is planned for the third quarter. Further information will be provided at that time.

Vaccinations: All staff continue to be strongly encouraged to get COVID 19 vaccinations. Anyone who declines has the opportunity to change their mind at any given time and are encouraged to be vaccinated.

Maryland Ambulatory Surgery Association update regarding APIC comments on adherence to stricter measures to prevent spread of COVID 19 shared with attendees and all staff and physicians at PSCF. See attached copy for reference.

<u>Safety and Quarterly environmental evaluation of facility complete</u>. See attached report submitted by Becky Edland to the PI Committee. All issues as documented on attached reports repaired and/or resolved as indicated. No other significant problems have been reported in the month of May. See attached log of reports for documentation of issues and status of repairs and problem resolutions. All issues have been resolved.

- a. Recalls: Alcon Custom Packs were recalled due to questions with surgical gowns in the packs of affected lots. All gowns were replaced in the packs and others discarded as directed by ALCON recall. PSCF will monitor future deliveries for those lots. If received, they will be corrected or returned in compliance with recall notice attached. At this time, none has been received.
- <u>Medical Gas system:</u> Beacon Medaes Panel in Main OR has been replaced and updated with current technology and approved for use. No problems have been identified since that time and it has been placed on the current PM agreement with MEGSS.
- c. Evaluation of the Haddon's Matrix to Identify risk and Prevention Strategies was reviewed. This will be considered for enhanced workplace violence prevention. See attached example of Hot Wash Tool. Staff engagement is positive and strong. This process will be integrated in to the drill program at the facility to enhance safety and minimize risk to employees moving forward. Staff education and training provided.

Annual Infection Control Report:

The report revealed no infections reported in the year of 2020. Infection Rate: zero

Infection rate ytd May 2021: 0

TB is at low risk to the center and community.

COVID 19 remains prevalent and all preventative measures are in place to protect patients, staff and community at large. Staff are in the process of getting vaccinated and/or signing educational waivers stowed in their employee file. All are strongly encouraged to vaccinate. All Regulatory requirements in place to insure safety of the staff, patients and community. Visitation remains restricted to patients only and one parent of a minor to mitigate spread.

Enhanced infection control practices remain in place and a compliance study is planned for July 2021. No problems have been noted to date.

Safety

Drills: April/May drill report attached. No problems have been reported to date. Compliance and participation is good. For the month of May, an Active Shooter Drill, and full facility evacuation/shelter in place drill was carried out. See attached Drill Summary. Critique in Drill binder for review. This drill went very well.

May Drill Report: Patient Emergency Transfer and Generator/Utilities Failure drill conducted. See drill binder for critique. All went very well and participation is strong. Summary attached.

Lipid rescue training was reviewed as performed in previous months to reinforce staff awareness. See attached information shared with staff in addition to application of the rescue process with April Code Drill. All present agreed the education and drill was very helpful to the staff.

Handwashing: No problems reported in May. Compliance is good utilizing full PPE as required to insure enhanced infection control practices for the safety of the patient and staff. Reminders given on a regular basis. All are directed to self-monitor and monitor their peers to insure safety awareness and safety for all.

Compliance and enforcement is mandatory for all patient touch and non-patient touch staff to assist in patient safety and employee safety. Staff will be evaluated as indicated and counselled as needed. No significant problems are reported at this time.

Traffic control reminders provided and monitored regularly and ongoing regarding lounge capacity and distancing during meals. Staff safety is paramount. All areas are required to observe PPE and distancing time outs on a continual basis.

Distancing notices and mask instructions remain in place for all. HEPA air filtration and UV light system is in place

Sterile Processing- There were no problems identified on the SPD checklist for May 2021 as reported by SPD technician Derek Crouse. See attached report.

Variety of quotes for water conditioning system is in progress. This will assist in improving water quality to SPD equipment as recommended by Steris Corporation. Culligan and Steris Systems will be evaluated for quality and installed in the third quarter. This will be further addressed when a decision has been made. Water has been sent for testing to determine the specific needs of the center.

Materials Management Report:

Loss review: No significant loss reported this month. No problems reported in the month of May with the exception of the Alcon Pack Recall as addressed above.

PSCF was considering the purchase of a New Centurion Phaco Machine. ROI in progress in addition to purchase of eye set and Toric instruments upon request of the surgeon to enhance turn around times and support sterile processing team in time management when two OR's are running at the same time.

A cost analysis is under review for the following:

- o Alcon Centurion Chaco Machine
- Zeiss Lumera Microscope: tabled until further notice
- Eye instruments: 2 Toric Sets and 2 Cataract Sets
- o Skytron OR boom lights
- o Water treatment system
- Stryker Light Source for Dr. Nesbitt

Gas Modules on Anesthesia machines

The following products are reported as remaining on back order: However, MM has been able to maintain stock at PSCF at this time. The issue is being monitored carefully.

.25% Marcaine Plain: Pending delivery

Alternatives are under review by Materials Manager. No problems have been reported because of the issues at this time.

Product Evaluation:

No Reports for the Month of May

Simple Admit: Well received by staff utilizing product. Remains under review and revisions remain in progress. Some patients prefer phone screening. Evaluation is ongoing due to the complexity of the product and periodic updates required. Will work to enhance the patient education process to improve satisfaction

Potential needs for 2021:

Due to end of life:

Stretchers

Washer/disinfector: will also install water treatment system to prolong life of the equipment.

Stryker Heavy Power

Zoll Defibriliator: under review.

• Education:

Completed monthly as reported by Cheryl Huffman, RN PSCF Education Coordinator. See attached report for May 2021. See In-service manual summary for record of presentations and attendance on a monthly basis.

Healthstream Education remains ongoing and required of all staff specific to their area of service. Process under review and update to improve the orientation process for new hires. Expired courses have been replaced and/or updated by C. Huffman, RN.

Patient Education:

Valuables waiver has been put in to place to educate patients and to support the risk management process. This document is initiated at the front desk.

Kelly Cox RN is updating and developing improved medication education materials for patients upon discharge from PSCF:

Antibiotic stewardship and Opiod education for prescriptions to keep patients, families and community safe.

Compliance with prescribers Prescription Drug Monitoring Program for Maryland CRISP. PSCF in process of enrollment. This will also be a component of the PSCF Credentialing process in the future. Compliance with all requirements will be added to the PSCF monthly chart audit and pharmacy review.

Education Materials to assist patient in understanding of DVT prevention devices to be provided upon discharge to enhance risk minimization efforts. See attached. Well received by patients and their families.

The PSCF clinical team is developing total Joint Patient Education Class. This will be further addressed when fully coordinated with all surgeons. Patients will benefit from an in person course and tour of the facility once complete and COVID guidelines permit.

Summary of Drills:

Drills and Critiques complete, participation good, no problems identified. May summary is attached. Very good review for all attendees. See attached drill schedule and table of contents for 2021.

- Monthly Staff meeting: Refer to Staff Meeting Minutes Manual for review of topics covered.
- Credentialing: For presentation to the Board of Directors for approval.

For the month of May 2021:

Re-Appointments:

No Report of activity for May 2021

New:

No report of Activity for May 2021

Provisional Reviews:

No report of activity for May 2021

Voluntary Withdrawals:

None

Peer Review ongoing and perpetual:

There are no Peer Review issues or negative trends to report for the month of May 2021. There was one patient return to the OR for bleeding control. Isolated event which was resolved and no long-term adverse effects reported.

Annual Peer Review remains ongoing and perpetual. There were no significant problems reported ytd 2021 via events, audits and behavioral/compliance. The process works well at this time and the Board is very receptive to ongoing reviews and improvement.

• Environment of Care and Safety:

- a. No problems reported for the months of may 2021. See attached documentation via Medical Records Review.
 - o Drills as previously addressed above. Refer to Drill logbook.

- o Monitor Log under development. See attached copy.
- o Fire and Safety Inspection issues addressed and resolved. Fire Extinguishers checked by monitoring company and confirmed properly charged. No problems reported.
- Will work on checklist to evaluate and mitigate workplace violence. Becky Edland will present document once complete. Pending.
- o Review of Panic button conducted with Safety Nurse and Business office staff.
- Equipment repairs complete. See attached log
- b. OSHA 300 document remains posted by employee time clock for easy access.

Pharmacy Review:

No problems reported on monthly pharmacy reports for the month of May by the pharmacy nurse Kelly Cox, RN. Crash cart review unchanged and audits conducted monthly. Back orders have arrived! Contents have been replaced and updated. We are hopeful the rest will arrive soon and backorders will be behind us! Audit form remains under consideration for revision to improve efficiency.

Diversion Audits are perpetual and ongoing. No problems identified for the month of January as completed by D. Copper, RN. See attached reports. Lauren Moser, RN will oversee this audit while Danyelle is on maternity leave.

Bacitracin no longer favored for irrigant or instillation. Povidone Iodine literature attached to evaluate as a replacement protocol for irrigation solutions. All surgeons and staff notified and updates applied as recommended in May.

Drug Recalls: NO medication recalls noted. Alcon eye packs as noted and reported on above.

Pathology/Radiology Reviews:

No problems identified. Turn around times appropriate and less than 72 hours.

Maryland Cancer Registry dialogue in progress. Lauren Moser, Kimberly Herr and Meagan Brown will chair this process. Reporting has been re-initiated.

Radiology Reports: No problems reported.

Education and communication of annual exposure remains in progress. No problems reported in May

For Radiology safety, there were no problems or issues of concern reported during the month of May.

Medical Records: 18 Records Reviewed

See attached chart audit record now in place for results. The audit record has been updated to reflect Pre-Operative and Post-Operative COVID screening is complete and followed up on appropriately if indicated. No significant problems identified in September 2020 charts.

PSCF is poised and ready to start the education and onboarding process for Simple Admit in November. It is believed this will enhance the medical record completion rates. However, we will audit to confirm. Further information will be reported once fully implemented and charts available for auditing process.

Chart Audit Summary:

A. Issues reported in May 2021

Results have revealed improvement in all areas.

Audit form updated to cover post-operative COVID screening compliance and follow up.

Staff reminded to document number of IV sticks in Pre-op and that Time Out is always as a method of support to the time out process, pre op confirmations will be continued. Documentation of time out in the OR and will include proper use of PPE moving forward for safety purposes.

See attached report for May

B. Peer Review:

No significant problems reported via chart audits and Anesthesia/Surgeon Peer Review. No negative trends observed and quality of care is appropriate to diagnosis for the specialty reviewed.

No significant problems reported for the month of May. No negative trends noted.

 Business Office: See attached report submitted by the Business Office Manager regarding monthly security audit for December and Cyber Security education and training for 2020. No problems identified.

See attached Business Office Summary of activities for May:

See attached Profit and Cost by Physician report reviewed by committee attendees.

Human Resources:

Business Office Manager has been put into place. Welcome to Karen Lind

RepTrax: Functional and no problems reported in May 2021.

BCBS negotiations continue and are nearing finalization. This will be further addressed when additional information and a response from BCBS is received. All present agreed and are hopeful for a good response. See attached documents. Awaiting a response from Carefirst.

Now that we are utilizing Simple Admit, the patient packet is under revision. Further information will be provided at the next meeting. All present agreed it was appropriate. Copies will remain available for any patient that wishes to receive it.

New Copiers for Business Office are working well and is a significant improvement in work actives and efficiency in the business office condominium. If they proves to save time and improves efficiency with a positive ROI, PSCF will move forward once the current copier fails. At this time, we are leaning toward the Ricoh product.

Financials Reviewed: Progress is good. See attached

Healthcare disparities and data collection discussed. Insufficient evidence to evaluate if disparities exist. We will continue to monitor and take corrective actions as indicated to assure access to all and promote

PSCF charity care process on an ongoing basis. This will be further discussed periodically as additional data is collected and stratified. Data collection has been improved as directed by the BOM.

Business Office Meeting: See minute is manual for reference.

• Business Office PI Report:

The PSCF Fee schedule will be evaluated and updated in 2021 by the Business office manager and board of directors to determine if changes are necessary.

Authorization process of receiving from offices is good and no significant problems have been reported in May. The PSCF business office team is working closely with surgeons offices to insure compliance and accuracy of the process. No losses due to authorizations issues for the month of May.

Profit and Loss

Charity Care Progress Report review; Provided by Karen Lind. Letters sent to offices to raise awareness to community. Will monitor for improved activity and report at subsequent meetings.

See attached summary of Business Office Activities.

We welcome Karen Lind BOS/BOM to our team.

Privacy and Security:

No breaches confirmed on security audit and general security throughout the facility for the month of May. Corporate Compliance Training is provided annually and as needed. Compliance is good and staff are very conscientious of the process. Karen Lind has been assigned as Privacy and Security Officer of PSCF.

Policy Review:

- a. Advance Directives updated and staff education provided at March staff meeting
- b. Employee Manual is revised and has been implemented for 2021. Staff are in the process of acknowledging receipt.
- c. Enhanced Infection Control processes in place and under continual evaluation. Post op follow up revised and implemented. Revisions will continue to follow the ever-changing local and national rates of COVID infection and recommendations by the CDC and FCHD. Updates will be implemented as received.
- d. PPE management and compliance under ongoing review. Safety and Emergency Preparedness readiness is in good compliance.
- e. Healthcare disparities review discussed and methods of improvement of data collection in progress.
- Policies and Procedures.
 - f. *All are ongoing and under perpetual review via Policy Stat process.
- Studies:

- 1. Handwashing and Infection Control practice observation: revised and more comprehensive. See attached form. Compliance is strong, staff actively engaged and now peer monitoring.
- 2. Infection Control in the Operating Room to be initiated in July.
- 3. Healthcare disparities analysis

Other:

The PSCF team strives to be survey ready at all times and will continue to do so.

Tech late day assignments discussed and will be implemented on a fair cycle to insure adequate daily coverage.

Evaluation of website and PSCF brochure. Revisions in progress.

CON Application under development.

The meeting adjourned at 1500

Minutes Submitted by	/
Date Approved	/



PHYSICIANS SURGERY CENTER of FREDERICK

Board of Managers/MEC Meeting June 29, 2021

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	Agenda		BOM Hanc
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Constituent exceptioner	Order: 530pm	S. Magro	
A CONTRACTOR AND THE PARTY OF T	w/Approval of January/2021 Meeting Minutes	. S. Magio, 2.	
III. •	Financial Reports		
	Growth of the Center and Recruiting (Walsh, Horfon, Gupta)		
New B	usiness:		
•	Goriona Mutus Pre-Operative Testing Policy Employee/Patient PPE, Waiting re	oom-Screenings	
	vaccines: Effective July 1, 2021 , 3.24	D M	Subject of
	Staffing Policy: Disabilities/Diversity/Junches 401K. EGG Contract Negotiations: Carefirst	and the second	Magio 🗸
•	Credentialing: Peer Review/Risk Management Review		
	Capital Equipment: Rosa Robotics/Microscope/Centurion/Boom lighting Performance Improvement/Risk Management/Intection Control/WC claim		
•	Leapfrog Survey		
•	Business Office Manager Report:		
	Healthcare Benefits: Open Enrollment: CareFirst Employee Health Insurance. Other:		
V. Option	al Agenda Item:		
Colors legislature de Roman de Colors de Color	pikanssion		
VII. Adjour		S. Magro	
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PHYSICIANS SURGERY CENTER of FREDERICK

Board of Managers/MEC Meeting September 15, 2021 Agenda

Agenda Item Responsible Action Call to Order: 530pm S. Magro Review/Approval of June 2021 Meeting Minutes S. Magro Ш. Financial Reports Old Business: ΙV Growth of the Center and Recruiting CON Direction the Directors/Partners would like to proceed New Business: Block Time Review Corona Virus Pre-Operative Testing Policy: Employee vaccines-Effective September, 2021 Magre Staffing Policy: Late Days and additional pay request/Raises ECG Contract Negotiations: Carefirst Credentialing: Peer Review/Risk Management Review Business Office Report: Charity Care Policy Capital Equipment: Centurion/Boom lighting/Water Treatment/Heavy Power/Hip distractor Performance Improvement/Risk Management/Infection Control/WC claim (Serena/Jenn) Other: V. Optional Agenda Item: Open Discussion VII. Adjournment S. Magro

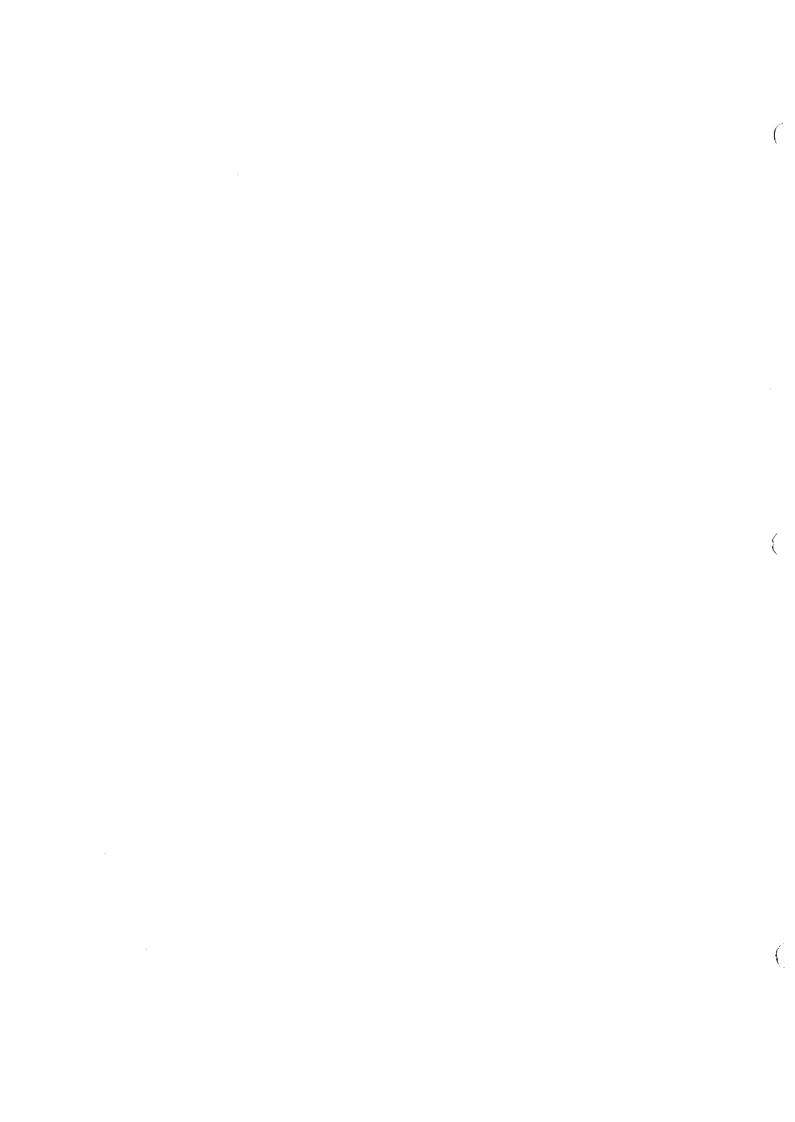
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Board Review

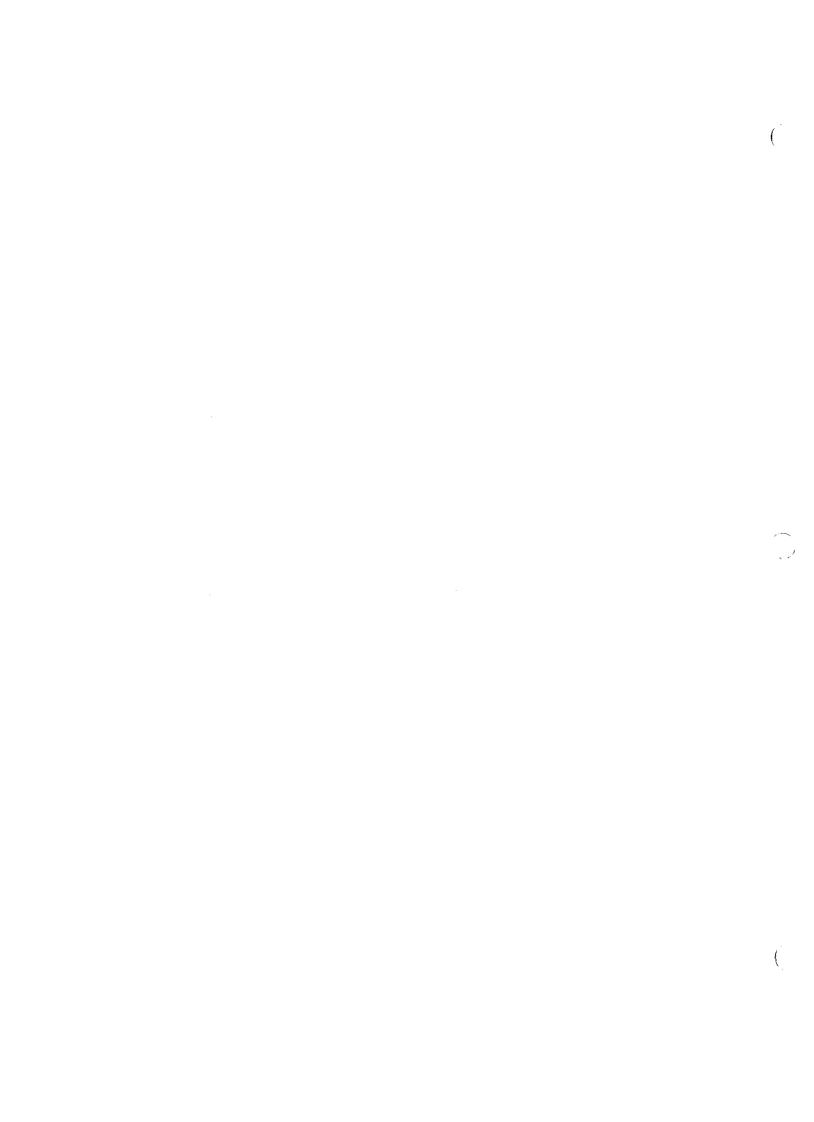
Scott Andochick, MD-President-Medical Director James Steinberg, DO, MD-Vice President/Chairman Adam Mecinski, MD Secretary Kristin Nesbitt Silon, MD Matthew Levine, MD Sunil Thadani, MD Jan, 13, 2021

Topic Reviewed and Approved:	Approved
Governing Body Bylaws Review	
Medical Staff Bylaw Review/ Rules and Regulation Review	
Medical Director Agreement: Medical Director Evaluation	
Board Member Assignments	
Governing Body Self Evaluation	
Board/Physician Compliance	
Appointment of Credentialing Coordinator	70-4
Approval Policies and Procedures and Policy Manual Review	
Credentialing and Peer Review: Approval process of providers and surgeon Credential	ling/Privileging
Anesthesia Services and providers	
Appointment and Re-appointment policies	
Appointment of Administrator	
Appointment of Risk Manager and RM program	
Appointment of Infection Control Coordinator	
QAPI Coordinator Appointment	
Appointment of Fire and Safety Program and the Safety Officer	
Disaster Preparedness Plan	
Scope of Services Review (All approved procedures listed)	
Accounting and Financial Management Program and Accountability/ Budget Approval	/Charity Care
Mission Statement	, , , , , , , , , , , , , , , , , , , ,
Approval AAAAHC Standards and ongoing Accreditation	
Strategic Planning/Long Term Goals	1-11-11-11
Exempt tissue policy/list	
Corporate Compliance	
Coding Audit Approval	
Physician DEA	
Patient Bill of Rights and Responsibilities	
Major Contract Review and Vendor Evaluation	
Job Descriptions: Administrator, Medical Director and Clinical Coordinators	
Transfer Agreement	
Contracted Services Review	
Employee Manual	
Employee Code of Conduct	
Employee Background Checks (OIG, State Licensing, Full Criminal Bk Checks, Drug Test	ingl
Employee Annual Review (Performance Reviews)(New Competencies Yearly)	ing)
Annual evaluation of QAPI plan/Risk Management program	EXHIBIT



	1
Infection Control Program-Plan /Risk Assessment Approval	
Approval of Flu Prevention	
Approval COVID 19 prevention, mitigation and management program	-
TB Protocol	
TB Risk Assessment	
Safe Patient Handling Plans Reviewed (Fall Risk Assessment/TB or Infectious Patient)	
Blood Born Pathogen Training/Hazardous Communication Training	
Infection Control Officer Appointment	
EP Drill and Emergency Preparedness and Disaster Plan	
Illness and Injury Prevention Sign Off	
Safety Plan Approval	
MH Drill/In-service	
Code Blue Drill	
Hazardous Chemical Review (Bio-Haz Inservice and Eval of Facility) SDS Manual	
Emergency Equipment	
Appointment of Safety Officer/Patient Safety Officer	
Radiation Plan Approval	
ALARA Review	
Radiation Safety Officer Appointment	
Medical Physicist Review of C-Arms	<u> </u>
Pharmacy Plan Approval	
Review Confused Drug Names (Look Alike/Sound Alike), High Alert Medications	
Pharmacist Approval	
Formulary and Hazardous Drug List and POC/High Alert Medications	
Emergency Medication List: Crash Cart Contents	
Pharmacy Nurse Appointment	
Education and Training Program	
EOC/Healthstream and Education and Training	
Education and Training Nurse Appointment	
Other/Summary:	
Human Resources	
Medical Director: Scott E. Andochick, MD	
Director of Anesthesia Services: Leudvig Sardarian, MD	<u></u>
Technical Repair Services: Anesthesia Machines and equipment maintenance and management	
Medical staff credentialing and granting of privileges: Medical Director, Administrator, Jenn Terry, RN	
Management of surgical services: Administrator	
Management of nursing services: Administrator, Shannon LaMendola RN CC	
Consulting Pharmacist for Management of pharmaceutical Services: RPH, Joe Nesbaum RPH,	
(Adminstrator, S. LaMendola RN, Kelly Cox, RN CC)	
Management of laboratory (if applicable) and radiologic services FHH: Medical	
Director/Administrator	
Consulting Physicist: Associates in Medical Physics-George Stefun	
Management of the ASC's physical plant: Medical Director/Administrator	
Medical records maintenance: BOM	

(



Quality Assurance and Performance Improvement: Administrator	
Materials Management: Administrator, Karen Miles, Nicole Martyak	
Safety, Hazard Comm. and Disaster Planning: Administrator, Becky Edland RN, Cheryl Huffman RN,	WALTER COLOR OF THE COLOR OF TH
Education Coordinators: Healthstream, Administrator, Cheryl Huffman RN, Kelly Hughes RN	

President/CEO



Driving Di-tions From 15 North:

a Motter Avenue Exit īē ⊢

· Veer Right off exit onto Opossumtown Pike

Go through two lights

At third light make a Right onto Thomas Johnson

'Go % mile and make a right onto Thomas Johnson Court. Center is the first left, 81 Thomas Johnson Ct.

Driving Directions From 15 South:

· Take the Motter Avenue Exit

Turn left onto Opposumtown Pike

Go through one light

At second light make a Right onto Thomas Johnson Drive Go % mile and make a Right onto Thomas Johnson Court. Center is the first left on Thomas Johnson Court.

EXHIBIT

Physicians Surgery Center of Frederick

81 Thomas Johnson Court Frederick, MD 21702

Phone: 240-215-3070 Fax: 240-215-3071

Patient Information

*Please arrive at the Center promptly:

(1 hour before General or sedation anesthesia and 30 before your procedure. If you would like to contact minutes before Local) unless otherwise instructed.. Pre-Op Nurse a few days before your surgery, and she will also confirm your arrival time the evening You will receive pre-surgical instructions from our us you can do so by calling: 240-215-3070.

Patient Remarks

care before, after and even after I was recovering at home! weeks of each other, and could not have asked for better "I had surgery on two different surgical sites within two Thanks!!!

"Wonderful care, great staff, very professional!"

"The staff was great, they took excellent care of me during and after the procedure."

Ownership Statement

Frederick, LLC and its Physician owners. Your physician may This facility is owned by the Physicians Surgery Center of have an interest in this facility.

The following physicians have an ownership interest in this organization:

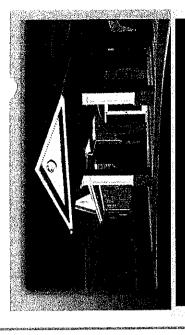
Scott Andochick, MD

James Steinberg, DO

Sunil Thadani, MD

Adam Mecinski, MD

Matthew Levine, MD Kristen Nesbitt, MD The Physicians Surgery Center of Frederick is a Non-Smoking Campus





terrated by the

OT AMBULATORY HEALTH CARE, INC. ACCREDITATION ASSOCIATION

spcoming surgery at Physicians Surgery Center of Frederick. accredited by the Accreditation Association for Ambulatory This Center is a premier ambulatory surgery center that is Welcome! Your physician has scheduled your Medicare and State approved and licensed. PSCF is Health Care, Inc.

highest quality care in a warm, personalized and secure cared for. Our Staff is committed to providing you the setting. Our goal is to deliver excellent care and make We pride ourselves with an excellent team of nurses and staff who will make you feel comfortable and your visit a pleasant experience.

We are so happy to serve you, and will do everything possible to make your visit with us as pleasant and proficient as possible to ensure that your day of surgery goes well please read the following information.

*Date of your surgery is:_

*Please Arrive at the center at :_

Special Instructions

Our bill covers the facility fee, supplies and any implants used. ** Fees for your surgeon, anesthesiologist, and any other services such as laboratory or pathology will be billed separately. Please contact their office if you have any questions regarding their billing process.

If your insurance does not pay 100%: We require the patient or responsible party to pay for the amount of your unmet deductible, coinsurance and any co-payment for outpatient surgical facilities.

<u>Cases which are not covered by insurance:</u> We require full payment on or before the date of the procedure, unless other financial arrangements are made in advance. We accept cash, check, credit card (VISA, AMEX, MasterCard), Discover and Care Credit.

You will receive a letter detailing your benefits with any deductible, coinsurance or co-pay due on day of surgery.

Financial Hardship: Call about PSCF Charity Care Policy or go to www.physicianssurgctr.com for policy & application.

We are required by regulatory bodies to inform each patient in advance of surgery of our Advance Directive Policy. It is the policy of the PSCF to acknowledge the right of each individual to have an Advance Directive or Living Will. You, as the patient have a right to choose where you have your surgical procedure performed. If you choose to have it performed at the PSCF, we want you to do so with the understanding that you WILL be treated if in the rare event, your heart or breathing stops while you are at the facility and transported to the hospital. We will send information about your advance directives to the receiving facility. If you would like information on Advance Directives and Maryland Forms, our professional office staff can provide you with copies upon request.

Preparing for Surgery

Prior to your surgery you can register on line for your surgery.
 Go to www.simpleadmit.com and use PW: PSCF240NEW. Feel free to call 240-215-3070 if you have questions or prefer to speak

with our Pre-Op screening nurse or you have no internet service. Be sure to let the staff know of any special needs.

Please bring a list of your medications. Notify the nurse if you take medication for heart, high blood pressure or diabetes so he/she can advise you about taking medication on the day of surgery.

Bathe or shower with an antibacterial soap on the morning of surgery to minimize the chance of infection.

 Call your surgeon if you develop a cold, fever or respiratory problem before surgery. If you cannot reach your physician, contact the Center. Your anesthesia care will be provided by Board Certified Anesthesiologists who are also on staff at Frederick Memorial Hospital. The anesthesiologist will remain with you and the nurses until you have fully recovered and are discharged from the center. For General or MAC ("Twilight") Anesthesia cases, you are required to have nothing to eat or drink 8 hours prior to your arrival. (including chewing gum, tobacco or lozenges).. Any food or liquid in the stomach can cause serious complications and your surgery may be postponed or cancelled.

This does not apply to persons having local only anesthesia. If you are having local anesthesia you may have a light meal the day of your procedure unless otherwise instructed by your physician.

For women who know or suspect they may be pregnant, please notify your physician and the Center.

If patient is a minor, one parent must remain at the center at all times during the patients visit.

The Day of Surgery

· Arrive promptly at the scheduled time. This will allow adequate time for all necessary admission procedures.

· Parking is conveniently located at the Center.

-Wear comfortable, loose fitting clothing that can be easily removed. For your comfort/safety we encourage you to wear low-heeled shoes. Avoid wearing jewelry, nail polish and cosmetics. Leave contact lenses at home or bring your lens case with you. Please wear your glasses if needed. All valuables (including

Jewelry and wallets) and other personal items should be left at home. Please remove all body piercing.

· Bring your insurance card, driver's license and any co-payment and/or deductible you may owe at time of surgery. If you owe from a previous visit, you will be required to make that payment on or before the time of your next visit.

Please bring your Durable Power of Attorney for Healthcare and/or advance Directives if you have one so it can be placed in your record.

·To maximize the comfort of all visitors, we suggest that adult patients be accompanied by only one person.

· Do not smoke 24 hours immediately before or after receiving anesthesia. Smoking may interfere with the anesthetic and produce nausea during recovery.

You're Recovery Period

After your surgery, you will be moved to our fully equipped recovery room and monitored by our physicians and nurses until you are ready to go home. Most patients are discharged between 15 minutes and 2 hours after surgery.

It is our policy for you to have someone drive you to and from the Center for surgery if you have General/MAC or IV anesthesia. We also strongly recommend that someone stays with you for the first 24 hours after surgery.

Your Recovery at Home

Your surgeon will provide post-operative instructions regarding diet, rest and medications. In the event of any difficulty, call your surgeon without delay. If you are experiencing a life threatening event, call 911.

 \cdot Do not drink alcoholic beverages for 24 hours after receiving an anesthetic or when taking pain medication.

Attached you will find a copy of your Rights as a patient and our policy on advance directives. Please take a moment to read them at your convenience and feel free to ask our staff if you have any questions.

To decrease your registration time on day of procedure, complete the attached forms and bring them with you on the day of your visit. We look forward to serving you.

(

Shannon.Magro physicianssurgerycenter.net

From:

Watkins, Rissah (Health/OPAC) < RWatkins@FrederickCountyMD.gov>

Sent:

Friday, May 21, 2021 9:24 AM

To:

Shannon.Magro physicianssurgerycenter.net

Subject:

Response from the Frederick County Health Department

Dear Shannon Magro,

Thank you for contacting us with your question, and for letting us know about your Charity Care Policy for surgical services. We would recommend that you share this information with the following community entities:

Mission of Mercy

Linda M. Ryan
Executive Director
Mission of Mercy
22 S. Market St. Suite 6D
Frederick, MD 21701
301-682-5683 x202

Religious Coalition Emergency Human Needs

Nick Brown, Executive Director
Religious Coalition for Emergency Human Needs
27 Degrange St
Frederick MD 21701
T: 301.631.2670 Ext 105
F: 240.215.3019
www.RCEHN.org

Fredrick Community Action Agency

Janet Jones, MHA
Department of Housing & Human Services
Frederick Community Action Agency
100 S. Market St.
Frederick, MD 21701
301-600-3967 (direct)
301-600-1506 (main)
ijones@cityoffrederickmd.gov

Additionally:

- Dr. Julio Menocal
- Centro Hispano
- Asian American Center of Frederick
- Spanish Speaking Services of Maryland
- · Church community as many churches pay for services

Thank you,



~Rissah

Rissah J. Watkins, MPH, CPH

Pronouns: she, her, hers
Director of Planning, Assessment, and Communication
Frederick County Health Department
350 Montevue Lane
Frederick, MD 21702
(301) 600-6005 (phone)
(301) 600-3111 (fax)
rwatkins@frederickcountymd.gov
www.frederickcountymd.gov/health

4 M B

FCHD is committed to customer service. Click here to take the Customer Satisfaction Survey.



Fundarian County Mankla Department
Our extracts to be improve the treasts out well-being of the treasts of Frederick County Engugit progresse that present alternations of Manual progress, and Manual progress, progress witness and antity, and proper public English

CONFIDENTIALITY NOTICE: Any documents accompanying this transmission may contain confidential health information that is legally privileged. This information is intended only for the use of the individual or entity named above. The authorized recipient of this information is prohibited from disclosing this information to any other party unless required to do so by law or regulation, and is required to destroy the information after its stated need has been of these documents is strictly prohibited. If you have received this information in error, please notify the sender immediately and arrange for the return or destruction of the original document(s). Thank you.





To the office of: Centro Hispano

In an effort to raise continued awareness of our facility policies that may assist your clients in access to healthcare, please refer to the attached notice should the need arise. It is our goal to continually improve access throughout the area we serve, and improve the lives of our community residents regardless of ability to pay.

Thank you for helping us to support the Frederick County and surrounding areas to meet everyone's surgical needs. We will continue to send out periodic reminders of this notification. If you have any questions regarding this matter, or feel your patients may need assistance feel free to contact our Business Office Manager at 240-215-3070.

Please see attached policy and notification for your reference with link to the PSCF website so patients can access the Charity Care Policy and application in private (www.physicianssurgctr.com).

Sincerely,

Shannon Magro



Physicians Surgery Center of Frederick FINANCIAL ASSISTANCE FORM

INSTRUCTIONS FOR COMPLETING THIS FORM

In order for a patient to be eligible for special financial consideration, this form should be completed and the requested documentation attached, and the form returned to **Physicians Surgery Center of Frederick**. The information will be verified and proper determination will be made in a timely manner. Please provide the following documentation to the facility:

- This form, completed and signed
- Copies of signed Federal Income Tax Return for previous year
- Copies of payroll check stubs for the previous 2 months
- Copies of recent utility bills, rent/mortgage receipt, medical bills, auto loan receipts, bank statements, alimony/child support receipts, government assistance receipts, other income/investment statements (e.g. 401K statement)

	RESPONSI	BLE PARTY INFOR	MATION
Responsible Party		Marital Status	
Address			
SSN			
Employer	<u>Position</u>		
Address	City		
Spouse		Birth Date	
Spouse's Employer	Position	<u>Phone</u>	
Number of children in the house	Ages		10 5 GTO
Please provide documentation of statement may be required if you	of income sources. W.o.s.	INCOME INFORM s, income tax statem	ents, check stubs, or check statements. A financio
Wages before deductions	in openinois i carry		Spouse
Alimony/Child support			
Disability/worker's comp			
Pension			
Social Security Income			
Dividends/Interest Income	· · · · · · · · · · · · · · · · · · ·		
Prince less income		_	
Rental Income			
Rental Income			
Rental Income Estate Trust Income			
Rental Income Estate Trust Income Welfare/Public assistance			
Rental Income Estate Trust Income Welfare/Public assistance Food Stamps			
Rental Income Estate Trust Income Welfare/Public assistance Food Stamps Other (please list)			



Physicians Surgery Center of Frederick FINANCIAL ASSISTANCE FORM

FINANCIAL II	NFORMATIO	V			
ASSETS	VALU	E		VALUE	
Cash/Checking				investments	
Savings Stocks and Bonds			Life Insurance		
		Other			
ALL REAL PRO	PERTY AND	VEHICLE	S		
			VALUE	BALANCE	MONTHLY PAYMENT
Residence rent /	own (circle on	e)		<u> </u>	Marrial
Other property		<u> </u>			
Vehicle #1	Make N	Model .	Year		
Vehicle #2	Make N	<u>lodel</u>	Year		
/ehicle #3	Make N	<u>lodel</u>	Year		
Medical Provider'	s Nume	<u> </u>	BALANCE	INS WILL PAY	MONTHLY PAYMENT
vedical Provider	3 Nume		BALANCE	INS WILL PAY	MONTHLY PAYMENT
vedical Provider	3 Nume		BALANCE	INS WILL PAY	MONTHLY PAYMENT
ST ALL OTHER			BALANCE	INS WILL PAY	MONTHLY PAYMENT
ST ALL OTHER	CREDITORS	, mail ord			MONTHLY PAYMENT
ST ALL OTHER	CREDITORS (Charge cards	, mail ord		arate sheet if necessary) BALANCE	MONTHLY PAYMENT
ST ALL OTHER	CREDITORS (Charge cards	, mail ord	er, etc attach sepa	arate sheet if necessary)	
ST ALL OTHER	CREDITORS (Charge cards		er, etc attach sept	arate sheet if necessary) BALANCE	MONTHLY PAYMENT
ST ALL OTHER	CREDITORS (Charge cards		er, etc attach sept	arate sheet if necessary)	MONTHLY PAYMENT

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Confidential



Physicians Surgery Center of Frederick FINANCIAL ASSISTANCE FORM

	ОТН	ER MONTHLY EXPENSES	
EXPENSE	MONTHLY PAYMENT	EXPENSE	MONTHLY PAYMENT
Food	-	Auto Insurance	
Phone		Cable TV	
Electric/Gas/	Water/Sewer	Health Insurance	
Contributions		Recreation	
Other (List)		Other (List)	
FOR OFFI	CE USE ONLY		
	***************************************	LY FINANCIAL SUMMARY	
	Total Income:		_
	Subtotals:		-
		Real property Vehicles <u>\$</u>	_
		Monthly Medical	
		Expenses \$	
		Creditors Credit <u>\$</u>	_
		Other Monthly Expenses <u>S</u>	
	Total Expenses:		_
	PATIENT CO	ONDITIONS AND COMMENTS	
Please answer	the following questions – attach additional pa		
	Have you applied for Medicaid and been		'es No (circle one)
	Have you asked for assistance from your fo	_	es 140 (circle one)
		(and one)	
	Have you asked for assistance from your c	lergy or church? Yes No (circle one)	
	How much are you able to pay each mon	the	
COMMENTS:			
	t the information I have provided is true and comple it bureau report. I understand that if any of this inforr I I will be liable for payment of any and all charges ir		rederick to verify this information, including I may be denied special financial
		Date:	
Responsibl	le Party Signature		
© Copyright 20 Confidential	004 Nueterra Healthcare Management L.L.C		
ALLIANIII (41			



TABLE L. WORKFORCE INFORMATION

INSTRUCTION: List the facility's existing staffing and changes required by this project, include all major job categories under each heading provided in the table. The number of Full Time Equivalents (FTEs) should be calculated on the basis of 2,080 paid hours per year equals one FTE. In an attachment to the application, explain any factor used in convening paid hours to worked hours. Please ensure that the niting table are consistent with expenses provided in uninflated projections in Tables F and G. PROJECTED CHANGES AS A RESULT OF THE PROPOSED PROJECT THROUGH THE LAST YEAR OF PROJECTION (CURRENT OTHER EXPECTED CHANGES IN PROJECTED ENTIRE CURRENT ENTIRE FACILITY OPERATIONS THROUGH THE LAST YEAR OF PROJECTION (CURRENT FACILITY THROUGH THE LAST YEAR OF DOLLARS) PROJECTION (CURRENT DOLLARS) * DOLLARS) Total Cost (should be Current Total Cost Average Job Category Average Current Year Salary per Average FTEs (should be Total Cost Salary per with FTEs Salary pei FTEs Total Cost FTE consistent witi FTE ections in projections in Table G. If Table G) Regular Employees Administration *(List general* categories, add rows if needed) BOS/BOM \$57,581 \$57,581 0.0 Billing \$52,563 \$0 \$57,581 \$52,563 \$53,165 \$53,165 BOS \$69,220 2.0 \$0 \$105,728 \$69,220 1.5 \$103,830 Administrator \$103,830 \$0 3.5 1.0 \$117,653 \$117,653 \$173,050 0.0 Clinical Coordinator 1.0 1.0 \$77,987 \$77,987 \$375,004 \$117,65 \$90,000 **Total Administration** \$90,000 \$167,987 3.5 Direct Care Staff (List general \$246.995 \$621,999 categories, add rows if needed) 0.6 \$68,171, \$68,171 1.0 \$68,952 \$68,952 0.8 \$137,123 \$78,145 \$78,145 RN 1.0 \$71,318 \$0 0.8 \$78,145 \$71.318 1.0 \$72,134 \$72,134 RN 0.6 \$47,060 2.0 \$143,452 \$47,060 0.6 \$47,599 ٦N 0.6 \$29,366 \$58,453 \$29,366 1.2 \$94,659 Pre-Operative Screening RN 0.8 0.6 \$58,453 0.8 \$29,366 \$58,453 \$58.45 \$0 1.6 0.6 \$42,692 \$116,906 \$42,692 \$42,692 RN \$42,692 1.0 \$63,750 1.2 \$85,384 \$63,750 1.0 \$64,480 \$64,480 1.0 \$86,371 \$86,371 2.0 \$128,230 PRN staff total 1.0 \$87,360 \$87,360 1.0 2.0 \$82,256 \$82,258 \$173,731 \$165,458 1.0 RN \$83,200 \$83,200 \$86,371 2.0 \$86,371 1.0 Technician \$87,360 \$87,360 0.8 \$42,569 2.0 \$173,73 \$42,569 0.8 \$42,569 Technician \$42,569 1.0 \$63,750 1.6 \$85,138 \$63,750 1.0 \$64,480 \$64,480 -chnician 0.6 2.0 \$33,561 \$128,230 \$33,561 0.6 \$33,561 \$33,561 nician \$21,880 \$67,122 \$21,880 nician 0.8 \$46,986 0.4 \$21,880 \$46,986 0.1 \$58,733 \$58,733 0.8 \$36,91 0.9 \$105,719 \$36,917 0.8 RN \$36,91 \$36,917 0.5 \$39,547 1.6 \$73,834 \$39,547 RN 0.5 1.0 \$74,032 \$74,032 \$39.547 1.0 \$74,032 \$74,032 **Total Direct Care** 14.9 \$0 \$1.073.197 \$148.06 Support Staff (List general categories, add rows if needed) SPD Technician 1.0 \$44.049 \$44,049 1.0 \$44,554 \$44,554 Medical Assistant \$0 2.0 0.2 \$5,758 \$88,603 \$5,758 1.0 \$36,192 \$36,192 Medical Assistant \$41.950 \$35,782 \$35,782 1.0 Medical Assistant \$36,192 \$36,192 \$28,790 2.0 \$71,97 \$28,790 1.0 COVID 19 Screening \$29,120 \$29,120 1.0 \$27,680 2.0 \$57,910 \$27,680 Medical Assistant 1.0 \$27,680 \$37,500 \$37,500 **Total Support** \$142,059 \$37,500 REGULAR EMPLOYEES TOTAL 25 Î - \$0 \$1,590,260 20.8 1.353:075 2. Contractual Employees Administration (List general categories, add rows if needed) Clinical Coordinator \$87,360 1.0 \$87,360 Clinical Coordinator OR \$0 \$174,720 \$87,360 \$87,360 \$0 \$0 \$0 0.0 \$0 \$0 **Total Administration** 0.0 \$0 \$0 Direct Care Staff (List general 80 categories, add rows if needed) \$0 \$0 \$0 \$0 0.0 \$0 \$0 \$0 0.0 \$0 \$0 \$0 \$0 0.0 \$0 Total Direct Care Staff \$0 0.0 Support Staff (List general *60 categories, add rows if needed) \$0 \$0 0.0 \$0 \$0 0.0 \$0 \$0 \$0 \$0 0.0 \$0 ŔΩ Total Support Staff 0.0 \$0 \$0 CONTRACTUAL EMPLOYEES TOTAL 0.0 \$0 efits (State method of lating benefits below) TOTAL COST

\$1,049,383 20.8.

\$1,353,075 0.0

\$0

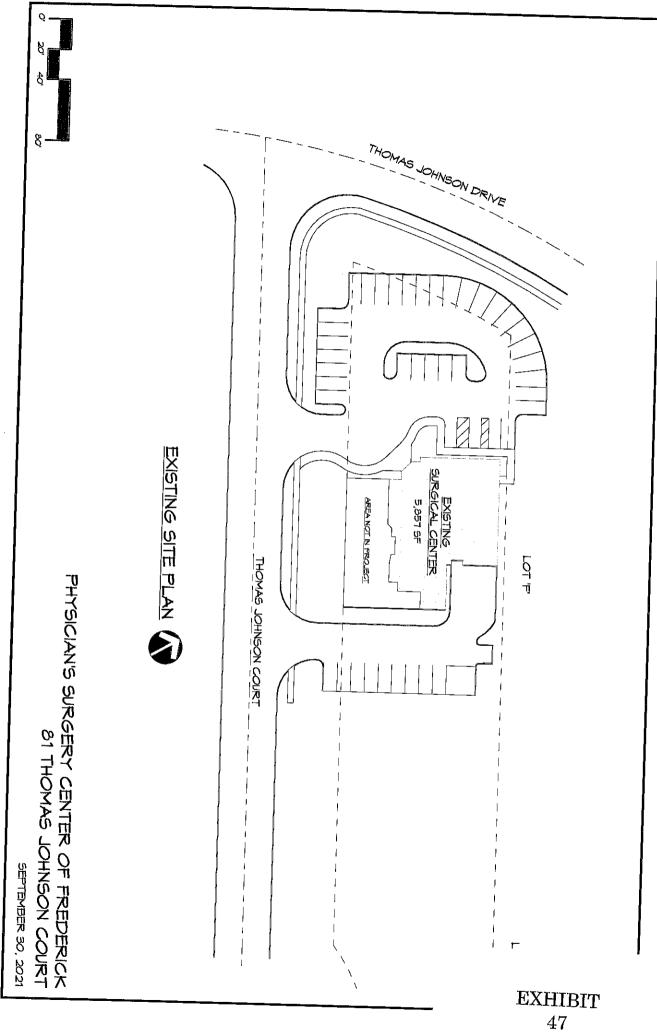
25.1

\$2,943,335



Table 2.0	Tue M	AND FUTU	RE PROJEC	CT				
Table 3 Cont.	Year	Two Most Actual Ended years/Current Year						
	(Endin	g with first f	ull vear at	full utilizatio	5)			
CY or FY (Circle)	2019	2020	2021	2022	2023	2024		
Patient Mix: A. Percent of Total	Davanus				2023	2024	2025	
1. Medicare				10			_	
	17	15	14	16	18	17	18	
2. Medicaid	2	3	5	6	8	8	9	
3. Blue Cross	24	23	23	24	23	23	22	
4. Commercial Insurance	31	30	24	26	27	26	25	
5. Self-Pay	12	16	14	16	16	16	15	
6. Other (Specify)			 	 	+	+	+	
Government Programs: Tricare	2	7	3	6	6	6	6	
WC/Auto	12	6	17	6	4	5	5	
7. TOTAL	100%	100%	100%	100%	100%	100%	100%	
P. Downst J. D. III			11 S. 116 Sept. 25.00				10070	
B. Percent of Patient		/Procedures	(as applica	ible)	- I - I - I - I - I - I - I - I - I - I			
1. Medicare	35	33	33	36	37	36	37	
2. Medicaid	5	6	8	10	10	10	11	
3. Blue Cross	27	30	26	27	27	25	23	
4. Commercial Insurance	23	24	27	22	21	20	20	
5. Self-Pay	1	1	1	2	2	2	1	
6. Other (Specify)		 				 -	'	
Government Programs: Tricare	2	2	4	3	2	4	4	
VC/Auto	7	5	2	3	2	3	4	
7. TOTAL	100%	100%	100%	100%	100%	100%	100%	







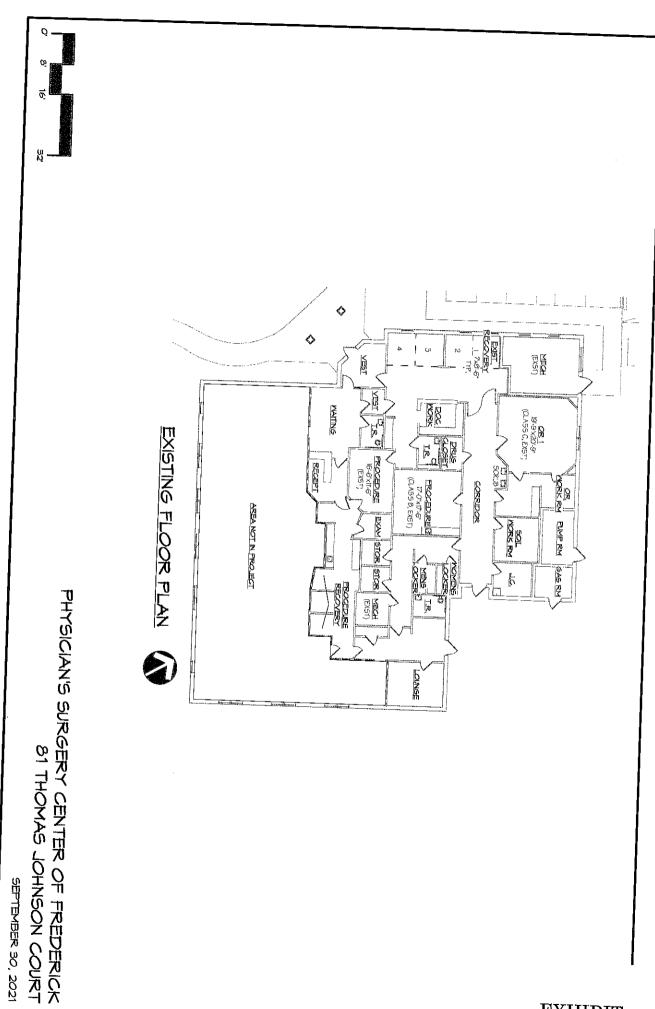
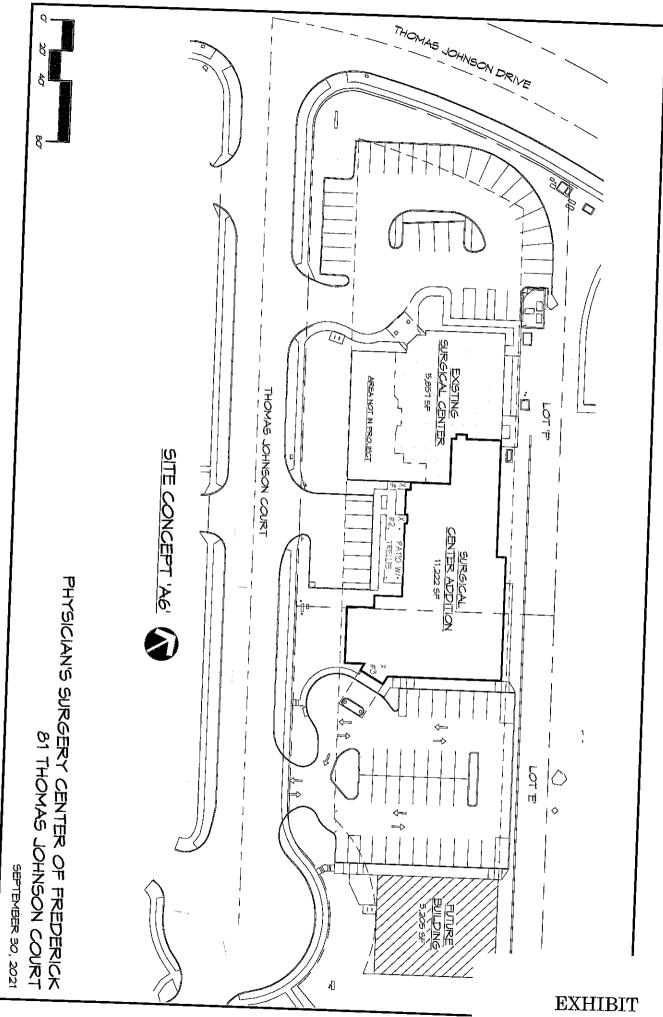


EXHIBIT 48

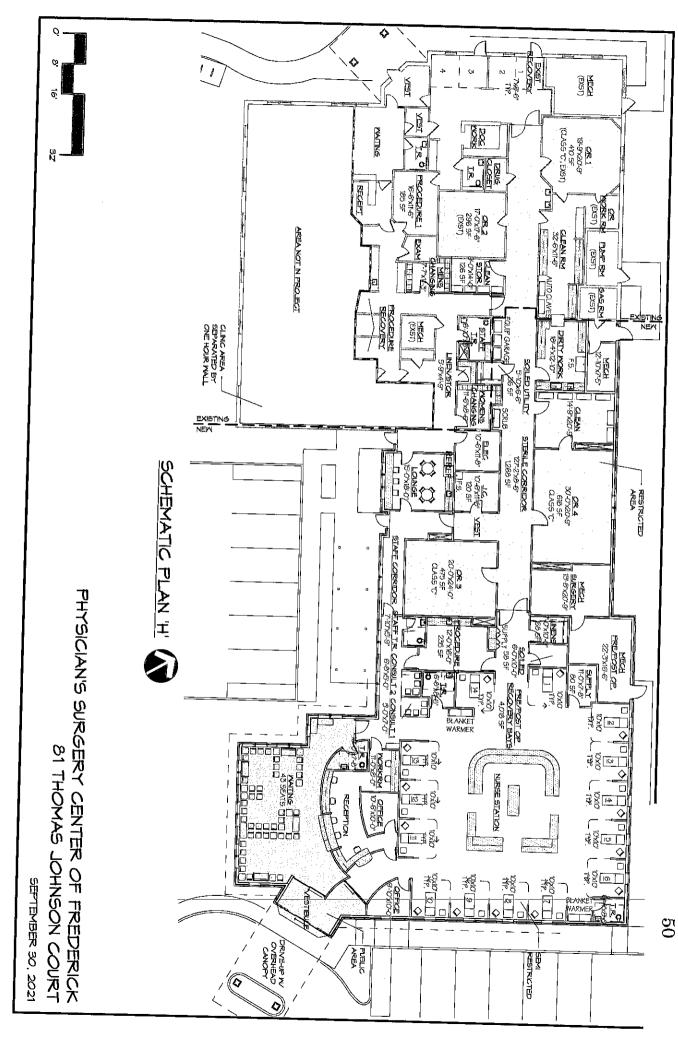




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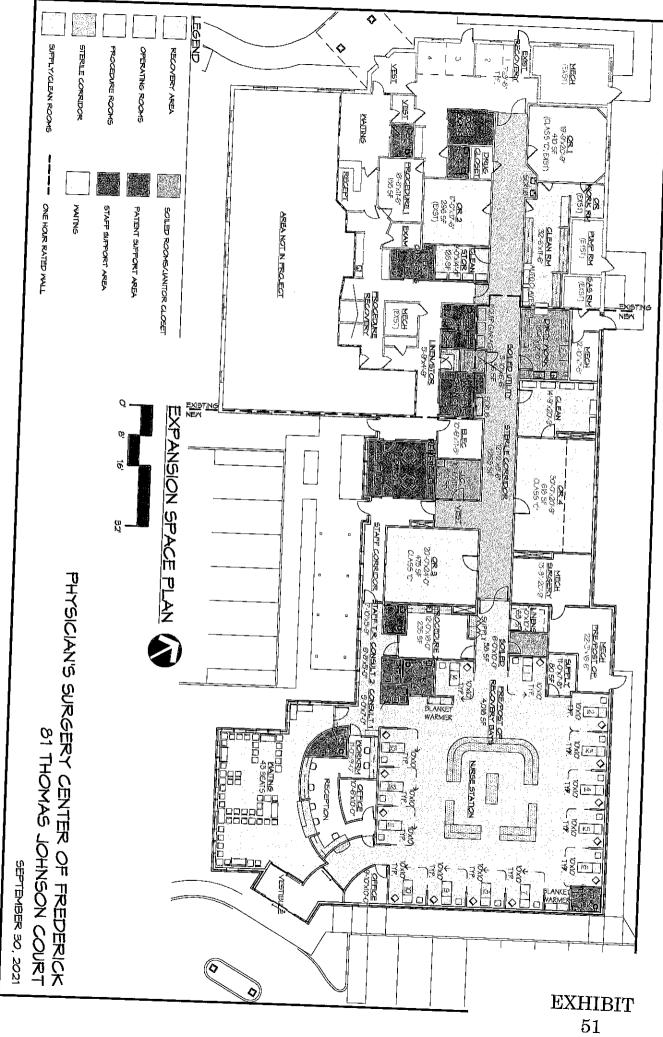




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EXHIBIT







CERTIFICATE OF NEED, FACTS, DATA AND COSTS

ANDOCHICK PROPERTIES PHYSICIANS SURGERY CENTER EXPANSION

Areas and Scope Of Work

-						
Existing	Building at 81 Thomas Johnson Court					·
	Total Square Foot as Constructed:					
	PSCF Surgery Center: Suite B			8,505	SF	
	Suite A (not included in project)		57 SF			
	and the standard in brolect)		48 SF			
			05 SF			
Bullding	Expansion at 81 Thomas Johnson Court, Suite B (Lo					
	Total Square Foot of Expanded Building:	its 8E and 8F)			
	PSCF Surgery Center			11,340	SF	
	r our dangery center	11,34	40 SF			
Bulldina	Renovation for PSCF at 81 Thomas Johnson Court					
J	Existing Area of Surgery Center					
	Total Square Foot of Eviation D	5,85	7 SF			
	Total Square Foot of Existing Center Renovated:	106	55 SF			
		Renovated		Existing	a	
	Renovated Areas and Rooms	Area		to remai	_	
						Description
	OKZ	296	SF			
	Oldan (COM)	374	SF			Celling Replaced with Drywall
	, oldan Storage	126	SF			Room Expanded, New Finishes, Millwork
	- Coned Other	38	SF			Room created from existing corridor
	TTOTICIS CHANGING ROOM	98	SF			West side utilty closet
	Z Weils Orlanging Room	88	SF			Separate Changing Area with lockers
	6 Staff Toilet Room	45	SF			Separate Changing Area with lockers
		1,065	SF.			Renovate existing toilet room and add shower See Line 20
	Adjacent Evietine Ame					See Line 20
	Adjacent Existing Areas					Comments
	OR 1			410	SE	
	Drug Closet			35	SE	Relocation of Med Gas Receptacles New Hardware
	Procedure 1			185	SF	riow maruware
	Clean Work Room			38		
	Sterile Corridor			431	SF	Updated Finishes, see line 23 for renovation description
	Staff Linen Storage			27	-,	Updated Finishes, see line 31 for renovation description Closet for clean staff uniforms
	Staff Corridor			125	SF.	Updated Finishes
	Decommission Recovery Total Existing			144	SF	Remove MED Gas
	· · · · · · · · · · · · · · · · · · ·	1,065	SF	1,395	SF	WILLIAM MED G98
Existing are	as of PSCF renovation and adjacent areas					
•	Renovated Areas					
	Adjacent areas	1,065				
	Existing Areas not in project	1,395				
	Total Existing Surgery Center	3,397				
		5,857	SF			
Summary of	New Construction and Existing Renovation Project A	-				
,	Renovated Areas					
	New Construction	1,065 8			5	See Line 20
	Total Project Area	11,340 8				See Line 16
	,	12,405 S	F			· · · -
,	Adjacent Existing Areas					
E	Existing Area not in project	1,395 S			S	See Line 46
7	otal Area of Surgery Center with Expansion Area	3,397 S				See Line 47
	-5-7 Serior Will Expansion Area	17 197 S	F			



CERTIFICATE OF NEED, FACTS, DATA AND COSTS

ANDOCHICK PROPERTIES PHYSICIANS SURGERY CENTER EXPANSION

PSCF Surgery Center Suite B 5,857 SF Partial \$0 Proceedings \$0.000 \$0.	Scope of Work Summary	Existing Building at 81 Thomas Jol	nnson Court		Scope	Shell	Tenant	Totai
Dr. Andochick, Suite A (Not included in project) 2,648 SF 8,505 SF	i otal Square	Foot as Constructed: PSCF Surgery Center Suite R	E 057 DE	8,505 SF				Total
In project 2,648 SF 8,505 S		Dr. Andochick, Suite A (Not include	5,857 SF d			\$0		
Total Square Foot of Expanded Building: 11,222 SF \$320			2,648 SF		NIC			
Total Square Foot of Expanded Building: 11,222 SF \$320	Building Expansion at 81	Thomas Johnson Court (Lots 8E ar	ıd 8F)					
PSCF Surgery Center Construction 11,222 SF \$1,684,401 \$1,907,000 \$3,591 \$1,607,000 \$0 \$220,000 \$0 \$220,000 \$0 \$220,000 \$0 \$220,000 \$0 \$220,000 \$0 \$220,000 \$0 \$220,000 \$0 \$220,000 \$0 \$220,000 \$0 \$220,000 \$0 \$220,000 \$0 \$220,000 \$0 \$220,000 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Total Square F	Foot of Expanded Building:	,	11,222	SF \$320			
Suilding Renovation for PSCF at 81 Thomas Johnson Court Total Square Foot of Existing Center Renovated: 1065 SF PSCF Surgery Renovation Construction Building Permits Design and Engineering Fees \$120 \$0 \$127,800 \$1		Site Improvements Fixed Equipment (Allowance) Building Permits Utility Permits	Included in Const	ruction	,,=-	\$220,000 \$0 \$21,000	\$0 \$50,000 \$24,000	\$3,591,401 \$220,000 \$50,000 \$45,000 \$0
Building Renovation for PSCF at 81 Thomas Johnson Court Total Square Foot of Existing Center Renovated: 1065 SF PSCF Surgery Renovation Construction \$120 \$0 \$127,800 \$127,800 \$35,000 \$5,000		Design and Engineering Fees	Includes Civil Eng	' Allowance	of \$45,000	\$154,500		\$285,000
Building Renovation for PSCF at 81 Thomas Johnson Court Total Square Foot of Existing Center Renovated: 1065 SF PSCF Surgery Renovation Construction \$120 \$0 \$127,800						\$2,079,901	\$2,111,500	\$4,191,401
Total Square Foot of Existing Center Renovated: 1065 SF PSCF Surgery Renovation Construction Building Permits \$120 \$0 \$127,800 \$127,	Building Renovation for Ps	SCF at 81 Thomas Johnson Court						. , , , , , , , , , , , , , , , , , , ,
Social Register of Expansion Social Register of Expansion	Total Square F	oot of Existing Center Renovated: PSCF Surgery Renovation Construct Building Permits	1065 SF ion		\$120			\$127,800 \$5,000
Area in Project: Project Cost Per Square Foot with Fees and Fixed Equipment Allowance Adjustments to Construction Costs Land Value for Expansion 1.0 Acre with Developed Infrastucture Allowance for Movable Equipment Recommended Contingency Total Adjustments Total Adjustments Project Cost Per Square Foot with Fees and Fixed Equipment Allowance \$375,000 \$375,000 \$300,000 \$300,000 \$20		Design and Engineering Fees					\$35,000	\$35,000
Project Cost Per Square Foot with Fees and Fixed Equipment Allowance \$11,222 \$190.33 \$181.65 \$355. Adjustments to Construction Costs Land Value for Expansion 1.0 Acre with Developed Infrastucture Allowance for Movable Equipment Recommended Contingency \$300,000 \$300,00 \$200,000 \$2	Area in Project:					\$2,079,901		\$167,800 \$4,359,201
Adjustments to Construction Costs Land Value for Expansion 1.0 Acre with Developed Infrastucture Allowance for Movable Equipment Recommended Contingency Total Adjustments \$375,000 \$375,000 \$300,000 \$200,000 \$200,000 TOTAL CAPITAL COSTS \$5,234,2 Core Logic Marshall Swift Estimating for Expansion Class D Building Type: Wood Frame with Brick Veneer		ot with Fees and Fixed Equipment Allo	wance					12,287 \$355,48
Allowance for Movable Equipment Recommended Contingency \$300,000 \$300,0 \$200,000 \$200,0 Total Adjustments \$375,000 \$500,000 \$875,0 FOTAL CAPITAL COSTS \$5,234,2 Core Logic Marshall Swift Estimating for Expansion Class D Building Type: Wood Frame with Brick Veneer	Adjustments to Constructio	on Costs						,
Recommended Contingency \$300,000 \$200,0	Land Value for I Allowance for M	Expansion 1.0 Acre with Developed Ir lovable Equipment	frastucture			\$375,000		\$375,000
\$375,000 \$500,000 \$875,0 FOTAL CAPITAL COSTS \$5,234,2 Core Logic Marshall Swift Estimating for Expansion Class D Building Type: Wood Frame with Brick Veneer	Recommended	Contingency						\$300,000 \$200,000
\$5,234,2 Core Logic Marshall Swift Estimating for Expansion Class D Building Type: Wood Frame with Brick Veneer		Total Adjustments				\$375,000	\$500,000	\$875,000
Core Logic Marshall Swift Estimating for Expansion Class D Building Type: Wood Frame with Brick Veneer	OTAL CAPITAL COSTS							\$5 224 S04
Class D Building Type: Wood Frame with Brick Veneer								\$5,234,201
Race Structure - Fut Well Have - O. D.	ore Logic Marshall Swift E	stlmating for Expansion						
Base Structure Ext Walls Heating Cooling Sprinkler Total	lass D Building Type: Wood	Frame with Brick Veneer						
luality Level: 3.5 Very Good, 18 feet ave height with renovation 12,287 sf 3,782,307 \$417,758 \$474,032 \$74,336 \$4,748.4	uality Level: 2 E Vac. Card	40.6		se Structure		eating Cooling	Sprinkler	Total

Quality Level: 3.5 Very Good, 18 feet ave height with renovation		Base Structure	Ext Walls	Heating Cooling	Sprinkler	Total
Quality Level: 3.0 Good, 10 feet ave height with renovation Quality Level: 3.5 Very Good,18 feet ave height withOUT renovation	12,287 sf 12,287 sf 11,222 sf \$167,800	3,782,307 3,920,536 4,293,762 R	\$417,758 \$349,934 \$383,231	+ 17 1100	\$74,336 \$83,920 \$76,646	\$4,748,433 \$4,750,523 \$5,355,282
Quality Level: 3.5 Very Good, 18 feet ave height with renovation Quality Level: 3.0 Good, 10 feet ave height with renovation Quality Level: 3.5 Very Good, 18 feet ave height withOUT renovation. Worksheets attached	12,287 sf 12,287 sf 11,222 sf	\$4,748,433 \$4,750,523 \$5,355,282	Const PSF \$386.46 \$386.63 \$462.26	\$220,000 \$220,000		\$4,968,433 \$4,970,523



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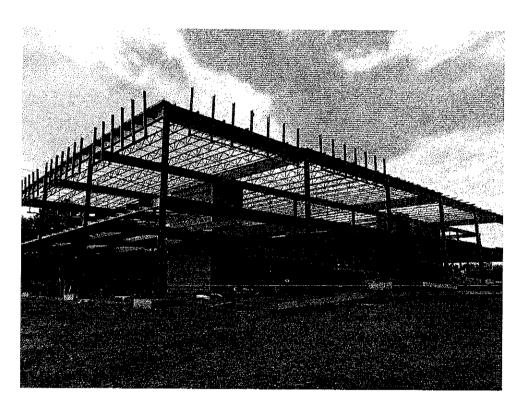
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1 of 8



Justin Ausherman 833-216-7392 (tel:833-216-7392)

AushCo

First Name

Your First Name *

Last Name

Your Last Name *

Phone

(XXX) XXX-XXXX *

Email

Your Email *

Your Message

Please send me additional information.

7100 Guilford Dr

Frederick, MD 21704

Media

\$20.00/SF/Yr

Office For Lease • 2,000+ SF

Contact Broker

EXHIBIT 53

	•	WW.CITYFEET.C	OM/) (Contact Broke
Property Type	Office	Year Built	2022	
otal Building Size	40,000 SF	Tenancy	Multiple	
Building Class	A			
0	51			
Transit Score	Walk Score			

1 Space Available				
1 Space Available	Space Use	Size	Rent	Details
	Space Use	Size 2,000-40,000 SF		Details
Name 				
Name 				details
Name 	Medical Office	2,000-40,000 SF	\$20,00/SF/Yr Hide	details

♡ SAVE

Description

7100 Guilford Drive is a new, Class A, Professional and Medical Office Building. The property was designed during the COVID pandemic and as such includes touchless or minimal touch features throughout including toe-kick elevator buttons. This is a must see office property designed, build, owned and managed by local real estate professionals.

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Public Transportation

Commuter Rail	Drive	Walk	Distance
Frederick Commuter Rail (Brunswick Line)	 7 min		1.8 ml
Monocacy Commuter Rail (Brunswick Line)	 7 min	-	2.2 ml



Justin Ausherman 833-216-7392 (tel:833-216-AushCo



First Name	Last Name	Your Message
Your First Nan	Your Last Nam	Please send me additional
Phone		information.
(XXX) XXX-XXX	I	
Email		Contact Broker
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1 of 1



Media

Street View

2 N Market St

List Search

Frederick, MD 21701

- Downtown Frederick (/cont/downtown-frederick-frederickmd/retail-space-for-lease)



Chris Kline,Jr. 240-457-4802

(tel:240-457-4802)

Frederick Commercial

First Name

Your First Name *

Last Name

Your Last Name *

Phone

(XXX) XXX-XXXX *

Email

Your Email *

Your Message

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\$8,750/Mo

Property Details BACK (HTTPS://WWW.CITYFEET.COM/)

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Property Type	Storefront Retail Office	Year Built	1950
Total Building Size	6,133 SF	Tenancy	Multiple
Building Class	В	Zoning	DB

34 86
Transit Score Walk Score

1 Space Available

Name	Space Use	Size	Rent	Details
3rd Floor Ste	Office	4,200 SF	\$25.00/SF/Yr	Hide details
Date available:	Now	Lease term:	Neį	gotiable
Service type:	Triple Net	Space Type:	Rel	

Amenities

Signalized Intersection

Public Transportation

Commuter Rall	Drive	Walk	Distance
Frederick Commuter Rall (Brunswick Line)	 5 min	9 mln	0.4 mi
Monocacy Commuter Rail (Brunswick Line)	9 min	-	3.3 ml

Walk

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Parking Details

Parking Available:

Yes

Reserved:

Spaces Provided:

10

Type:

Surface

Included in Rent:



Chris Kline,Jr. 240-457-4802 (tel:240-457-4802) Frederick Commercial



First Name

Last Name

Your Message

Your First Nan

Your Last Nam

Phone

(XXX) XXX-XXXX *

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Seamus Fitzgera 301-78 4050

(tel:301-787-4050)

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First Name

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Last Name

Your Last Name *

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(XXX) XXX-XXXX *

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Media

Мар

Street Vlew

5970 Frederick Crossing Ln

Frederick, MD 21704

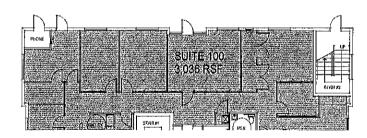
\$15.00/SF/Yr

Office For Lease • 3,036+ SF

BACK (HTTPS://WWW.CITYFEET.COM/) Property Type Office Year Bullt 2005 Total Building Size 8,900 SF Tenancy Multiple Building Class B ZonIng MXD Transit Score Walk Score

1 Space Available

Name	Space Use	Size	Rent	Details
1st Floor Ste 100	Office	3,036-3,662 SF	\$15.00/SF/Yr	Hide details
Date available:	Now	Lease term:		egotiable
Service type:	Triple Net	Built out as:	St	andard Office
Space Type:	Relet	In Contiguous I	olock; 3,	662 SF



Description

Refreshed office condo in a high visibility location close to downtown, I-70 & I-270, Rt 85, restaurants and shopping.





Seamus Fitzgeral 301-78 4050

(tel:301-787-4050)

Fitzgerald Realty Group, Inc
First Name
Your First Name *
Last Name
Your Last Name *
Phone
(XXX) XXX-XXXX *
Email
Your Email *
Your Message
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5970 Frederick Crossing Lane (https://images1.cityfeet.com/d2/KQAZS3VozUoCdPFgxz9ksIRu6GOs9e7ZGCfG-I0bcCY/document.pdf) BACK (HTTPS://WWW.CITYFEET.COM/)

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Public Transportation

Commuter Rall	Drive	Walk	Distance
Monocacy Commuter Rail (Brunswick Line)	6 min	-	2.0 mi
Frederick Commuter Rail (Brunswick Line)	7 min	-	2,2 mi

Parking Details

Parking Available:	Yes
Reserved:	No
Spaces Provided:	40
Туре:	Surface
and the Bank.	



Seamus Fitzgerald 301-787-



4050 (tel:301-787-4050)

Fitzgerald Realty Group, Inc.

First Name	Last Name	Your Message
Your First Nan	Your Last Nam	Please send me additional
Phone		information.
(XXX) XXX-XXX	X *	

Email



Seamus Fitzgera 301-78 4050

(tel:301-787-4050)

Fitzgerald Realty Group, Inc

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Your First Name *
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Your Last Name *
Phone
(XXX) XXX-XXXX *
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(https://marketing.loopnet.com/whyadvertise/) List your property (/con	t/Advertise/Benefits) 4050 (tel:301-787-4050)
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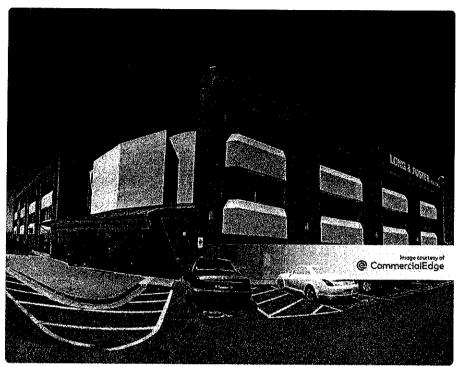
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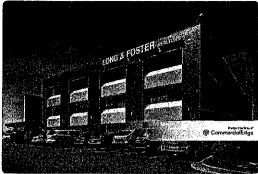
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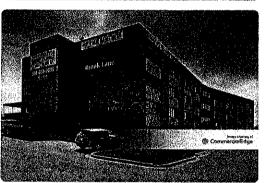
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Your Message

Maryland > Frederick County > Frederick > Ballenger Creek







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Details

Spaces Available

Contacts

Location

Buckeystown Pike Office Center - Office Space Availability 5301 Buckeystown Pike, Frederick, MD 21704

For Lease

\$22.5 - \$44.44/Sqft/Year

Property Size

80,000 Sqft

Parking Spaces Avail.

280

Property Tenancy Multi-Tenant

Property Type

Office - General Office

Lot Size

3.46 Acre

Parking Ratio

3.50/1,000 SF

Building Class

R

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Want more info on this listing?

Reach out to the broker for more info on lease terms and amenities

Reach Out Now

Spaces Available

Name: #304

see more (V)

Space Type

General Office

Total Space Available

2,291 Sqft

Name: #340

see more 🛇

Lease Rate

\$22.5/Sqft/Year

Floor

3

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Name: #490

see more (V)



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Name: #103

see more 🔷

Space Type

General Office

\$22.5/Sqft/Year

Lease Rate

Total Space Available

2,779 Sqft

Floor

1

Name: #370

see more 🛇

Space Type

General Office

Total Space Available

1,586 Sqft

Lease Rate

\$22.5/Sqft/Year

Floor

3

Name: #308

see more 🛇

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Name: #420

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Space Type

General Office

\$22.5/Sqft/Year

Lease Rate

Total Space Available

2,726 Sqft

Floor

Name: #360

see more (V)

Space Type

General Office

Lease Rate

Contact for pricing

Total Space Available

1,554 Sqft

Floor

Name: #K

see more 🕟

Space Type

Shared Space

Lease Rate

\$700/Month

Cookies Settings

Total Space Available

273 Sqft

Divisible Space

273 - 273 Sqft

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Name: #J

see more 🕟



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Name: #H

see more 🕢

Space Type

Shared Space

Total Space Available

499 Sqft

Lease Rate

Contact for pricing

Divisible Space

499 - 499 Sqft

Name: #G

see more 🕢

Space Type

Shared Space

Total Space Available

252 Sqft

Lease Rate

\$700/Month

Divisible Space

252 - 252 Sqft

Name: #D

see more 🗘

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Name: #L

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Space Type

Shared Space

Total Space Available

191 Sqft

Lease Rate

\$600/Month

Divisible Space

191 - 191 Sqft

Name: #M

see more 🛇

Space Type

Shared Space

Total Space Available

182 Sqft

Lease Rate

\$600/Month

Divisible Space

182 - 182 Sqft

Name: #N

see more 🛇

Space Type

Shared Space

Total Space Available

307 Sqft

Lease Rate

\$600/Month

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Divisible Space

307 - 307 Sqft

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Name: #O

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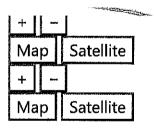
Contacts

Sandra Sagoe Cross & Company (301) 682-9015

Lauren Potter Cross & Company (301) 682-9015

Daniel Cross Cross & Company (301) 682-9015

Location

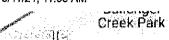


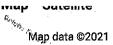
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Buckeystown Pike Office Center

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City Frederick, MD

Neighborhood **Ballenger Creek**

Zip Code **21704**

Market **Baltimore**

Frequently Asked Questions

What is the asking price at Buckeystown Pike Office Center?

The asking price for spaces at Buckeystown Pike Office Center rests at \$22.5 - \$44.44/Sqft/Year per square foot.

How many office spaces for rent are listed at Buckeystown Pike Office Center?

9 office spaces are listed at Buckeystown Pike Office Center.

What is the total size of Buckeystown Pike Office Center?

Buckeystown Pike Office Center has a total of 80,000 square feet.

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What is the year built for Buckeystown Pike Office Center?

The year built for Buckeystown Pike Office Center is 1986.

Looking for more in-depth information on this property?

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Contact Property

Name*	
Email*	
Phone Number*	
Company	
I found a listing for Buckeystown Pike Office Center on PropertySha information about this property.	rk and I'd like additional
This site is protected by reCAPTCHA and the Google Privacy Policy and Terms of Service apply	
PropertyShark is a marketing lead generator. By continuing, you agree to the PropertyShark T	erms Of Service and Privacy Policy.
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RIVERSID...

10/11/21, 11:08 AM

5310 Spectru...

198 Thomas J...

NWC Synergy...

NWC Synergy...

itact for pricing

: - \$18/Sqft/Year

stact for pricing

stact for pricing

Property

Office / 85...

Property

Office / 52...

Property

Office / 11...

Property

Office / 11...

Availability

1 Space / ...

Availability

4 Spaces / ...

Availability

1 Space / ...

Availability

1 Space / ...

Top Markets Near Frederick

Nearby Properties

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64 THOM...

THE GALA...

FREDERIC...

50 Citizens W...

64 Thomas Jo...

1888 North ...

7485 New Ho...

Property

Property

Property

Property

Office / 50...

Office / 60...

Office / 81...

Office / 72...

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Buckeystown Pike Office Center is located at 5301 Buckeystown Pike in the Ballenger Creek neighborhood, MD, Frederick, 21704. The Class B Office building was completed in 1986 and features a total of 80,000 Sqft. There are 17 Office spaces available for lease at 5301 Buckeystown Pike, Frederick, MD, 21704, totaling 19,282 Sqft.\$22.5 - \$44.44/Sqft/Year The largest space available has 2,779 Sqft and a rental rate of \$22.5/Sqft/Year.

There are 47 office spaces for lease in the Ballenger Creek neighborhood, totaling 458,830 Sqft of available office space. The office space availability for the 21704 zip code is 146,324 Sqft, in 22 office spaces. The average asking office rent per sq. ft. in Ballenger Creek is \$17.95/sqft/year. For Class A office buildings the average office rate is \$15.17/sqft/year, for Class B office buildings the average office rate is \$20.74/sqft/year.

In Ballenger Creek, there are 7 class B office buildings. In 1986, the same year Buckeystown Pike Office Center was built, 35 more commercial properties (office, industrial, retail) over 50,000 square feet were built in Frederick, featuring 631,727 square feet of commercial space. At zip code level, there are 47 commercial properties, of which 3 are office buildings over 50,000 square feet.

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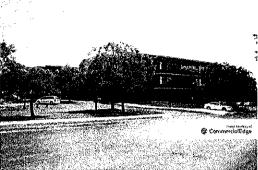
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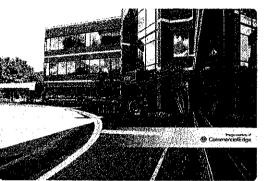
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Maryland > Frederick County > Frederick > Ballenger Creek







5202 Presidents Court - Office Space Availability 5202 Presidents Court, Frederick, MD 21703

For Lease

\$24.5/Sqft/Year

Property Size

233,000 Sqft

Parking Spaces Avail.

1048

Property Tenancy

Multi-Tenant

Year Built

1996

Property Type

Office - General Office

Lot Size

23.91 Acre

Parking Ratio

4.50/1,000 SF

Building Class

В

Date Updated

Sep 23, 2020

Want more info on this listing?

Reach out to the broker for more info on lease terms and amenities

Reach Out Now

Spaces Available

Name: #100

see more 📀

Space Typetails

Spaces Available

Lease Racentacts

Location

General Office

\$24.5/Sqft/Year

Total Space Available

13,195 Sqft

Floor

1

Name: #210

see more 📀

Contacts



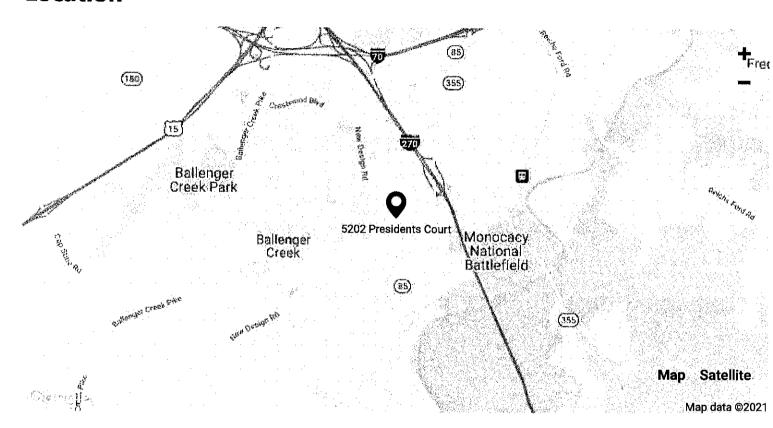
Jack McShea
Avison Young



Rusty McCabe
Avison Young



Location



City Frederick, MD

Neighborhood **Ballenger Creek**

Zip Code 21703

Market

Baltimore

Frequently Asked Questions

What is the asking price at 5202 Presidents Court?

The asking price for spaces at 5202 Presidents Court rests at \$24.5/Sqft/Year per square foot.

What is the total size of 5202 Presidents Court?

5202 Presidents Court has a total of 233,000 square feet.

What is the year built for 5202 Presidents Court?

The year built for 5202 Presidents Court is 1996.

Contact Property

Looking for more in-depth information on this property?

Looking for more in-depth information on this property? Find property characteristics, ownership, tenant details, local market insights and more. Unlock data on <u>CommercialEdge</u>.

Name*
Email*
Phone Number*
Company
I found a listing for 5202 Presidents Court on PropertyShark and I'd like additional information about this property.

PropertyShark is a marketing lead generator. By continuing, you agree to the PropertyShark Terms Of Service and Privacy Policy.

Nearby Listings

WESTVIE...

<

5280 Corpora...

THE OFFI...

5255 Westvie...

RIVERSID...

RIVERSID...

8490 Progres...

stact for pricing

Property Office / 21...

Availability 1 Space / ... **itact for pricing**

Property Office / 16...

Availability

3 **Spaces / ...**

8560 Progres...

itact for pricing

Property Office / 33...

Availability

4 Spaces / ...

ntact for pricing

Property Office / 12...

Availability

2 Spaces / ...

Top Markets Near Frederick

Nearby Properties

<

800 OAK ...

URBANA...

THE OFFI...

THE OFFI...

800 Oak Stree...

3275 Bennett ...

5265 Westvie...

5295 Westvie...

Property

Office / 20...

Property

Office / 11...

Property

Office / 16...

Property

Office / 12...

5202 Presidents Court, Frederick, MD 21703 - Office Space for rent

5202 Presidents Court is located at 5202 Presidents Court in the Ballenger Creek neighborhood, MD, Frederick, 21703. The Class B Office building was completed in 1996 and features a total of 233,000 Sqft. There are 2 Office spaces available for lease at 5202 Presidents Court, Frederick, MD, 21703, totaling 21,714 Sqft.\$24.5/Sqft/Year The largest space available has 13,195 Sqft and a rental rate of \$24.5/Sqft/Year.

There are 47 office spaces for lease in the Ballenger Creek neighborhood, totaling 458,830 Sqft of available office space. The office space availability for the 21703 zip code is 363,102 Sqft, in 29 office spaces. The average asking office rent per sq. ft. in Ballenger Creek is \$17.95/sqft/year. For Class A office buildings the average office rate is \$15.17/sqft/year, for Class B office buildings the average office rate is \$20.74/sqft/year.

In Ballenger Creek, there are 7 class B office buildings. In 1996, the same year 5202 Presidents Court was built, 13 more commercial properties (office, industrial, retail) over 50,000 square feet were built in Frederick, featuring 1,608,906 square feet of commercial space. At zip code level, there are 57 commercial properties, of which 21 are office buildings over 50,000 square feet.

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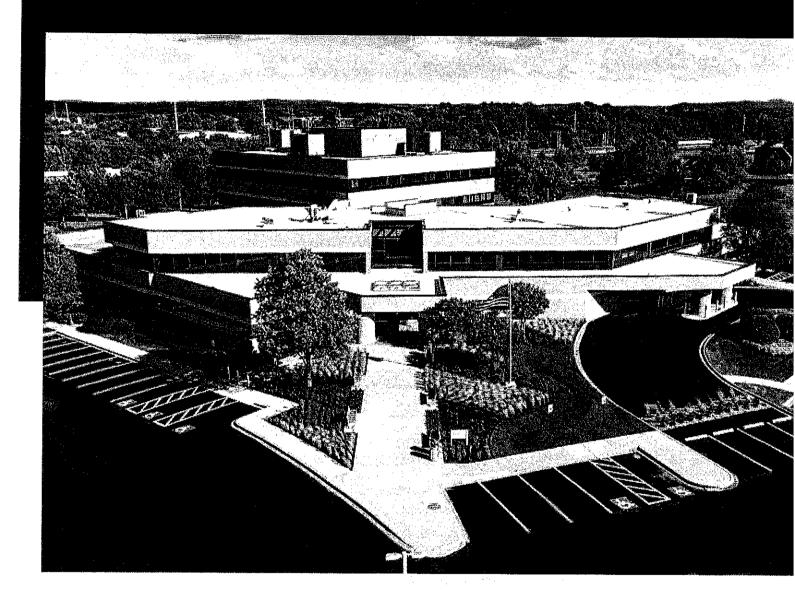




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201 Thomas Johnson Drive Suite 202 | Frederick, MD 21701 | AUSHCO.COM



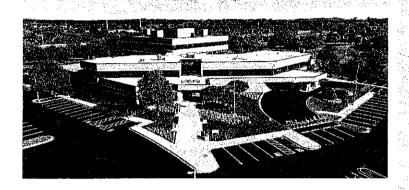
OFFICE BUILDING

GOVERNORS PLACE

110 THOMAS JOHNSON DRIVE, FREDERICK, MD 21702

GOVERNORS PLACE

110 THOMAS JOHNSON DRIVE, FREDERICK, MD 21702



CHOICE AMBER MEADOWS MARKET SQUARE WORMANS MILL INDUSTRIAL PARK ANTIETAM VILLAGE CANTERBURY

STATION Map data @2021

GOVENORS

OFFERING SUMMARY

Year Built:

Renovated:

Market:

2,183 - 56,000 SF Available SF:

\$13.00 SF/yr (NNN) Lease Rate:

Lot Size: 22.43 Acres

Building Size: 114,478 SF

Zoning:

(PB)

1987

2017

Professional Business

Frederick

Submarket: Frederick

PROPERTY OVERVIEW

Governors Place is a Frederick landmark property. Originally built to be the corporate headquarters of a regional bank the building is now being converted and modernized into a convenient and desired multi-tenant office building featuring upgraded and energy efficient lighting, modern finishes, updated way-finding signage and exterior upgrades.

PROPERTY HIGHLIGHTS

- Flexible suite sizes
- Fresh new renovations
- Excellent visibility
- Maximum contiguous suite 36,100

Coog[aplegate

- High speed data
- immediately available



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GOVERNORS PLACE

110 THOMAS JOHNSON DRIVE, FREDERICK, MD 21702



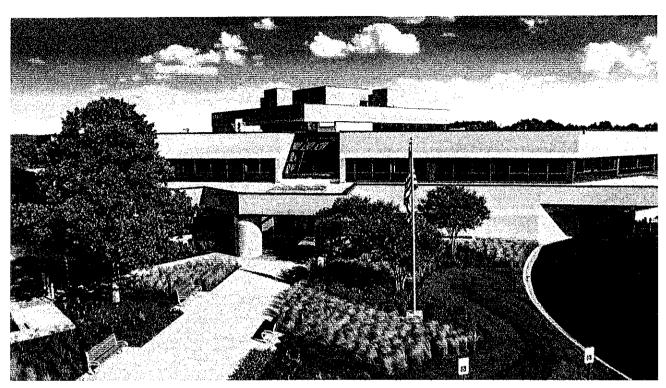


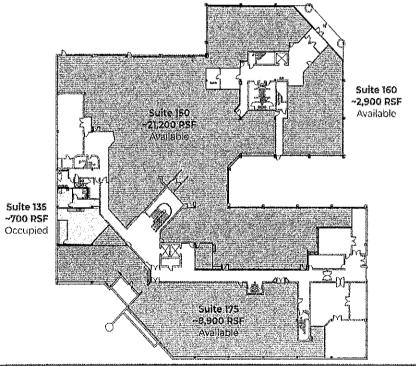


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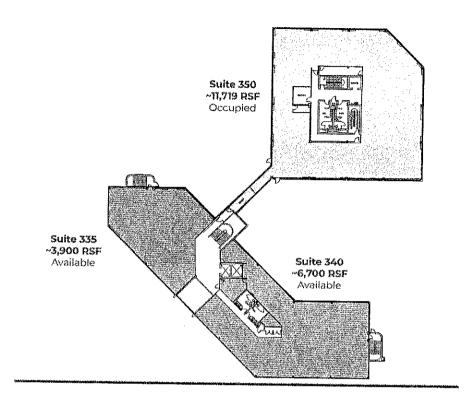


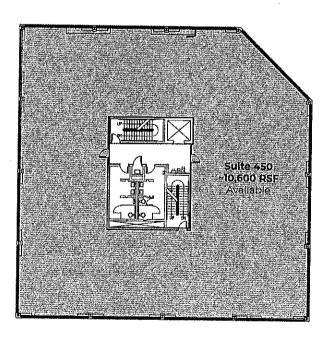
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GOVERNORS PLACE

110 THOMAS JOHNSON DRIVE, FREDERICK, MD 21702



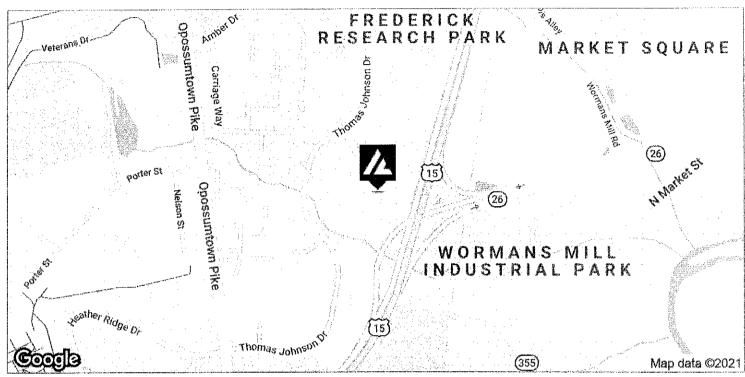


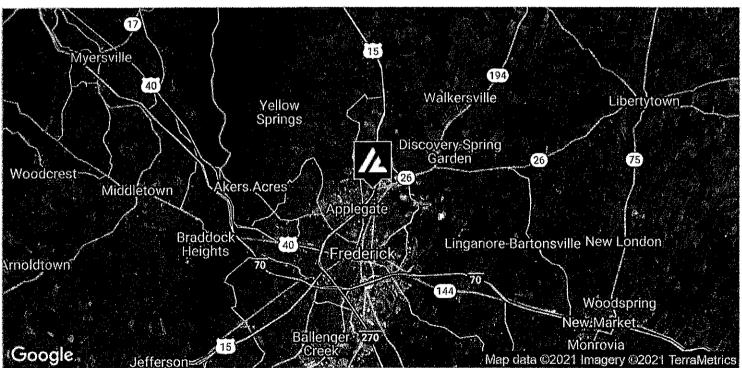


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110 THOMAS JOHNSON DRIVE, FREDERICK, MD 21702







JUSTIN AUSHERMAN

240.578.4220 JUSTIN@AUSHCO.COM

Properties



For Sale

\$4,300,000

UNDER CONTRACT: 27 Acre Lot on Monocacy Boulevard in City of Frederick Monocacy Boulevard, Frederick, MD, United States

The 27 +/- acre Monocacy Boulevard property is sub-dividable to accommodate large and small development opportunities. Located adjacent to the upcoming Laniary Park development and across the street from a 30 +/- acre mixed use site currently in development, this unique property offers abundant growth opportunities.

Ashleigh Kiggans

703-507-1069 (Mobile)

ashleigh@macroltd.com

VIEW MORE PROPERTY DETAILS



For Sale or Lease

Call for Pricing

Premier First Floor Medical Office Space For Sale or Lease

5950 Frederick Crossing Lane, Frederick, MD, USA

This 2,000 SF medical office space available for sale or lease includes six private offices, large work room, kitchenette, reception area, and two bathrooms. It is conveniently situated



near the intersection of Guilford Drive and Rt. 85 (adjacent to Wal-Mart, Best Buy, Kohl's, Ross, A.C. Moore, and more). Frederick Crossing is close to major retailers, [...]

Dave Wilkinson

301-748-5670 (Mobile)

dave@macroltd.com

VIEW MORE PROPERTY DETAILS



For Sale or Lease

Call for Pricing

Professional Office Condominium for Sale or Lease

75 Thomas Johnson Dr, Frederick, MD 21702, USA

This 2,657 SF professional/medical office condominium is available in a single-story brick office building. Property Details Landmark Location Covenants and By-Laws Applicable Ample Parking 2 Miles to Frederick Health Hospital Quick and Easy Access to All Major Highways Minutes to Historic Downtown Frederick For Sale \$644,000 or For Lease \$12.00/SF NNN (\$12/SF, NNN Rate – [...]

Dave Wilkinson

301-748-5670 (Mobile)

dave@macroltd.com

VIEW MORE PROPERTY DETAILS



Sold or Leased



\$1,355,620

Attractive Fully Leased Office Condominium for Sale

75 Thomas Johnson Drive, Frederick, MD, USA

SOLD: GREAT investment opportunity on this 5,894 SF medical/professional office condominium with road frontage on Thomas Johnson Drive. Solid tenant occupying the condominium through 2023, with options to renew up to an additional 12 years, and tenant is making improvements, which will be completed in Spring 2021. Additional lease details are available with an executed [...]

Ashleigh Kiggans

703-507-1069 (Mobile)

ashleigh@macroltd.com

VIEW MORE PROPERTY DETAILS



Sold or Leased

Call for Pricing

Prime Professional Office Condominium for Sale or Lease

97 Thomas Johnson Drive, Frederick, MD, USA

SOLD: This MUST SEE 2,100 SF corner office condominium, with 2 separate entrances, features 4 large windowed offices, which could be subdivided, 2 separate waiting areas, 2 bathrooms, a kitchenette, a business storage office, signage availability, and more. Property Details • Landmark Location in Medical/Professional Office HUB • Ample Parking • Approximately 2 Miles to [...]

Ashleigh Kiggans

703-507-1069 (Mobile)

ashleigh@macroltd.com

VIEW MORE PROPERTY DETAILS





Sold or Leased

\$20.00 per SQ FT

Class A Office Building Suite for Lease

411 Aviation Way, Frederick, Maryland 21701, United States

LEASED: High quality concrete and glass office building, with abundant natural light, in a serene setting offering beautiful views of Frederick airport and surrounding area. Professional office suites are attractive and designed to portray a peaceful environment. Located minutes from Historic Downtown Frederick and within 45 miles of 3 international airports. Property Details Building amenities [...]

Ashleigh Kiggans

703-507-1069 (Mobile)

ashleigh@macroltd.com

VIEW MORE PROPERTY DETAILS



Sold or Leased

\$1,700,000

Frederick Medical Office Building for Sale

52 Thomas Johnson Drive, Frederick, MD, USA

SOLD: This 7,237 SF single-story medical office building is designed for an owner-user or single tenant. It sits on an acre of land and includes a large waiting room, large reception area, multiple exam rooms, x-ray room, office support area, many doctors' offices,



kitchenette/break room, and much more. Property Details Conveniently located near the new [...]

Rocky Mackintosh

301-748-5655 (Mobile)

rocky@macroltd.com

VIEW MORE PROPERTY DETAILS



Sold or Leased

\$690,000

Frederick Professional Office Condominium for Sale

65 Thomas Johnson Drive, Frederick, MD, USA

SOLD: 3,699 SF professional/medical office condominium available in this single-story brick office condominium building. The space contains a waiting room with a reception counter, handicapped accessible restroom, exam rooms, kitchenette, additional restroom and an open treatment area. Property Details Landmark Location Covenants and By-Laws Applicable Ample Parking (88 Spaces) 2 Miles from Frederick Health Hospital

Rocky Mackintosh

301-748-5655 (Mobile)

rocky@macroltd.com

VIEW MORE PROPERTY DETAILS



Sold or Leased



\$14.55 per SQ FT

Frederick Medical Office Condominium for Lease

300 West 9th Street, Frederick, MD, United States

LEASED: This 5,637 SF office condominium is excellent for a medical practice looking to expand. This facility has 11 exam rooms, 6 doctor offices, office manager and business offices, a spacious waiting room, a lab and lab office, and much more. Conveniently located among an established medical area, this condominium is only 2 blocks north [...]

Rocky Mackintosh

301-748-5655 (Mobile)

rocky@macroltd.com

VIEW MORE PROPERTY DETAILS



Sold or Leased **\$1,190,000**

Frederick Medical Office Condominium for Sale

300 West Ninth Street, Frederick, MD

SOLD: This 5,637 SF Frederick medical office condominium is fully leased until the September of 2017. With excellent potential for a new tenant, it will make an ideal income property for an investor or a medical practice looking to expand. Conveniently located among an established medical area, this condominium is only 2 blocks north of Frederick [...]

Rocky Mackintosh

301-748-5655 (Mobile)

rocky@macroltd.com



LEASE AGREEMENT

THIS LEASE AGREEMENT (hereinafter "Lease") is made effective as of this 1st day of September, 2011 ("Effective Date") by and between ANDOCHICK PROPERTIES, LLC ("Landlord") and ANDOCHICK SURGICAL CENTER, LLC d/b/a PHYSICIAN'S SURGERY CENTER OF FREDERICK ("Tenant").

WITNESSETH

That for and in consideration of the mutual covenants hereinafter contained and for other good and valuable consideration, Landlord does hereby lease to Tenant, and Tenant does hereby rent and lease from Landlord, upon the following terms and conditions:

1. FUNDAMENTAL LEASE AGREEMENT PROVISIONS.

A. <u>Lease Provisions</u>. The following fundamental lease agreement provisions contained in this Section 1.A. have been prepared in such a manner as to provide to the users of this Lease a convenient place where all the variable information for this specific Lease may be located for easy use and reference. However, while the information in Section 1.A. is accurate, such information may require further explanation, definition, and information regarding its application in this Lease as between the parties; and such further explanation, definition, information and application must be obtained by further reference to those provisions in the Lease following Section 1.A., and the Exhibits attached to this Lease.

Specifics

- (1) <u>Location of Building</u>: 81 Thomas Johnson Court, Frederick, Maryland, 21702 (the "Building")
- (2) <u>Leased Premises</u>: 5,834 square feet of the office space located in the Building as such is further shown and depicted on <u>Exhibit A</u>, which is attached hereto and incorporated herein (hereinafter, the "Leased Premises").
- (3) Lease Guarantor: None.
- (4) <u>Use of Leased Premises</u>: General Office and the operation of a multi-specialty ambulatory surgery center and for no other use.
- (5) Lease Term: One Hundred and Twenty Months (120) Months
- (6) <u>Lease Commencement Date</u>: January 1, 2013
- (7) Lease Expiration Date: December 31, 2022
- (8) Option Terms: Two (2), Five (5) year terms.

- (9) Gross Leasable Area of Building: 8,530.
- (10) Gross Leasable Area of Leased Premises: 5,834.
- (11) <u>Tenant's Proportionate Share of Taxes, Insurance, and Expenses</u>: 68.40% (which is the Gross Leasable Area of Leased Premises divided by Gross Leasable Area of Building).
- (12) Minimum Annual and Monthly Rent: Beginning January, 1, 2013 shall be as set forth in the Rent Table below:

Rent Table:

Lease Year	Base Rental Rate	Monthly Base Rent	Annual Base Rent
Year 1	\$27.00	\$13,126.50	\$157,518.00
Year 2	\$27.54	\$13,389.03	\$160,668.36
Year 3	\$28.09	\$13,656.81	\$163,881.73
Year 4	\$28.65	\$13,929.95	\$167,159.36
Year 5	\$29.23	\$14,208.55	\$170,502.55
Year 6	\$29.81	\$14,492.72	\$173,912.60
Year 7	\$30.41	\$14,782.57	\$177,390.85
Year 8	\$31.01	\$15,078.22	\$180,938,67
Year 9	\$31.63	\$15,379.79	\$184,557.44
Year 10	\$32.27	\$15,687.38	\$188,248.59

- (13) <u>Annual Rental Increases</u>: Two Percent (2%) for Initial Term (already incorporated into Rent Table in Section 1.A(12) above).
- (14) Security Deposit: Shall be equal to the first month's rent See Section 21
- (15) Address to Send Rent Payments: Andochick Properties, LLC, 81 Thomas Johnson Court, Suite A, Frederick, Maryland 21702
- B. <u>Description and Location of Leased Premises</u>. Landlord hereby leases unto Tenant, and Tenant hereby leases from Landlord, for the term, upon the provisions, agreements, covenants and conditions herein set forth, the Leased Premises as described in Section 1.A(2) above. The Leased Premises is situated in the Building identified in Section 1.A(1) above. The Leased Premises shall include the rights in common with others to use the parking areas, sidewalks, and other common areas, but in all cases subject to the terms of this Lease.
- C. <u>Termination of Existing Lease</u>. Landlord and Tenant hereby agree that the Lease Agreement, dated December 20, 2007, by and between Landlord and Tenant (the "Existing Lease") is scheduled to terminate on December 31, 2012, and that this Lease shall commence as of January 1, 2013.

2. LEASE TERM.

A. <u>Initial Term</u>. Landlord leases to Tenant and Tenant leases from Landlord the Leased Premises commencing as of the Lease Commencement Date set forth in Section 1.A(6) above and terminating on the Lease Expiration Date set forth in Section 1.A(7) above, subject to any Option Terms (if any) properly exercised by Tenant (hereinafter, the "Lease Term" or "Term"). Tenant agrees that it is leasing the Leased Premises in its current "AS IS" condition. Except for latent defects, Landlord is not responsible or liable for any improvements or repairs to the Leased Premises. Tenant's taking possession of the Leased Premises shall constitute conclusive evidence that the Leased Premises, except for latent defects, are in good order and satisfactory condition. Tenant acknowledges that Landlord has made no promises to remodel, improve, decorate or clean the Leased Premises, and no representation respecting the condition of the Leased Premises or the Building has been made to Tenant by or on behalf of Landlord.

B. Option Term,

- (1) Provided that Tenant shall not then be in default of this Lease after the expiration of any applicable notice and cure periods provided for herein, and shall otherwise be occupying Leased Premises, Tenant shall have the right, at Tenant's option, to extend the Term of this Lease for the periods specified in Section 1.A(8) above (if any) by sending written notice of such election to Landlord. The option granted herein ("Option Term" or "Option") shall be exercisable by Tenant giving written notice to Landlord of the exercise of such Option at least one hundred and eighty (180) days prior to the expiration of the initial Term (or prior Option Term) of this Lease. Upon the exercise of such Option, the Lease Expiration Date shall automatically be extended for the period of such Option. The Option Term shall be subject to the same terms, covenants and conditions as set forth in this Lease with respect to the initial Term, except for the Option Term so exercised, which shall be deleted. If Tenant properly exercises its Option herein, then the defined term "Term" shall include such Option Term.
- (2) The Minimum Rent rate for the first year of each Option term shall be set at 95% of the then prevailing market rental rate as determined by McPhearson & Associates, Inc. (or any successor entity if McPhearson & Associates, Inc. is no longer in existence, hereinafter, "McPhearson"), and such appraisal shall take into account any landlord concessions (fit-out allowance, etc.) that are customary in light of the then prevailing market conditions. As part of the foregoing appraisal, McPhearson shall also determine the standard annual rent increases that are applicable in light of the then prevailing market rental rates. Such annual increases shall be applied commencing on the second Lease Year of each Option Term, and on the beginning of each Lease Year thereafter. Landlord and Tenant shall share equally in the cost of McPhearson's appraisal.
- (3) Tenant shall execute a Lease Amendment extending the Term and confirming the new Minimum Rent within thirty (30) days of receipt of an instrument of amendment from Landlord. Time shall be of the essence with respect to each of the provisions of this Section; if Tenant fails or refuses to provide notices or to take action as provided in this Section within the times herein set forth herein, then the renewal right and Option(s) granted shall lapse and terminate. The provisions of this Section shall not be applicable to any sublessee of all or any part of the Premises from Tenant; nor

shall these provisions be applicable to any assignce of Tenant's interest in less than the whole of Landlord's interest in this Lease or the Premises if Tenant shall have previously assigned part but not all of its interest in this Lease and the Premises to one assignee, or if it shall have assigned all or different parts of its inherent in the Lease and the Premises to more than one assignee.

- 3. <u>RENT</u>. Tenant covenants and agrees to pay rent to the Landlord at the following rates and times:
 - A. Minimum Rent shall be payable as follows:
- (1) The minimum annual and monthly rent payable by Tenant under this Lease for the initial Term of this Lease is set forth in the Rent Table in Section 1.A(12) above ("Minimum Rent"). Tenant shall pay the Minimum (Monthly) Rent set forth in the Monthly Base Rent column of the Rent Table commencing on the Lease Commencement Date, and continuing on the first (1st) day of each calendar month thereafter during the first Lease Term.
- (2) On the first day of the second Lease Year, and on the first day of each Lease Year thereafter during the Lease Term, the Minimum (annual) Rent (then in effect) shall be increased by TWO percent (2%) over the previous Lease Year's Minimum (annual) Rent. Each such adjustment shall be accomplished (and shall be effective for the entire then-operative Lease Year) by multiplying the Minimum (annual) Rent (then in effect) by One Hundred and Two percent (102%). The rent increases have already been incorporated into the Rent Table set forth in Section 1.A(12) above.

A "year of the Lease Term" or a "Lease Year" as used in this Lease shall be a period of twelve (12) calendar months, with the first of such Lease Years under this Lease beginning on the first day of the calendar month next following the Lease Commencement Date if the Lease Commencement Date shall fall on some date other than the first day of a month, with the Minimum Rent being pro rated on a day for day basis for any partial month. The increased Minimum Rent as set forth herein shall be due and payable automatically without further notice or action by the Landlord on the first day of each Lease Year. If any monthly installment of the Minimum Rent or any other monetary amounts, which under the provisions hereof are considered as additional rent, shall be in arrears, in whole or in part, for ten (10) or more days following the due date therefor, then Tenant shall be in default hereunder and Landlord may elect to pursue such remedies as are set forth herein.

B. Additional Rent Payments.

(1) Taxes.

- (a) Tenant shall pay Tenant's Proportionate Share of all real property taxes assessed against the Building (including the land upon which the Building is located) and the Leased Premises. If the taxing authorities include in the tax base upon which such real estate taxes are levied or assessed the value of any improvements made by Tenant, or of any machinery, equipment, fixtures, inventory or other personal property or assets of Tenant, then Tenant shall pay the entire real estate taxes attributable to or based upon such items in addition to such taxes payable by Tenant as set forth herein.
 - (b) Landlord shall provide Tenant with a tax bill or statement showing Tenant's

Proportionate Share of the real estate taxes applicable to the Leased Premises and such tax bill or statement submitted to Tenant shall be evidence of the amount of taxes assessed or levied, as well as of the items taxed. Tenant shall pay Tenant's Proportionate Share of all taxes, costs and fees as provided herein to Landlord within thirty (30) days of the mailing from Landlord to Tenant of Landlord's notice of such taxes. Landlord may, for its convenience, estimate Tenant's Proportionate Share of such real estate taxes at the beginning of each Lease Year hereunder and bill Tenant on a monthly basis for such estimates. Within ninety (90) days following the end of each calendar year (or each Lease Year). Landlord will compute the actual real estate taxes for such preceding calendar year and bill the Tenant for any shortfalls in such estimated payments, or credit the Tenant against future payments for any amounts which Tenant paid in excess of the actual costs. Tenant shall pay any shortfall in the taxes within thirty (30) days of receiving a statement therefore. The failure of the Landlord to provide the Tenant with a statement of the taxes within the above-referenced 90 day period shall not prohibit the Landlord from otherwise collecting from the Tenant any amounts due for a short fall in the taxes paid Tenant shall at all times be solely responsible for and shall pay Landlord before delinquency, all municipal, county, state or federal taxes assessed or levied against any the Leased Premises or any personal property of any kind owned, installed or used by Tenant unless any penalty or delinquency charge is cause by the failure of Landlord to timely pay such taxes to the applicable governmental authority after receiving payment timely therefor from Tenant. Tenant shall pay any and all expenses incurred by Landlord in protesting and appealing any real property tax assessments for the Leased Premises; provided any reduction to the real property tax assessments shall be paid over to Tenant to the extent that Tenant has paid such taxes at a higher amount prior to the appeal or protest.

(2) Project/Leased Premises Expenses. Landlord shall provide Tenant with copies of any invoices for insurance Landlord carries in connection with the Leased Premises (including fire, casualty, extended coverage and liability insurances) and Tenant shall pay to Landlord Tenant's Proportionate Share of all insurance premiums for such insurance policies. Tenant shall also pay Tenant's Proportionate Share of all charges, costs and expenses ("Project/Leased Premises Expenses") which Landlord shall incur in connection with the operation, maintenance and repair of the Building. the land upon which the Building is located, and the Leased Premises, it being understood and agreed that this Lease is a fully "NET" lease to the Landlord. Tenant's Proportionate Share of these Project/Leased Premises Expenses shall specifically include, but not be limited to, snow removal; resurfacing, repainting and restriping, cleaning and sweeping of parking areas and driveways; purchase. construction, maintenance and use of trash and refuse receptacles; replanting and relandscaping; car stops; directional signs and markers; janitorial services, alarm services, window cleaning, light bulbs and general maintenance for the common area; security services and equipment providing for the security of the Building or useful to the Tenant in the reduction of overall insurance costs; common area utilities, including, but not limited to, parking lot lighting, project sign electricity, common water and sewer facilities and common drainage systems; the amortization of the costs of installation of capital improvement items which are primarily for reduction of the operating costs of the Building; out-of-pocket market expenses directly related to management and supervision of the Building, including, but not limited to, property management services not to exceed three and one half percent (3.5%)of base rent; and other things determined necessary in the Landlord's reasonable judgment for proper maintenance and repair of the common area in a good, sanitary and attractive condition. Notwithstanding the foregoing, the following expenses shall be excluded from Project/Leased Premises Expenses: (A) Leasing commissions (if any), attorneys' fees, costs, disbursements and other expenses

incurred in connection with negotiations for leases with tenants, other occupants, or prospective tenants or other occupants of the Building, or similar costs incurred in connection with disputes with tenants, other occupants, or prospective tenants or other occupants of the Building; (B) Non-cash items, such as deductions for depreciation of the Building and the Building equipment, or interest on capital invested; (C) Payments of principal and interest or other finance charges made on any debt, and rental payments made under any ground or underlying lease or leases, except to the extent that a portion of such payments is expressly for ad valorem/real estate taxes or insurance premiums on the Building; (D) Costs incurred by Landlord in the sale, financing, refinancing, mortgaging, selling or change of ownership of the Building, including brokerage commissions (if any), attorneys' and accountants' fees, closing costs, title insurance premiums, transfer taxes and interest charges; (E) Costs which are to be capitalized in accordance with generally accepted accounting principles (except such capitalized costs in connection with improvements to the Building by Landlord after the Lease Commencement Date pursuant to any governmental law, regulation or action not applicable to the Building when its construction commenced; provided that the cost of each such capital improvement, shall be amortized over the useful life thereof and only that portion attributable to each Lease Year shall be included); (F) Any penalty charges incurred by Landlord due to Landlord's late payment of taxes, utility bills or other amounts included in Project /Leased Premises Expenses except to the extent Landlord was contesting the payment of any such item in good faith and/or such late payment was caused by the Tenant's failure to timely pay Landlord for such items under the terms of this Lease; (G) Allowances and other costs and expenses incurred in fixturing, furnishing, renovating or otherwise improving, decorating or redecorating space for tenants or prospective tenants of the Building, or vacant leasable space in the Building (including permit, license and inspection costs but excluding normal maintenance, repair and replacement costs); (H) Cost of any political or charitable donations or contributions; (I) Expenses for repair, replacements and general maintenance paid by proceeds of insurance or by Tenant or third parties, and alterations attributable solely to tenants of the Building; (J) Interest and any increase in the rate of interest payable by Landlord with respect to any debts secured by a deed to secure debt or mortgage on the Building or the Property; (K) Legal expenses for disputes with tenants; legal and auditing fees, other than those legal and auditing fees necessarily incurred in connection with the maintenance and operation of the Building; and legal or accounting fees incurred in connection with any debt or equity financing of the Building; (L) Income, excess profits or franchise taxes or other such taxes imposed on or measured by the income of Landlord from the operation of the Building or any inheritance, estate, succession, transfer, gift or intangible taxes that are or may be imposed on Landlord; (M) (N) Costs incurred which are reimbursed by other tenants of the Building or third parties; (O) Wages and costs associated with home office off-site employees of Landlord other than the reasonable cost of professional services provided by such employees which would otherwise be provided by outside professionals, and the wages, salaries, or other compensation paid to any executive above the grade of Building Manager; The Landlord reserves the right to allocate any charges and/or expenses described herein in a disproportionate manner in those cases in which Landlord reasonably determines that Tenant or any other tenant of the Center is a heavier user of such items. Landlord will provide Tenant with a detailed written description of any charges and/or expenses described herein which Landlord will be classifying as used in a disproportionate manner. Tenant shall pay Tenant's Proportionate Share of all of these fees, charges, costs and expenses within thirty (30) days of the mailing by Landlord to Tenant of a statement therefor. Landlord may, for its convenience, estimate, in written detail, the insurance premiums, fees, charges, costs and expenses that may be due from Tenant in accordance with this Section at the beginning of each calendar year (or each Lease Year) and bill Tenant on a monthly basis for such estimates. Within ninety (90) days following the end of each

calendar year (or each Lease Year), Landlord will compute the actual costs and expenses for such preceding calendar year ("Reconciliation Report") and bill the Tenant for any shortfalls in such estimated payments, or credit the Tenant against future payments for any amounts which Tenant paid in excess of such actual costs and expenses. Tenant shall pay any shortfall in such expenses within thirty (30) days of receiving a statement therefore and a copy of the Reconciliation Report. The failure of the Landlord to provide the Tenant with a statement of the amounts due within the above-referenced 90 day period shall not prohibit the Landlord from otherwise collecting from the Tenant any amounts due for a short fall. . Tenant, for a period of ninety (90) days after delivery of the Reconciliation Report and upon at least ten (10) business days written notice to Landlord, shall have reasonable access during normal business hours to inspect the books and records of Landlord relating to Reconciliation Report for the purpose of verifying the Project/Leased Premises Expenses; provided that Tenant shall bear all costs relating to such inspection, including, but not limited to, costs of photocopies. Each Reconciliation Report provided by Landlord shall be conclusive and binding upon Tenant unless within ninety (90) days after receipt thereof, Tenant notifies Landlord, in writing, that it disputes the correctness thereof, specifying those respects in which it claims the Reconciliation Report to be incorrect. Unless resolved by the parties, such dispute shall be determined by a court of competent jurisdiction. If the court proceedings result in a determination that the Reconciliation Report contained an aggregate discrepancy of five percent (5%) or more in Landlord's favor, then Landlord shall bear all costs in connection with such litigation. If the court proceedings result in a determination that the Reconciliation Report contained an aggregate discrepancy of less than five percent (5%) in Landlord's favor, Tenant shall bear all costs in connection with such litigation. Pending determination of the dispute, Tenant shall pay any amounts due from Tenant in accordance with the Reconciliation Report, but such payment shall be without prejudice to Tenant's claims.

(3) Remedies/Interest/Attorneys' Fees/Late Fees

- (a) All costs, fees and other expenses, charges and sums of every nature that Tenant assumes or agrees to pay under this Lease, together with all interest and penalties that may accrue thereon, and all damages, costs, expenses, and sums (including reasonable attorneys' fees) that Landlord may suffer or incur by reason of any default by Tenant in performance of the terms hereof, shall all be deemed to be, and collectible as, additional rent due under this Lease. The term "rent" as used in this Lease shall mean all Minimum Rent and additional rent, as the context may require.
- (b) If Tenant shall default in the performance of any of its non-monetary obligations under this Lease and shall not cure such default within thirty (30) days after Landlord's written notice to Tenant thereof, Landlord may, and in addition to any and all other remedies available to it under this Lease or otherwise by law, perform the same for the account and at the expense of Tenant (with a 10% surcharge for Landlord's overhead and administrative costs), which sums shall be payable as additional rent. Notwithstanding the foregoing, Tenant shall not be deemed to be in default of this Lease if such default cannot reasonably be cured within such thirty (30) day period, and (i) Tenant shall within such period commence such cure and thereafter diligently prosecute the same to completion and (ii) cure such non-monetary default within 60-days. Landlord at any time—may perform such obligations of the Tenant in the event of exigent circumstances, in order to preserve life, limb or property, in which case the Tenant shall immediately reimburse Landlord for all costs and expenses incurred by Landlord in performing such obligations.

- (e) In the event Tenant should default under any of the provisions of this Lease, which default is not remedied by Tenant within any applicable cure period, and Landlord employs attorneys or incurs other expenses for the collection of rent or the enforcement of performance or observance of the terms and conditions of this Lease, Tenant, on demand, shall pay Landlord such reasonable attorneys' fees and other expenses so incurred. Such reasonable attorneys' fees and other expenses so incurred shall be due and payable by Tenant upon the referral of such matter to an attorney, even if any litigation has not yet been commenced. If Landlord shall, without fault on the part of Landlord, be made a party to any litigation commenced against the Tenant, and if the Tenant shall fail to provide Landlord with legal counsel approved by Landlord (such approval shall not be unreasonably withheld or delayed), Tenant shall pay, upon demand, all court costs and reasonable attorneys' fees incurred or paid by Landlord in connection with such litigation but such court costs and reasonable attorneys' fees shall not be considered additional rent hereunder.
- (d) In the event that any Minimum Rent payment to be paid by Tenant under this Lease is not paid within ten (10) days after the same is due, or in the event that any additional rent payment to be paid by Tenant under this Lease is not paid within ten (10) days after the same is due, a late charge equal to seven percent (7%) of the delinquent amount will be assessed as liquidated damages (and not a penalty) for the additional administrative charges incurred by Landlord as a result of such late payment. In addition, any Minimum Rent and/or additional rent not paid within thirty (30) days of the due date therefore shall accrue interest at the rate of twelve percent (12) per annum, compounded monthly.
- C. <u>Late Payments</u>. Anything herein to the contrary notwithstanding, the Term of this Lease is for the entire Lease Term, and the provisions herein for payment of rent in monthly installments by the Tenant is for convenience of the Tenant only. If the Minimum Rent shall be in arrears, in whole or in part, for ten (10) or more days after the due date therefor, or if any other sums of money which under the provisions hereof may be considered as additional rent, shall be in arrears, in whole or in part, for ten (10) or more days after the due date therefor, then the Tenant shall be in default hereunder and the Landlord may elect to pursue such remedies as are set forth herein and as otherwise available under Maryland Law.
- D. Back Rent/Existing Lease. It is acknowledged and agreed that under the terms of the Existing Lease (as amended by a certain First Amendment to Lease Agreement) the Tenant has agreed to pay the Landlord certain back rent and other amounts ("Back Rent"). In addition, it is acknowledged that the Existing Lease will terminate as of the Lease Commencement Date of this Lease, but such termination shall not in any way affect, modify, or extinguish the Tenant's obligation to pay any of the Back Rent, Minimum Rent or additional rent under the terms of this Lease and/or the Existing Lease, and if Tenant shall be in default of the Existing Lease at the time of the Lease Commencement Date, then such default shall be deemed a default under this Lease.
- 4. <u>TENANT IN POSSESSION</u>. The parties acknowledge and agree that the Tenant is currently occupying the Leased Premises under the terms of the Existing Lease.
- 5. <u>PAYMENT OF RENT</u>. All payment of rent shall be made by the Tenant, without notice, set-off, deduction or demand, to the Landlord at the address set forth in Section 1.A(15) above or at such other place directed by Landlord. No payment by the Tenant of a lesser amount of the monthly rent (minimum and/or additional) shall be deemed other than a payment on account of the earliest rent

due, nor is acceptance of a check or endorsement thereon to be deemed an accord and satisfaction, and the Landlord may accept such payment or checks without prejudice to any of its available remedies for any default which may have been made by the Tenant.

- 6. <u>POSSESSION BY TENANT</u>. The Tenant acknowledges that it has been occupying the Leased Premises under the Existing Lease, and therefore accepts the Leased Premises in its "AS IS" condition, except for latent defects. Neither the Landlord, nor its agents, have made any warranties, statements or representations with respect to the Leased Premises.
- 7. <u>QUIET ENJOYMENT</u>. The Tenant, upon payment of the rent provided for herein, and upon performance of all the terms of this Lease, shall peaceably and quietly enjoy the Leased Premises without disturbance from the Landlord.

8. COVENANTS. Tenant covenants and agrees that:

- (1) Tenant will promptly pay all electricity, water, sewer, gas (if any), telephone and other utility bills applicable to the Leased Premises as the same shall become due, it being understood and agreed that Landlord is not providing any utilities to the Leased Premises. Failure by Tenant to pay any of the above expenses shall constitute a default under this Lease, allowing the Landlord to exercise it rights and remedies hereunder against the Tenant. The parties acknowledge and agree that certain utilities for the Leased Premises are not separately metered, and thus, the Landlord shall bill such utilities to the Tenant in accordance with Section 10 below.
- (2) Tenant shall use the Leased Premises for the singular purpose specified in Section 1.A.(4) hereof and for no other purpose. Tenant shall not use or permit the Leased Premises to be used for any other purpose or purposes or under any other trade name, style or designation without the prior written consent of Landlord, which consent may be granted or withheld in its sole discretion. Tenant will not use or permit the Leased Premises, or any part thereof, to be used for any disorderly or unlawful purpose. Tenant will, at its own expense, promptly comply with all lawful statutes, ordinances (including zoning ordinances), rules, orders, regulations, and requirements of the federal, state, county or municipal governments now in force or hereafter enacted insofar as the conduct of its business in the Leased Premises shall pertain to the same.
- (3) Tenant will keep the interior of the Leased Premises, together with all electrical, plumbing, heating, air conditioning and other mechanical equipment, including appliances, used exclusively in connection therewith, in good order and condition and surrender same at the expiration of the Lease in the same good order in which they are received. Except for occurrences caused by Landlord's gross negligence or willful misconduct, Landlord shall be under no liability for repair, maintenance, alteration or any other action with reference to the Leased Premises or any part thereof, or repair, maintenance, alteration, replacement or any other action with respect to any plumbing, electrical, heating, air conditioning or other mechanical equipment, including appliances, used in connection with the Leased Premises. Tenant must provide Landlord with written notice of any alteration which may be undertaken by Tenant or Tenant's agents. Tenant shall also be liable and responsible for the maintenance and replacement of any and all generators or other equipment located outside of the Leased Premises that is used in its business, regardless of who owns such equipment.

Any and all changes, improvements, or alterations to the Leased Premises shall be subject to the reasonable review and approval of Landlord. Tenant shall submit any and all plans and specifications for such changes, improvements or alterations to Landlord prior to commencing any such work for Landlord's approval, which approval will not be unreasonably withheld or delayed. Landlord shall have the right to impose reasonable conditions on its approval; provided that after Landlord's approval of such changes, improvements or alterations, Tenant will have the right to control the construction and construction management work associated with any such approved changes, improvements or alterations; provided that Tenant will cooperate and coordinate any construction in the Leased Premises with Landlord's building engineers and property management team. Tenant will comply with all of Landlord's reasonable rules and regulations regarding construction. In reviewing the Tenant's plans and specifications for any changes, improvements, or alterations as provided above, Tenant shall pay Landlord for such reasonable costs incurred by Landlord in reviewing such plans and specifications (e.g., engineering review costs, etc.).

- (4) Tenant will not permit refuse, trash or waste of any nature to accumulate in the Leased Premises, but will remove the same at its own expense and will use best efforts to keep the premises free of insects, rodents, and other pests. Furthermore, Tenant will not permit refuse, trash, waste or debris to accumulate in any manner on or around the Leased Premises.
- (5) All personal property in the Leased Premises and all of Tenant's equipment and trade fixtures in the Leased Premises shall be considered Tenant's property and shall remain at Tenant's sole risk, and the Landlord, except for occurrences caused by Landlord's gross negligence or willful misconduct, shall not be liable for any damage to or loss of such personal property or Tenant improvements arising from acts of negligence of any person, nor from the leakage of the roof, or from bursting, leaking or overflowing of water, sewer, or steam pipes, or from the heating, electricity, plumbing, air conditioning or other mechanical fixtures, or any cause or casualty whatsoever, nor shall the Landlord be liable for any injury to the agents, employees, invitees and/or guests of the Tenant or other persons in and about Leased Premises. Tenant expressly agrees to indemnify and hold the Landlord harmless in all such cases and to carry public liability insurance, at its own expense, in accordance with the provisions set forth below. Landlord shall under no circumstances be liable to Tenant in damages or otherwise for any interruption in service of water, electricity, or any other utilities. Tenant, at its own expense, shall carry fire insurance with extended coverage on its fixtures, equipment, stock in trade and other personal property. Nothing in this Section shall be deemed to transfer ownership of any fixtures or other part of the real property owned by Landlord.
- (6) Tenant shall and does hereby indemnify Landlord and agrees to save it harmless and, at Landlord's option, defend it from and against any and all claims, actions, damages, liabilities and expenses (including reasonable attorneys' and other professional fees) judgments, settlement payments, and fines paid, incurred or suffered by Landlord (except to the extent caused by Landlord's gross negligence or willful conduct) in connection with: (a) with bodily injury including loss of life or personal injury, or damage to property or to the environment, suffered by third parties, and arising from or out of the occupancy or use by Tenant of the Leased Premises or any part thereof or any other part of the Building or property upon which the Leased Premises are located, and occasioned wholly or in part by any act or omission of Tenant, its officers, agents, contractors, employees or invitees; or (b) with damage to property or the environment and arising, directly or indirectly, wholly or in part, from any

conduct, activity, act, omission, or operation involving the use, handling, generation, treatment, storage, disposal, other management or release of any Hazardous Substances in, from or to the Leased Premises, whether or not Tenant may have acted negligently with respect to such Hazardous Substances; or (c) any claim or proceeding brought by a third party alleging, in whole or in part, that Tenant's acts, activities, conduct, or omissions in or about the Leased Premises violate its obligations to comply with a law, rule, order, ordinance, direction, regulation or requirement of federal, state, county and municipal authorities imposing a duty with respect to the use, occupation or alteration of the Leased Premises.

Landlord shall indemnify, defend, protect and hold Tenant and its officers, directors, employees, agents, invitees, shareholders and affiliates (collectively "Tenant Party") harmless from and against any and all liabilities, claims, damages and/or losses of any kind (including, without limitation, attorneys fees) arising, directly or indirectly, entirely or in part, out of any injury to any person occurring on the Property, caused by the gross negligence or willful misconduct of Landlord, Landlord's agents or employees. If any action or proceeding is brought against Tenant by reason of any such claim, Landlord, upon receipt of written notice from Tenant, shall defend the same, at Landlord's expense.

(7) Tenant, at its expense, shall obtain and maintain in effect as long as this Lease remains in effect and during such other time as Tenant occupies the Leased Premises or any part thereof, insurance policies providing at least the following coverage: (a) commercial general liability insurance written on an occurrence basis with respect to the Leased Premises and the business operated by Tenant including, but not limited to, coverage for contractual liability, specifically including the liability of Tenant arising out of the indemnities provided in this Lease, and coverage against bodily injury, loss of life, personal injury, and property damage, with minimum combined single limits of Two Million Dollars (\$2,000,000) per occurrence and in the aggregate; and (b) "all-risk" property insurance policy written at replacement cost value and with replacement cost endorsement, covering all of Tenant's personal property in the Leased Premises, Tenant's interest in all alterations, Tenant improvements and all other leasehold improvements and all betterments installed in the Leased Premises by or on behalf of Tenant; and (c) if and to the extent required by law, worker's compensation or similar insurance in form and amounts required by law.

The company or companies writing any insurance which Tenant is required to carry and maintain or cause to be carried or maintained pursuant this Lease, as well as the form of such insurance, shall have a rating of at least B+ or better and a financial size rating of X or larger from Best's Key Rating Guide and Supplemental Service, Property/Casualty (or comparable rating from a comparable insurance rating service), and shall be licensed to do business in the State of Maryland. Commercial general liability insurance policies required under this Lease shall include Landlord, as an additional insured, shall be primary and non-contributory, and shall also contain a provision by which the insurer agrees that such policy shall not be canceled, materially changed or not renewed without at least 10-days advance written notice to Landlord. Each such copy of Tenant's policy, or a certificate thereof, shall be deposited with Landlord by Tenant on or before the Lease Commencement Date and within 30-days of each renewal of such insurance policies therafter. Tenant shall have the right to meet its insurance requirements related to this Lease in the form of a "blanket" or "umbrella" policy, provided that the coverage amounts under such policies shall equal or exceed the coverage amounts

required herein, and Landlord shall specifically be listed as an additional insured under such polices. Notwithstanding anything set forth above in Sections, all dollar limits specified shall be increased from time to time as reasonably necessary to effect economically equivalent insurance coverage, or coverage deemed adequate in light of then-existing circumstances.

During the Term of this Lease, Landlord, at its sole cost and expense (subject to Tenant's Proportionate Share as provided in Section 3.B above), shall keep the Leased Premises insured against loss or damage by fire, and such other risks as shall be insurable against under present or future forms of fire and extended coverage policies (so-called "all risk" policy) which are used in Maryland on one hundred (100%) percent replacement cost basis. The policy shall contain a special coverage all risk endorsement and full replacement cost endorsement. All such policies or certificates shall contain an agreement by the insurers that such policies shall not be canceled or materially changed without at least thirty (30) days prior written notice to Landlord and its mortgagee.

Landlord shall procure and maintain during the Term of this Lease a policy or policies of insurance, written by a responsible insurance company or companies, insuring Landlord against any and all losses, claims, demands or actions for injury to or death of any one or more persons in any one occurrence to the limit of not less than Two Million Dollars (\$2,000,000), and for damage to property in an amount not less than Five Hundred Thousand Dollars (\$500,000), which insurance will cover accidents or occurrences: (i) incurring in the Building or upon its environs (other than inside the Leased Premises); (ii) arising from, related to or connected with the conduct and operation of the Building and its environs (other than the Leased Premises); and (iii) caused by acts performed or required to be performed by Landlord under this Lease including acts on, within or affecting the Leased Premises. The cost of said insurance shall be part of the Project/Leased Premises Expenses for which the Tenant shall be responsible for the payment of Tenant's Proportionate Share as provided in Section 3.B above.

- (8) Tenant will not place or suffer to be placed or maintained on the exterior of the Leased Premises any sign, advertising matter or other thing of any kind, nor will Tenant place or maintain any decoration, lettering or advertising matter on the glass of any window or door of the Leased Premises or anywhere within the Leased Premises if clearly observed from outside the Leased Premises without first obtaining the written approval of the Landlord, which shall not be unreasonably withheld or delayed.
- (9) Unless agreed to the contrary in writing by the Landlord, any and all interior improvements, repairs, replacements, fixtures, and fixed decorations constructed or otherwise made to the Leased Premises shall become the property of the Landlord and remain in the Leased Premises upon the expiration or early termination of this Lease; PROVIDED, HOWEVER, Landlord may at its option at the time of approving any alteration, improvement or repair require Tenant to remove all or any part of such repairs, replacements, decorations and/or fixtures, at Tenant's expense. If Landlord does not exercise its option at the time of approval, Tenant shall not be responsible for the removal or cost of removal of any alterations, improvements, or additions approved in writing by Landlord. Tenant shall not make any alterations, installations, additions or improvements to the Leased Premises without Landlord's prior written consent, which shall not be unreasonably withheld or delayed, and then only by contractors or mechanics approved by Landlord, which approval will not be unreasonably withheld or delayed. Notwithstanding the foregoing, Tenant may, without Landlord's consent, make

cosmetic and non-structural alterations of less than Ten Thousand Dollars (\$10,000). If approved by Landlord, then all such alterations, installations, additions or improvements shall be done at such times and in such manner as Landlord and Tenant may agree upon. Subject to their complying with Tenant's security procedures for protecting the confidentiality of Tenant's business, Tenant will permit Landlord, or its employees and/or agents, to enter the Leased Premises upon reasonable notice for the purpose of inspecting the Leased Premises and it is understood and agreed that Landlord shall retain a passkey to the Leased Premises for such purpose. In addition, Tenant shall permit Landlord, and its employees, agents and/or contractors, to post "For Rent" signs and to show the Leased Premises at reasonable hours to prospective tenants during the last six (6) months of the Lease Term, provided Tenant has not exercised is right to extend the term of the Lease as provided for herein.

- (10) Tenant will not install or store in the Leased Premises any safe, machinery, fixture, equipment or other item of any kind which will exceed in weight 200 pounds per square foot; provided, however that any equipment installed or placed in the Leased Premises as of the Effective Date of this Lease shall be exempt from the foregoing restriction and Tenant shall not be required to remove such equipment.
- (11) Except as otherwise provided in this Lease, Tenant will occupy the Leased Premises promptly upon commencement of the Lease Term and thereafter will continuously conduct in the Leased Premises its business operations during the Lease Term during normal business hours; PROVIDED, HOWEVER, during the last two years of the Lease Term the Tenant may vacate the Leased Premises and otherwise maintain the Leased Premises in a "dark condition" provided that (i) Tenant is not otherwise in default of the Lease and (ii) Tenant continues to comply with all other terms and conditions of this Lease, including without limitation, the payment of all Minimum Rent and additional rent due under the Lease for the remaining portion of the Lease Term; PROVIDED FURTHER HOWEVER, if Tenant shall vacate the Leased Premises as provided herein, then Landlord at any time shall have the right by written notice to Tenant to terminate this Lease.
- (12) Tenant shall at no time allow the temperature maintained within the Leased Premises to fall below 60 degrees or exceed 85 degrees Fahrenheit.
- (13) The Tenant shall not do or permit anything to be done upon the Leased Premises which is in violation of any fire insurance policy thereon, or which would increase the premiums on said policy.
- (14) Tenant shall perform all covenants contained in this Lease. Tenant shall promptly, upon receipt of written notice specifying action desired by Landlord and required by the provisions of this Lease (with no notice by Landlord being required in the case of nonpayment of rent or additional rent), comply with such notice. If Tenant shall not promptly [within ten (10) days of mailing of notice in the case of non-monetary defaults] begin performance and diligently pursue the same and comply with such notice, then Landlord may, at its option, enter the Leased Premises and do the things specified in said notice, and/or terminate this Lease. Tenant shall pay, upon demand, any reasonable expenses incurred by Landlord in taking the action required by said notice, and such expenses shall be collectible by Landlord as additional rent due under this Lease.

9. SURRENDER OF LEASED PREMISES.

- A. At the expiration or earlier termination of this Lease, Tenant agrees to surrender the Leased Premises to the Landlord in as good a condition at the time of occupancy by Tenant, reasonable use and wear, or damage caused by fire which was not caused by negligence or carelessness of Tenant, or damage caused by an act of God, excepted.
- B. No act or thing done by the Landlord, or any of its agents, during the Term of this Lease shall be deemed an acceptance by it of a surrender by the Tenant of the Leased Premises, and no agreement to accept surrender shall be valid unless in writing signed by the Landlord. A mere delivery of keys by the Tenant to the Landlord without such written agreement from Landlord shall not operate as a termination of this Lease or of the Leased Premises.
- 10. <u>UTILITIES</u>. The Landlord shall not be responsible to furnish to the Tenant any facilities and/or utilities. All charges for services such as, but not limited to, telephone, heat, light, electricity, air conditioning, water, sewer and janitorial service shall be paid by the Tenant directly to the supplier thereof, except for water and sewer, electricity, and other utilities which may not be separately metered. It is agreed that with respect to any utilities that are not separately metered, such utilities shall be deemed additional rent and part of the expenses Tenant is obligated to pay in accordance with Section 3.B(2) above, and Tenant shall pay Tenant's Proportionate Share thereof in accordance with Section 3.B(2) above; provided, however, that in the event Tenant uses more than its Proportionate Share of electricity because of its surgical use of the Leased Premises (e.g., lighting and equipment), Landlord specifically reserves the right to bill Tenant for amounts in excess of Tenant's Proportionate Share of electricity. Tenant shall indemnify Landlord against any liability or damages incurred by Landlord for Tenant's failure to timely pay any utilities.
- 11. ASSIGNMENT AND SUBLETTING. Except as specifically provided below under "Corporate Transfer," Tenant shall not assign or transfer either the benefits of or burdens under this Lease or encumber the same, nor sublet or permit the Leased Premises or any part thereof to be used by others, without the prior written consent of the Landlord, which consent shall not be unreasonably withheld, conditioned or delayed. If this Lease is assigned, or the Leased Premises are sublet, in both cases with the written consent of Landlord, the Tenant herein shall remain primarily liable for the payment of rent herein reserved, and for performance of all other lease terms. The provision herein requiring written consent of Landlord for any assignment or subletting of the Leased Premises is a continuing provision for the benefit of Landlord, regardless of the number of times that Landlord may have agreed to an assignment or subletting.

Corporate Transfer. If Tenant is a corporation, the stock of which is not publicly traded, any transfer of Tenant's issued and outstanding capital stock or any issuance of additional capital stock, as a result of which the majority of the issued and outstanding capital stock of Tenant is held by a corporation, firm or person or persons who do not hold a majority of the outstanding capital stock as of the date hereof, shall be deemed a prohibited assignment/transfer under this Section. Further, if Tenant is a limited liability company, (a) any assignment/transfer of a controlling interest in the limited liability company or any other change in the composition of the limited liability company, which as to clause (b) results in a change in management of Tenant from the person or persons managing the limited liability company as of the date hereof, shall be

deemed a prohibited assignment/transfer under this Section. Notwithstanding anything to the contrary contained in this Section, and provided that the Tenant is not otherwise in default of this Lease, Tenant may assign, sublet or transfer any of Tenant's interest in this Lease, at any time during the Term to (1) a parent, subsidiary or affiliate corporation of Tenant, (2) an entity succeeding to all or substantially all of the assets of Tenant as a result of sale, acquisition, consolidation, or merger, or (3) an entity to which all or substantially all assets of Tenant have been sold, upon prior ninety (90) days advanced written notice to Landlord but without Landlord's prior written consent provided, (i) the net worth of the transferee shall be not less than the net worth of Tenant as of the date of assignment/transfer; (ii) such transferee continues to operate the business conducted in the Leased Premises for the permitted use and in the same manner as Tenant and pursuant to all of the provisions of this Lease; (iii) such transferce shall assume in writing in a form reasonably satisfactory to Landlord all of Tenant's obligations hereunder; (iv) Landlord shall be furnished with a copy of such assignment or other transfer instrument within thirty (30) days prior to the effective date of the proposed assignment or other transfer thereof; and (v) Tenant to which the Leased Premises were initially leased shall remain fully liable as principal and not as guarantor or surety for the rent and all conditions and covenants of this Lease to be performed by Tenant for the full lease Term, even if Landlord accepts rent from the assignee or in any other manner deals with them.

12. DEFAULT.

A. Tenant's Breach.

(1) Remedies. If the rent agreed to be paid, including all other sums of money which under the provisions hereof may be considered as additional rent, shall be in arrears in whole or in part for ten (10) or more days, Landlord may distrain therefor [and in connection with distraint proceedings. Tenant agrees that a nominal bond not to exceed Five Hundred Dollars (\$500,00) shall be sufficiently and the covenant to pay rent herein shall be considered breached by the Tenant. If Tenant shall be in breach of any of the covenants set forth in this Lease, Landlord may at its option, after having given notice set forth below, and if Tenant after such notice shall fail to remedy such breach as set forth below, reenter the Leased Premises without the need for resort to judicial proceedings, and declare this Lease and the tenancy hereunder terminated, and Landlord shall be entitled to the benefit of all provisions of the law respecting the speedy recovery of lands and tenements held over by tenants or proceedings in forcible entry and detainer. Tenant agrees that if Landlord shall so reenter or if this Lease shall be terminated by Landlord because of breach hereunder by Tenant: (a) all of the rent payable herein shall be paid up to the time of reentry, dispossession, expiration or termination, together with reasonable expenses of Landlord as hereinafter defined; (b) Landlord may relet the Leased Premises or any part thereof, either in the name of Landlord or otherwise, for a term or terms which may, at Landlord's option, be less than or exceed the period which would otherwise have constituted the balance of the Lease Term and may grant reasonable concessions; and (c) Tenant shall pay Landlord, as liquidated damages for the failure of Tenant to observe and perform the covenants of this Lease, any deficiency between (A) the sum of (i) the total Minimum Rent for the entire Lease Term (or Option Term), plus (ii) the additional rent (adjusted to a monthly payment) payable hereunder for the month immediately preceding such reentry or termination times the number of months constituting the balance of the Lease Term, and (B) the amount, if any, of rents actually collected on account of the Leased Premises for any of the period following the date of reentry, dispossession, expiration or termination which would otherwise have constituted the balance of the Lease Term. Such liquidated

damages shall be computed and payable, at the Landlord's option, either in an accelerated lump sum payment in an amount equal to the total amount due hereunder for the remaining Lease Term or payment in monthly installments, in advance, on the first day of each calendar month following termination of the Lease and continuing until the date on which the Lease Term would have expired but for such termination, and any suit or action brought to collect any such liquidated damages for any month shall not, in any manner, prejudice the right of Landlord to collect any liquidated damages for any subsequent month by a similar proceeding. If Landlord elects to receive such liquidated damages in an accelerated lump sum as provided above, then the accelerated lump sum shall be subject to a present value calculation using five percent (5%) discount rate and a period of time equal to the remaining term of the Lease.

- (2) <u>Continuing Liability of Tenant</u>. The maintenance of any action or proceeding to recover possession of the Leased Premises, or any installment or installments of Minimum Rent or any other monies that may be due or become due from Tenant to Landlord, shall not preclude Landlord from thereafter instituting and maintaining subsequent actions or proceedings for the recovery of possession of the Leased Premises or of any other monies that may be due or become due from Tenant. Any entry or re-entry by Landlord shall not be deemed to absolve or discharge Tenant from liability hereunder.
- B. Attorneys' Fees Other Expenses. In computing such liquidated damages, there shall be added to the said deficiency such reasonable expenses as Landlord may incur in connection with reletting, such as court costs, attorneys' fees, real estate brokerage commissions and for keeping the Leased Premises in good order or for preparing the same for reletting and including a five percent (5%) charge for the Landlord's overhead.
- C. Notice. In the event Landlord shall determine that Tenant shall be in breach in the performance of any monetary covenant on its part to be performed hereunder, Landlord shall be required to provide 10-days prior written notice to Tenant before exercising any remedies set forth in this Lease. In the event Landlord shall determine that Tenant shall be in breach in the performance of any non-monetary covenant on its part to be performed hereunder, Landlord shall be required to give thirty (30) days' prior written notice thereof to Tenant before exercising any remedies set forth in this Lease. Tenant shall have thirty (30) days following the mailing of such written notice to cure the breaches described in such notice, unless Landlord shall agree in writing to any extension of such period; PROVIDED, HOWEVER, if Tenant shall proceed with due diligence to cure said breaches after said notice, then such thirty (30)-day period shall be extended to such a period of time as may be required (not to exceed 60-days), in the Landlord's reasonable discretion, to cure such listed breaches while proceeding with due diligence.
- 13. <u>LIABILITY OF LANDLORD</u>. Landlord shall not be liable for, and Tenant agrees to indemnify and hold Landlord harmless for, any personal injury to Tenant or its agents, employees, visitors, invitees or any other user of any part of the Leased Premises, nor shall Landlord be liable for any damage to any property of the above, unless such injury or damage shall be the direct result of the gross negligence of Landlord or its agents, contractors or employees. Neither the shareholders, officers, directors, trustees, individuals or partners comprising Landlord nor the shareholders (or any of the partners comprising same), directors, trustees, officers, or partners of any of the foregoing (collectively,

the "Parties") shall be liable for the performance of Landlord's obligations under this Lease. Tenant shall not seek any damages against any of the Parties. The liability of Landlord for Landlord's obligations under this Lease shall not exceed and shall be limited to the Landlord's interest in the Leased Premises, and Tenant shall not look to any other property or assets of any of the Parties in seeking either to enforce Landlord's obligations under this Lease or to satisfy a judgment for Landlord's failure to perform such obligations.

- 14. GOVERNING LAW. This Lease shall be governed by, construed, and enforced in accordance with Maryland law. In construing this Lease, the feminine and the neuter shall be substituted for the masculine in form, and vice versa, and plural terms shall be substituted for singular and singular for plural where the context requires. If any provision of this Lease is declared invalid or unenforceable, the remainder shall continue in full force and effect.
- 15. SUBORDINATION/ATTORNMENT. This Lease shall be subject and subordinate at all times to the lien of mortgages (and/or deeds of trust) which are, or hereafter may be made, a lien on the Leased Premises. Although no instrument or act on the part of Tenant shall be necessary to effectuate such subordination, Tenant will, nevertheless, execute and deliver (within 10-days) such further instruments subordinating this Lease to the lien of any such mortgages as may be desired by the mortgagee. In the event that Landlord sells or otherwise conveys the Leased Premises during the Lease Term, including any renewal terms, the Tenant shall, upon request of Landlord, attorn to and acknowledge the purchaser or other grantee of the Leased Premises as landlord hereunder. In the event of any foreclosure sale or sales under any deeds of trust and/or mortgages that may affect the Leased Premises from time to time, during the Lease Term, the Tenant shall, upon written request of the holder of the aforesaid deeds of trust and/or mortgages, attorn to and acknowledge the foreclosure purchaser or purchasers at such sale as landlord hereunder. During the term of this Lease and upon the written request of the Tenant, Landlord shall assist the Tenant with obtaining a Subordination and Non-Disturbance Agreement from Landlord's current or future lender/mortgagee; provided, however, that it is agreed that the terms and conditions of such SNDA shall be solely between the Tenant and the The Landlord agrees from time to time and as requested by Tenant and/or Landlord's lender. Landlord's lender to execute such SNDA's subject to the Landlord's (and its counsel's) reasonable review and approval as to the terms and conditions contained therein.
- 16. <u>INSOLVENCY OF TENANT</u>. If proceedings of any type of insolvency shall be filed against Tenant or if a writ of attachment or execution of any nature be levied on the property of Tenant, and such proceedings or levy are not released or dismissed within sixty (60) days thereafter, or if a sale of the leasehold interest hereby created should be made under any judicial process, or if Tenant shall make an assignment for benefit of creditors, or shall voluntarily institute insolvency proceedings or have such proceedings involuntarily instituted against it, then such shall be deemed a default by Tenant under the terms of this Lease, and Landlord, at its option, may reenter and take possession of the Leased Premises and remove all persons therefrom, terminate this Lease, and/or avail itself of any and all other options for a breach and default of this Lease as provided under law and/or by the terms of this Lease.
- 17. TAKING/CONDEMNATION. If either the entire Leased Premises or the Building shall be acquired or condemned by any governmental authority under its power of eminent domain for any

public or quasi-public use or purpose, this Lease shall terminate as of the date of vesting or acquisition of title in the condemning authority and the rents hereunder shall be abated on that date. If less than the whole but more than twenty five percent (25%) of the rental area of the Leased Premises or more than fifty percent (50%) of the rentable area of the Building (even if the Premises are unaffected) or such portion of the Common Facilities as shall render the Leased Premises or the Building untenantable should be so acquired or condemned, Landlord and Tenant shall each have the option to terminate this Lease by notice given to the other within sixty (60) days of such taking. In the event that such a notice of termination is given, this Lease shall terminate as of the date of vesting or acquisition of title in the condemning authority and the rents hereunder shall be abated on that date. If (a) neither Landlord nor Tenant shall exercise their respective options to terminate this Lease, as hereinabove set forth, or (b) some lesser portion of the Leased Premises or the Building, which does not give rise to a right to terminate pursuant to this Section, is taken by the condemning authority, this Lease shall continue in force and effect, but from and after the date of the vesting of title in the condemning authority, the Minimum Rent payable hereunder during the unexpired portion of the Lease Term shall be reduced in proportion to the reduction in the total rental area of the Leased Premises, and any additional rent (other than additional rent due Landlord by reason of Tenant's failure to perform its obligations hereunder) payable pursuant to the terms hereof shall be adjusted to reflect the diminution of the Leased Premises and/or the Building, as the case may be.

Tenant shall have no claim against Landlord arising out of the taking or condemnation, or arising out of the cancellation of this Lease, or for any portion of the amount that may be awarded as damages as a result of any taking or condemnation, or for the value of any unexpired portion of the Lease Term, or for any property lost through condemnation, and Tenant hereby assigns to Landlord all its rights, title and interest in and to any such award; provided, however, that, in the event of a taking of all or any portion of the Leased Premises, Tenant may assert any claim it may have against the condemning authority for compensation for Tenant's Personal Property and/or Tenant Improvements lost thereby and for any relocation and interruption of business as may be allowed in the condemnation proceedings and/or for any other damages sustained by Tenant provided that such awards shall be made in addition to, and stated separately from, the award made for the Building, and the Leased Premises. Landlord shall have no obligation to contest any taking or condemnation.

18. DAMAGE BY CASUALTY. If the Leased Premises shall be damaged by fire, the elements, accident or other casualty (any of such causes being referred to herein as a "Casualty"), but the Leased Premises shall not be thereby rendered wholly or partially untenantable, Landlord shall promptly cause such damage to be repaired and there shall be no abatement of rent reserved hereunder. If, as the result of Casualty, the Leased Premises shall be rendered wholly or partially untenantable, then, subject to Landlord's rights to terminate this Lease as provided below, Landlord shall cause such damage to be repaired and all rent reserved hereunder (other than any additional rent due Landlord either by reason of Tenant's failure to perform any of its obligations hereunder or by reason of Landlord's having provided Tenant with additional services hereunder) shall be abated proportionately as to the portion of the Leased Premises rendered untenantable during the period of such untenantability. All such repairs shall be made at the expense of Landlord, subject to Tenant's responsibilities set forth herein. Landlord shall not be liable for interruption to Tenant's business or for damage to or replacement or repair of the Tenant improvements, Tenant's personal property or

alterations, all of which damage, replacement or repair shall be undertaken and completed by Tenant, at Tenant's expense.

If the Leased Premises are (a) rendered wholly untenantable, or (b) damaged as a result of any cause which is not covered by insurance that is required to be maintained by Landlord hereunder, or if the Building is damaged to the extent of fifty percent (50%) or more of the rentable area, or if, for reasons beyond Landlord's control or by virtue of the terms of any financing of the Building, sufficient insurance proceeds are not available for the reconstruction or restoration of the Building or Leased Premises, then, in any such events, Landlord may elect to terminate this Lease by giving to Tenant notice of such election within ninety (90) days after the occurrence of such event. If such notice is given, the rights and obligations of the parties shall cease as of the date set forth in such notice, and the Minimum Rent and additional rent (other than any additional rent due Landlord either by reason of Tenant's failure to perform any of its obligations hereunder or by reason of Landlord's having provided Tenant with additional services hereunder) shall be adjusted as of the date of such termination.

If, within the ninety (90) day period set forth above, Landlord shall not have made an election to rebuild or to terminate this Lease as provided in the preceding paragraph, then Tenant may elect to terminate this Lease by giving to Landlord notice of such election within thirty (30) days following the expiration of such ninety (90) period. If such notice of termination is given by Tenant, the rights and obligations of the parties shall cease as of the date set forth in such notice, and the Minimum Rent and additional rent (other than any additional rent due Landlord either by reason of Tenant's failure to perform any of its obligations hereunder or by reason of Landlord's having provided Tenant with additional services hereunder) shall be adjusted as of the date of such termination.

Notwithstanding anything contained herein to the contrary, in the event the Landlord has not substantially completed any repairs or restoration to the Building as a result of a Casualty as required herein within two hundred seventy (270) days of the date of such Casualty, then Tenant shall have the option to terminate the Lease by providing the Landlord with ninety (90) days advanced written notice and this Lease shall terminate as of 11:59PM on the 90th day after such written notice unless Landlord shall substantially complete such repairs and restoration within such 90-day period, in which event this Lease shall not terminate and shall otherwise continue in full force and effect as if Tenant never issued its termination notice.

- 19. HOLD OVER OF TENANT. In no event shall continued possession of the Leased Premises after expiration of the Lease Term by the Tenant, with the agreement of the Landlord, be construed to be other than the beginning of a tenancy from month to month at the consent of the Landlord, unless the parties hereto prior to such expiration have entered into another written lease which by its terms commences upon expiration of this Lease. The said month-to-month tenancy shall be on the terms and conditions herein specified, so far as practicable, except that the monthly installment of Minimum Rent shall be one and one-half (1.5) times the monthly installment of Minimum Rent then in effect at the expiration of this Lease.
- 20. <u>TERMINATION OF LEASE</u>. If Tenant shall be in default of payment of rent or any other material condition of this Lease and such material default shall not be cured within ten (10) days of the due date therefor, then Landlord may serve upon Tenant notice of its intent to terminate this Lease and

a notice to quit, and Tenant hereby agrees that such notices shall effectively operate to terminate this Lease and the Lease Term hereunder shall be conclusively considered to have expired upon receipt of the aforesaid notices; PROVIDED, HOWEVER, it is understood and agreed that the termination of this Lease and the expiration of the term hereunder shall in no way limit or impair Landlord's remedies hereunder and all of Tenant's obligations shall survive such termination and expiration. Tenant shall thereafter be considered a Tenant holding over beyond the termination of the Lease. Landlord may reenter the Leased Premises after the expiration of the Lease and/or the Lease Term hereunder, or may avail itself of any further remedy it has under the Laws of the State of Maryland.

21. SECURITY DEPOSIT. The parties acknowledge and agree that the Tenant's Security Deposit made under the terms of the Existing Lease has been surrendered and paid to Landlord as a result of Tenant's failure to pay rent under the Existing Lease. Accordingly, on or before the end of the first Lease Year, the Tenant shall pay Landlord the Security Deposit listed in Section 1.A(14) as and for security for (1) payment of rent agreed to be paid hereunder, and (2) expense or damage incurred or suffered because of failure of Tenant to keep and perform the agreements contained herein, and Landlord shall return so much of the amount of the security deposit to Tenant within thirty (30) days following completion of the Lease Term as Tenant shall be entitled to depending on the extent to which Tenant shall have in all respects complied with the agreements contained herein. No interest shall be paid on any part of the security deposit and the Landlord need not keep the security deposit separate or in any segregated account. The security deposit shall never be applied as rent unless so treated by Landlord as an element of damages for breach by the Tenant. In the event at any time during the Lease Term, Landlord shall apply all or any portion of the security deposit to correct a breach by the Tenant hereunder, Tenant shall immediately restore the amount of the security deposit held by the Landlord to the original amount provided above, and the amount so required to make such restoration shall be payable upon demand, as additional rent hereunder. Neither said security deposit nor the application of any part thereof by Landlord shall be a bar or defense to any action in unlawful detainer or to any action which Landlord may at any time commence for a breach of any of the covenants or conditions of this Lease.

22. PARKING/COMMON AREAS/LANDLORD REPAIRS.

A. Control of Common Area. Any and all common areas located in and around the Building and upon the land upon which the Building is located shall be subject to the exclusive management and control of Landlord Landlord shall have the right, from time to time, to designate, withdraw, redesignate, relocate, limit or add to the common area. Landlord shall have the right to establish and enforce such reasonable rules and regulations concerning the common area (including the parking areas) as it may deem necessary or advisable for the proper and efficient management, operation, maintenance and use thereof, and Tenant shall comply with such rules and regulations. Landlord shall have the right to make changes in the common area and any part thereof, including, without limitation, changes in the number, location and relocation of driveways, entrances, exits, vehicular parking spaces, the direction of flow of traffic, the setting apart of prohibited areas, the exclusion of employee parking therefrom as Landlord may deem necessary and advisable for the proper and efficient operation and maintenance of the common area, and in particular, the vehicular parking areas for the convenience of the suppliers, business invitees and customers of all tenants of the Building; provided, however that, notwithstanding anything to the contrary contained here, the parking lot around the Building shall be

reserved for use without charge by Building tenants, their patients and other invitees.

- B. <u>Maintenance of Common Area</u>. Landlord covenants to keep, maintain, manage and operate the common area, or to cause the same to be done, in a manner consistent with other properties in the area, and to keep the sidewalks and driveways constituting a portion of the common area clean and reasonably clear of snow and ice. Tenant shall pay Tenant's Proportionate Share of such expenses in accordance with Section 3.B(2) above.
- C. Maintenance of Building. Landlord shall keep the roof, exterior walls, footers, foundation, and other structural components of the Building in good order and repair. Tenant shall pay Tenant's Proportionate Share of such expenses in accordance with Section 3.B(2) above. As of the Effective Date, the Landlord represents that it has no actual knowledge that the Building is in violation of any laws or ordinances, including the Americans with Disabilities Act. In addition, to Landlord's actual knowledge, the Building and its structural components and roof are in good order and repair, subject to normal wear and tear.
- 23. <u>CONDOMINIUM</u>. The Tenant does hereby consent in advance to subdivision and/or development of the Building (and/or the land), and to the formation of individual and separately saleable units (in the nature of condominium units, cooperative units or otherwise). Tenant does hereby consent in advance to the creation of such condominium regimes, cooperative associations and other organizations in connection with such subdivision and/or development of the Building as the Landlord shall determine appropriate, as long as the rights of the Tenant pursuant to the terms of this Lease are not thereby adversely and materially affected; and the Tenant further agrees to pay all or any portion of the additional rents required to be paid under this Lease to such regime, association or organization as may be directed by the Landlord, as long as such additional rents shall not be increased over and above those required to be paid hereunder by the Tenant.
- 24. BROKERS/LEGAL REPRESENTATION. Landlord and Tenant recognize that Corporate Realty Advisors and Jay Rigelsky (collectively, "CRA") have been retained by Blue Chip Partners (the manager of the Tenant) to assist the Tenant in negotiating this Lease. Accordingly, it is acknowledged and agreed that the Landlord has not agreed to pay CRA (or any other broker or agent) any fee, commission, or other compensation associated with this Lease, and any compensation to be paid to CRA shall be paid solely by Blue Chip Partners. Except as provided above, Landlord and Tenant acknowledge, represent and warrant each to the other that no broker or real estate agent brought about or was involved in the making of this Lease and that no brokerage fee or commission is due to any party as a result of the execution of this Lease. Each of the parties hereto agrees to indemnify and hold harmless the other against any claim by any broker, agent or finder based upon the execution of this Lease and predicated upon a breach of the above representation and warranty. In addition, it is acknowledged that the Law Offices Craig R. Habicht, LLC and Craig R. Habicht, Esq. represent only the Landlord in this transaction, and the Tenant by and through CRA and Blue Chip is representing the Tenant.

25. <u>HAZARDOUS SUBSTANCE</u>.

A. Prohibition. Tenant shall not cause or permit any Hazardous Substance (hereinafter

defined) to be used, stored, generated or disposed or on or in the Leased Premises by Tenant, Tenant's agents, employees, contractors or invitees, without first obtaining Landlord's written consent, which consent may be withheld in Landlord's sole discretion. If Hazardous Substances are used, stored, generated or disposed of on or in the Leased Premises except as permitted above, or if the Leased Premises become contaminated in any manner for which Tenant is legally liable, Tenant shall indemnify and hold harmless the Landlord from any and all claims, damages, fines, judgments, penalties, costs, liabilities or losses (including, without limitation, a decrease in value of the Leased Premises, damages due to loss or restriction of rentable or usable space, or any damages due to adverse impact on marketing of the Leased Premises, and any and all sums paid for settlement of claims, attorneys' fees, consultant and expert fees) arising during or after the Lease Term and arising as a result of such contamination caused by Tenant or its employees, agents or contractors. This indemnification includes, without limitation, any and all costs incurred due to any investigation of the site or any cleanup, removal or restoration mandated by a federal, state or local agency or political subdivision. Without limitation of the foregoing, if Tenant causes or permits the presence of any Hazardous Substance on the Leased Premises and such results in contamination, Tenant shall promptly, at its sole expense, take any and all necessary actions to return the Leased Premises to the condition existing prior to the presence of any such Hazardous Substance on the Leased Premises. Tenant shall first obtain Landlord's approval for any remedial action. Notwithstanding the foregoing, it is acknowledged and agreed that the Leased Premises will be used for certain medical purposes as otherwise set forth in Section 1.A(4) above, which may involve minor amounts of substances and materials that may otherwise be deemed Hazardous Substances under the terms of this Lease. Accordingly, the Landlord does hereby consent to the Tenant's use of such medical Hazardous Substances, subject to the following: (i) the Tenant agrees to use, dispose, and otherwise handle such Hazardous Substances strictly in accordance with all federal, state, and local laws; (ii) the Tenant shall immediately notify the Landlord in writing of any violation or notice of violation received regarding its use, disposal or handling of such Hazardous Substances; and (iii) the Tenant shall indemnify and hold harmless the Landlord from and against any matter or expense relating to such Hazardous Substances as otherwise provided in this Lease.

- B. <u>Definition</u>. As used herein, "Hazardous Substance" means any substance which is toxic, ignitable, reactive, or corrosive and which is regulated by any local government, the State of Maryland, or the United States government. "Hazardous Substance" includes any and all material or substances which are defined as "hazardous waste", "extremely hazardous waste" or a "hazardous substance" pursuant to state, federal or local governmental law. "Hazardous Substance" includes, but is not restricted to, asbestos, polychlorobiphenyls ("PCB's") and petroleum.
- 26. ESTOPPEL CERTIFICATES. Tenant shall, without charge, at any time and from time to time, within fifteen (15) days after receipt of request therefor by Landlord, execute, acknowledge and deliver to Landlord a written estoppel certificate, certifying to Landlord, Landlord's Mortgagee(s), any purchaser of Landlord's interest in the Building, or any other person designated by Landlord, as of the date of such estoppel certificate, among other things, the following: (a) whether Tenant is in possession of the Leased Premises; (b) whether this Lease is in full force and effect; (c) whether there have been any amendments to this Lease, and if so, specifying such amendments; (d) whether there are then existing any set-offs or defenses against the enforcement of any rights hereunder, and if so, specifying such matters in detail; (e) the dates, if any, to which any rent or other charges have been paid

in advance and the amount of any Security Deposit held by Landlord; (f) that Tenant has no knowledge of any then existing defaults of Landlord under this Lease, or if there are such defaults, specifying them in detail; (g) that Tenant has no knowledge of any event having occurred that authorizes the termination of the Lease by Tenant, or if such event has occurred, specifying it in detail; (h) the address to which notices to Tenant under this Lease should be sent. Any such certificate may be relied upon by the person or entity to whom it is directed or by any other person or entity who could reasonably be expected to rely on it in the normal course of business; and (i) the Commencement Date of the Lease and the termination date of the Term. The failure of Tenant to execute, acknowledge and deliver such a certificate in accordance with this Section within fifteen (15) days after a request therefor by Landlord shall constitute an acknowledgement by Tenant, which may be relied on by any person who would be entitled to rely upon any such certificate, that such certificate as submitted by Landlord to Tenant is true and correct.

- 27. THE PARTIES HERETO SHALL AND THEY HEREBY DO WAIVE TRIAL BY JURY IN ANY ACTION, PROCEEDING OR COUNTERCLAIM BROUGHT BY EITHER OF THE PARTIES HERETO AGAINST THE OTHER ON ANY MATTERS WHATSOEVER ARISING OUT OF OR IN ANY WAY CONNECTED WITH THIS LEASE, THE RELATIONSHIP OF LANDLORD AND TENANT, TENANT'S USE OR OCCUPANCY OF THE LEASED PREMISES AND/OR ANY CLAIM OF INJURY OR DAMAGE. IN THE EVENT LANDLORD COMMENCES PROCEEDINGS FOR NONPAYMENT OF RENT, TENANT SHALL NOT INTERPOSE ANY COUNTERCLAIM OF WHATEVER NATURE OR DESCRIPTION IN ANY SUCH PROCEEDING WHICH WOULD POSTPONE OR DELAY THE DISPOSITION OF SUCH PROCEEDING OR POSTPONE OR DELAY THE ABILITY OF LANDLORD TO OBTAIN POSSESSION OF THE LEASED PREMISES, EXCEPT SUCH COUNTERCLAIMS AS MAY BE REQUIRED BY LAW TO BE INTERPOSED OR FOREVER LOST. THIS SHALL NOT, HOWEVER, BE CONSTRUED IN ANY WAY AS A WAIVER OF TENANT'S RIGHT TO ASSERT SUCH CLAIMS IN ANY SEPARATE ACTION OR ACTIONS BROUGHT BY TENANT. TENANT HEREBY EXPRESSLY WAIVES ANY AND ALL RIGHTS OF REDEMPTION GRANTED BY OR UNDER ANY PRESENT OR FUTURE LAWS IN THE EVENT OF TENANT BEING EVICTED OR DISPOSSESSED FOR ANY CAUSE, OR IN THE EVENT OF LANDLORD OBTAINING POSSESSION OF THE LEASED PREMISES BY REASON OF THE VIOLATION OF TENANT OF ANY OF THE COVENANTS OR CONDITIONS OF THIS LEASE, OR OTHERWISE.
- 28. <u>NOTICES</u>. All notices, requests, consents and other communications hereunder shall be in writing and shall be personally delivered, delivered via nationally recognized delivery service (i.e. Fed Ex orUPS), or mailed by first-class, registered or certified mail, return receipt requested, postage prepaid to the addresses listed on the signature page attached hereto, or to such other address as may have been furnished by a party. Any notice, request, consent or other communication shall be deemed received when it is personally delivered or on the third (3rd) business day after it is deposited in the United States mail, as set forth above, as the case may be.
- 29. <u>MISCELLANEOUS PROVISIONS</u>. The covenants, terms, and provisions contained herein shall extend to and be binding on the heirs, personal representatives, executors, administrators, successors and assigns (as to Tenant only after written approval of Landlord) of the respective parties hereto. This Lease contains the entire agreement between the parties, and cannot be changed or

modified, unless by written agreement signed by all the parties hereto. Any remedies of the Landlord specified herein for breach of any of the terms herein are cumulative, and are not intended to be exclusive of any other lawful remedies. Time is of the essence with respect to each and every provision of this Lease. The failure of the Landlord to insist upon strict performance of any of the terms, conditions and covenants herein shall not be deemed to be a waiver of any rights or remedies that Landlord may have and shall not be deemed a waiver of any subsequent breach or default in the terms, conditions and covenants herein contained, except as may be expressly waived in writing. In particular, the receipt by Landlord of rent with knowledge of the breach of any covenant of this Lease shall not be deemed a waiver of such breach, and no provision of this Lease shall be deemed to have been waived by Landlord unless such waiver is in writing and signed by Landlord. This Lease may be executed in counterparts, each of which taken together shall constitute a binding agreement.

- 30. <u>SATELLITE DISH AND ANTENNA</u>. During the Term of this Lease, and so long as Tenant is in possession of the Leased Premises and Tenant is not in default of the Lease, Tenant shall be permitted to have access to the roof of the Building in order to install and maintain thereon one or more satellite dishes and/or antennae, together with the right to install and maintain related cabling between such devices and the Leased Premises (all, collectively, the "Communications Equipment"), upon the following terms and conditions:
- A. All such installations shall be for the exclusive use of Tenant, solely for the transmission and reception of signals in the conduct of its business operations at the Leased Premises for its permitted use as provided in this Lease. Under no circumstances whatsoever shall Tenant sell, rent, assign, sublet, license or otherwise share the Communications Equipment with or to any other person or entity, except to the extent actually and reasonably necessary to permit Tenant to conduct its business at the Leased Premises.
- B. Tenant will not make any installation of Communications Equipment on or in the Building until Tenant shall have caused complete and detailed plans and specifications therefor to have been prepared, at Tenant's expense, by an architect, engineer, or other duly qualified person, shall have submitted same to Landlord for review by Landlord and Landlord's architects and engineers, and shall have obtained Landlord's written approval thereof, such approval not to be unreasonably withheld, conditioned or delayed.
- C. Without in any way limiting the exercise of Landlord's discretion in reviewing and approving Tenant's request, no Communications Equipment shall be permitted to be installed if the same: (i) exceeds 6 feet in height above the surface of the Building roof, (ii) weighs more than 200 pounds, (iii) in the reasonable opinion of Landlord or Landlord's architect or engineer, requires the installation of structural reinforcements to the Building, (iv) in the reasonable opinion of Landlord or Landlord's architect or engineer, is likely to interfere with existing Building systems or with the transmission or reception of radio signals by existing antennae on or in the Building or on or in adjacent properties; or (v) is otherwise architecturally or aesthetically incompatible with the Building due to the proposed Communications Equipment's design, height, bulk, shape, color scheme, finish, configuration, appearance, materials or proposed location.
 - D. Tenant shall obtain and exhibit to Landlord at Landlord's request copies of all

requisite approvals and licenses with respect to the Communications Equipment, including, to the extent required, FCC approvals for transmitting equipment, local zoning and regulatory approval, building permits, and any architectural approvals required under restrictive covenants applicable to the Building and the Property. Landlord's approval of Tenant's plans and specifications for the Communications Equipment, if granted, shall not under any circumstances be deemed to imply that the same comply with, or are permitted to be installed under, any Federal, state or local laws or regulations, or private covenants, conditions and restrictions.

- E. Any cabling to be installed from the roof-mounted Communications Equipment to the Leased Premises shall be shielded to prevent interference with other Building cabling or communications systems, shall be properly identified and labeled at every access point within the Building, shall be coated to comply with all applicable fire and life safety codes, and shall be installed only through approved channeling and communications closets or otherwise as approved by Landlord.
- F. If all required approvals, licenses and permits are granted as provided above, then Tenant shall cause the work described in such plans and specifications to be performed, at its expense, promptly, efficiently, competently and in a good and workmanlike manner by duly qualified and licensed persons or entities, without interference with or disruption to the operations of tenants or other occupants of the Building or neighboring properties. All such work shall comply strictly with the terms of Landlord's approval, as well as with all applicable codes, rules, regulations and ordinances and shall be performed by Landlord's designated roofing contractor or such other contractors who are approved in advance by Landlord and who carry the insurance coverage required to be carried by Tenant's contractors as provided elsewhere in the Lease.
- G. If Tenant is permitted to install the Communications Equipment following Landlord's approval, then Tenant shall notify Landlord of the date on which work is scheduled to begin and shall arrange for periodic inspections by Landlord of the job progress to insure compliance with the approved plans and specifications. Landlord shall also have the right at any time before, during, or after the construction to require Tenant to furnish further assurances against mechanics' liens including, but not limited to, releases of liens signed by all contractors, subcontractors, and suppliers, and affidavits executed by Tenant, Tenant's contractor, or architect, that all charges for labor and materials have been paid. Tenant shall promptly pay or bond off any lien filed against the Premises, the Building or the Property for any construction performed by or on behalf of Tenant.
- H. All Communications Equipment installed by or for Tenant shall be removed from the Building upon the termination of this Lease unless Landlord and Tenant otherwise agree in writing. If Communications Equipment is to be removed at the termination of this Lease, then Tenant hereby agrees to cause the same to be removed and to repair all damage caused by such removal at its sole cost and expense unless Landlord determines to control the removal of some or all of the same, in which case such removal and repair shall also be at Tenant's cost and expense. If Tenant is required to perform such removal and fails to remove the same, then Landlord may cause them to be removed at Tenant's expense, and Tenant hereby agrees to reimburse Landlord for the cost of such removal, together with all and any damages which Landlord may suffer and sustain by reason of Tenant's failure to remove the same. Tenant's obligations to observe and perform the covenants set forth in this Subsection shall survive the expiration or earlier termination of this Lease.

- I. Tenant agrees to pay Landlord, upon written demand, as Additional Rent, all reasonable costs incurred by Landlord in connection with any actual or proposed installation of Communications Equipment, including, without limitation, the reasonable costs of investigations by Landlord and Landlord's architects and engineers and other design professionals as to the acceptability of a proposed installation of Communications Equipment. Tenant acknowledges and agrees that the reasonable costs and expenses imposed and agreed to be paid by Tenant under this Subsection are agreed to be paid in consideration of the Landlord's processing of the Tenant's request, and that they are not intended as consideration for the consent to installation of Communications Equipment. Payment of such fees and costs shall under no circumstances obligate the Landlord to consent to any requested installation.
- 31. LANDLORD SUBORDINATION OF LIENS. From time to time as requested by a financial institution who shall be making a loan to the Tenant ("Tenant's Lender") in connection with Tenant's business operated from the Leased Premises, the Landlord shall execute such agreements and instruments ("Landlord's Agreements") to subordinate the Landlord interests and/or liens in Tenant's personal property, equipment, and related trade fixtures ("Tenant's Property"), subject to the reasonable review of Landlord's legal counsel. The Landlord's Agreement shall only effect a subordination of Landlord's interests in Tenant's Property to Tenant's Lender and shall not in any way hinder or affect the Landlord from pursuing any remedies against the Tenant for Tenant's default of the Lease subject to any applicable notice and cure periods, and other terms set forth in the Landlord's Agreement which may be mutually agreed to by the parties.

IN WITNESS WHEREOF, witness the hands of the undersigned parties executing this Lease in duplicate on the day and the year below indicated.

WITNESS:	LANDLORD:	
Shammon 4nagra	ANDOCHICK PROPERTIES, LLC By: Sadw (seal) Print Name: Scott Applochick Title: President Address:	
WITNESS:	TENANT:	
Koren & Sind	By: Fuffuth (se Print Name: Kevin Hurtt Title: Vice President Address:	
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OR 1	2/12/2019	10:30 AM	10:04 AM	10:36 AM	10:12 AM	10:30 AM	10:04 AM	10:32 AM	1 20757-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	2/12/2019	11:15 AM	10:43 AM	11:16 AM	10:42 AM	11:09 AM	10:39 AM	11:12 AM	7 20759-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	2/12/2019	12:00 PM	11:24 AM	11:48 AM	11:31 AM	11:42 AM	11:19 AM	11:44 AM	7 20492-3	Right Catar OPH	Thadani, St OPH	MAC
OR 1	2/12/2019	12:45 PM	12:11 PM	12:40 PM	12:09 PM	12:34 PM	12:07 PM	12:36 PM	23 20756-1	Right Catar OPH	Thadani, St OPH	MAC
										_		
OR 1	2/12/2019	2:45 PM	12:42 PM	1:10 PM	12:46 PM	1:04 PM	12:42 PM	1:06 PM	6 20763-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	2/12/2019	1:30 PM	1:16 PM	1:49 PM	1:14 PM	1:44 PM	1:10 PM	1:45 PM	4 20615-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	2/12/2019	2:15 PM	1:49 PM	2:12 PM	1:55 PM	2:05 PM	1:49 PM	2:08 PM	4 19228-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	2/12/2019	3:15 PM	2:13 PM	2:36 PM	2:18 PM	2:30 PM	2:13 PM	2:32 PM	5 20654-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	2/12/2019	4:00 PM	2:43 PM	3:10 PM	2:50 PM	3:04 PM	2:43 PM	3:06 PM	11 20762-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	2/13/2019	9;45 AM	10:40 AM	1:57 PM	11:03 AM	1:40 PM	10:37 AM	1:52 PM	32 20699-1	Bilateral Se PLS	Andochick, PLS	GA
OR 1	2/13/2019	12:30 PM	2:11 PM	3:04 PM	2:29 PM	2:50 PM	2:10 PM	2:59 PM	18 20786-1	Debrideme ORT	MecInski, APLS	GA
OR 1	2/14/2019	11:00 AM	11:25 AM	12:50 PM	11:56 AM	12:36 PM	11:25 AM	12:47 PM	143 20625-1	Left: Arthrc ORT	Steinberg, . ORT	GA
	2/14/2019		1:23 PM	3:05 PM	1:53 PM	2:49 PM	1:23 PM	3:05 PM	36 20772-1	Right: Arthi ORT		GA
OR 1		1:15 PM									Steinberg, ORT	
OR 1	2/15/2019	8:45 AM	8;58 AM	9:26 AM	9:05 AM	9:21 AM	8:58 AM	9:23 AM	7 20708-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	2/15/2019	9;15 AM	9:33 AM	10:23 AM	9:41 AM	9:56 AM	9:32 AM	10:00 AM	9 20597-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	2/15/2019	10:00 AM	10:10 AM	10:43 AM	10:19 AM	10:38 AM	10:10 AM	10:40 AM	10 20773-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	2/18/2019	12:00 PM	11:18 AM	12;02 PM	11:31 AM	11:50 AM	11:18 AM	11:57 AM	54 20716-1	Right: Arthi ORT	Steinberg, . ORT	GA
OR 1	2/18/2019	1:15 PM	12:34 PM	3:29 PM	12:58 PM	3:15 PM	12:34 PM	3:23 PM	37 11702-2	Right: Arth: ORT	Steinberg, . ORT	GA
OR 1	2/19/2019	9:45 AM	8:40 AM	9;28 AM	8:49 AM	9:25 AM	8:40 AM	9:32 AM	27 15718-2	Bilateral Bl: OPH	Henry, J. Cl OPH	MAC
OR 1	2/19/2019	11:00 AM	11:27 AM		11:35 AM	12:30 PM	11:27 AM		115 20795-1	Bilateral Te GEN	Henry, J. Cl OPH	MAC
OR 1	2/19/2019	12:30 PM	12:55 PM	2:20 PM	1:08 PM	2:15 PM	12:55 PM	2:18 PM	19 20799-1	Right Desce OPH	Thadani, St OPH	GA
										•		
OR 1	2/19/2019	2:00 PM	2:27 PM	2:56 PM	2;38 PM	2;51 PM	2:27 PM	2:53 PM	9 20680-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	2/19/2019	2:30 PM	2:58 PM	3:21 PM	3:06 PM	3:17 PM	2:58 PM	3:19 PM	5 17187-3	Right Catar OPH	Thadani, St OPH	MAC
OR 1	2/19/2019	3:15 PM	3;28 PM	3:50 PM	3:35 PM	3:46 PM	3:28 PM	3:42 PM	9 20800-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	2/19/2019	3:45 PM	3;56 PM	4:19 PM	4:02 PM	4:15 PM	3:56 PM	4:17 PM	14 20652-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	2/19/2019	4:15 PM	4:28 PM	5:15 PM	4:50 PM	5:10 PM	4:28 PM	5:12 PM	11 20798-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	2/19/2019	5:00 PM	5:19 PM	5:42 PM	5:27 PM	5:39 PM	5:19 PM	5:40 PM	7 20801-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	2/19/2019	5;30 PM	5:50 PM	6:20 PM	5:56 PM	6:16 PM	5:50 PM	6:18 PM	10 10484-4	Left Catara OPH	Thadani, St OPH	MAC
OR 1	2/20/2019	12:00 PM	1:48 PM	6:26 PM	2:45 PM		1:48 PM	6:19 PM	32 18031-2	Bilateral Re PLS	Andochick, PLS	GA
OR 1	2/21/2019	9:45 AM	9:41 AM	10:20 AM	9:57 AM	10:13 AM	9:41 AM		26 20712-1	Right: Arthi ORT	Steinberg, . ORT	GA
OR 1	2/21/2019	11:00 AM	10:56 AM	11:41 AM	11:12 AM	11:25 AM	10:56 AM	11:39 AM	43 20804-1	Left: Arthrc ORT	Steinberg, . ORT	GA
OR 1	2/21/2019	12:15 PM	12:02 PM	1:12 PM	12:25 PM	1:00 PM	12:02 PM	1:10 PM	23 12316-2	Left: Left BI ORT	Steinberg, . ORT	GA
OR 1	2/22/2019	8:45 AM	8:38 AM	9:07 AM	8:46 AM	9:01 AM	8:38 AM	9:03 AM	7 20728-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	2/22/2019	9:15 AM	9:15 AM	9:45 AM	9:27 AM	9:39 AM	9:15 AM	9:41 AM	12 20617-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	2/22/2019	9:45 AM	9:55 AM	10:22 AM	10:03 AM	10:15 AM	9.55 AM	10:17 AM	14 20810-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	2/22/2019	10:45 AM	10:45 AM	11:19 AM	10:55 AM	11:09 AM	10:45 AM	11:14 AM	28 20691-1	Excision Le: PLS	Mecinski, APLS	MAC
OR 1	2/22/2019	12:00 PM	11:36 AM	12:26 PM	11:54 AM	12:12 PM	11:36 AM	12:20 PM	22 20818-1	Open Redu ORT	Mecinski, APLS	GA
OR 1	2/25/2019	1:15 PM	1:29 PM	2:14 PM	1:48 PM	2:06 PM	1:29 PM	2:10 PM	19 17844-2	Left: Arthrc ORT	Steinberg, . ORT	GA
		2:30 PM	2:39 PM	4:10 PM	3:07 PM	4:08 PM	2:39 PM	4:08 PM	29 20815-1			
OR 1	2/25/2019									Right: Right HND	Steinberg, ORT	GA
OR 1	2/26/2019	8:30 AM	8:19 AM	8:46 AM	8:28 AM	8:40 AM	8:19 AM	8:42 AM	7 20825-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	2/26/2019	9:00 AM	8:50 AM	9:19 AM	8:59 AM	9:13 AM	8:50 AM	9:15 AM	8 20826-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	2/26/2019	9:30 AM	9:21 AM	9:50 AM	9:29 AM	9:44 AM	9:21 AM	9:46 AM	6 20833-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	2/26/2019	10:00 AM	9:51 AM	10:16 AM	10:02 AM	10:13 AM	9:51 AM	10:14 AM	5 18102-2	Left Catara: OPH	Thadani, St OPH	MAC
OR 1	2/26/2019	10:30 AM	10:18 AM	10:42 AM	10:27 AM	10:37 AM	10:18 AM	10:39 AM	4 20827-1	Left Catara OPH	Thadani, St. OPH	MAC
OR 1	2/26/2019	11:00 AM	10:48 AM	11:35 AM	10:58 AM	11:30 AM	10:48 AM	11:32 AM	9 20681-2	Left Catara OPH	Thadani, St. OPH	MAC
OR 1	2/26/2019	11:30 AM	11:39 AM	12:09 PM	11:47 AM	12:04 PM	11:39 AM	12:06 PM	7 20828-1	Left Conjur OPH	Thadani, St OPH	MAC
OR 1	2/27/2019		11:56 AM			4:10 PM	11:56 AM	4:25 PM	36 20700-1	Bilateral Br PLS	Andochick, PLS	GA
OR 1	2/27/2019	3:00 PM		1 111	3:05 PM	3:13 PM	2:58 PM	3:19 PM	87 20845-1	Debrideme ORT	Mecinski, A PLS	L
			SiOA DAA	5-27 DA							•	
OR 1	2/27/2019	2:00 PM	5:04 PM	5:37 PM	5:12 PM	5:24 PM	5:04 PM	5:31 PM	105 20844-1	Debrideme ORT	Mecinski, A PLS	MAC
OR 1	2/28/2019	9:45 AM	10:01 AM	11:00 AM	10:18 AM	10:47 AM	10:01 AM		23 20777-1	Right: Arthi ORT	Steinberg, ORT	GA
OR 1	2/28/2019		11:26 AM	12:28 PM			11:26 AM		29 20852-1	Irrigation A ORT	Steinberg, . ORT	GΑ
OR 1	2/28/2019	12:15 PM			12:41 PM	1:07 PM	12:31 PM	1:12 PM	7 20858-1	Removal Ti PLS	Mecinski, A PLS	L
OR 1	3/1/2019	7:30 AM	8:34 AM	10:08 AM	8:54 AM	9:46 AM	8:34 AM	9:52 AM	8 20727-1	Right Catar OPH	Thadani, St OPH	GΑ
OR 1	3/1/2019	9:00 AM	10:22 AM	10:50 AM	10:34 AM	10:38 AM	10:22 AM	10:44 AM	30 20854-1	Excision Le: ENT	Mecinski, A PLS	MAC
OR 1	3/1/2019		11:11 AM	12:48 PM	11:33 AM	12:31 PM	11:11 AM	12:43 PM	27 20850-1	Pinning Pos ORT	Mecinski, A PLS	GA
OR 1	3/1/2019	12:15 PM	1:01 PM	2:07 PM	1:36 PM	1:51 PM	1:08 PM	2:03 PM	25 10963-2	Excision Hit PLS	Mecinski, APLS	GA
OR 1	3/1/2019	1:30 PM	2:27 PM	3:02 PM	2:38 PM	2:48 PM	2:27 PM	3:45 PM	24 10235-3	Debrideme ORT	Mecinski, A PLS	MAC
		2:45 PM	3:18 PM	4:15 PM	3:36 PM	4:01 PM	3:18 PM	4:09 PM	27 20858-2	Removal Ti PLS		
OR 1	3/1/2019		P'TO LIA	H.ID FIVE							Mecinski, APLS	GA
OR 1	3/1/2019	3:45 PM			4:27 PM	4:42 PM	4:23 PM	4:45 PM	14 20688-2	Re-Excision ENT	Mecinski, A PLS	L
OR 1	3/1/2019	4:15 PM			5:01 PM	5:21 PM	4:58 PM	5:26 PM	13 20002-2	Excision Me PLS	Mecinski, A PLS	L
OR 1	3/1/2019	5:15 PM			5:46 PM	5:48 PM	5:37 PM	5:52 PM	11 20839-1	Excision of PLS	Mecinski, A PLS	L
OR 1	3/4/2019	3:00 PM			3:36 PM	3:54 PM	3:34 PM	4:00 PM	205 20119-2	Debrideme ORT	Mecinski, A PLS	L
OR 1	3/5/2019	9:00 AM	9;35 AM	10:28 AM	9:45 AM	10:19 AM	9:35 AM	10:21 AM	13 20861-1	Left Catara OPH	Pillar Topal OPH	MAC
OR 1	3/5/2019	9:45 AM	10:32 AM	11:04 AM	10:42 AM	10:56 AM	10:32 AM		11 16612-2	Right Catar OPH	Pillar Topal OPH	MAC
OR 1	3/5/2019	1:15 PM	10:32 AM	11:04 AM	10:42 AM	10:56 AM	10:32 AM	10:58 AM	26 20865-1	Right Deep OPH	Pillar Topal OPH	MAC
OR 1	3/5/2019	10:15 AM	11:14 AM	12:18 PM	11:29 AM	12:05 PM	11:14 AM	12:09 PM	16 20523-1	Left Descer OPH	Pillar Topal OPH	MAC
OR 1		11:15 AM		1:06 PM		12:59 PM	12:34 PM	1:03 PM	25 20862-1	Left Pterygl OPH	Pillar Topal OPH	MAC
OR 1		11:45 AM	1:15 PM	2:14 PM	1:24 PM	2:09 PM	1:15 PM	2:10 PM	12 20863-1	Left Descer OPH	Pillar Topal OPH	MAC
OR 1		12:45 PM	2:23 PM	3:05 PM	2:32 PM	2:56 PM	2:23 PM	2:59 PM	13 20864-1	Right Ptery OPH	Pillar Topal OPH	MAC
OR 1		11:00 AM		2:15 PM	11:55 AM	1:59 PM	11:19 AM	2:10 PM	16 16170-4	Right Breas PLS	Andochick, PLS	GA
OR 1	3/6/2019	3:00 PM	3:07 PM	4:52 PM	3:16 PM	4:31 PM	3:07 PM	4:46 PM	57 20867-1	Right and L PLS	Andochick, PLS	MAC

OR 1	3/7/20	19 9:15 A	M 9:14 A	M 10:30 AN	1 9:34 AM	1 10:16 A	A 9:14 A	M 10:23 AM		25 20792-	1 004	61.1.1 Acres	
OR 1	3/7/20	19 4:00 F	M		4:22 PM							Steinbarg, . ORT	GA
OR 1	3/12/20			M 0.24 AA					3:	52 20904-:		Mecinski, A PLS	Ļ
OR 1								M 8:32 AM		5 20869-	1 Left Catara: OPH	Thadani, St OPH	MAC
	3/12/20:			1A 00; P	1 8:41 AM	8:55 AN	/ 8:35 A	M 8:57 AM		3 20874-1	Left Catara: OPH	Thadani, 51 OPH	
OR 1	3/12/20:	19 9:15 A	M 9:01 AI	M 9:22 AN	1 9:07 AM	9:15 AN	4 9:01 A			4 19228-2			MAC
OR 1	3/12/20:	19 9:45 A	M 9:23 At	V 9:49 AN								Thadani, St OPH	MAC
OR 1	3/12/20:									5 20868-3	Left Catara OPH	Thadani, St OPH	MAC
OR 1							1 9:53 AI	M 10:10 AM		7 20872-3	L Left Catara OPH	Thadani, St OPH	MAC
	3/12/20:					10:50 AN	1 10:25 A	VI 10:52 AM	1	L5 20870-:			
OR 1	3/12/201	l9 11:30 A	M 10:57 AN	4 11:19 AM	11:03 AM	11:13 AN			-		•	Thadani, St OPH	MAC
OR 1	3/12/201	12:00 P	M 11:29 AN							5 10484-5		Thadani, St OPH	MAC
OR 1	3/12/201								1	L3 20876-1	l Right Catar OPH	Thadani, St OPH	MAC
						12:13 PM	1 11:54 AM	V 12:15 PM		5 20875-1	Right Catar OPH	Thadani, Sc OPH	MAC
OR 1	3/12/201	.9 1:00 P	M 1:13 PN	4 1:58 PM	1:33 PM	1:46 PM	1:13 PM	1:53 PM		8 20729-2			
OR 1	3/14/201	.9 8:45 Ai	M 8:56 AN	4 9:35 AM	9:02 AM	9:30 AM						Thadani, St OPH	GA
OR 1	3/14/201	9 10:00 A	M 9:56 AN							1 18560-2		Steinberg, . ORT	GA
OR 1	3/14/201			I II:03 AIV					2	1 20859-1	Bilateral: A ORT	Steinberg, . ORT	GA
					1:06 PM	1:11 PN	1:00 PN	И 1:15 PM	11	5 20823-1	Repair Mol ENT	Mecinski, A PLS	
OR 1	3/15/201	9 8:30 AJ	M 8:47 AN	7 9:14 AM	8:53 AM	9:09 AM	8:47 AN	4 9:11 AM		9 20905-1			Ļ
OR 1	3/15/201	9:00 AI	V 9:27 AN	1 9:49 AM	9:34 AM	9:45 AM					•	Thadani, SL OPH	MAC
OR 1	3/15/201									6 16683-1		Thadani, St OPH	MAC
OR 1								/ 10:20 AM		9 20842-1	Right Catar OPH	Thadani, St OPH	MAC
	3/15/201				10:38 AM	10:51 AM	10:30 AN	4 10:53 AM	1	0 17819-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	3/15/201	9 11:30 AN	И 11:40 AN	1 2:37 PM	12:08 PM	2:19 PM	11:40 AN	4 2:33 PM		7 20783-1	Second Sta; PLS		
OR 1	3/15/201	9 2:15 PM	∕ î				3:15 PA					Mecinski, A PLS	GA
OR 1	3/15/201				7.45.514					2 20370-3	Removal Pi ORT	Mecinski, A PLS	L
OR 1					3:43 PM	3;56 PM			1.0	0 20938-1	Repair Ope HND	Mecinski, APLS	L
	3/18/201				9:23 AM	9:56 AM	10:07 AM	1 10:07 AM	91	0 20918-1	Left: Arthrc ORT	Steinberg, . ORT	=
OR 1	3/18/201	9 10:00 AN	/ 10:32 AM	11:11 AM	10:43 AM	11:01 AM	10:32 AM			5 20924-1			GA
OR 1	3/18/2019	9 11:15 AN	/ 11:29 AM	1:56 PM		1:38 PM					Left: Arthrc ORT	Steinberg, . ORT	GA
OR 1	3/19/2019		10:46 AM						2	3 12272-2	Left: Remo ORT	Steinberg, . ORT	GA
OR 1					10:55 AM	11:07 AM	10:46 AM	1 11:08 AM	64	4 20917-1	Left Catara OPH	Thadani, Su OPH	MAC
	3/19/2019		4 11:13 AM		11:16 AM	11:38 AM	11:13 AM	11:39 AM		5 20913-1	Left Catara OPH		
OR 1	3/19/2019	9 11:30 AN	1 11:45 AM	12:17 PM	11:49 AM	12:11 PM	11:45 AM	12:13 PM				Thadani, St OPH	MAC
OR 1	3/19/2019	12:15 PM	1 12:20 PM		12:22 PM					5 20760-2	Right Catar OPH	Thadani, St. OPH	MAC
OR 1	3/19/2019					12:42 PM	12:20 PM		7	7 20912-1	Right Catar OPH	Thadani, Su OPH	MAC
					12:59 PM	1:19 PM	12:56 PM	1:21 PM	13	20915-1	Right Catar OPH	Thadani, St. OPH	MAC
OR 1	3/19/2019	1:15 PM	1 1:29 PM	2:00 PM	1:34 PM	1:54 PM	1:29 PM	1:55 PM		20756-2	Left Catara OPH		
OR 1	3/19/2019	1:45 PM	2:02 PM	2:36 PM	2:05 PM	2:30 PM	2:02 PM					Thadani, St OPH	MAC
OR 1	3/19/2019									7 20911-1	Left Catara: OPH	Thadani, St OPH	MAC
OR 1				3:23 PM	2;49 PM	3:18 PM	2:41 PM	3:19 PM	9	20916-1	Left Catara: OPH	Thadani, St OPH	MAC
	3/19/2019			4:00 PM	3:38 PM	3:58 PM	3:29 PM	3:56 PM	10	20914-1	Left Catara: OPH	Thadani, Sc OPH	
OR 1	3/20/2019	2:45 PM	1		12:54 PM	1:26 PM	12:18 PM	1:31 PM		20543-2		•	MAC
OR 1	3/22/2019	8:15 AM	8:32 AM	9:05 AM	8:35 AM						Revision Ri _l PLS	Andochick, PLS	L
OR 1	3/22/2019					9;01 AM	8:31 AM		10	20492-4	Left Catara OPH	Thadani, St OPH	MAC
				9:38 AM	9:13 AM	9:31 AM	9:11 AM	9:33 AM	9	20757-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	3/22/2019		9:42 AM	10:09 AM	9:44 AM	10:05 AM	9:42 AM	10:06 AM	9	20759-2	Left Catara OPH	Thadani, St OPH	
OR 1	3/22/2019	10:30 AM	10:17 AM	10:43 AM	10:19 AM	10:39 AM	10:16 AM			20950-1			MAC
OR 1	3/22/2019	11:15 AM	10:49 AM								Right Catar OPH	Thadani, St OPH	MAC
OR 1	3/25/2019					11:05 AM	10:49 AM	11:05 AM	9	20810-2	Right Catar OPH	Thadaní, St OPH	MAC
				9:48 AM	9:50 AM	9:52 AM	9:40 AM	9:48 AM	60	17401-2	Left; Left PrORT	Steinberg, . ORT	GA
OR 1	3/25/2019	10:30 AM	11:02 AM	11:15 AM	11:06 AM	11:08 AM	11:02 AM	11:15 AM		20949-1	Left: Left Tr ORT		
OR 1	3/25/2019	11:15 AM	11:43 AM	12:46 PM		12:45 PM	11:43 AM					Steinberg, . ORT	GA
OR 1	3/25/2019	1:45 PM	1:20 PM	2:30 PM						20963-1	Left: Arthrc ORT	Steinberg, . ORT	GΑ
OR 1			1.20 FIV	2;50 PIVI	1:38 PM	2:29 PM	1:20 PM	2:30 PM	34	20969-1	Flap Closur GEN	Mecinski, A PLS	GA
	3/25/2019	3:30 PM			3:05 PM	3:18 PM	3:00 PM	3:21 PM	30	20970-1	Excision Le: ENT	Mecinski, APLS	
OR 1	3/26/2019	10:15 AM	9:54 AM	10:19 AM	10:01 AM	10:13 AM	9:54 AM	10:16 AM		20825-2			L
OR 1	3/26/2019	10:45 AM	10:31 AM			10:52 AM					Left Catara OPH	Thadani, St OPH	MAC
OR 1	3/26/2019						10:31 AM	10:54 AM	15	20875-2	Left Catara: OPH	Thadani, St OPH	MAC
			11:02 AM			11:20 AM	11:02 AM	11:22 AM	8	17305-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	3/26/2019	11:45 AM	11:29 AM	11:52 AM	11:37 AM	11:48 AM	11:29 AM	11:49 AM	7	20826-2	Left Catara OPH		
OR 1	3/26/2019	12:15 PM	12:00 PM	12:20 PM			12:00 PM					Thadani, Sc OPH	MAC
OR 1	3/26/2019		12:25 PM							20951-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1						12:40 PM	12:25 PM	12:42 PM	8	20952-1	Right Catar OPH	Thadani, St. OPH	MAC
	3/26/2019	1:15 PM	12:49 PM	1:09 PM	12:53 PM	1:04 PM	12:49 PM	1:06 PM	7	18638-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	3/26/2019	1:45 PM	1:13 PM	1:40 PM	1:24 PM	1:36 PM	1:13 PM	1:37 PM		20874-2			
OR 1	3/26/2019	2:15 PM	1:46 PM	2:13 PM	1:53 PM	2:08 PM	1:46 PM	2:10 PM			Right Catar OPH	Thadani, St OPH	MAC
OR 1	3/26/2019	2:45 PM	2:21 PM	2:42 PM						13168-4	Right Catar OPH	Thadani, St. OPH	MAC
					2:27 PM	2:38 PM	2:21 PM	2:39 PM	11	20801-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	3/28/2019	8;45 AM	8:49 AM	9:40 AM	9:07 AM	9:28 AM	8:49 AM	9:40 AM	19	20991-1	Left: Arthrc ORT		
OR 1	3/28/2019	11:00 AM	10:20 AM	2:26 PM	10:51 AM	2:08 PM	10:20 AM	2:26 PM		19973-3		Steinberg, ORT	GA
OR 1	4/1/2019	9:15 AM									Revision Ri _i PLS	Andochick, PLS	GA
OR 1	4/1/2019	11:00 AM				L0;54 AM		11:01 AM	32	21015-1	Left: Left P: ORT	Steinberg, . ORT	GA
					11:38 AM 1	L1:53 AM	11:24 AM	11:59 AM	23	21015-1	Left: Arthrc ORT	Steinberg, . ORT	GA
OR 1	4/1/2019	12:30 PM	12:35 PM	2:32 PM	12:54 PM	2:10 PM	12:35 PM	2:28 PM		21020-1	Right: Oper ORT	Steinberg, . ORT	
OR 1	4/1/2019	3:30 PM	3;54 PM	4:43 PM	4:06 PM	4:35 PM	3:54 PM	4:38 PM		17199-3			GA
OR 1	4/3/2019	12:00 PM	2:08 PM	5:18 PM	2:44 PM	4:55 PM	2:08 PM				Right Desce OPH	Thadani, Sc OPH	MAC
OR 1								5:09 PM	43	20841-1	Left Breast PLS	Andochick, PLS	GA
	4/5/2019	8:15 AM	8:09 AM	8:34 AM		8:29 AM	8:09 AM	8:31 AM	11	20873-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	4/5/2019	9:00 AM	8:41 AM		8:50 AM	9:06 AM	8:41 AM	9:08 AM		12436-2	Left Catara OPH		
OR 1	4/5/2019	9:30 AM	9:16 AM	9:44 AM		9:39 AM	9;16 AM	9:41 AM				Thadani, St. OPH	MAC
OR 1	1. 1.	10:00 AM		10:12 AM						20987-1	Left Catara OPH	Thadani, St OPH	MAC
						0:06 AM		10:09 AM	8	18960-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1		10:30 AM		10:44 AM :	l0:27 AM 1	0:39 AM	10:17 AM	10:41 AM	8	20763-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	4/5/2019	11:00 AM	10:50 AM	11:15 AM :				11:12 AM		20989-1			
OR 1											Left Catara OPH	Thadani, St OPH	MAC
OR 1								11:53 AM		20979-1	Right Catar OPH	Thadani, St OPH	MAC
	4/5/2019	1:00 PM	1:22 PM	3:27 PM		3:12 PM	1:22 PM	3:22 PM	89	21050-1	Left: Arthrc ORT	Levine, Ma ORT	GA
OR 1	4/8/2019	12:30 PM	12:15 PM	12:55 PM 👙	2:33 PM 1	2:50 PM	12:15 PM	12:55 PM		20990-1			
OR 1	4/8/2019	1:45 PM	1:29 PM	3:24 PM		3:14 PM	1:29 PM				Right: Arth: ORT	Steinberg, . ORT	GA
OR 1	4/9/2019	8:00 AM						3:24 PM		21048-1	Right: Arthi ORT	Steinberg, . ORT	GA
			8:15 AM	8:43 AM		8:39 AM	8:15 AM	8:40 AM	8 :	18493-2	Left Catara: OPH	Thadani, St OPH	MAC
OR 1	4/9/2019	8:30 AM	8:48 AM	9:13 AM	8:48 AM	9:08 AM	8:46 AM	9:10 AM		21008-1	Right Catar OPH	Thadani, St OPH	
OR 1	4/9/2019	9:15 AM	9:17 AM	9:48 AM		9:42 AM	9:17 AM	9:43 AM					MAC
OR 1		10:00 AM								21010-1	Right Catar OPH	Thadani, St OPH	MAC
						0:17 AM		10:19 AM	8 2	21009-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1					0:30 AM 10	0:50 AM (.0:25 AM	10:52 AM	6.2	20916-2	Right Catar OPH	Thadani, St OPH	
OR 1	4/9/2019	11:30 AM	11:06 AM :	11:34 AM 1		1:30 AM 1		11:31 AM					MAC
OR 1	4/9/2019			12:07 PM 1						21011-1	Right Catar OPH	Thadani, St OPH	MAC
								12:04 PM		21006-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	4/9/2019			12:43 PM 1	2:16 PM 12	2:38 PM 1	2:12 PM	12:40 PM	8 2	21012-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	4/9/2019	1:45 PM	12:48 PM	1:15 PM 1	2:48 PM :		.2:48 PM	1:12 PM		21005-1	Right Catar OPH		
OR 1	4/9/2019	2:30 PM	1:40 PM				1:40 PM					Thadani, St OPH	MAC
OR 1	4/9/2019							2:04 PM		0950-2	Left Catara OPH	Thadani, St OPH	MAC
		3;15 PM	2:12 PM				2:11 PM	2:37 PM	7 1	.9477-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	4/9/2019	4:00 PM	2:45 PM	3:09 PM	2:48 PM 3	3:05 PM	2:45 PM	3:06 PM			Left Catara OPH	Thadani, St OPH	
OR 1	4/9/2019	4:45 PM	3:15 PM				3;15 PM	3:50 PM					MAC
OR 1	4/12/2019	8:00 AM									Right Catar OPH	Thadani, St OPH	MAC
		2190 MM	O'O'S WIAI	O'DO WIA	8:14 AM 8	3:25 AM	8:07 AM	8:26 AM	6 1	6683-2	Right Catar OPH	Thadani, St OPH	MAC
												•	

OR 1	4/12/2019	8:30 AM	8:34 AM	8:59 AM	8:40 AM	8;53 AM	8;34 AM	8:55 AM	8 12436-3	Right Catar OPH	Thadani, St OPH	MAC
OR 1	4/12/2019	9:00 AM	9:01 AM	9:26 AM	9:06 AM	9:21 AM	9;01 AM	9:22 AM	6 21036-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	4/12/2019	9:30 AM	9:28 AM	9:58 AM	9:34 AM	9:51 AM	9:28 AM	9:54 AM	6 21038-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	4/12/2019	10:45 AM	9:59 AM		10:06 AM	10:16 AM	9:59 AM		5 20628-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	4/12/2019	10:15 AM	10:23 AM	10:50 AM	10:31 AM	10:46 AM	10:23 AM	10:47 AM	5 20905-2	Left Catara: OPH	Thadani, St OPH	MAC
OR 1	4/12/2019	11:15 AM	10:52 AM	11:18 AM	10:59 AM	11:12 AM	10:52 AM		5 21037-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	4/15/2019	7:30 AM	7:40 AM	9:38 AM	8:23 AM	9;19 AM	7:40 AM	9:32 AM	0 14724-1	Right: ArthrORT	Steinberg, . ORT	GA
OR 1	4/16/2019	8:30 AM	8:43 AM	9:25 AM	8:56 AM	9:15 AM	8:43 AM	9:19 AM	0 20981-1	Ptosis Repa OPH	Henry, J. Cl OPH	MAC
	4/16/2019	9:15 AM	9:38 AM	10:26 AM	9:46 AM	10:16 AM	9:38 AM		19 20934-1	Bilateral Ec OPH	Henry, J. Ct OPH	MAC
OR 1		10:30 AM	10:40 AM	10:28 AM	10:52 AM	12:25 PM	10:40 AM	12:22 PM	20 18356-1	Bilateral Bl: OPH	Henry, J. ChOPH	MAC
OR 1	4/16/2019						1:00 PM					GA
OR 1	4/16/2019	12:15 PM	1:00 PM	2:41 PM	1:18 PM 2:58 PM	2:29 PM 3:19 PM	2:48 PM	2:34 PM	38 21060-1	Right Desce OPH Right Ptery OPH	Thadani, St OPH	MAC
OR 1	4/16/2019	1:45 PM	2:48 PM	3:30 PM				3:23 PM	14 21052-1		Thadani, St OPH	
OR 1	4/16/2019	2:45 PM	3:37 PM	4:10 PM	3:47 PM	4:03 PM	3:37 PM	4:05 PM	14 21065-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	4/16/2019	3:30 PM	4:11 PM	4:38 PM	4:18 PM	4:30 PM	4:11 PM	4:33 PM	6 21051-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	4/16/2019	4:00 PM	4:43 PM	5:17 PM	4:49 PM	5:07 PM	4:43 PM	5:10 PM	10 21063-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	4/17/2019	11:00 AM	10;39 AM	6:45 PM	11:11 AM	6;25 PM	10:39 AM	6:39 PM	49 18026-7	Revision Ri _I PLS	Andochick, PLS	GA
OR 1	4/19/2019	8:15 AM	8:18 AM	8:38 AM	8:23 AM	8:33 AM	8:18 AM	8:35 AM	7 21091-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	4/19/2019	8:45 AM	8:42 AM	9:01 AM	8:47 AM	8:57 AM	8;42 AM	8:59 AM	7 10961-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	4/19/2019	9:15 AM	9:06 AM	9:31 AM	9:13 AM	9:26 AM	9:06 AM	9:28 AM	7 21074-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	4/19/2019	9:45 AM	9:35 AM	9:58 AM	9:39 AM	9:51 AM	9:35 AM	9:53 AM	7 16988-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	4/19/2019	10:15 AM	10:02 AM	10:25 AM	10:09 AM	10:20 AM	10:02 AM	10:22 AM	9 21075-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	4/19/2019	10:45 AM	10:32 AM	10:59 AM	10:41 AM	10:55 AM	10:32 AM	10:56 AM	10 21076-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	4/19/2019	12:00 PM	12:02 PM	12:54 PM	12:22 PM	12:44 PM	12:00 PM		64 20953-2	Open Redu ORT	Mecinski, A PLS	GA
OR 1	4/22/2019	12:15 PM	12:47 PM	1:13 PM	1:00 PM	1:03 PM	12;47 PM	1:11 PM	23 13972-2	Left: Left TcORT	Steinberg, . ORT	GΑ
OR 1	4/22/2019	1;00 PM	1:36 PM	2:28 PM	1:57 PM	2:12 PM	1:36 PM	2:26 PM	25 17531-2	Right: Arth: ORT	Steinberg, . ORT	GΑ
OR 1	4/22/2019	2:15 PM	2:46 PM	4:14 PM	3:22 PM	4:02 PM	2:46 PM	4:10 PM	20 21107-1	Right: Arthi ORT	Steinberg, . ORT	GA
OR 1	4/23/2019	9:00 AM	9:08 AM	9:34 AM	9:14 AM	9:27 AM	9:08 AM	9:28 AM	10 20685-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	4/23/2019	9:30 AM	9;38 AM	9:59 AM	9:43 AM	9:55 AM	9:38 AM	9:56 AM	10 21082-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	4/23/2019	10:00 AM	10:01 AM	10:24 AM	10:08 AM	10:19 AM	10:01 AM	10:21 AM	5 21086-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	4/23/2019	10:30 AM	10:27 AM	10:57 AM	10:37 AM	10:51 AM	10:27 AM	10:53 AM	6 21084-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	4/23/2019	11:00 AM	10:58 AM	11:26 AM	11:05 AM	11:21 AM	10:58 AM	11:22 AM	5 20687-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	4/23/2019	11:30 AM	11:27 AM	11:57 AM	11:36 AM	11;53 AM	11:27 AM	11:54 AM	5 21110-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	4/23/2019	12:00 PM	12:02 PM	12:28 PM	12:08 PM	12:22 PM	12:02 PM	12:24 PM	8 20952-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	4/23/2019	12:30 PM	12:31 PM	1:00 PM	12:40 PM	12:54 PM	12:31 PM	12:55 PM	7 15420-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	4/23/2019	1:15 PM	1:03 PM	1:36 PM	1:10 PM	1:29 PM	1:03 PM	1:30 PM	8 21083-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	4/25/2019	9:45 AM	9:28 AM	10:21 AM	9:48 AM	10:08 AM	9:28 AM	10:16 AM	36 20919-1	Left: Arthrc ORT	Steinberg, . ORT	GA
OR 1	4/25/2019	11:00 AM	10:47 AM	11:29 AM	10:59 AM	11;15 AM	10:47 AM	11:24 AM	31 12193-2	Left: Arthrc ORT	Steinberg, . ORT	GA
OR 1	4/26/2019	8:00 AM	8:15 AM	8:41 AM	8:21 AM	8:35 AM	8:15 AM	8:38 AM	7 21096-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	4/26/2019	8:45 AM	8:42 AM	9:13 AM	8:51 AM	9:08 AM	8:40 AM	9:10 AM	2 20843-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	4/26/2019	9:15 AM	9:16 AM	9:41 AM	9:22 AM	9:36 AM	9:16 AM	9:38 AM	6 21094-1	Left Catara: OPH	Thadani, St OPH	MAC
OR 1	4/26/2019	9:45 AM	9:43 AM	10:10 AM	9:51 AM	10:05 AM	9:43 AM	10:07 AM	5 21099-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	4/26/2019	10:30 AM	10:14 AM	10:44 AM	10:20 AM	10:39 AM	10:14 AM	10:44 AM	7 21097-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	4/26/2019	11:15 AM	10:52 AM	11:24 AM	10:59 AM	11:18 AM	10:52 AM	11:21 AM	8 21111-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	4/29/2019	9:45 AM	9:48 AM	10:36 AM	10:05 AM	10:24 AM	9:48 AM	10:30 AM	31 21105-1	Left: Arthrc ORT	Steinberg, . ORT	GA
OR 1	4/29/2019		10:50 AM	12:06 PM	11:20 AM	11:47 AM	10:50 AM	12:01 PM	20 21106-1	Right: Arthi ORT	Steinberg, . ORT	GA
OR 1	4/29/2019	1:15 PM	12:48 PM	1:31 PM	1:04 PM	1:22 PM	12:48 PM	1:26 PM	47 21119-1	Right: Arthi ORT	Steinberg, . ORT	GA
OR 1	4/29/2019	2:30 PM	2:49 PM	2:54 PM	2:20 PM	2:39 PM	2:11 PM	2:49 PM	45 12099-3	Right: Arthi ORT	Steinberg, ORT	GA
OR 1	4/29/2019	3:45 PM			4:14 PM	4:26 PM	4:01 PM	4:30 PM	72 21169-1	Repair Righ ORT	Mecinski, A PLS	L
OR 1	4/30/2019	9:00 AM	9:07 AM	9:41 AM	9:13 AM	9:34 AM	9:07 AM	9:38 AM	15 21129-1	Right Ptery OPH	Thadani, St OPH	MAC
OR 1	4/30/2019	10:00 AM	9:50 AM	10:15 AM	9:55 AM	10:11 AM	9:50 AM	10:12 AM	12 21131-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	4/30/2019	10:30 AM	10:16 AM	10:36 AM	10:23 AM	10:31 AM	10:16 AM	10:33 AM	4 21125-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	4/30/2019	11:30 AM	11:02 AM	11:26 AM	11:08 AM	11:23 AM	11:02 AM	11;23 AM	29 14137-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	4/30/2019	12:00 PM	11:33 AM	11:59 AM	11:39 AM	11:54 AM	11;33 AM	11:56 AM	10 21062-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	4/30/2019	1:00 PM	12:05 PM	12:28 PM	12:11 PM	12:23 PM	12:05 PM	12:25 PM	9 21065-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	4/30/2019	12:30 PM	12:34 PM	1:01 PM	12:40 PM	12:56 PM	12:34 PM	12:58 PM	9 21130-1	Right Catar OPH	Thadanl, St OPH	MAC
OR 1	4/30/2019	1:30 PM	1:04 PM	1:34 PM	1:13 PM	1:29 PM	1:04 PM	1:31 PM	6 21126-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	5/1/2019		11:19 AM		11:50 AM	2:08 PM	11:19 AM	2:20 PM	37 20383-2	Bilateral Br PLS	Andochick, PLS	GA
OR 1	5/2/2019	7:30 AM	7:39 AM	8:19 AM	7:56 AM	8:18 AM	7:39 AM	8:14 AM	0 21112-1	Right: Arthi ORT	Steinberg, ORT	GA
OR 1	5/2/2019	8:45 AM	8:44 AM	9:28 AM	8:58 AM	9:14 AM	8:44 AM	9:23 AM	30 20514-2	Right: Arthi ORT	Steinberg, . ORT	GA
OR 1	5/2/2019	10:00 AM	9:47 AM	10:36 AM	10:04 AM	10:23 AM		10:31 AM	22 21137-1	Left: Arthrc ORT	Steinberg, . ORT	GA
OR 1	5/3/2019	8:00 AM	8:06 AM	8:36 AM	8:13 AM	8:30 AM	8:06 AM	8:31 AM	6 21076-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	5/3/2019	8;30 AM	8:37 AM	9:02 AM	8:42 AM	8:56 AM	8:37 AM	8:57 AM	6 21075-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	5/3/2019	9:00 AM	9:04 AM	9:38 AM	9:12 AM	9:28 AM	9:04 AM	9:29 AM	7 21038-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	5/3/2019	9:30 AM	9:40 AM	10:13 AM	9:51 AM	10:07 AM		10:08 AM	11 21156-1	Right Catar OPH	Thadani, St. OPH	MAC
OR 1	5/3/2019		10:14 AM	10:32 AM	10:20 AM	10:31 AM	10:14 AM		6 10961-3	Right Catar OPH	Thadani, St OPH	MAC
	5/3/2019		10:41 AM		10:49 AM	11:06 AM	10:41 AM		9 21155-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1 OR 1		11:30 AM	11:43 AM		11:52 AM	12:10 PM	11:41 AM	12:17 PM	33 20665-3	Laft Middle HND	Mecinski, A PLS	GA
	5/3/2019	12:30 PM	12:32 PM	1:11 PM	12:42 PM	12:59 PM	12:33 PM	1:04 PM	16 21170-1	Flap Recon: ENT	Mecinski, A PLS	MAC
OR 1	5/3/2019	1:45 PM	12,32 FIVE	1,11 1141	1:26 PM	1:37 PM	1:22 PM	1:42 PM	18 21141-1	Excision Le: PLS	Mecinski, A PLS	L
OR 1 OR 1	5/3/2019	2:30 PM			1:57 PM	2:48 PM	1:51 PM	2:53 PM	9 13860-2	Excision of GEN	Mecinski, A PLS	Ŀ
OR 1	5/3/2019 5/3/2019	4:00 PM 4:30 PM			3:08 PM 4:08 PM	3:14 PM 4:14 PM	3:02 PM 4:06 PM	3:17 PM 4:18 PM	9 21171-1 49 21176-1	Right Forea ORT Incision and GEN	Mecinski, APLS	Ł
OR 1	5/3/2019 5/6/2019		Q:04 AAA	9:16 AM	8;40 AM	9:03 AM	8;21 AM	9:10 AM		Right: Arth: ORT	Mecinski, APLS	L
OR 1	5/6/2019 5/7/2019	8:00 AM	8:21 AM	9:54 AM	9;06 AM	9:05 AM	8:54 AM	9:10 AM 9:49 AM	24 21177-1 15 21158-1	_	Steinberg, . ORT	GA MAC
OR 1	5/7/2019 5/7/2019	8:30 AM	8:54 AM						15 21158-1 18 21159-1	Right Desct OPH	Pillar Topal OPH	MAC
OR 1	5/7/2019		10:07 AM	10:36 AM		10:30 AM	10:07 AM		18 21159-1	Left Pterygi OPH	Pillar Topal OPH	MAC
OR 1	5/7/2019		10:54 AM		11:03 AM		10:54 AM		22 21160-1	Left Penetr OPH	Pillar Topal OPH	GA
OR 1	5/7/2019	11:30 AM	12:41 PM	1:07 PM	12:52 PM	1:01 PM	12:41 PM	1:04 PM	20 16612-3	Left Catara OPH	Pillar Topal OPH	MAC
OR 1	5/7/2019	12:00 PM	1:22 PM	2:17 PM	1:34 PM	2:13 PM	1:22 PM	2:14 PM	18 21161-1	Left Descer OPH	Pillar Topal OPH	MAC
OR 1	5/7/2019	1:30 PM	2:27 PM	3:07 PM	2:41 PM	3:01 PM	2:27 PM	3;03 PM	13 20525-1	Right Catar OPH	Pillar Topal OPH	MAC
OR 1	5/8/2019	1:15 PM	2:38 PM	7:58 PM	3:27 PM	6:30 PM	2:38 PM	6:43 PM	29 20878-1	Right Breas PLS	Andochick, PLS	GA
OR 1	5/9/2019	9:45 AM	9:42 AM		10:05 AM	10:36 AM		10:41 AM	26 20877-1	Right: Arthi ORT	Steinberg, ORT	GA
OR 1	5/9/2019		11:18 AM		11:31 AM	11:51 AM		11:59 AM	36 21087-1	Right: Arth ORT	Steinberg, . ORT	GA
OR 1	5/10/2019	7:30 AM	8:15 AM	8:45 AM	8:23 AM	8:40 AM	8:15 AM	8:42 AM	6 21163-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	5/10/2019	8:45 AM	8:49 AM	9:17 AM	8:55 AM	9:12 AM	8:49 AM	9:14 AM	7 21165-1	Left Catara OPH	Thadani, St OPH	MAC
00.1						0.41 484	9:21 AM	9:42 AM	7 21099-2	Left Catara OPH		****
OR 1	5/10/2019	9:15 AM	9:21 AM	9:45 AM	9:26 AM	9:41 AM					Thadani, St OPH	MAC
OR 1	5/10/2019 5/10/2019			9:45 AM 10:09 AM		10:03 AM		10:06 AM	5 21166-1	Left Catara OPH	Thadani, St OPH Thadani, St OPH	MAC

OR 1	5/10/201	19 10:30 AN	√ 10:15 AN	4 10:57 AM	10:31 AM	10;53 AM	10:15 AN	/ 10:55 AM	0.24467	d 8111 a. asu		
OR 1	5/10/201								9 21167 8 21098		Thadani, St OPH	MAC
OR 1	5/10/201	9 11:30 AM				11:57 AM			7 21168	-	Thadani, Su OPH	MAC
OR 1	5/14/201	.9 8:15 AM	√1 8:17 AN						8 21011		Thadani, St OPH Thadani, St OPH	MAC
OR 1	5/14/201	.9 9:00 AN	A 8:52 AN	9:23 AM	8:54 AM	9:19 AM			B 21006		Thadani, St OPH	MAC MAC
OR 1	5/14/201			1 9:51 AM	9:29 AM	9:46 AM	9:28 AM		8 21007-		Thadani, St OPH	MAC
OR 1	5/14/201				10:03 AM	10:32 AM	9:59 AM	1 10:34 AM	11 21191		Thadani, St. OPH	MAC
OR 1	5/14/201						10:42 AM	11:09 AM	8 21189-		Thadani, St OPH	MAC
OR 1	5/14/201					11:40 AM	11:15 AM	11:41 AM	6 20947-		Thadani, St OPH	MAC
OR 1	5/14/201					12:13 PM		1 12:15 PM	8 2091,3-	2 Right Catar OPH	Thadani, St OPH	MAC
OR 1	5/14/201			12:49 PM		12:44 PM			6 10378-	4 Right Catar OPH	Thadani, St. OPH	MAC
OR 1 OR 1	5/14/201				1:06 PM	1:20 PM			15 21161-		Pillar Topal OPH	L
OR 1	5/14/201: 5/14/201:				1:31 PM	1:51 PM			7 21192-	1 Right Catar OPH	Thadani, Su OPH	MAC
OR 1	5/17/201				2:05 PM	2:16 PM	1:58 PM		6 21091-		Thadani, St OPH	MAC
OR 1	5/17/2019				8:13 AM	8:27 AM			6 21207-		Thadani, St OPH	MAC
OR 1	5/17/2019					11:30 AM	8:35 AM		7 21208-	-	Thadani, St OPH	MAC
OR 1	5/17/2019				9:11 AM	9:25 AM			7 21227-	-	Thadani, St OPH	MAC
OR 1	5/17/2019				9:42 AM 10:21 AM	10:08 AM 10:37 AM	9:33 AM		6 21155-	-	Thadani, St OPH	MAC
OR 1	5/17/2019			11:15 AM		11:09 AM			8 21037-	-	Thadani, St OPH	MAC
OR 1	5/20/2019				9:13 AM	9:52 AM			7 21209-		Thadani, St OPH	MAC
OR 1	5/20/2019						10:19 AM		26 14182-	-	Steinberg, . ORT	GA
OR 1	5/20/2019			1:29 PM	12:24 PM	1:10 PM		1:06 AW	19 21194- 30 21205-	-	Steinberg, . ORT	GA
OR 1	5/21/2019				10:22 AM	10:39 AM			41 21233-		Steinberg, . ORT	GA
OR 1	5/21/2019	10:15 AM			10:53 AM	11:24 AM	10:49 AM		8 21232-		Thadani, St OPH	MAC
OR 1	5/21/2019	11:15 AM	11:31 AM	11:55 AM		11:48 AM			6 21235-		Thadani, St. OPH	MAC
OR 1	5/21/2019	11:45 AM	11:57 AM	12:20 PM	12:01 PM		11:57 AM		7 21128-	-	Thadani, St. OPH Thadani, St. OPH	MAC
OR 1	5/21/2019	12:15 PM	12:22 PM	12:49 PM	12:28 PM		12;22 PM		7 21236-:	-	Thadani, St OPH	MAC MAC
OR 1	5/21/2019	12:45 PM	12:50 PM	1:19 PM	12:58 PM	1:13 PM	12:50 PM	1:15 PM	6 19828-2		Thadani, St OPH	MAC
OR 1	5/21/2019		1:40 PM	2:11 PM	1:45 PM	2:04 PM	1:40 PM	2:07 PM	25 11170-9		Thadani, St OPH	MAC
OR 1	5/21/2019		2:14 PM	2:47 PM	2:21 PM	2:42 PM	2:14 PM	2:43 PM	7 21237-1		Thadani, St OPH	MAC
OR 1	5/21/2019		2:46 PM	3:36 PM	3:05 PM	3:22 PM	2:46 PM	3:31 PM	3 21234-1		Thadani, 5t OPH	GA.
OR 1	5/21/2019		3:48 PM	4:42 PM	4:01 PM	4:34 PM	3:48 PM	4:37 PM	17 21161-5	Left Descer OPH	Pillar Topal OPH	MAC
OR 1	5/22/2019		9:41 AM	2:37 PM	10:22 AM	2:22 PM	9:41 AM	2:31 PM	27 20849-1	Left Breast PLS	Andochick, PLS	GA
OR 1	5/23/2019		9:32 AM		10:10 AM	10:39 AM	9:32 AM	10:51 AM	33 21206-1	Left: Arthrc ORT	Gupta, Rish ORT	GA
OR 1	5/23/2019		11:18 AM	12:44 PM	11:36 AM	12:24 PM	11:18 AM	12:36 PM	27 21216-1	Left: Arthrc ORT	Gupta, Rish ORT	GA
OR 1 OR 1	5/24/2019		8:08 AM	8:30 AM	8:15 AM	8:28 AM	8:08 AM	8:30 AM	6 20843-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	5/24/2019		8:36 AM	8:58 AM	8:44 AM	8:57 AM	8:36 AM	8:58 AM	6 21167-2	Left Catara OPH	Thadani, Sc OPH	MAC
OR 1	5/24/2019 5/24/2019		9:04 AM	9:20 AM	9:14 AM	9:26 AM	9:04 AM	9:28 AM	6 21096-2	_	Thadani, St OPH	MAC
OR 1	5/24/2019		9:37 AM 10:08 AM	9:59 AM	9:42 AM	9:58 AM	9:36 AM	9:59 AM	8 21239-1		Thadani, St OPH	MAC
OR 1	5/24/2019		10:06 AM	10:30 AM 10:59 AM		10:29 AM	10:08 AM	10:30 AM	9 21084-2		Thadani, 51 OPH	MAC
OR 1	5/28/2019		9:03 AM	9:28 AM	10:42 AM 9:09 AM	10:57 AM	10:35 AM	10:59 AM	6 20989-2		Thadani, St OPH	MAC
OR 1	5/28/2019	9:30 AM	9:31 AM	9:55 AM	9:38 AM	9:22 AM 9:50 AM	9:03 AM	9:25 AM	8 21082-2		Thadani, St OPH	MAC
OR 1	5/28/2019		10:01 AM	10:30 AM	10:07 AM	10:24 AM	9:31 AM 10:01 AM	9:52 AM	6 20687-3		Thadani, St OPH	MAC
OR 1	5/28/2019	10:30 AM	10:38 AM				10:01 AM		9 21268-1	Left Catara OPH	Thadani, St. OPH	MAC
OR 1	5/28/2019					11:29 AM		10:39 AM	11 21264-1		Thadani, St. OPH	MAC
OR 1	5/28/2019	11:30 AM	11:39 AM			12:00 PM	11:39 AM		7 21130-2 8 21267-1		Thadani, St. OPH	MAC
OR 1	5/28/2019	12:00 PM	12:20 PM		12:35 PM		12:20 PM	1:34 PM	17 21263-1	Right Catar OPH Right Desce OPH	Thadani, St OPH	MAC
OR 1	5/28/2019	1:30 PM	1:46 PM	2:10 PM	1:52 PM	2:04 PM	1:46 PM	2:07 PM	12 21083-2	Right Catar OPH	Thadani, St OPH	GA
OR 1	5/29/2019	12:00 PM	12:20 PM	4:52 PM	1:02 PM	4:33 PM	12:20 PM	4:46 PM	42 13446-4	Revision of PLS	Thadani, St OPH Mecinski, A PLS	MAC
OR 1	5/30/2019	8:15 AM	8:37 AM	10:11 AM	9:03 AM	10:01 AM			21 21280-1	Left: Left B ORT	Steinberg, . ORT	GA GA
OR 1	5/30/2019	10:00 AM	10:35 AM	12:22 PM	11:01 AM	12:04 PM	10:35 AM	12:17 PM	29 15912-1	Right: Oper ORT	Steinberg, . ORT	GA
OR 1	5/31/2019	8:00 AM	7:56 AM	8:19 AM	8:02 AM	8:14 AM	7:56 AM	8:15 AM	10 21227-2	Left Catara OPH	Thadani, St. OPH	MAC
OR 1	5/31/2019	8:30 AM	8:21 AM	8:47 AM	8:28 AM	8:40 AM	8:21 AM	8:42 AM	6 21168-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	5/31/2019	9:30 AM	8:56 AM	9:29 AM	9:02 AM	9:23 AM	8:56 AM	9:25 AM	14 21269-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	5/31/2019	9;00 AM	9:32 AM	9:58 AM	9:39 AM	9:53 AM	9:32 AM	9:54 AM	7 21303-1	Right Catar OPH	Thadani, St. OPH	MAC
OR 1	5/31/2019	10:00 AM		10:25 AM	10:08 AM	10:18 AM	10:02 AM	10:20 AM	8 20436-3	Right Catar OPH	Thadani, St OPH	MAC
OR 1	5/31/2019	10:30 AM		10:56 AM	10:38 AM	10:50 AM	10:31 AM	10:52 AM	11 21239-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	5/31/2019	11:00 AM					10:57 AM	11:19 AM	5 21273-1	Right: Right OPH	Thadani, St OPH	MAC
OR 1	6/3/2019	9:15 AM				10:29 AM		10:36 AM	26 21203-1	Right: Arthi ORT	Steinberg, ORT	GA
OR 1	6/3/2019						11:09 AM		33 21226-1	Left: Arthrc ORT	Steinberg, . ORT	GA
OR 1	6/3/2019	12:45 PM	12:36 PM		12:52 PM		12:36 PM	1:23 PM	32 21304-1	Left: Arthrc ORT	Steinberg, . ORT	GA
OR 1	6/6/2019	8:45 AM	8:53 AM	9:52 AM	9:13 AM	9;32 AM	8:53 AM	9:45 AM	21 14661-3	Left: Arthrc ORT	Steinberg, . ORT	GA
OR 1	6/7/2019	8:30 AM	8:10 AM	8:44 AM	8:16 AM	8:31 AM	8:10 AM	8:39 AM	11 21242-1	Excision Ba PLS	Mecinski, A PLS	MAC
OR 1 OR 1	6/7/2019	9:45 AM	8:58 AM	9:41 AM	9:13 AM	9:23 AM	8;58 AM	9:36 AM	19 21288-1	Closed Nas: ENT	Mecinski, A PLS	MAC
OR 1	6/7/2019 6/7/2019	10:45 AM						11:42 AM	24 20997-2	Left Thumb ORT	Mecinski, A PLS	GA
OR 1	6/7/2019	12:30 PM 1:45 PM						12:36 PM	17 21274-2	Excision Ma GEN	Mecinski, A PLS	GA
OR 1	6/7/2019	3:00 PM	1:04 PM 2:03 PM	1:51 PM	1:21 PM	1:39 PM	1:04 PM	1:46 PM	28 21326-1	Right Midd ORT	Mecinski, A PLS	MAC
OR 1	6/7/2019	4:00 PM	2:05 PW	3:12 PM	2:23 PM	2:52 PM	2:03 PM	3:07 PM	17 21328-1	Debrideme ORT	Mecinski, A PLS	GA
OR 1	6/10/2019	9:45 AM	0.42 064	10/25 ABA	3:27 PM	3:47 PM	3:22 PM	3:50 PM	15 21289-1	Wide Excisi PLS	Mecinski, A PLS	Ļ
OR 1	6/10/2019	12:15 PM	9:42 AM 12:15 PM	10:26 AM		10:17 AM		10:23 AM	41 21342-1	Right: Arth ORT	Steinberg, ORT	GA
OR 1	6/11/2019	8:15 AM	8:19 AM		12:34 PM		12:15 PM	2:34 PM	112 21348-1	Left Thumb HND	Mecinski, A PLS	GA
OR 1	6/11/2019	9:00 AM	8:57 AM	8:45 AM	8:21 AM	8:41 AM	8:19 AM	8:42 AM	10 10378-5	Left Catara OPH	Thadani, St. OPH	MAC
OR 1	6/11/2019	9:30 AM		9:17 AM 10:08 AM	8:55 AM	9:14 AM	8:54 AM	9:16 AM	12 20298-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	6/11/2019					L0:04 AM	9:43 AM		27 21297-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	6/11/2019							10:38 AM	8 21010-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	6/11/2019			11:09 AW 1 11:40 AM 1				11:08 AM	7 17321-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1				12:16 PM 1				11:38 AM	6 21296-1	Right Catar OPH	Thadani, St. OPH	MAC
OR 1								12:14 PM 12:46 PM	10 21295-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	6/11/2019		12:55 PM		12:25 PM		12:22 PM 12:55 PM	12:46 PM	8 21294-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1								1:16 PM 12:11 PM	9 21293-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	6/14/2019	8:00 AM	8:16 AM			8:32 AM	8:16 AM	8:33 AM	21 20161-3 7 21331-1	Bilateral: A ORT	Steinberg, . ORT	GA
OR 1	6/14/2019	8:30 AM	8:40 AM			8:58 AM	8:40 AM	9:01 AM	7 21331-1 7 21330-1	Right Catar OPH Right Catar OPH	Thadani, St OPH	MAC
OR 1	6/14/2019	9:00 AM	9:06 AM			9:22 AM	9:06 AM	9:24 AM	5 21165-2	Right Catar OPH	Thadani, St OPH Thadani, St OPH	MAC
				***					5 KIIOJ-Z	Supply Squar OFF	modern, at OPM	MAC

OR 1	6/14/2019	9:30 AM	9:37 AM	9:59 AM	9:44 AM	9:54 AM	9:37 AM	9:56 AM	13 21332-1	Left Catara: OPH	Thadani, St OPH	MAC
OR 1	6/14/2019			10:23 AM	10:06 AM	10:18 AM	10:01 AM	10:20 AM	5 20436-4	Left Catara OPH	Thadani, St OPH	MAC
OR 1	6/14/2019			10:50 AM	10:32 AM	10:45 AM	10:27 AM	10:47 AM	7 21303-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	6/14/2019			11:19 AM	11:01 AM				9 15292-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	6/18/2019	9:00 AM	9:04 AM	9:39 AM	9:11 AM	9:30 AM	9:04 AM	9:34 AM	14 21316-1	Ptosis Repa OPH	Henry, J. Cł OPH	MAC
OR 1	6/18/2019	9:30 AM	9:43 AM	10:29 AM	9:49 AM	10:23 AM	9:43 AM	10:28 AM	9 21317-1	Pteryglum OPH	Henry, J. Cr OPH	MAC
OR 1	6/18/2019			11:59 AM	10:53 AM	11:49 AM			14 21337-1	Right Desce OPH	Thadani, St OPH	GA
OR 1	6/18/2019	11:45 AM	12:04 PM	12:32 PM	12:17 PM	12:25 PM	12:04 PM	12:27 PM	9 21338-1	Right Catar OPH	Thadani, St OPH	MAC
	· · · ·						12:04 PM	12:51 PM	8 21336-1	Right Catar OPH		MAC
OR 1	6/18/2019	12:15 PM	12:35 PM	12:55 PM	12:41 PM	12:50 PM	12:55 PM	1:15 PM	7 21166-2	-	Thadani, St. OPH	
OR 1	6/18/2019	12:45 PM	12:58 PM	1:20 PM	1:06 PM	1:14 PM				Right Catar OPH	Thadani, St. OPH	MAC
OR 1	6/18/2019	1:15 PM	1:24 PM	1:47 PM	1:30 PM	1:41 PM	1:24 PM	1:43 PM	9 19744-2	Right Catar OPH	Thadani, St. OPH	MAC
OR 1	6/18/2019	1;45 PM	1:48 PM	2:14 PM	12:56 PM	2:08 PM	1:47 PM	2:09 PM	4 21334-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	6/18/2019	2;15 PM	2:16 PM	2:45 PM	2:22 PM	2:39 PM	2:16 PM	2:40 PM	7 21343-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	6/18/2019	2:45 PM	2:48 PM	3:15 PM	3:00 PM	3:09 PM	2:48 PM	3:10 PM	8 21347-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	6/18/2019	3:15 PM	3:22 PM	3:48 PM	3:28 PM	3:41 PM	3:22 PM	3:43 PM	12 21233-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	6/18/2019	3:45 PM	3:50 PM	4:13 PM	3:57 PM	4:08 PM	3:50 PM	4:09 PM	7 21110-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	6/18/2019	4:15 PM	4:15 PM	4:46 PM	4:22 PM	4:38 PM	4:15 PM	4:40 PM	6 20685-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	6/19/2019	8:15 AM	12:00 AM	12:00 AM	7:50 AM	8:16 AM	7:47 AM	8:20 AM	13 10235-4	Excision Ma PLS	Mecinski, A PLS	L
OR 1	6/19/2019	9:45 AM	12:00 AM	12:00 AM	8:47 AM	8:55 AM	8:44 AM	9:00 AM	24 21346-1	Scar Revisic ENT	Mecínski, A PLS	L.
OR 1	6/19/2019	9:15 AM	9:57 AM	10:00 AM	9:47 AM	9:54 AM	9:33 AM	9:57 AM	33 21382-1	Excision Le: PLS	Mecinski, A PLS	GA
OR 1	6/20/2019	9;45 AM	9:52 AM	10:38 AM	10:09 AM	10:24 AM	9:52 AM		43 10863-4	Left: Arthrc ORT	Steinberg, . ORT	GA
OR 1	6/20/2019	11:00 AM	10:55 AM	11:47 AM	11;20 AM	11:32 AM	10:55 AM		22 16467-3	Left: Arthrc ORT	Steinberg, . ORT	GA
OR 1	6/21/2019	MA 00;8	8;08 AM	8:33 AM	8:19 AM	8:28 AM	8:08 AM	8:29 AM	9 21364-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	6/21/2019	8;30 AM	8;37 AM	8:59 AM	8;43 AM	8:54 AM	8:37 AM	8:55 AM	8 21365-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	6/21/2019	9:00 AM	9:05 AM	9:27 AM	9:12 AM	9:22 AM	9:05 AM	9:23 AM	10 21362-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	6/21/2019	9;30 AM	9:32 AM	9:56 AM	9:38 AM	9:51 AM	9:32 AM	9:53 AM	9 21363-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	6/21/2019	10:00 AM	9:57 AM	10:22 AM	10:04 AM	10:17 AM	9;57 AM		4 21361-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	6/21/2019	10:30 AM	10:25 AM	10:54 AM	10:31 AM	10:47 AM	10:25 AM	10:48 AM	7 21366-1	Left Catara OPH	Thadani, St. OPH	MAC
OR 1	6/21/2019	11:00 AM	10:57 AM	11:19 AM	11:03 AM	11:14 AM	10:57 AM	11:15 AM	9 21294-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	6/24/2019	9:45 AM	9:31 AM	10:18 AM	9:58 AM	10:11 AM	9:31 AM		42 21353-1	Right: Arthi ORT	Steinberg, . ORT	GA
OR 1	6/24/2019	11:00 AM	10:39 AM	11:27 AM	10:51 AM	11:14 AM		11:22 AM	21 21088-1	Right: Arth: ORT	Steinberg, . ORT	GA
OR 1	6/24/2019	12:15 PM	12:15 PM	1:01 PM	12:29 PM	12:48 PM	12:15 PM	12:56 PM	53 21391-1	Right: Arth: ORT	Steinberg, . ORT	GA
OR 1	6/24/2019	1:30 PM	1:27 PM	3:35 PM	1:47 PM	3:16 PM	1:27 PM	3:30 PM	31 21404-1	Right: Repa ORT	Steinberg, . ORT	GA
OR 1	6/25/2019	8:00 AM	8:09 AM	8:33 AM	8:15 AM	8:27 AM	8:09 AM	8:29 AM	5 19604-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	6/25/2019	8:30 AM	8:36 AM	9:00 AM	8:41 AM	8:54 AM	8:36 AM	8:56 AM	7 21371-1	Left Catara: OPH	Thadani, St OPH	MAC
OR 1	6/25/2019	9:00 AM	9:03 AM	9:29 AM	9:08 AM	9:24 AM	9:03 AM	9:25 AM	7 21237-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	6/25/2019	9:30 AM	9:34 AM	9:56 AM	9:40 AM	9:50 AM	9:34 AM	9:52 AM	9 21368-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	6/25/2019	10:00 AM	10:01 AM	10:27 AM	10:12 AM	10:22 AM	10:01 AM	10:23 AM	9 21063-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	6/25/2019	10:30 AM	10:30 AM	11:02 AM	10:38 AM	10:57 AM	10:30 AM	10:58 AM	7 21266-1	Right Catar OPH	Thadani, St. OPH	MAC
OR 1	6/25/2019	11:00 AM	11:06 AM	11:27 AM	11:06 AM	11:21 AM	11:06 AM	11:23 AM	8 21370-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	6/25/2019	11:30 AM	11:30 AM	11:54 AM	11:35 AM	11:47 AM	11:30 AM		7 21236-3	Right Catar OPH	Thadani, St. OPH	MAC
OR 1	6/27/2019	8:45 AM	8:41 AM	9:37 AM	9:03 AM	9:22 AM	8:41 AM	9:31 AM	24 20698-1	Right: Arthi ORT	Steinberg, . ORT	GA
OR 1	6/28/2019	9:30 AM	8:44 AM	9:06 AM	8:52 AM	9:03 AM	8:44 AM	9:06 AM	105 16535-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	6/28/2019	10:00 AM	9:17 AM	9:38 AM	9:23 AM	9:37 AM	9:17 AM	9:38 AM	11 21372-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	6/28/2019	10:30 AM	9:47 AM	10:30 AM	9:55 AM	10:29 AM	9:47 AM	10:30 AM	9 20027-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	6/28/2019	11:00 AM	11:12 AM	11:34 AM	11:19 AM	11:31 AM	11:12 AM	11:34 AM	42 19790-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	6/28/2019	1:00 PM	1:14 PM	2:43 PM	1: 45 PM	2:38 PM	1:14 PM	2:43 PM	100 21412-1	Left: Quadr ORT	Levine, Ma ORT	GA
OR 1	6/28/2019	3:00 PM	3:01 PM	4:22 PM	3:30 PM	4:15 PM	3:01 PM	4:22 PM	18 21422-1	Left: Quadr ORT	Levine, Ma ORT	GA
OR 1	7/1/2019	9:15 AM	10:02 AM	10:41 AM	10:17 AM	10:31 AM	10:01 AM	10:37 AM	30 21220-1	Left: Arthrc ORT	Steinberg, . ORT	GA
OR 1	7/1/2019	10;30 AM	11:04 AM	12:30 PM	11:29 AM	12:17 PM	11:04 AM	12;28 PM	27 21244-1	Right: Arthi ORT	Steinbarg, . ORT	GA
OR 1	7/1/2019	12:45 PM	1:00 PM	2:03 PM	1;14 PM	1;53 PM	1:00 PM	1:59 PM	32 21419-1	Bilateral; A ORT	Steinberg, . ORT	GA
OR 1	7/2/2019	8:30 AM	9:45 AM	10:40 AM	9:56 AM	10:34 AM	9;45 AM	10:35 AM	30 21431-1	Right Desc∈OPH	Pillar Topal OPH	GA
OR 1	7/2/2019	10:00 AM	12:20 PM	12:50 PM	12:29 PM	12:43 PM	12:20 PM	12:45 PM	105 21434-1	Right Catar OPH	Pillar Topal OPH	MAC
OR 1	7/2/2019	10:30 AM	1:01 PM	1:31 PM	1:10 PM	1;25 PM	1:01 PM	1:26 PM	16 20861-2	Right Catar OPH	Pillar Topal OPH	MAC
OR 1	7/2/2019		1:45 PM	2:35 PM	1:55 PM	2:29 PM	1:45 PM	2:30 PM	19 21430-1	Left Descer OPH	Pillar Topal OPH	GΑ
OR 1	7/2/2019	12:00 PM	3:05 PM	3:57 PM	3:14 PM	3:51 PM	3:05 PM	3:52 PM	35 21429-1	Laft Descer OPH	Pillar Topal OPH	GA
OR 1	7/2/2019	1:00 PM	4:03 PM	4:43 PM	4:11 PM	4:36 PM	4:03 PM	4:38 PM	11 21433-1	Left Catara: OPH	Pillar Topal OPH	MAC
OR 1	7/2/2019	1:30 PM	4:44 PM	5:13 PM	4:52 PM	5:05 PM	4:44 PM	5:08 PM	6 21435-1	Left Catara OPH	Pillar Topal OPH	MAC
OR 1	7/3/2019	8:45 AM			8:35 AM	8:42 AM	8:31 AM	8:45 AM	34 21457-1	Excision Le: ENT	Mecinski, A PLS	Ł
OR 1	7/3/2019	9:45 AM			9:10 AM	9:48 AM	9:03 AM	9:53 AM	18 21463-1	Debrideme ORT	Mecinski, A PLS	L
OR 1	7/3/2019				10:06 AM	10:16 AM	10:02 AM	10:18 AM	9 21479-1	Excision of ENT	Mecinski, A PLS	L
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OR 1 PATAMAN AND PLANTING THE PARTY OF THE P		8/7/2019	2:30 PM			1:53 PM	2:18 PM	1:49 PM			31-4			
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OR 1 8/8/2019 9:15 AM 9:53 AM 11:16 AM 10:27 AM 10:59 AM 9:53 AM 11:12 AM 31 21621-1 Right: Arthi ORT Steinberg, ORT BLG		8/8/20 1 9	9:15 AM	9:53 AM	11:16 AM 1	LO:27 AM 1	L0:59 AM	9:53 AM	11:12 AM	31 2162	21-1 F	Right: Arthi ORT	Steinberg, . ORT	BLG

OR 1	8/8/2019	11:30 AM	11:37 AM	12:32 PM	12:04 PM	12:23 PM	11:37 AM	12:30 PM	25 21655-1	Left: Incisio ORT	Stainberg, . ORT	GA
OR 1	8/15/2019								22 21542-1	Right: Arth ORT	Steinberg, . ORT	GA.
OR 1	8/19/2019								23 21583-1	Left: Arthro ORT	Levine, Mar ORT	BLG
OR 1	8/19/2019			2:10 PM	1:15 PM			2:05 PM	23 21581-1	Right Knee: ORT	•	
OR 1	8/20/2019								28 21684-1		Levine, Mar ORT	GA
OR 1	8/20/2019		12:38 PM	1:06 PM			12:38 PM	1:01 PM		Bilateral Pt OPH Right Remc OPH	Henry, J. Cl OPH	MAC
OR 1									20 21622-1	-	Thadani, St OPH	MAC
	8/20/2019		1:07 PM	1:42 PM	1:13 PM		1:07 PM	1;38 PM	6 21610-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	8/20/2019	1:00 PM	1:44 PM	2:09 PM	1:52 PM		1:44 PM		6 17160-3	Right Catar OPH	Thadani, St OPH	MAC
OR 1.	8/20/2019	1:30 PM	2:10 PM	2:30 PM	2:16 PM		2:10 PM	2:26 PM	5 21516-2	Right Catar OPH	Thadani, St. OPH	MAC
OR 1	8/20/2019	2:00 PM	2:32 PM	3:00 PM	2:38 PM	2:52 PM	2:32 PM		6 21639-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	8/20/201 9	2:30 PM	3:03 PM	3:29 PM	3:09 PM		3:03 PM		7 21614-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	8/20/2019	3:00 PM	3:35 PM	4:03 PM	3:43 PM	3:55 PM	3:35 PM	3;58 PM	10 21560-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	8/20/2019	3:30 PM	4:04 PM	4:27 PM	4:10 PM	4:18 PM	4:04 PM	4:22 PM	6 21623-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	8/21/2019	9:15 AM	8:52 AM	9:55 AM	9:11 AM	9:40 AM	8:52 AM	9:48 AM	14 21700-1	Left Knee: / ORT	Levine, Mar ORT	GA
OR 1	8/21/2019	9:00 AM	9:08 AM	9:32 AM	9:12 AM	9:25 AM	9:08 AM	9:32 AM	40 21715-1	Excision Ext GEN	Mecínski, A PLS	L
OR 1	8/22/2019	9:45 AM	9:53 AM	10:40 AM	10:01 AM	10:27 AM	9:53 AM	10:33 AM	33 15002-2	Left: Arthrc ORT	Steinberg, . ORT	GA
OR 1	8/22/2019	11:00 AM	11:12 AM	2:31 PM	11:58 AM	2:21 PM	11:12 AM	2:26 PM	39 21625-1	Revision Le PLS	Andochick, PLS	GΑ
OR 1	8/23/2019	9:00 AM	9:09 AM	9;28 AM	9:16 AM	9:27 AM	9:09 AM	9:28 AM	3 21627-1	Left Catara OPH	Thadani, St. OPH	MAC
OR 1	8/23/2019	9:30 AM	9:33 AM	9:49 AM	9;38 AM	9:48 AM	9:33 AM	9:49 AM	5 21427-2	Left Catara OPH	Thadani, St. OPH	MAC
OR 1	8/23/2019	10:00 AM	9:54 AM	10:12 AM	9:59 AM	10:11 AM	9:54 AM	10:12 AM	5 21536-2	Left Catara: OPH	Thadani, St OPH	MAC
OR 1	8/23/2019	11:00 AM	10:23 AM	11:03 AM	10:34 AM	11:01 AM	10:23 AM	11:03 AM	11 21658-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	8/23/2019	11:30 AM	11:07 AM	11:31 AM	11:11 AM	11:29 AM	11:07 AM	11:31 AM	4 21683-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	8/26/2019	9:45 AM	9:38 AM	11:43 AM	10:13 AM		9:38 AM		23 21724-1	Left: Open ORT	Steinberg, . ORT	GA
OR 1	8/25/2019	12:30 PM	12:29 PM	1:09 PM	12:43 PM	1:04 PM	12:29 PM	1:09 PM	46 21722-1	Right Knee: ORT	Walsh, Con ORT	GA
OR 1	8/26/2019	1:30 PM	1:41 PM	2:23 PM	1:57 PM	2:20 PM	1:41 PM	2:23 PM	32 21725-1	Debrideme ORT	Mecinski, A PLS	GA.
OR 1	8/26/2019	3:00 PM	2:44 PM	2:57 PM	2:50 PM	2:54 PM	2:44 PM	2:57 PM	21 21733-1	Lip Lacerati ENT	Mecinski, A PLS	GA
OR 1	8/26/2019	3:45 PM	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		3:47 PM	3:57 PM	3:43 PM	3:57 PM	46 21742-1	Repair to Li ENT	Mecinski, A PLS	L
OR 1	8/27/2019	8:15 AM	8:23 AM	8;43 AM	8:20 AM	8:35 AM	8:17 AM	8:40 AM	6 21660-1	Left Catara OPH		MAC
OR 1	8/27/2019	9:00 AM	8:53 AM	9;15 AM	8:50 AM	9:11 AM	8:53 AM	9:12 AM	13 21561-2		Thadani, St OPH	
OR 1	8/27/2019	9:30 AM	9:30 AM	9:59 AM	9:26 AM	9:54 AM	9:25 AM	9:56 AM		Left Catara OPH	Thadani, St OPH	MAC
OR 1	8/27/2019	10:00 AM	10:07 AM						13 17263-2	Left Catara OPH	Thadani, St. OPH	MAC
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OR 1	8/27/2019	11:00 AM	11:17 AM	11:38 AM		11:33 AM	11:15 AM	11:35 AM	10 21544-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	8/27/2019	11:30 AM	11:47 AM	12:10 PM	11:53 AM	12:05 PM	11:43 AM		8 21439-2	Right Catar OPH	Thadanl, St OPH	MAC
OR 1	8/27/2019	12:00 PM	12:17 PM	12:36 PM	12:15 PM	12:31 PM	12:17 PM	12:33 PM	10 21661-1	Right Catar OPH	Thadanl, St OPH	MAC
OR 1	8/27/2019	12:30 PM	12:46 PM	1:04 PM	12;43 PM	1:00 PM	12:40 PM	1:01 PM	7 21663-1	Right Catar OPH	Thadani, Sc OPH	MAC
OR 1	8/27/2019	1:00 PM	1:06 PM	1:27 PM	1:12 PM	1:22 PM	1:06 PM	1:24 PM	5 21664-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	8/27/2019	1:30 PM	1:30 PM	1:49 PM	1;35 PM	1:44 PM	1:30 PM	1:46 PM	6 21264-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	8/30/2019	8:00 AM	8:10 AM	8:30 AM	8:14 AM	8:25 AM	8:10 AM	8:26 AM	7 21658-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	8/30/2019	8:30 AM	8:33 AM	8:55 AM	8;39 AM	8:50 AM	8:33 AM	8:51 AM	7 16887-2	Left Catara OPH	Thadani, St. OPH	MAC
OR 1	8/30/2019	9:00 AM	9:00 AM	9:21 AM	9:05 AM	9:15 AM	9:00 AM	9:17 AM	9 20188-2	Left Catara: OPH	Thadani, St OPH	MAC
OR 1	8/30/2019	9:30 AM	9:22 AM	9:44 AM	9:27 AM	9:36 AM	9:22 AM	9:37 AM	5 21675-1	Left Catara: OPH	Thadani, St OPH	MAC
OR 1	8/30/2019	10:00 AM	9:48 AM	10:14 AM	9:56 AM	10:06 AM	9:48 AM	10:07 AM	11 21672-1	Left Catara: OPH	Thadani, St OPH	MAC
OR 1	8/30/2019	10:30 AM	10:15 AM	10:36 AM	10;19 AM	10:29 AM	10:15 AM	10:31 AM	8 19104-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	8/30/2019	1:00 PM	1:11 PM	4:45 PM	1:56 PM	4:30 PM	1:11 PM	4:42 PM	160 21754-1	Right: Oper ORT	Nesbitt Silo ORT	BLG
OR 1	9/3/2019	MA 00:8	8:36 AM	10:32 AM	8:48 AM	10:25 AM	8:36 AM	10;27 AM	21 21726-1	Right Deep OPH	Piliar Topal OPH	GA
OR 1	9/3/2019	10:00 AM	10:40 AM	11:10 AM	10:52 AM	11:03 AM	10:40 AM	11:07 AM	13 21691-1	Right Catar OPH	Pillar Topal OPH	MAC
OR 1	9/3/2019	11:15 AM	11:33 AM	12:04 PM	11:39 AM	11:56 AM	11:33 AM	12:00 PM	26 21615-1	Left Catara OPH	Pillar Topal OPH	MAC
OR 1	9/3/2019	10:30 AM	12:09 PM	12:50 PM	12:20 PM	12:42 PM	12:09 PM	12:46 PM	9 21692-1	Left Catara OPH	Pillar Topal OPH	MAC
OR 1		11:45 AM	1:03 PM	1:33 PM	1:10 PM	1:24 PM	1:03 PM	1:29 PM	17 20862-3	Left Catara OPH	Pillar Topal OPH	MAC
OR 1	9/3/2019	12:15 PM	1:54 PM	3:23 PM	2:06 PM	3:12 PM	1:54 PM	3:19 PM	25 20865-2	Left Deep # OPH	Pillar Topal OPH	GA
OR 1	9/4/2019	8:45 AM	9:08 AM	10:16 AM	9:24 AM	10:04 AM	9:08 AM	10:10 AM	32 21773-1	Pinning rigi ORT	Macinski, A PLS	MAC
OR 1	9/4/2019			11:20 AM	10:36 AM	11:04 AM	10:27 AM		17 21766-1	Excision Cy PLS	Mecinski, A PLS	MAC
OR 1	9/4/2019	11:15 AM			11:38 AM	11:43 AM	11:28 AM		15 21774-1	Incision & LGEN	Mecinski, A PLS	L
OR 1	9/5/2019	9:45 AM	9:28 AM	10:48 AM		10:36 AM		10:48 AM	35 21718-1	Right: Arth: ORT	Steinberg, . ORT	
OR 1	9/6/2019	9:00 AM	9:14 AM	9:42 AM	9:19 AM	9:38 AM	9:14 AM	9:39 AM				GA MAG
OR 1	9/6/2019	9:30 AM		10:06 AM		10:03 AM		10:04 AM	6 21//5-1 6 21616-1	Right Catar OPH Right Catar OPH	Thadani, St OPH	MAC
OR 1	9/6/2019			10:36 AM	10:21 AM		10:13 AM	10:33 AM			Thadani, St OPH	MAC
OR 1	9/6/2019			11:16 AM	10:55 AM	11:13 AM	10:42 AM		9 21771-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	9/6/2019							11:14 AM	9 21626-2	Left Catara OPH	Thadani, St. OPH	MAC
OR 1	9/6/2019			12:16 PM			11:22 AM 11:55 AM		8 21568-2	Left Catara OPH	Thadani, St. OPH	MAC
OR 1	9/6/2019	1:00 PM	1:15 AN	2:44 PM	1:30 PM	2:26 PM		12:13 PM	9 21639-2	Left Catara OPH	Thadani, St. OPH	MAC
OR 1	9/9/2019			11:41 AM			1:16 PM	2:42 PM	63 21794-1	Left: Closec ORT	Steinberg, . ORT	GA
							10:09 AM		18 21554-1	Left: Arthro ORT	Levine, Mar ORT	BLG
OR 1	9/9/2019		12:06 PM	1:50 PM	12:43 PM	1:37 PM	12:06 PM	1:47 PM	28 21603-1	Right: Arth ORT	Levine, Mar ORT	BLG
OR 1	9/9/2019	1:45 PM	2:19 PM	4:00 PM	3:01 PM	3:45 PM	2:19 PM	3:56 PM	32 21617-1	Left: Arthrc ORT	Levine, Mar ORT	BLG
OR 1	9/9/2019	4:15 PM	4:18 PM	4:36 PM	4:26 PM	4:30 PM	4:18 PM	4:34 PM	22 21776-1	Closed Red ENT	Mecinski, A PLS	MAC
OR 1	9/10/2019	8:15 AM	8:15 AM	8:36 AM	8:14 AM	8:28 AM	8:12 AM	8:31 AM	6 21743-1	Left Catara: OPH	Thadani, St OPH	MAC
OR 1	9/10/2019	9:00 AM	8:42 AM	9:05 AM	8:40 AM	9:01 AM	8:42 AM	9:02 AM	11 21663-2	Left Catara: OPH	Thadani, St OPH	MAC
OR 1	9/10/2019	9:30 AM	9:10 AM	9:31 AM	9:08 AM	9:26 AM	9:06 AM	9:27 AM	4 21544-2	Left Catara: OPH	Thadani, St OPH	MAC
OR 1	9/10/2019	10:00 AM		10:04 AM	9:38 AM	9:58 AM		10:00 AM	8 21739-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	9/10/2019				10:06 AM	10:29 AM	10:04 AM	10:30 AM	4 21728-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	9/10/2019				10:38 AM			10:59 AM	4 21669-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	9/10/2019				11:08 AM		11:05 AM		6 21660-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1			11:34 AM	11:54 AM	11;33 AM	11:48 AM	11:30 AM	11:49 AM	5 21777-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	9/10/2019	12:30 PM	12:00 PM	12:22 PM	11:58 AM	12:18 PM	11:56 AM	12:18 PM	7 21662-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	9/10/2019	1:00 PM	12:24 PM	12:47 PM	12:29 PM			12:42 PM	6 21529-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	9/11/2019	10:15 AM	10:04 AM	12:12 PM	10:28 AM			12:07 PM	23 21421-2	Bilateral Se PLS	Macinski, A PLS	GA
OR 1			12:29 PM		12:39 PM		12:29 PM	1:08 PM	22 21790-1	Wide Excisi ENT	Macinski, A PLS	MAC
OR 1	9/11/2019	2:15 PM	1:24 PM	1:52 PM	1:32 PM	1:42 PM	1:18 PM	1:46 PM	10 12286-5	Excision of ORT	Mecinski, A PLS	MAC
OR 1	9/11/2019	3:15 PM			2:25 PM	2:36 PM	2:21 PM	2:39 PM	35 11336-3	Excision Le: ENT	Mecinski, A PLS	L
OR 1	9/13/2019	8:30 AM	9:12 AM	9:36 AM	9:19 AM	9:29 AM	9:12 AM	9:31 AM	9 21778-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	9/13/2019	9:30 AM		10:03 AM	9:47 AM	9:57 AM	9:39 AM	9:58 AM	8 21085-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1				10:33 AM				10:26 AM	9 21628-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1								10:51 AM	8 20310-2	Left Catara OPH	Thadani, St OPH	
OR 1								11:21 AM	8 21672-2			MAC
OR 1	9/16/2019	1:45 PM	2:18 PM	5:20 PM	2:58 PM	5:07 PM	2:18 PM	5:15 PM		Right Catar OPH	Thadani, St OPH	MAC
	2, 20, 2013	/- / 141		- 1-W (141	2.50 P IVI	5141 1.1A1	MINI CALL	5,15 PW	272 21846-1	Open Redu ORT	Levine, Ma [,] ORT	BLG

OR 1	9/17/201	9 8:00 AN	/I 8:42 AN	1 9:35 AM	8:47 AM	9:29 AM	8:42 AM	. 0.20 444	15 24740			
OR 1	9/17/201										Henry, J. Ct OPH	MAC
OR 1	9/17/201								14 21709-1		Henry, J. Cl OPH	MAC
OR 1	9/17/201								60 21060-2		Thadani, St OPH	GA
OR 1	9/17/201								11 21781-1	_	Thadani, St. OPH	MAC
OR 1	9/17/201					1:21 PM			7 21527-2		Thadani, St. OPH	MAC
OR 1	9/17/2019					1:52 PM 2:15 PM			10 17160-4		Thadani, St. OPH	MAC
OR 1	9/17/2019								8 21791-1		Thadani, St OPH	MAC
OR 1	9/17/2019					2:53 PM			20 21780-1		Thadani, St OPH	MAC
OR 1	9/17/2019					3:19 PM			7 21125-2		Thadani, St OPH	MAC
OR 1						5:57 PM			41 21723-2		Andochick, PLS	GA
OR 1	9/18/2019					5:20 PM			25 21731-1	. Bilateral Se PLS	Andochick, PLS	GA
	9/19/2019								37 21826-1	Right: Arthi ORT	Steinberg, . ORT	GA
OR 1	9/19/2019					12:46 PM	11:35 AM	12:48 PM	23 21827-1	Left: Arthrc ORT	Steinberg, . ORT	GA
OR 1	9/20/2019					10:10 AM			7 21332-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	9/20/2019					10:37 AM	10:16 AM	10:37 AM	6 21792-1	Right Catar OPH	Thadani, St. OPH	MAC
OR 1	9/20/2019					11:02 AM	10:45 AM	11:03 AM	8 19634-2	Right Catar OPH	Thadani, St. OPH	MAC
OR 1	9/20/2019					11:29 AM	11:10 AM	11:31 AM	7 21793-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	9/20/2019				11:48 AM	12:03 PM	11:36 AM	12:06 PM	5 21668-2		Thadani, St OPH	MAC
OR 1	9/23/2019			9:57 AM	9:32 AM	9:49 AM	9:09 AM	9:54 AM	39 21828-1	Right: Arth: ORT	Steinberg, ORT	GA
OR 1	9/24/2019			9:45 AM	9:29 AM	9:37 AM	9:21. AM	9:39 AM	10 21508-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	9/24/2019		9:47 AM	10:10 AM	9:55 AM	10:04 AM	9:47 AM	10:06 AM	8 21616-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	9/24/2019			10:38 AM	10:18 AM	10:31 AM	10:12 AM	10:34 AM	6 21849-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	9/24/2019	10:30 AM	10:42 AM	11:05 AM	10:49 AM	10:57 AM	10:42 AM	11:00 AM	8 16084-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	9/25/2019	11:30 AM	12:01 PM	4:34 PM	12:26 PM	4:24 PM	12:01 PM	4:32 PM	49 21547-1	Revision Ri _I PLS	Andochick, PLS	GA
OR 1	9/26/2019	8:45 AM	8:55 AM	9:50 AM	9:10 AM	9:29 AM	8:55 AM	9:46 AM	22 21853-1	Right: Arth: ORT	Steinberg, . ORT	GA
OR 1	9/26/2019	10:00 AM	10:01 AM	10:47 AM	10:23 AM	10:38 AM	10:01 AM	11:30 AM	15 21858-1	Right: Arth ORT	Steinberg, . ORT	
OR 1	9/27/2019	9:30 AM	9:41 AM	10:02 AM	9:46 AM	9:55 AM	9:41 AM	9:57 AM	5 21085-2	Left Catara OPH		GA
OR 1	9/27/2019	10:00 AM	10:03 AM		10:06 AM	10:17 AM		10:18 AM	6 21209-2	Right Catar OPH	Thadani, St. OPH	MAC
OR 1	9/27/2019	10:30 AM		10:49 AM	10:28 AM	10:43 AM	10:22 AM	10:44 AM	4 21699-1		Thadani, St. OPH	MAC
OR 1	9/27/2019		10:52 AM	11:15 AM	10:57 AM	11:08 AM	10:52 AM	11:10 AM		Right Catar OPH	Thadani, St OPH	MAC
OR 1	9/30/2019		8:42 AM	9:21 AM	8:55 AM	9:13 AM	8:42 AM		8 21850-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	9/30/2019		9:58 AM	10:38 AM	10:10 AM	10:25 AM		9:15 AM	23 19151-3	Left: Arthrc ORT	Steinberg, ORT	GA
OR 1	9/30/2019	1:00 PM	1:27 PM	2:48 PM	1:56 PM	2:38 PM	9:58 AM	10:32 AM	43 21871-1	Right Arthr ORT	Steinberg, . ORT	GA
OR 1	9/30/2019	2:45 PM	3:03 PM	4:58 PM			1:27 PM	2;45 PM	175 21891-1	Left: Left D ORT	Levine, Ma ORT	GA
OR 1	10/1/2019	9:00 AM	9:06 AM	9:34 AM	3:26 PM	4:49 PM	3:03 PM	4:51 PM	18 21897-1	Right: Right ORT	Levine, Mar ORT	GA
OR 1	10/1/2019	9:30 AM	9:36 AM		9:11 AM	9:30 AM	9:06 AM	9;31 AM	8 21872-1	Right Catar OPH	Pillar Topal OPH	MAC
OR 1	10/1/2019			10:06 AM	9:41 AM	10:00 AM	9:36 AM	10:02 AM	5 21703-1	Right Catar OPH	Pillar Topal OPH	MAC
OR 1	10/1/2019		10:13 AM	11:08 AM		11:00 AM	10:13 AM	11:01 AM	11 21735-1	Right Desce OPH	Piliar Topal OPH	GA
OR 1				11:55 AM		11:48 AM	11:27 AM	11:50 AM	26 21435-2	Right Catar OPH	Pillar Topal OPH	MAC
	10/1/2019		12:01 PM	12:40 PM	12:09 PM	12:34 PM	12:01 PM	12:36 PM	11 21431-2	Left Descer OPH	Pillar Topal OPH	GA
OR 1	10/1/2019		12:48 PM	1:13 PM	12:55 PM		12:48 PM	1:08 PM	12 21873-1	Left Catara: OPH	Pillar Topai OPH	MAC
OR 1	10/1/2019	1:00 PM	1:19 PM	2:14 PM	1:29 PM	2;08 PM	1:19 PM	2:09 PM	11 21768-1	Left Penetr OPH	Pillar Topal OPH	GA
OR 1	10/2/2019	1:30 PM	2:54 PM	4:19 PM	2:48 PM	3:54 PM	2:54 PM	4:02 PM	91 21731-2	Evacuation PLS	Andochick, PLS	GA
OR 1	10/3/2019	9:45 AM	10:49 AM	12:52 PM	11:15 AM	12:43 PM	10;49 AM	12:49 PM	31 21899-1	Left: Arthrc ORT	Steinberg, . ORT	GA
OR 1	10/3/2019	11:30 AM			12:33 PM	12:42 PM	12:29 PM	12:48 PM	20 21421-3	Wound Clo HND	Mecinski, A PLS	L
OR 1	10/3/2019	4:00 PM			4:14 PM	4:36 PM	4:04 PM	4:40 PM	196 21910-1	Skin Graft FPLS	Mecinski, A PLS	Ĺ
OR 1	10/4/2019	8:00 AM	8:17 AM	8:44 AM	8:24 AM	8:38 AM	8:17 AM	8:39 AM	7 21807-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	10/4/2019	8:30 AM	8:54 AM	9:19 AM	9:00 AM	9:12 AM	8:54 AM	9:13 AM	15 21892-1	Right Catar OPH	Thadani, Sc OPH	MAC
OR 1	10/4/2019	9:00 AM	9:21 AM	9:48 AM	9:25 AM	9:42 AM	9;21 AM	9:43 AM	8 21875-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	10/4/2019	9:30 AM	9:49 AM	10:10 AM	9:54 AM	10:03 AM	9:49 AM	10:10 AM	6 21729-2	Right Catar OPH	Thadani, St OPH	
OR 1	10/4/2019	10:00 AM	10:12 AM	10:33 AM		10:27 AM		10:28 AM	2 21893-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	10/4/2019	10:30 AM	10:36 AM	11:00 AM				10:53 AM	8 21627-2	Right Catar OPH		MAC
OR 1	10/4/2019	11:00 AM	11:24 AM				11:24 AM		31 21904-1	Pinning Pro ORT	Thadani, St OPH	MAC
OR 1	10/4/2019	12:15 PM	12:25 PM	2:01 PM	12:53 PM	1:42 PM	12:26 PM	1:51 PM		-	Mecinski, A PLS	GA
OR 1	10/4/2019	2:00 PM	2:22 PM	3:22 PM	2:40 PM	3:00 PM	2:22 PM		27 21139-3	Arthrodesk ORT	Mecinski, A PLS	GA
OR 1	10/4/2019	3:15 PM	3:38 PM	4:45 PM	4:04 PM	4:33 PM		3:15 PM	31 21900-1	Removal TI PLS	Mecinski, A PLS	MAC
OR 1	10/4/2019	4:30 PM	4:55 PM	5:25 PM			3:38 PM	4:42 PM	23 21905-1	Removal Fc POD	Mecinski, A PLS	GA
OR 1	10/7/2019	9:45 AM	9:49 AM		5:11 PM	5:18 PM	4:55 PM	5:23 PM	13 21924-1	Removal Fc ORT	Mecinski, A PLS	MAC
OR 1	10/8/2019			10:38 AM		10:21 AM		10:30 AM	20 21906-1	Left: Arthrc ORT	Steinberg, . ORT	GA
		8:15 AM	8:20 AM	3:19 PM	8:16 AM	8;38 AM	8:13 AM	8:40 AM	3 21829-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	10/8/2019	9:00 AM	8:47 AM	9:09 AM	8:45 AM	9:03 AM	8:42 AM	9:05 AM	2 21916-1	Right Catar OPH	Thadani, St. OPH	MAC
OR 1	10/8/2019	9:30 AM	9:12 AM	9:39 AM	9:11 AM	9:31 AM	9:10 AM	9:34 AM	5 21913-1	Right Catar OPH	Thadani, St. OPH	MAC
OR 1	10/8/2019	10:00 AM		10:09 AM		10:03 AM		10:05 AM	6 21739-2	Right Catar OPH	Thadani, St. OPH	MAC
OR 1	10/8/2019	10:30 AM					10:10 AM		5 21830-1	Right Catar OPH	Thadani, St. OPH	MAC
OR 1	10/8/2019		10:45 AM				10:43 AM	11:17 AM	11 21912-1	Right Catar OPH	Thadani, Sc OPH	MAC
OR 1	10/8/2019					11:42 AM	11:20 AM	11:44 AM	3 21777-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	10/8/2019			12:15 PM	11:49 AM	12:09 PM	11:47 AM	12:11 PM	3 21661-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	10/8/2019	12:30 PM	12:19 PM	12:44 PM	12:20 PM	12:36 PM	12:17 PM	12;39 PM	6 21914-1	Left Carara OPH	Thadani, St OPH	MAC
OR 1	10/8/2019	1:00 PM	12:48 PM	1:12 PM	12:45 PM	1:03 PM	12:44 PM	1:07 PM	5 17375-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	10/8/2019	1:30 PM	1:19 PM	1:49 PM	1:19 PM	1:42 PM	1:17 PM	1:43 PM	10 21268-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	10/9/2019		12:50 PM	3:44 PM	1:29 PM		12:50 PM	3:31 PM	37 11703-2	Revision Le PLS	Andochick, PLS	GA
OR 1	10/10/2019	8:45 AM	8:44 AM	9:42 AM	9:05 AM	9:35 AM	8:44 AM	9:39 AM	23 21895-1	Left: Arthrc ORT	Steinberg, . ORT	
OR 1	10/10/2019		10:23 AM				10:23 AM		44 21911-1	Left: Left D ORT		GA GA
OR 1								12:14 PM			Steinberg, ORT	GA MAG
OR 1	10/11/2019								5 21874-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1			12:49 PM		12:24 PM 12:53 PM			12:43 PM	5 21915-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	10/11/2019						12:49 PM	1:05 PM	6 21917-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1							10:19 AM		28 20674-2	Left: Arthrc ORT	Levine, Mar ORT	GA
	10/14/2019		12:46 PM	2:17 PM	1:23 PM		12:46 PM	2:15 PM	35 21818-1	Left: Arthrc ORT	Levine, Ma ⁻ ORT	BLG
OR 1	10/14/2019	2:15 PM	2:43 PM	3;24 PM	2:59 PM	3:17 PM	2:39 PM	3:21 PM	24 21918-1	Left: Arthrc ORT	Levine, Ma ⁻ ORT	GA
OR 1	10/15/2019	8:30 AM		10:11 AM		10:05 AM		10:07 AM	10 21863-1	Bilateral Bl: OPH	Henry, J. Cł OPH	MAC
OR 1								11:36 AM	52 21575-1	Right Ptery OPH	Thadani, St OPH	MAC
OR 1							11:41 AM		5 21614-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1								12:27 PM	5 21919-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1						12:50 PM	12:33 PM	12:51 PM	6 21962-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1			12:55 PM	1:20 PM	1:03 PM	1:14 PM	12:55 PM	1:17 PM	4 21629-1	Rigth Catar OPH	Thadani, St OPH	MAC
OR 1		12:45 PM	1:27 PM	1:49 PM	1:32 PM	1:44 PM	1:27 PM	1:45 PM	10 21963-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	10/15/2019	1:15 PM	1:59 PM	2:24 PM	2:02 PM	2:19 PM	1:59 PM	2:22 PM	14 21848-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	10/15/2019	1:45 PM	2:25 PM	3:20 PM	2:35 PM	3:16 PM	2:25 PM	3:17 PM	3 21878-1	Left Pterygl OPH	Thadani, St. OPH	MAC
							-			, 111		

OR 1	10/15/2019	2:45 PM	3:22 PM	3:54 PM	3:38 PM	3:48 PM	3:22 PM	3;50 PM	5 21780-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	10/16/2019				1:28 PM	2:32 PM			31 21734-1	Left: Arthrc ORT	Levine, Mar ORT	GA
OR 1	10/16/2019						3:01 PM		23 21864-1	Right: Arthr ORT	Levine, Mar ORT	GA
OR 1	10/17/2019			10:43 AM	9:20 AM		9:14 AM		41 21990-1	Left: Open ORT		GA
OR 1	10/21/2019						9:58 AM		34 21986-1	Right: Arth: ORT	Steinberg, . ORT Steinberg, . ORT	
OR 1	10/22/2019				8:55 AM		8:48 AM		2 21850-2	Left Catara: OPH		GA MAC
OR 1	10/22/2019						9:25 AM		11 21972-1	Left Catara: OPH	Thadani, St OPH	MAC
OR 1	10/22/2019						9:46 AM				Thadani, St. OPH	MAC
OR 1					9:51 AM				2 21970-1	Right Catar OPH	Thadani, St. OPH	MAC
	10/22/2019					10:31 AM	10:15 AM		10 21966-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	10/22/2019					11;21 AM	11:01 AM		27 21971-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	10/22/2019					12:08 PM	11:28 AM		5 22007-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	10/22/2019					12:33 PM	12:12 PM		4 21967-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	10/24/2019	8:45 AM				9:42 AM	9:01 AM		38 22025-1	Right: Arthr ORT	Steinberg, . ORT	GA
OR 1	10/25/2019	7:30 AM				8:13 AM	8:00 AM		4 21892-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	10/25/2019	8:30 AM	8:24 AM	8:43 AM	8:28 AM	8:39 AM	8:24 AM	8:40 AM	9 21976-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	10/25/2019	9:00 AM			8:47 AM	9:05 AM	8:45 AM		5 18901-3	Right Catar OPH	Thadani, St OPH	MAC
OR 1	10/25/2019	9:30 AM			9;15 AM	9;29 AM	9:11 AM		6 20987-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	10/25/2019		9:36 AM	9:55 AM	9:41 AM	9:51 AM	9:36 AM	9:51 AM	6 21978-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	10/25/2019			10:26 AM			10:00 AM		9 19746-1	Right Catar OPH	Thadani, St. OPH	MAC
OR 1	10/25/2019			11:04 AM		10:59 AM	10:35 AM	11:00 AM	11 21807-2	Left Catara: OPH	Thadani, St. OPH	MAC
OR 1	10/25/2019			12:16 PM		12:11 PM	11:38 AM	12:16 PM	38 22040-1	Repair Righ HND	MecInski, A PLS	MAC
OR 1	10/25/2019	1:15 PM	12:58 PM	1:43 PM	1:08 PM	1:31 PM	12:58 PM	1:38 PM	42 22048-1	Excision MaPLS	Mecinski, A PLS	GA
OR 1	10/25/2019	2:45 PM			1:57 PM	2:02 PM	1:52 PM	2:05 PM	14 22047-1	Excision of PLS	Mecinski, A PLS	L.
OR 1	10/28/2019	8:45 AM	8:49 AM	9:32 AM	9:03 AM	9:19 AM	8:49 AM	9:26 AM	27 10493-3	Right: Arth: ORT	Steinberg, . ORT	GA
OR 1	10/28/2019	10:00 AM	9:45 AM	10:30 AM	10:01 AM	10:24 AM	9:45 AM		19 22003-1	Right: Arth: ORT	Steinberg, . ORT	GA
OR 1	10/28/2019			12:18 PM		12:00 PM	11:00 AM		30 22049-1	Left: Arthrc ORT	Steinberg, . ORT	GA
OR 1	10/29/2019	8:00 AM	8:15 AM	8:36 AM	8:21 AM	8:33 AM	8:15 AM	8:33 AM	9 21922-1	Right Catar OPH	Thadani, St. OPH	MAC
OR 1	10/29/2019	8:30 AM	8:38 AM	9:01 AM	8:46 AM	8:57 AM	8:38 AM	8:59 AM	5 22026-1	Right Catar OPH	Thadani, St. OPH	MAC
OR 1	10/29/2019	9:00 AM	9:05 AM	9:33 AM	9:13 AM	9:29 AM	9:05 AM	9:30 AM	6 22009-1	Left Catara: OPH	Thadani, St. OPH	MAC
OR 1	10/29/2019	9:30 AM	9:38 AM	10:00 AM	9:45 AM	9:57 AM	9:38 AM	9:58 AM	8 22060-1	Right Catar OPH	Thadani, St. OPH	MAC
OR 1	10/29/2019	10:00 AM	10:12 AM	10:38 AM		10:33 AM	10:12 AM	10:35 AM	14 21964-1	Right Catar OPH	Thadani, St. OPH	MAC
OR 1	10/29/2019	10:30 AM	10:42 AM	11:08 AM	10:50 AM	11:05 AM	10:42 AM	11:06 AM	7 21963-2	Left Catara OPH	Thadani, St. OPH	MAC
OR 1	10/29/2019	11:00 AM	11:12 AM	11:34 AM	11:20 AM	11:31 AM	11:12 AM	11:32 AM	6 21980-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	10/29/2019	11:30 AM	11:38 AM	12:12 PM	11:43 AM	12:07 PM	11:38 AM	12:08 PM	6 21849-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	10/29/2019	12:00 PM	12:15 PM	12:39 PM	12:21 PM	12:32 PM	12:15 PM	12:35 PM	7 21699-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	10/29/2019	12:30 PM	12:42 PM	1:09 PM	12:53 PM	1:06 PM	12:42 PM	1:07 PM	7 21979-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	10/29/2019	1:00 PM	1:11 PM	1:37 PM	1:19 PM	1:32 PM	1:11 PM	1:33 PM	4 21969-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	10/30/2019	12:30 PM	2:40 PM	3:36 PM	2:55 PM	3:21 PM	2:40 PM	3:30 PM	28 22073-1	Repair Exte HND	Mecinski, A PLS	GA
OR 1	11/1/2019	8:00 AM	8;22 AM	8:50 AM	8:32 AM	8:45 AM	8:22 AM	8:47 AM	4 21792-2	Left Catara: OPH	Thadani, St OPH	MAC
OR 1	11/1/2019	9:00 AM	9:17 AM	9:40 AM	9:22 AM	9:35 AM	9:17 AM	9:36 AM	9 21659-1	Left Catara: OPH	Thadani, St OPH	MAC
OR 1	11/1/2019	9:30 AM	9:42 AM	10:04 AM	9:48 AM	9:57 AM	9:42 AM	10:00 AM	6 22017-1	Right Catar OPH	Thadani, St. OPH	MAC
OR 1	11/1/2019	10:30 AM	10:07 AM	10:34 AM	10:13 AM	10:27 AM	10:07 AM	10:29 AM	7 21917-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	11/1/2019	11:00 AM	10:36 AM	11:04 AM	10:43 AM	10:55 AM	10:36 AM	10:57 AM	7 21369-1	Right Catar OPH	Thadani, St. OPH	MAC
OR 1	11/1/2019	10:00 AM	11:06 AM	11:35 AM	11:15 AM	11:24 AM	11:06 AM	11:27 AM	9 13181-6	Right Catar OPH	Thadani, St OPH	MAC
OR 1	11/1/2019	11:45 AM			12:06 PM	12:10 PM	11:55 AM	12:12 PM	28 21904-2	Pin Remova ORT	Mecinski, A PLS	L
OR 1	11/1/2019	4:45 PM			12:31 PM	12:45 PM	12:25 PM	12:48 PM	13 22086-1	Repair Lip LORT	Mecinski, APLS	L
OR 1	11/1/2019	12:30 PM	1:03 PM	1:45 PM	1:09 PM	1:29 PM	1:03 PM	1:38 PM	15 22022-1	Excision Mi ENT	Mecinski, A PLS	MAC
OR 1	11/1/2019	1:45 PM	1:52 PM	3:12 PM	2:15 PM	2:49 PM	1:52 PM	3:02 PM	14 22080-1	Open Redu ORT	Mecinski, A PLS	GA
OR 1	11/1/2019	3:15 PM			3:23 PM	3:32 PM	3:15 PM	3:38 PM	13 22067-1	Debrideme ORT	Mecinski, A PLS	L
OR 1	11/1/2019	4:00 PM			4:01 PM	4:10 PM	3:50 PM	4:15 PM	12 22082-1	Debrideme HND	Mecinski, A PLS	Ĺ
OR 1	11/4/2019	10:15 AM	11:05 AM	11:56 AM	11:27 AM	11:48 AM	11:05 AM	11:56 AM	37 15368-2	Right: ArthrORT	Steinberg, . ORT	GA
OR 1	11/5/2019	8:30 AM	8;40 AM	9:05 AM	8:45 AM	8:59 AM	8:40 AM	9:01 AM	10 21873-2	Right Catar OPH	Pillar Topal OPH	MAC
OR 1	11/5/2019	9:00 AM	9:15 AM	10:31 AM	9:26 AM	10:22 AM	9:15 AM	10;26 AM	14 22044-1	Left Descer OPH	Pillar Topal OPH	GA
OR 1	11/5/2019	10:30 AM	10:39 AM	11:50 AM	10:49 AM	11:43 AM	10:39 AM	11:46 AM	13 22043-1	Left Penetr OPH	Pillar Topal OPH	GA
OR 1	11/5/2019	11:30 AM	12:01 PM	12:27 PM	1.2:09 PM	12:21 PM	12:01 PM	12:23 PM	15 22061-1	Left Catara: OPH	Pillar Topal OPH	MAC
OR 1	11/5/2019	12:00 PM	12:32 PM	12:55 PM	12:38 PM	12:50 PM	12:32 PM	12:52 PM	9 21872-2	Left Catara OPH	Pillar Topal OPH	MAC
OR 1	11/5/2019	12:30 PM	1:11 PM	2:05 PM	1:24 PM	1:59 PM	1:11 PM	2:01 PM	19 21693-1	Left Descer OPH	Pillar Topal OPH	GA
OR 1	11/5/2019	10:00 AM	2:12 PM	2:36 PM	2:18 PM	2:31 PM	2:12 PM	2:32 PM	11 21703-2	Left Catara OPH	Pillar Topal OPH	MAC
OR 1	11/5/2019	1:30 PM	2:42 PM	3:46 PM	3:02 PM	3:33 PM	2:42 PM	3:41 PM	10 22045-1	Right Secor OPH	Pillar Topal OPH	MAC
OR 1	11/6/2019	11:30 AM	1:57 PM	5:18 PM	2:34 PM	4:58 PM	1:57 PM	5:05 PM	83 19973-5	Revision BII PLS	Andochick, PLS	GA
OR 1	11/8/2019	8:00 AM	8:10 AM	8:36 AM	8:19 AM	8:29 AM	8:10 AM	8:31 AM	6 22051-1	Left Catara OPH	Thadani, St. OPH	MAC
OR 1	11/8/2019	8:30 AM	8:38 AM	9:06 AM	8:45 AM	8:59 AM	8:38 AM	9:01 AM	7 21915-2	Left Catara OPH	Thadani, Sc OPH	MAC
OR 1	11/8/2019	9:00 AM	9:06 AM	9:28 AM	9:13 AM	9:22 AM	9:06 AM	9:24 AM	5 21971-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	11/8/2019	9:30 AM	9:29 AM	9:51 AM	9:36 AM	9:46 AM	9:29 AM	9:48 AM	5 21978-2	Left Catara: OPH	Thadani, St OPH	MAC
OR 1	11/8/2019	10:00 AM	9:53 AM	10:17 AM	9:59 AM	10:10 AM	9:53 AM	10:12 AM	5 21966-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	11/8/2019	10:30 AM	10;21 AM	10:45 AM	10:27 AM	10:40 AM	10:21 AM	10:41 AM	9 16306-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	11/8/2019	11:00 AM	10:57 AM	11:20 AM	11:04 AM	11:14 AM	10:57 AM	11:15 AM	16 22027-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	11/11/2019	9:30 AM	9:36 AM	10:25 AM	9:58 AM	10:10 AM	9:36 AM	10:20 AM	32 22029-1	Left: Arthrc ORT	Steinberg, - ORT	GA
OR 1	11/11/2019	10:45 AM	10:53 AM	12:26 PM	11:25 AM	12:15 PM	10:53 AM		33 22062-1	Left: Arthrc ORT	Steinberg, . ORT	GA
OR 1	11/11/2019	1:00 PM	12:48 PM	2:58 PM	1:12 PM	2:46 PM	11:51 AM	12:48 PM	29 19991-2	Left: Arthrc ORT	Steinberg, . ORT	GA
OR 1	11/12/2019	7:30 AM	7:54 AM	8:23 AM	7:56 AM	8:18 AM	7:54 AM	8:20 AM	10 21829-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	11/12/2019	8:15 AM	8:29 AM	9:06 AM	8:32 AM	9:02 AM	8:30 AM	9:03 AM	10 22096-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	11/12/2019	9:00 AM	9:08 AM	9:31 AM	9:12 AM	9:30 AM	9:08 AM	9:31 AM	5 21913-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	11/12/2019	9:30 AM		10:00 AM	9:41 AM	9:55 AM	9:37 AM	9:58 AM	6 22097-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	11/12/2019	10:00 AM	10:02 AM	10:26 AM	10:05 AM		10:02 AM	10:23 AM	4 17375-3	Right Catar OPH	Thadani, St OPH	MAC
OR 1	11/12/2019	10:30 AM		10:58 AM			10:29 AM	10:55 AM	6 22098-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	11/12/2019	11:30 AM		11:33 AM			11:07 AM	11:31 AM	12 20914-2	Right Catar OPH	Thadani, St. OPH	MAC
OR 1			11:39 AM	12:08 PM			11:39 AM	12:06 PM	8 22052-1	Right Catar OPH	Thadani, St. OPH	MAC
OR 1	11/12/2019	11:00 AM	12:13 PM				12:13 PM	12:45 PM	7 16972-3	Left Catara OPH	Thadani, St OPH	MAC
OR 1	11/12/2019	12:30 PM	12:52 PM	1;25 PM	12:59 PM		12:52 PM	1:22 PM	7 22074-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	11/12/2019	1:00 PM	1:30 PM	1:55 PM	1:34 PM	1:52 PM	1:30 PM	3:53 PM	8 22100-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	11/12/2019	1:30 PM	2:00 PM	2:34 PM	2:03 PM	2:29 PM	2:00 PM	2:32 PM	113 20799-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	11/13/2019	10:45 AM	10:48 AM					11:34 AM	25 21942-1	Excision Ma PLS	Mecinski, A PLS	GA
OR 1	11/13/2019	12:15 PM					11:50 AM		16 22108-1	Excision Le: ENT	Mecinski, APLS	L
OR 1	11/13/2019	1:00 PM						12:51 PM	11 22092-1	Excision Le: ENT	Mecinski, A PLS	Ĺ
OR 1	11/13/2019	1:45 PM			1:33 PM	1:49 PM	1:23 PM	1:51 PM	32 22093-1	Excision McPLS	Mecinski, A PLS	L
											,	

OR 1	11/14/201	.9 8:45 AI	M 8:46 AN	4 9:24 AM	8:58 AM	0.13 66	4 D.45 AN	4 0.45				
OR 1	11/14/201								29 22031-1	Right: Arthi ORT	Steinberg, - ORT	GA
OR 1	11/14/201							/ 11:12 AM / 12:30 PM	36 22002-1	Left: Arthro ORT	Steinberg, . ORT	GA
OR 1	11/15/201								31 21823-1 11 18958-2	Left: Arthre ORT	Steinberg, ORT	GA
OR 1	11/15/201	9 8:30 AN	M 8:41 AN						5 22109-1	Right Catar OPH Right Catar OPH	Thadani, St OPH Thadani, St OPH	MAC
OR 1	11/15/201	9:00 AM	M 9:11 AN	9:36 AM					6 14173-3	Right Catar OPH	Thadani, St OPH	MAC MAC
OR 1	11/15/201		V 9:43 AN	10:11 AM	9:54 AM	10:04 AM			11 22017-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	11/15/201		√ 10:14 AN	10:45 AM	10:19 AM	10:39 AM			7 22110-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	11/15/201				10:00 AM	11:13 AM	10:48 AM		6 21912-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	11/15/201					11:41 AM	11:22 AN	1 11:44 AM	7 21369-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	11/18/201				10:15 AM	10:33 AM	9:59 AN	1 10:41 AM	37 22032-1	Left: Arthrc ORT	Steinberg, . ORT	GA
OR 1	11/18/2019					11:40 AM	11:10 AM	1 11:44 AM	29 12099-4	Right: Arth: ORT	Steinberg, ORT	GA
OR 1	11/18/2019							12:47 PM	31 22104-1	Left: Arthre ORT	Steinberg, . ORT	GA
OR 1 OR 1	11/18/2019				2:00 PM				44 22126-1	Right: Oper ORT	Steinbarg, ORT	GA
OR 1	11/19/2019								9 21979-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	11/19/2019 11/19/2019				8:56 AM				7 22112-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	11/19/2019				9:23 AM	9:40 AM			8 21965-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	11/19/2019				9:55 AM				6 21980-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	11/19/2019					10:33 AM			5 21970-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	11/19/2019				11:13 AM	10:59 AM	10:39 AM 11:07 AM		5 21848-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	11/19/2019								7 21830-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	11/19/2019				1:53 PM	2:38 PM			4 22114-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	11/20/2019				2:22 PM	6:19 PM	1:40 PM		114 22043-2 33 22057-1	Left Repair OPH	Pillar Topal OPH	MAC
OR 1	11/21/2019				9:01 AM	10:18 AM	8:36 AM		44 22005-1	Bilateral Br PLS	Andochick, PLS	GA
OR 1	11/21/2019	10:45 AM				11:23 AM			23 22063-1	Left: Arthrc ORT Right: Arthr ORT	Steinberg, . ORT	GA
OR 1	11/21/2019	12:00 PM	11:50 AM	12:32 PM	12;05 PM	12:19 PM			21 22091-1	Left: Arthre ORT	Steinberg, ORT	GA
OR 1	11/21/2019	1:15 PM	1:39 PM	2:22 PM	1;39 PM	2:10 PM	1:39 PM		76 22068-1	Bilateral Bir OPH	Steinberg, . ORT Henry, J. Cl OPH	GA MAC
OR 1	11/21/2019	2:30 PM	2:29 PM	3:51 PM	2:41 PM	3:41 PM	2:29 PM	3:44 PM	17 22069-1	Blepharopi: OPH	Henry, J. Cl OPH	MAC
OR 1	11/21/2019	3:45 PM	3:58 PM	5:37 PM	4:07 PM	5:24 PM	3:58 PM	5:28 PM	14 22101-1	Bilateral Bl: OPH	Henry, J. Cl OPH	MAC
OR 1	11/22/2019			11:18 AM	9:04 AM	11:04 AM	8:40 AM	11:08 AM	29 22095-1	Bilateral Br PLS	Mecinski, A PLS	GA
OR 1	11/22/2019			12:18 PM	11:41 AM	12:05 PM	11:32 AM	12:58 PM	24 22149-1	Excision MePLS	Mecinski, A PLS	GA
OR 1	11/22/2019			1:39 PM	1:05 PM	1:23 PM	12:48 PM	2:07 PM	20-Jan 22185-1	Excision MaPLS	Mecinski, APLS	MAC
OR 1	11/25/2019			2:49 PM	1:30 PM	2:34 PM	1:07 PM	2:43 PM	132 22211-1	Left: Arthrc ORT	Steinberg, ORT	GA
OR 1	11/26/2019			8:32 AM	8:17 AM	8:29 AM	8:09 AM	8:30 AM	2 16972-4	Right Catar OPH	Thadani, St OPH	MAC
OR 1 OR 1	11/26/2019			8:54 AM	8:40 AM	8:51 AM	8:34 AM	8:52 AM	4 22145-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	11/26/2019			9:15 AM	9:02 AM	9:12 AM	8:56 AM	9;13 AM	4 22143-1	Left Catara: OPH	Thadani, St OPH	MAC
OR 1	11/26/2019 11/26/2019			9:52 AM	9:35 AM	9:48 AM	9:32 AM	9:50 AM	19 22026-2	Left Catara: OPH	Thadani, St OPH	MAC
OR 1	11/26/2019		9:54 AM	10:13 AM	10:03 AM	10:12 AM	9:54 AM	10:13 AM	4 22117-1	Left Catara: OPH	Thadani, St OPH	MAC
OR 1	11/26/2019			10:44 AM 11:12 AM	10:25 AM	10:40 AM	10:17 AM	10:42 AM	4 21967-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	11/26/2019				10:56 AM 11:22 AM	11:06 AM	10:46 AM	11:08 AM	4 19134-2	Left Catarci OPH	Thadani, St. OPH	MAC
OR 1	11/27/2019		TT: T/ CIA)	11.33 AN	12:05 PM		11:17 AM 11:27 AM		9 22007-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	12/2/2019	7:30 AM	7:52 AM	9;40 AM	8;22 AM	9:27 AM	7:52 AM	12:51 PM	16 11703-3	Right Breas PLS	Andochick, PLS	L
OR 1	12/2/2019	9:45 AM	11:38 AM	1:00 PM	12:12 PM	12:49 PM	11:38 AM	9:35 AM 12:52 PM	0 22070-1	Right: Arth: ORT	Steinberg, ORT	GA
OR 1	12/2/2019		1:16 PM	2:02 PM	1:37 PM	1:54 PM	1:16 PM	1:55 PM	123 11958-2 24 19376-3	Left: Arthre ORT	Steinberg, ORT	GA
OR 1	12/2/2019	1:15 PM	2:17 PM	3:48 PM	2;52 PM	3:37 PM	2:17 PM	3:41 PM	22 17289-2	Left: Arthrc ORT Right: Arth: ORT	Steinberg, . ORT	GA
OR 1	12/2/2019	3:30 PM	4:14 PM	4:31 PM	4:17 PM	4:19 PM	4:07 PM	4:24 PM	26 22212-1	Right: Man ORT	Steinberg, . ORT	GA GA
OR 1	12/3/2019	9:00 AM	9:22 AM	10:32 AM		10:26 AM	9:22 AM	10:30 AM	21 22192-1	Left Descer OPH	Steinbarg, . ORT Pillar Topal OPH	GA CA
OR 1	12/3/2019	10:00 AM	10:47 AM	11:42 AM		11:33 AM	10:47 AM	11:39 AM	17 21160-2	Left Pupillo OPH	Pillar Topal OPH	GA MAC
OR 1	12/3/2019	11:00 AM	11:56 AM	1:32 PM	12:06 PM	1:29 PM	11:56 AM	1:30 PM	17 22190-1	Left Deep # OPH	Pillar Topal OPH	GA
OR 1	12/3/2019	12:00 PM	1:39 PM	2:13 PM	1:56 PM	2:10 PM	1:39 PM	2:11 PM	9 22191-1	Right Ptery OPH	Pillar Topal OPH	MAC
OR 1	12/3/2019	1:00 PM	2:23 PM	2:44 PM	2:30 PM	2:40 PM	2:23 PM	2:42 PM	12 22061-2	Right Catar OPH	Pillar Topal OPH	MAC
OR 1	12/3/2019	1:30 PM	2:58 PM	3:52 PM	2:58 PM	3:48 PM	2:58 PM	3:48 PM	16 22194-1	Right Desce OPH	Pillar Topal OPH	GA
OR 1	12/5/2019	8:30 AM	8:34 AM	9:02 AM	8:51 AM	8:58 AM	8:34 AM	9:02 AM	25 21746-2	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 1	12/5/2019	9:15 AM	9:13 AM	9:39 AM	9:28 AM	9:34 AM	9:13 AM	9:39 AM	11 22064-1	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 1	12/5/2019	10:00 AM				10:17 AM	9:48 AM	10:21 AM	9 22013-1	Left: Excisic ORT	Nesbitt Silo ORT	MAC
OR 1	12/5/2019	10:45 AM				11:00 AM	10:32 AM	11:05 AM	11 22120-1	Left: Excisic GEN	Nesbitt Silo ORT	MAC
OR 1	12/5/2019	11:30 AM	11:21 AM		11:38 AM		11:21 AM	12:11 PM	16 21586-2	Left: Remo ORT	Nesbitt Silo ORT	GA
OR 1 OR 1	12/5/2019	12:45 PM	12:26 PM		12:48 PM		12:26 PM	1:53 PM	15 17709-3	Left: Arthrc ORT	Nesbitt Sila ORT	GA
OR 1	12/5/2019 12/6/2019	2:30 PM 8:15 AM	2:06 PM	3:46 PM	2:33 PM	3:42 PM	2:06 PM	3:46 PM	13 22225-1	Left: Open ORT	Nesbitt Silo ORT	GA
OR 1	12/6/2019	9:15 AM	8:13 AM 8:50 AM	8:40 AM 9:35 AM	8:20 AM	8:28 AM	8:13 AM	8:35 AM	17 22030-2	Removal Bt ORT	Mecinski, A PLS	MAC
OR 1	12/6/2019	10:30 AM			9:02 AM	9:19 AM	8:50 AM	9:30 AM	15 22186-1	Excision Ma GEN	Mecinski, A PLS	GA
OR 1	12/6/2019	11:30 AM	10:50 AM		10:03 AM 11:04 AM		9:48 AM		18 22231-1	Debrideme ORT	Mecinski, A PLS	MAC
OR 1	12/6/2019	12:30 PM	TO YOU WIN					11:38 AM	26 20323-3	Excision Mr PLS	Mecinski, A PLS	GA
11	12/9/2019	9:15 AM	9.08 AM		10:18 AM		11:57 AM 9:08 AM	12:16 PM	19 22226-1	Excision Le: PLS	Mecinski, A PLS	L
OR 1		11:00 AM						12:45 PM	11 12148-5	Left: Arthre ORT	Steinberg, . ORT	GA
OR 1	12/9/2019	1:15 PM	1:06 PM	1:41 PM	1:22 PM	1:39 PM	1:06 PM	1:41 PM	21 15625-3 21 22058-1	Right: Arth: ORT	Steinberg, ORT	GA
OR 1	12/9/2019	2:30 PM	2:04 PM	2:22 PM	2:15 PM	2:19 PM	2:04 PM	2:22 PM	23 17901-4	Right: ArthrORT	Steinberg, . ORT	GA
OR 1	12/10/2019	8:00 AM	8:35 AM	8:54 AM	8:40 AM	8:50 AM	8:35 AM	8:52 AM	7 21697-3	Right: Man ORT Right Catar OPH	Steinberg, ORT	GA
OR 1	12/10/2019	8;30 AM	8:59 AM	9:20 AM	9:03 AM	9:17 AM	8:59 AM	9:18 AM	7 21972-2	Right Catar OPH	Thadani, St OPH Thadani, St OPH	MAC
OR 1	12/10/2019	9:00 AM	9:23 AM	9:44 AM	9:28 AM	9:42 AM	9:23 AM	9:43 AM	5 22143-2	Right Catar OPH	Thadani, St OPH	MAC MAC
OR 1	12/10/2019	9:30 AM	9:49 AM	10:07 AM		10:03 AM	9:49 AM		6 22117-2	Right Catar OPH	Thadani, St OPH	
OR 1	12/10/2019							10:55 AM	12 22229-1	Right Ptery, OPH	Thadani, St OPH	MAC MAC
OR 1	12/10/2019			11:22 AM			11:00 AM		5 22230-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1				11:46 AM			11:28 AM		9 22112-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	12/10/2019							12:17 PM	6 22142-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	12/10/2019							12:42 PM	6 21969-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	12/10/2019	1:00 PM	12:49 PM		12:54 PM		12:49 PM	1:07 PM	7 22114-2	Left Catara: OPH	Thadani, St OPH	MAC
OR 1	12/10/2019	1:30 PM	1:27 PM	1:59 PM	1;32 PM	1:55 PM	1:27 PM	1:57 PM	20 20486-2	Left Pterygl OPH	Thadani, St OPH	MAC
OR 1	12/10/2019	2:30 PM	2:05 PM	2:35 PM	2:10 PM	2:31 PM	2:05 PM	2:33 PM	8 22233-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1		12:30 PM	1:25 PM	6:12 PM	2:05 PM	6:04 PM	1:25 PM	6:08 PM	38 20849-2	Right Breas PLS	Andochick, PLS	GA
OR 1	12/12/2019	8:45 AM		10:24 AM		L0:15 AM	9:30 AM	10:20 AM	22 10157-2	Right: Arth: ORT	Steinberg, . ORT	GA
OR 1								11:23 AM	25 13044-2	Left: Arthrc ORT	Steinberg, . ORT	GA
OR 1	12/12/2019	11:15 AM	11:46 AM	1:34 PM 1	L2:12 PM	1:23 PM :	11:46 AM	1:39 PM	23 22277-1	Left: Open ORT	Steinberg, . ORT	GA

OR 1	12/12/2019	4:00 PM	1		4:27 PM	4:42 PM	4:24 PM	4:47 PM	165 22298-1	Repair to Fi ORT	Mecinski, A PLS	L
OR 1	12/13/2019			1 8:43 AM					7 22235-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	12/13/2019								6 22174-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	12/13/2019								6 22116-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	12/13/2019								7 22158-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	12/13/2019								9 22145-2	Left Catara OPH		
OR 1	12/13/2019								7 16705-3	Left Catara OPH	Thadani, St. OPH Thadani, St. OPH	MAC
OR 1	12/13/2019								32 22299-1		•	MAC
OR 1	12/13/2019									Left Catara OPH	Thadani, St OPH	MAC
									24 22292-1	Incision and ORT	Mecinski, A PLS	MAC
OR 1	12/13/2019				1:02 PM				13 22291-1	Incision and ORT	Mecinski, A PLS	MAC
OR 1	12/13/2019						1:36 PM		22 22295-1	Full Thickne PLS	Mecinski, A PLS	MAC
OR 1	12/13/2019	2:15 PM					2:42 PM		21 19476-2	Left: Open ORT	Levine, Mar ORT	BLG
OR 1	12/16/2019	7:30 AM			8:30 AM		7:46 AM		0 20242-3	Right: Arthi ORT	Steinberg, . ORT	GA
OR 1	12/16/2019	9:45 AM					9:59 AM		27 22180-1	Right: Arthi ORT	Steinberg, . ORT	GΑ
OR 1	12/16/2019								25 21833-1	Left: Arthrc ORT	Steinberg, . ORT	GA
OR 1	12/16/2019				1:15 PM				40 22272-1	Right: Arthi ORT	Steinberg, . ORT	GA
OR 1	12/17/2019	8:15 AM			8:17 AM		8:16 AM		6 22100-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	12/17/2019	9;00 AM			8:44 AM		8:39 AM	9:04 AM	5 19854-2	Left Catara: OPH	Thadani, St OPH	MAC
OR 1	12/17/2019	9:30 AM	9:12 AM		9:14 AM		9:12 AM	9:37 AM	8 22052-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	12/17/2019	10:00 AM	9:47 AM		9:52 AM	10:11 AM	9:47 AM	10;12 AM	10 21743-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	12/17/2019	10:30 AM	10:34 AM	11:09 AM	10:41 AM	11:04 AM	10:34 AM	11:05 AM	22 22239-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	12/17/2019	11:00 AM	11:10 AM	11:42 AM	11:14 AM	11:36 AM	11:10 AM	11:37 AM	5 18892-2	Right Catar OPH	Thadani, St. OPH	MAC
OR 1	12/17/2019	11:30 AM	11:44 AM	12:21 PM	11:54 AM	12:16 PM	11:44 AM	12:16 PM	7 22237-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	12/17/2019	12:00 PM	12:22 PM	12:54 PM	12:28 PM	12:48 PM	12:22 PM	12:49 PM	6 22273-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	12/17/2019	12:30 PM	12:55 PM	1:18 PM	1:02 PM	1:12 PM	12:55 PM	1:14 PM	6 22238-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	12/18/2019	8:45 AM	8:48 AM	9:28 AM	9:02 AM	9:20 AM	8:48 AM	9:26 AM	16 22307-1	Flap Closur PLS	Mecinski, A PLS	GA
OR 1	12/18/2019	9:45 AM			9:44 AM	9:48 AM	9;36 AM	9:52 AM	10 22306-1	Biopsy Left GEN	Mecinski, APLS	L
OR 1	12/18/2019	10:45 AM			10:09 AM	10:15 AM	10:01 AM	10:38 AM	9 22220-1	Excision Le: PLS	Mecinski, A PLS	L
OR 1	12/18/2019	11:15 AM			10:43 AM	10:46 AM	10:37 AM	10:49 AM	10 22090-2	Removal PI ORT	Mecinski, A PLS	L
OR 1	12/18/2019	11:45 AM			11:04 AM	11:11 AM	10:57 AM		8 22294-1	Excision Le: ENT	Mecinski, A PLS	L
OR 1	12/18/2019	12:30 PM			11:28 AM	11;40 AM	11:23 AM	11:42 AM	11 15254-3	Wide Excisi PLS	Mecinski, A PLS	L
OR 1	12/18/2019	10:15 AM			12:19 PM	12:30 PM			33 22310-1	Blopsy Mas GEN	Mecinski, A PLS	Ĺ
OR 1	12/19/2019	9:45 AM	9:51 AM	10:31 AM	10:04 AM		9:51 AM		19 11987-2	Left: Arthrc ORT	Steinberg, . ORT	GA
OR 1	12/19/2019	11:00 AM	10:56 AM	11:38 AM	11:08 AM	11:28 AM			31 22270-1	Right: Arthi ORT	Steinberg, . ORT	GA
OR 1	12/19/2019	12:30 PM	12:47 PM	1:37 PM	1:01 PM	1:28 PM		1:32 PM	74 22304-1	Bilateral Bl: OPH	Henry, J. Cr OPH	MAC
OR 1	12/19/2019	2:00 PM	2:22 PM	5:00 PM	2:54 PM	4:49 PM	2:22 PM	4:54 PM	50 22214-1	Excision Pa PLS	Andochick, PLS	GA
OR 1	12/20/2019	9:45 AM	10:10 AM	10:59 AM	10:34 AM	10:58 AM	10:10 AM	10:59 AM	21 21101-3	Scar Revisit PLS	Mecinski, A PLS	
OR 1	12/20/2019	10:00 AM	10:17 AM	10:47 AM	10:22 AM	10:39 AM		10:41 AM	42 14135-3	Right Catar OPH	Thadani, St OPH	GA MAC
OR 1	12/20/2019	10:30 AM	10:49 AM	11:22 AM	11:00 AM	11:16 AM	10:49 AM		8 22243-1	Right Catar OPH	·	
OR 1	12/20/2019	10:45 AM	11:18 AM	12:37 PM	11:36 AM	12:30 PM	11:18 AM		2 22262-1	Replaceme PLS	Thadani, St OPH	MAC
OR 1	12/20/2019	12:30 PM	12:50 PM	1:50 PM	1:06 PM	1:45 PM		1:50 PM	13 22314-1		Mecinski, A PLS	GA
OR 1	12/20/2019	3:45 PM	12.50 1 141	1,30 107	4:14 PM	4:22 PM	4:08 PM	4:28 PM	138 22316-1	Bilateral Br PLS	Mecinski, A PLS	GA
OR 1	12/23/2019	1:00 PM	11:49 AM	12:19 PM	11:57 AM	12:06 PM				Exclsion Let ENT	Mecinski, A PLS	L
OR 1	12/23/2019	1:45 PM	TI'43 MIN	12,13 [14]			11:49 AM	12:11 PM	14 16302-4	Debrideme ORT	Mecinski, A PLS	MAC
			0.17.484	0.40.444	1:30 PM	1:45 PM	1:19 PM	1:49 PM	68 21643-2	Excision Ex PLS	Mecinski, A PLS	Ļ
OR 1	12/27/2019	8:00 AM	8:17 AM	8:40 AM	8:23 AM	8:34 AM	8:17 AM	8:35 AM	8 22326-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	12/27/2019	8:30 AM	8:41 AM	9:07 AM	8:45 AM	9:00 AM	8:41 AM	9:02 AM	6 22327-1	Left Catara OPH	Thadani, St OPH	MAC
OR 1	12/27/2019	9:00 AM	9:11 AM	9:32 AM	9:18 AM	9:26 AM	9:11 AM	9:28 AM	9 22234-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	12/27/2019	9:30 AM	9:33 AM	10;05 AM	9:38 AM	9:58 AM	9:33 AM	10:00 AM	5 22242-2	Left Catara OPH	Thadani, St OPH	MAC
OR 1	12/27/2019	10:00 AM	10:06 AM	10:29 AM	10:10 AM	10:22 AM	10:06 AM	10:23 AM	6 22158-2	Right Catar OPH	Thadani, St OPH	MAC
OR 1	12/27/2019	10:30 AM	10:30 AM	10:51 AM	10:36 AM	10:44 AM	10:30 AM	10:46 AM	7 22325-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	12/27/2019	11:00 AM	10:53 AM	11:19 AM	10:58 AM	11:12 AM	10:53 AM	11:13 AM	7 22317-1	Right Catar OPH	Thadani, St OPH	MAC
OR 1	12/27/2019	1:00 PM	12:55 PM	3:39 PM	1:33 PM		12:55 PM	3:39 PM	102 22337-1	Left: Open ORT	Levine, Ma [,] ORT	GA
OR 1	12/30/2019	3:45 PM	3:59 PM	4:43 PM	4:17 PM	4:34 PM	3:59 PM	4:38 PM	18 22344-1	Left Middle GEN	Mecinski, A PLS	MAC
OR 2	1/3/2019	7:30 AM	7:37 AM	8:15 AM	7:56 AM	8;04 AM	7:37 AM	8:08 AM	0 20390-1	Right: Righi ORT	Nesbitt Silo ORT	MAC
OR 2	1/3/2019	8:30 AM	8:19 AM	9:03 AM	8:34 AM	8;50 AM	8:19 AM	8:56 AM	11 20409-1	Right: Rele: ORT	Nesbitt Silo ORT	MAC
OR 2	1/3/2019	9;30 AM	9;08 AM	9:47 AM	9:26 AM	9:35 AM	9:08 AM	9:40 AM	12 20410-1	Right: Rele: ORT	Nesbitt Silo ORT	MAC
OR 2	1/3/2019	10:30 AM	9:51 AM	10:40 AM	10:08 AM	10:28 AM	9:51 AM	10:33 AM	11 20411-1	Right: Excls OR⊤	Nesbitt Silo ORT	GA
OR 2			10:47 AM	11:25 AM	11:03 AM	11:14 AM	10:47 AM	11:18 AM	14 20391-1	Right; Right ORT	Nesbitt Sila ORT	GA
OR 2	1/3/2019	12:30 PM	11:32 AM	12:08 PM	11:46 AM	11:54 AM	11:32 AM	12:01 PM	14 20392-1	Left: Releas ORT	Nesbitt Sila ORT	MAC
OR 2	1/3/2019	1:30 PM	12:26 PM	1:11 PM	12:44 PM	12:59 PM	12:26 PM	1:04 PM	25 20393-1	Left; Excisic ORT	Nesbitt Sila ORT	MAC
OR 2	1/3/2019	2:30 PM	1:17 PM	1:51 PM	1:33 PM	1:40 PM	1:17 PM	1:44 PM	13 20452-1	Left: Left Ei ORT	Nesbitt Sila ORT	MAC
OR 2	1/3/2019	3:30 PM	1:56 PM	2:31 PM	1:11 PM	2:19 PM	1:56 PM	2:24 PM	12 19793-2	Left: Left E! ORT	Nesbitt Silo ORT	MAC
OR 2	1/7/2019	12:00 PM	12:32 PM		1:28 PM		12:32 PM	2:33 PM	36 11425-2	Right: Arth: ORT	Levine, Ma ⁻ ORT	BLG
OR 2	1/7/2019	2:15 PM	3:05 PM	5:31 PM	3:52 PM	5:03 PM	3:05 PM	5:27 PM	32 19267-2	Right: Arth: ORT	Levine, Mar ORT	BLG
OR 2	1/8/2019	8:30 AM	8:24 AM	8:49 AM	8:37 AM	8:44 AM	8:24 AM	8:49 AM	10 20117-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	1/8/2019	9:30 AM	8:56 AM	9:24 AM	9:10 AM	9:20 AM	8:56 AM	9:24 AM	7 20416-1	Right: Rele: ORT	Nesbitt Sila ORT	MAC
OR 2	1/8/2019	10:30 AM	9:32 AM	9:58 AM	9:46 AM	9:52 AM	9:32 AM	9:59 AM	8 20541-1	Right: Right ORT	Nesbitt Sila ORT	MAC
OR 2	1/8/2019	11:30 AM	10:29 AM	11:21 AM	10:47 AM	11:17 AM	10:29 AM	11:21 AM	30 20417-1	Bilateral: Bi ORT	Nesbitt Sila ORT	MAC
OR 2	1/8/2019	12:30 PM	11:33 AM	12:00 PM	11:48 AM	11:55 AM	11;33 AM	12:00 PM	12 12716-3	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	1/8/2019	1:30 PM	12:14 PM	2;31 PM	12:44 PM	2:25 PM	12:14 PM	2:31 PM	14 20623-1	Left; Open ORT	Nasbitt Silo ORT	GA
OR 2	1/10/2019	8:30 AM	8:15 AM	8:45 AM	8:31 AM	8:57 AM	8:15 AM	8:43 AM	10 18463-2	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	1/10/2019	9:30 AM	8:57 AM	9:33 AM	9:16 AM	9:24 AM	8:57 AM	9:30 AM	14 20424-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	1/10/2019	10:30 AM	9:51 AM	10:22 AM	10:06 AM	10:12 AM	9:51 AM	10:19 AM	21 20425-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	1/10/2019	11:30 AM	11:24 AM				11:24 AM	12:06 PM	65 20453-1	Right: Right ORT	Nesbitt Sila ORT	MAC
OR 2			12:24 PM		12:47 PM		12:24 PM	1:56 PM	18 20427-1	Right: Right ORT	Nesbitt Silo ORT	GA
OR 2	1/10/2019	1:30 PM	2:11 PM		2:36 PM	3:08 PM	2:11 PM	3:18 PM	15 18821-3	Right: Repa ORT	Nesbitt Silo ORT	GA
OR 2	1/10/2019	2:45 PM	3:31 PM	4:32 PM	3:51 PM	4:20 PM	3:31 PM	4:28 PM	13 20631-1	Left: Repair HND	Nesbitt Silo ORT	MAC
OR 2	1/11/2019	9:30 AM		10:21 AM		10:15 AM	9:22 AM	10:15 AM	15 20455-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2					10:44 AM			11:08 AM	10 19615-2	Right: Excls ORT	Nesbitt Silo ORT	GA
OR 2		11:30 AM					11:25 AM	12:00 PM	17 20479-1	Left: Left E: ORT	Nesbitt Silo ORT	MAC
OR 2			12:10 PM	12:51 PM			12:11 PM	12:45 PM	11 20480-1	Left: Exclsic ORT	Nesbitt Silo ORT	MAC
OR 2	1/11/2019	1:30 PM		1:45 PM	1:16 PM	1:32 PM		1:39 PM	14 20498-1	Right: Excis GEN	Nesbitt Sila ORT	
OR 2	1/11/2019	2:30 PM	1:51 PM	2:52 PM	2:09 PM	2:42 PM	1:51 PM	2:46 PM	12 20512-1	Left: Excisic GEN	Nesbitt Sila ORT	MAC
OR 2	1/11/2019	3:30 PM	2:56 PM	3:29 PM	3:13 PM	3:16 PM	2:56 PM	3:23 PM	10 20501-2	Left: Remo ORT		MAC
OR 2	1/14/2019						10:10 AM	12:05 PM	27 20500-1	Right: Arth ORT	Nesbitt Silo ORT	MAC
OR 2		12:00 PM		2:01 PM	1:15 PM		12:32 PM	1:56 PM	27 20500-1 27 20503-1	Right: Arth ORT	Levine, Mar ORT	BLG BLG
. –	_, _ ,						(IV)	141	-,	Butta Artin ONT	Levine, Ma [.] ORT	BLG

OR 2	1/14/201	9 2:15 PN	/ 2:24 PM	1 3:21 PM	2:45 PM	3:16 PM	2,24 55					
OR 2	1/14/201			J.21 F W	4:33 PM	4:57 PM			28 20564-1	Right Knee: ORT	Levine, Mar ORT	GA
OR 2	1/15/2019			9:50 AM		9:37 AM			67 20664-1 15 20274-2	Pinning Lef ORT Right Endo: ORT	Mecinski, APLS	L
OR 2	1/15/2019								12 20428-1	Left: Excisic ORT	Nesbitt Silo ORT	GA
OR 2	1/15/2019	9 10:45 AN	1 10:53 AM						17 13608-3	Left: Releas ORT	Nesbitt Silo ORT Nesbitt Silo ORT	MAC MAC
OR 2	1/15/2019	9 11:45 AM	11:38 AM	12:13 PM					13 14920-4	Left: Releas ORT	Nesbitt Silo ORT	MAC
OR 2	1/15/2019	9 12:45 PM	1 12:27 PM			1:17 PM			17 20632-1	Left: Explor ORT	Nesbitt Silo ORT	GA
OR 2	1/16/2019	9 9:45 AN	1 10:12 AM	12:10 PM		11:49 AM			33 20598-1	Right: Arth ORT	Levine, Mar ORT	BLG
OR 2	1/16/2019	1:30 PM	1 12:56 PM	2:59 PM	1:24 PM	2:28 PM			50 20633-1	Left: Closec ORT	Steinberg, . ORT	GA
OR 2	1/17/2019	9:45 AM	1 8:30 AM	9:05 AM	8:46 AM	8:54 AM	8:30 AM		18 20493-2	Right: Rem ORT	Nesbitt Sila ORT	MAC
OR 2	1/17/2019	9 10:45 AM	9:24 AM	9:57 AM	9:37 AM	9:44 AM	9:24 AM		22 20096-1	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	1/17/2019	12:45 PM	10:07 AM	10:41 AM	10:21 AM	10:28 AM	10:07 AM		16 20474-1	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2	1/17/2019	1:45 PM	1 10:50 AM	12:37 PM	11:21 AM	12:15 PM	10:50 AM		15 20460-1	Left: Left Er ORT	Nesbitt Silo ORT	GA
OR 2	1/17/2019		12:46 PM	1:27 PM	1:04 PM	1:15 PM	12:46 PM		16 10292-2	Left: Left E: ORT	Nesbitt Silo ORT	MAC
OR 2	1/17/2019		1:40 PM	3:14 PM	2:06 PM	2:58 PM	1:40 PM	3:09 PM	20 20668-1	Left: Open ORT	Nesbitt Silo ORT	GA
OR 2	1/18/2019	8:45 AM	9:22 AM	10:49 AM	9:41 AM	10:35 AM	9:22 AM		37 20665-1	Open Redu ORT	Mecinski, A PLS	GA
OR 2	1/18/2019	10:30 AM	11:03 AM	12:04 PM	11:24 AM	11:44 AM	11:03 AM		18 20536-1	Excision Ma PLS	Mecinski, A PLS	MAC
OR 2	1/18/2019	11:45 AM			12:10 PM	12:21 PM	12:06 PM	12:24 PM	6 20669-1	Excision Le: ENT	Mecinski, A PLS	L
OR 2	1/18/2019				12:51 PM	1:11 PM	12:41 PM	1:14 PM	17 20663-1	Excision Ma ORT	Mecinski, A PLS	ī
OR 2	1/22/2019		8:17 AM	8:42 AM	8:30 AM	8:36 AM	8:17 AM	8:42 AM	8 14906-2	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2	1/22/2019		8:49 AM	9:18 AM	9:04 AM	9:14 AM	8:49 AM	9:18 AM	7 20657-1	Left: Left El ORT	Nesbitt Silo ORT	MAC
OR 2	1/22/2019		9:33 AM	10:22 AM	9:48 AM	10:13 AM	9;33 AM	10:22 AM	15 19881-2	Left: Remo ORT	Nesbitt Silo ORT	GA
OR 2	1/22/2019		10:38 AM	11:28 AM	11:04 AM	11:21 AM	10:38 AM	11:28 AM	16 20430-1	Right; Debr ORT	Nesbitt Silo ORT	MAC
OR 2	1/22/2019		11:44 AM	12:12 PM	12:01 PM	12:06 PM	11:44 AM	12:12 PM	16 20482-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	1/22/2019		12:24 PM	1:05 PM	12:43 PM	12:59 PM	12:24 PM	1:05 PM	12 20543-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	1/22/2019		1:15 PM	1:42 PM	1:29 PM	1:37 PM	1:15 PM	1:42 PM	10 20635-1	Right: Right ORT	Nesbitt Sila ORT	MAC
OR 2	1/22/2019		1:49 PM	3:05 PM	2:09 PM	2:56 PM	1:49 PM	3:05 PM	7 15837-2	Right; Subt HND	Nesbitt Silo ORT	GA
OR 2	1/23/2019		10:14 AM	12:09 PM	10:55 AM	11:48 AM	10:14 AM	12:05 PM	26 20577-1	Right: Arthi ORT	Levine, Ma [,] ORT	BLG
OR 2	1/24/2019			9:26 AM	8:46 AM	9:16 AM	8:30 AM	9;24 AM	14 14786-4	Right: Revis ORT	Nesbitt Silo ORT	GA
OR 2	1/24/2019		9:33 AM	10:49 AM	9:56 AM	10:34 AM	9:33 AM	10:47 AM	9 20459-1	Right: Right ORT	Nesbitt Silo ORT	GA
OR 2	1/24/2019		11:05 AM	12:09 PM	11:29 AM	12:01 PM	11:05 AM	12:08 PM	18 20483-1	Bilateral: Bi ORT	Nesbitt Silo ORT	MAC
OR 2	1/24/2019		12:17 PM	12:52 PM	12:36 PM	12:43 PM	12:17 PM	12;50 PM	9 20464-1	Left: Excisic ORT	Nesbitt Silo ORT	MAC
OR 2	1/24/2019		1:02 PM	1:36 PM	1:19 PM	1:28 PM	1:02 PM	1:34 PM	12 20504-1	Left: Left E≀ORT	Nesbitt Silo ORT	MAC
OR 2	1/24/2019		1:42 PM	2:14 PM	1:56 PM	2:04 PM	1:42 PM	2:12 PM	8 20484-1	Left: Left Er ORT	Nesbitt Silo ORT	GA
OR 2	1/25/2019	8:45 AM			8:19 AM	8:49 AM	8:14 AM	8:51 AM	22 20688-1	Excision Ba ENT	Mecinski, A PLS	L
OR 2	1/25/2019	10:00 AM			9:28 AM	9:39 AM	9:24 AM	9:44 AM	33 20694-1	Excision Le: ENT	Mecinski, A PLS	ī
OR 2	1/28/2019	9:45 AM	9:43 AM	11:36 AM	10:37 AM	11:19 AM	9:43 AM	11:31 AM	12 20545-1	Right: Arthi ORT	Levine, Ma ORT	BLG
OR 2	1/28/2019	12:00 PM	11:51 AM	1:40 PM	12:36 PM	1:15 PM	11:51 AM	1:35 PM	20 18302-3	Right Shoul ORT	Levine, Ma ORT	BLG
OR 2	1/28/2019	2:15 PM	2:09 PM	4:07 PM	2:49 PM	3:35 PM	2:09 PM	4:02 PM	34 20578-1	Right: Arthi ORT	Levine, Ma ORT	BLG
OR 2	1/29/2019	MA 08:8	8:18 AM	8:47 AM	8:31 AM	8:41 AM	8:18 AM	8:47 AM	13 18801-3	Right: Excis GEN	Nesbitt 5ilo ORT	MAC
OR 2	1/29/2019	9:30 AM	8:58 AM	9:25 AM	9:12 AM	9:19 AM	8:58 AM	9:25 AM	11 20636-1	Right: Righi ORT	Nesbitt Silo ORT	MAC
OR 2	1/29/2019	10:30 AM	9:35 AM	10:02 AM	9:49 AM	9:55 AM	9:35 AM	10:02 AM	10 20233-2	Right: Right ORT	Nesbitt Siia ORT	MAC
OR 2	1/29/2019	11:30 AM	10:22 AM	10;52 AM	10:36 AM	10:44 AM	10:22 AM	10:52 AM	20 20513-1	Left: Excisic ORT	Nesbitt Silo ORT	MAC
OR 2	1/29/2019	12:30 PM	11:04 AM	11:35 AM	11:20 AM	11:29 AM	11:04 AM	11:35 AM	12 20549-1	Left: Excisic ORT	Nesbitt Silo ORT	MAC
OR 2	1/29/2019	1:30 PM	12:03 PM	1:17 PM	12:21 PM	1:10 PM	12:03 PM	1:17 PM	28 20431-1	Left: Subto HND	Nesbitt Silo ORT	GA
OR 2	1/29/2019	2:45 PM			1:47 PM	2:00 PM	1:29 PM	2:03 PM	12 20518-1	Right: Excis ORT	Nesbitt Silo ORT	L
OR 2	1/30/2019	2:30 PM			3:45 PM	4:16 PM	3:38 PM	4:20 PM	111 20733-1	Excision Ma PLS	Mecinski, A PLS	Ĺ
OR 2	1/31/2019	8:30 AM	8:06 AM	8:37 AM	8:18 AM	8:26 AM	8:06 AM	8:31 AM	10 20010-3	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	1/31/2019	9:30 AM	8:43 AM	9;15 AM	8:54 AM	9:02 AM	8:43 AM	9:08 AM	12 19131-2	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	1/31/2019	10:30 AM	9:18 AM	10:06 AM	9:36 AM	9:51 AM	9;18 AM	10:01 AM	10 19293-2	Left: Exclsic ORT	Nesbitt Silo ORT	GA
OR 2	1/31/2019	11:30 AM	10:12 AM	11:30 AM	10:33 AM	11:13 AM	10:12 AM	11:23 AM	11 20552-1	Left: Left U ORT	Nesbitt Silo ORT	GA
OR 2	1/31/2019	12:30 PM	11:34 AM	12:44 PM	11:56 AM	12:35 PM	11:34 AM	12:40 PM	11 20583-1	Left: Left El ORT	Nesbitt Silo ORT	GA
OR 2	1/31/2019	1:45 PM	12:52 PM	1:26 PM	1:06 PM	1:15 PM	12:52 PM	1:20 PM	12 20474-2	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	1/31/2019	2:45 PM	1:30 PM	2:02 PM	1:43 PM	1:51 PM	1:30 PM	1:55 PM	10 18902-2	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	1/31/2019	3:45 PM	3:42 PM	6:51 PM	4:20 PM	6:28 PM	3:42 PM	6:45 PM	107 20724-1	Left: Open ORT	Gupta, Rish ORT	GA
OR 2	2/1/2019	8:00 AM	7:40 AM	9:12 AM	8:01 AM	8:55 AM	7:39 AM	9:07 AM	5 20547-1	Left: Left U ORT	Nesbitt Silo ORT	GA
OR 2	2/1/2019	9:00 AM	9:16 AM	9:50 AM	9:29 AM	9:39 AM	9:16 AM	9:45 AM	9 20546-1	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2	2/1/2019	10:00 AM		10:28 AM	10:11 AM	10:17 AM	9:54 AM	10:23 AM	9 20531-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	2/1/2019	11:00 AM	10:30 AM	11:04 AM	10:45 AM	10:53 AM	10:30 AM	10:58 AM	7 20725-1	Right: Righi ORT	Nesbitt Silo ORT	MAC
OR 2	2/1/2019	12:00 PM				12:36 PM	11:14 AM	12:44 PM	16 19559-2	Right: Arthi ORT	Nesbitt Silo ORT	GA
OR 2	2/4/2019	9:45 AM						11:47 AM	26 20570-1	Right: Arth ORT	Levine, Ma [.] ORT	BLG
OR 2	2/4/2019	12:00 PM	12:18 PM	1:54 PM	1:02 PM		12:18 PM	1:48 PM	31 20571-1	Left Should ORT	Levine, Ma [.] ORT	GA
OR 2	2/4/2019	2:15 PM	2:30 PM	4:10 PM	3:04 PM	3:54 PM	2:30 PM	4:05 PM	42 14862-3	Left: Arthrc ORT	Levine, Mar ORT	BLG
OR 2	2/6/2019	9:45 AM	10:26 AM			12:15 PM	10:26 AM	12:29 PM	26 16250-3	Right: Arthi ORT	Levine, Mar ORT	BLG
OR 2	2/6/2019	12:00 PM	12:53 PM	1:47 PM	1:09 PM	1:38 PM	12:57 PM	1:45 PM	28 20770-1	Repair Digital Nerve Le	Mecinski, APLS	GA
OR 2	2/11/2019	9:45 AM				11:49 AM	10:17 AM	11:59 AM	34 10061-2	Left Should ORT	Levine, Mar ORT	BLG
OR 2	2/11/2019	12:00 PM	12:56 PM	2:43 PM	1:29 PM		12:56 PM	2:40 PM	57 20343-1	Right: Arthi ORT	Levine, Mar ORT	BLG
OR 2	2/11/2019	2:15 PM	3:05 PM	3:25 PM	3:09 PM	3:15 PM	3:05 PM	3:22 PM	25 20672-1	Left Should ORT	Levine, Ma ⁻ ORT	GA
OR 2	2/11/2019	3:00 PM	4:01 PM	5:47 PM	4:23 PM	5:20 PM	4:01 PM	5:27 PM	39 20766-1	Left Radius ORT	Levine, Ma ⁻ ORT	GA
OR 2	2/15/2019	11:00 AM			11:03 AM	11:12 AM	10;43 AM	11:19 AM	35 20794-1	Left Little F ORT	Mecinski, A PLS	GA
OR 2	2/18/2019	9:45 AM	9:54 AM	11:19 AM	10:35 AM	11;04 AM	9:54 AM	11:16 AM	20 15583-3	Left: Arthrc ORT	Levine, Mar ORT	BLG
OR 2	2/19/2019	9:15 AM	8:39 AM	9:11 AM	8:54 AM	9:02 AM	8:39 AM	9:07 AM	14 20463-1	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2	2/19/2019	10:15 AM	9:23 AM	9:54 AM	9:38 AM	9:44 AM	9:23 AM	9:51 AM	16 20233-3	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2	2/19/2019	11:15 AM					10:03 AM	10:41 AM	12 20462-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	2/19/2019	12:15 PM			11:12 AM :	11:26 AM	10:54 AM	11:28 AM	13 20532-1	Right: Excis ORT	Nesbitt Silo ORT	MAC
OR 2	2/21/2019	8:30 AM	8:16 AM	8:45 AM	8:29 AM	8:38 AM	8:16 AM	8:43 AM	15 20713-1	Right: Rele: ORT	Nesbitt Silo ORT	MAC
OR 2	2/21/2019	9:30 AM	8:55 AM	9:29 AM	9:11 AM	9:22 AM	8:55 AM	9;27 AM	12 20410-2	Left: Releas ORT	Nesbitt Silo ORT	MAC
OR 2		10:30 AM	9:58 AM	11:19 AM	10:26 AM	11:04 AM	9:58 AM	11:17 AM	31 20742-1	Left: Left El ORT	Nesbitt Silo ORT	GA
OR 2	2/21/2019		11:32 AM	12:57 PM :	L1:56 AM :	12:45 PM	11:32 AM		15 17351-2	Left: Subto HND	Nesbitt Sila ORT	GA
OR 2	2/22/2019	9:15 AM			9:48 AM 3	10:01 AM	9:44 AM	10:08 AM	25 20665-2	Pin Remova ORT	Mecinski, A PLS	L
OR 2	2/22/2019			3	L0:36 AM 3	10:42 AM		10:48 AM	25 20821-1	Repair Righ HND	Mecinski, APLS	L
OR 2	2/25/2019	9:45 AM	9:53 AM	11:43 AM	L0:31 AM 3	11:30 AM	9:53 AM			Left: Arthrc ORT	Levine, Mar ORT	BLG
OR 2	2/26/2019	8:30 AM	8:33 AM	9:09 AM	8:52 AM	9:00 AM	8:33 AM	9:07 AM			Nesbitt Silo ORT	MAC
OR 2	2/26/2019	9:30 AM	9:22 AM	9:52 AM	9:36 AM	9:44 AM	9:22 AM	9:49 AM		-	Nesbitt Silo ORT	MAC
OR 2	2/26/2019						10:01 AM	11:28 AM		-	Nesbitt Silo ORT	MAC
OR 2	2/26/2019	11:45 AM	11:43 AM	12:30 PM 1	L2:01 PM 1	12:21 PM :	11:43 AM	12:27 PM			Nesbitt Silo ORT	MAC

OR 2	2/26/2019	12:45 PM	12:42 PM	2:20 PM	1:06 PM	2:08 PM	12:47 PM	2:16 PM	20 20105-1	Right: Subt-HND	Nasbitt Silo ORT	GΑ
OR 2	2/26/2019	2:00 PM	2:30 PM	3:43 PM	2:51 PM	3:28 PM	2:30 PM	3;39 PM	14 18458-2	Right: Expk ORT	Nesbitt Silo ORT	GA
OR 2	2/28/2019	8:30 AM	8:10 AM	8;41 AM	8:26 AM	8:31 AM	8:10 AM	8:37 AM	10 20546-2	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	2/28/2019	9:30 AM	8:50 AM	9:23 AM	9:05 AM	9:15 AM	8:50 AM	9:19 AM	13 20638-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	2/28/2019	10:30 AM	9:27 AM	9:59 AM	9:42 AM	9:49 AM	9:27 AM	9:55 AM	8 20557-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	2/28/2019	2:30 PM	10:07 AM	10:36 AM	10:21 AM		10:07 AM		12 20556-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	2/28/2019	11:30 AM	10:47 AM	11:16 AM	11:00 AM		10:47 AM		15 20585-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	2/28/2019	12:30 PM	11:21 AM	11:55 AM	11:37 AM		11:21 AM		8 20586-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	2/28/2019	1:30 PM	12:25 PM	12:57 PM	12:39 PM	12:47 PM	12:25 PM	12:52 PM	35 20010-4	Right: Right ORT	Nesbitt Sila ORT	MAC
OR 2	3/1/2019	8:30 AM	8:24 AM	9:02 AM	8:38 AM	8:53 AM	8:26 AM	8:57 AM	22 20293-1	Left: Left O ORT	Nesbitt Sila ORT	MAC
		9:30 AM					9:10 AM		13 17984-2			
OR 2	3/1/2019		9:10 AM	9:42 AM	9:26 AM	9:33 AM		9:37 AM 10:17 AM	13 20640-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	3/1/2019	10:30 AM	9:50 AM	10:22 AM		10:15 AM	9:50 AM			Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	3/1/2019	11:30 AM	10:31 AM	11:12 AM	10:45 AM		10:31 AM	11:07 AM	14 20639-1	Left: Left O ORT	Nesbitt Silo ORT	MAC
OR 2	3/1/2019	12:30 PM	11:36 AM	1:08 PM	11:58 AM		11:28 AM	1:03 PM	21 20641-1	Right: Arth: ORT	Nesbitt Silo ORT	GA
OR 2	3/1/2019	2:45 PM	1:26 PM	2:46 PM	1:56 PM	2:33 PM	1:26 PM	2:41 PM	23 20838-1	Left Hand: • ORT	Nesbitt Silo ORT	GΑ
OR 2	3/4/2019	9:15 AM	9:07 AM	10:53 AM	9:45 AM	10:34 AM	9:07 AM	10:48 AM	34 20790-1	Left: Arthrc ORT	Levine, Ma ⁻ ORT	BLG
OR 2	3/4/2019	11:30 AM	11:09 AM	2:00 PM	11:47 AM	1:41 PM	11:09 AM	1:55 PM	21 20791-1	Left Knee: / ORT	Levine, Ma [.] ORT	GA
OR 2	3/4/2019	1:45 PM	2:26 PM	4:33 PM	3:07 PM	4:11 PM	2:26 PM	4:28 PM	31 20811-1	Right: Arthi ORT	Levine, Ma [.] ORT	BLG
OR 2	3/5/2019	8:30 AM	8:13 AM	8:48 AM	8:26 AM	8:44 AM	8:13 AM	8:48 AM	13 20605-1	Left: Releas ORT	Nesbitt Sllo ORT	MAC
OR 2	3/5/2019	9:30 AM	9:02 AM	9:28 AM	9:15 AM	9:24 AM	9:02 AM	9:28 AM	14 20606-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	3/5/2019	10:30 AM	9:41 AM	10:09 AM	9:56 AM	10:05 AM	9:41 AM	10:09 AM	13 20573-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	3/5/2019	11:30 AM	10:19 AM	11:01 AM	10:34 AM	10:53 AM	10:19 AM	11:01 AM	10 20683-1	Right: Repa HND	Nesbitt Silo ORT	MAC
OR 2	3/5/2019	12:30 PM	11:32 AM	12:51 PM	12:03 PM	12:45 PM	11:32 AM	12:51 PM	31 20871-1	Right: Righi ORT	Nesbitt Silo ORT	GA
OR 2	3/5/2019	2:15 PM	1:11 PM	1:54 PM	1:26 PM	1:46 PM	1:11 PM	1:54 PM	20 20457-2	Right: Irriga ORT	Nesbitt Silo ORT	GA
OR 2	3/6/2019	9:45 AM	10:04 AM	12:00 PM	10:41 AM	11:43 AM	10:04 AM	11:54 AM	29 15438-3	Right: Arthi ORT	Levine, Ma ORT	BLG
OR 2	3/7/2019	8:30 AM	8:15 AM	9:09 AM	8:33 AM	8:52 AM	8:15 AM	9:04 AM	11 20591-1	Right: Excis GEN	Nesbitt Sila ORT	MAC
OR 2	3/7/2019	9:30 AM	9:17 AM	9:51 AM	9:34 AM	9:42 AM	9:17 AM	9:47 AM	13 20590-1	Right: Right ORT	Nesbitt Silo ORT	
OR 2	3/7/2019	10:30 AM	10:00 AM	10:50 AM	10:20 AM	10:38 AM	10:00 AM		13 20592-1			MAC
				11:39 AM				10:46 AM		Right: Excis GEN	Nesbitt Silo ORT	GA
OR 2	3/7/2019	11:45 AM	11:02 AM		11:18 AM	11:26 AM	11:02 AM	11:31 AM	16 20608-1	Left: Left E: ORT	Nesbitt Silo ORT	MAC
OR 2	3/7/2019	12:45 PM	11:20 AM	12:24 PM	12:06 PM	12:14 PM	11:51 AM		20 15349-1	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	3/7/2019	1:45 PM	12;37 PM	2;20 PM	12:56 PM	1:32 PM	12:37 PM	1:38 PM	18 20609-1	Left: Explor ORT	Nesbitt Silo ORT	GA
OR 2	3/7/2019	4:45 PM	1:54 PM	3:18 PM	2:22 PM	2;52 PM	1:54 PM	3:13 PM	16 20880-1	Left: Open ORT	Nesbitt Silo ORT	GA
OR 2	3/7/2019	3:30 PM	3:31 PM	4:59 PM	3:57 PM	4:40 PM	3:31 PM	4:51 PM	18 20879-1	Right: Oper ORT	Nesbitt Silo ORT	GΑ
OR 2	3/8/2019	11:45 AM	11:24 AM	12:09 PM	11:38 AM	11:56 AM	11:23 AM	12:04 PM	18 20796-1	Excision M: GEN	MecInski, A PLS	GA
OR 2	3/8/2019	1:00 PM	12:43 PM	1:21 PM	12:52 PM	1:09 PM	12:43 PM	1:16 PM	39 20851-1	Excision M: ENT	Mecinski, A PLS	MAC
OR 2	3/8/2019	2;00 PM	1:31 PM	2:06 PM	1:47 PM	1:54 PM	1:32 PM	2:01 PM	16 20323-2	Excision Le: ENT	Mecinski, A PLS	MAC
OR 2	3/8/2019	2:45 PM			2:22 PM	2:32 PM	2:19 PM	2:36 PM	18 20903-1	Excision Ma PLS	Mecinski, A PLS	L
OR 2	3/12/2019	8:30 AM	8:19 AM	9:00 AM	8;37 AM	8:50 AM	8:19 AM	8:53 AM	16 20659-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	3/12/2019	9:30 AM	9:10 AM	10:44 AM	9;44 AM	10:35 AM	9:10 AM	10:38 AM	17 15142-2	Right: Arth ORT	Nesbitt Silo ORT	GA
OR 2	3/12/2019	11:15 AM	10:55 AM	12:35 PM	11:27 AM	12:25 PM	10:55 AM	12:28 PM	17 20674-1	Right: Arth ORT	Nesbitt Silo ORT	GA
OR 2	3/12/2019	1:00 PM	12:51 PM	2:22 PM	1:11 PM	2:10 PM	12:51 PM	2:15 PM	23 18692-2	Left: Subto HND	Nesbitt Sila ORT	GA
OR 2	3/12/2019	2:45 PM			2:46 PM	2:57 PM	2:29 PM	3:01 PM	14 20642-1	Left: Excisic GEN	Nesbitt Sila ORT	L
OR 2	3/13/2019	8:45 AM	8:48 AM	10:09 AM	9:08 AM	9:54 AM	8:48 AM	10:04 AM	21 20248-3	Right Capst PLS	Mecinski, A PLS	GA.
OR 2	3/13/2019	10:30 AM	10:21 AM	10:57 AM	10:34 AM	10:48 AM	10:20 AM	10:52 AM	16 20750-2	Removal BLORT	Mecinski, A PLS	MAC
OR 2	3/13/2019	11:30 AM	11:09 AM	11:46 AM	11:18 AM	11:35 AM	11:09 AM		17 10765-6	Excision Ma PLS	Mecinski, APLS	
OR 2	3/14/2019	8:30 AM	8:24 AM	8:51 AM	8:38 AM	8:46 AM	8:24 AM	8:49 AM	18 20644-1		•	MAC
	3/14/2019	9:30 AM	9:07 AM	9:31 AM	9:20 AM	9:28 AM	9:07 AM			Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2								9:29 AM	18 20646-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2		10:30 AM	9;49 AM	10:17 AM		10:11 AM	9:49 AM	10:14 AM	20 20667-1	Right: Righi ORT	Nesbitt Silo ORT	MAC
OR 2		11;30 AM	10:30 AM	10:54 AM	10:42 AM		10:30 AM	10:52 AM	16 20735-1	Right: Righi ORT	Nesbitt Silo ORT	MAC
OR 2	3/14/2019	12:30 PM	11:09 AM	12:20 PM	11:31 AM	12:10 PM	11:09 AM	12:18 PM	17 15498-2	Left: Micro: HND	Nesbitt Silo ORT	GA
OR 2	3/14/2019	1:45 PM	12:40 PM	2:15 PM	1:10 PM	2:04 PM	12:40 PM	2:12 PM	22 20923-1	Right: Oper ORT	Nesbitt Silo ORT	GA
OR 2	3/15/2019	9:30 AM	9;23 AM	9:55 AM	9:36 AM	9:44 AM	9:23 AM	9:47 AM	18 19505-1	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	1. 1.		10:07 AM	10:41 AM	10:22 AM	10:31 AM	10:07 AM	10:35 AM	20 20692-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	3/15/2019	11:30 AM	10:55 AM	11:57 AM	11:16 AM	11:39 AM	10:55 AM	11:49 AM	20 20703-1	Left: Excisic ORT	Nesbitt Sila ORT	GA
OR 2	3/15/2019	12:30 PM	12:08 PM	12:41 PM				12:35 PM	19 20684-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	3/18/2019		10:06 AM	1:06 PM	10:40 AM	12:50 PM	10:06 AM	1:02 PM	26 20860-1	Left: Arthrc ORT	Levine, Ma ORT	BLG
OR 2	3/18/2019	12:00 PM	1:27 PM	3:06 PM	2:05 PM	2:48 PM	1:27 PM	3:02 PM	25 20822-1	Left: Arthrc ORT	Levine, Ma ORT	BLG
OR 2	3/18/2019	2:15 PM	3:21 PM	4:07 PM	3:40 PM	3:56 PM	3:21 PM	4:03 PM	19 20847-1	Right Knee; ORT	Levine, Ma ORT	GA
OR 2	3/19/2019	10:00 AM	10:25 AM	10:55 AM	10:39 AM	10:46 AM	10:25 AM	10:52 AM	13 20921-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	3/19/2019	11:00 AM	11:03 AM	11:55 AM	11:23 AM	11:45 AM	11:03 AM	11:52 AM	11 20610-1	Right: Excls GEN	Nesbitt Silo ORT	GA
OR 2	3/19/2019	12:00 PM	12:05 PM	1:22 PM	12:27 PM	1:10 PM	12:05 PM	1:19 PM	13 16120-4	Right: Right ORT	Nesbitt Silo ORT	GA
OR 2	3/19/2019	1:15 PM	1:36 PM	2:55 PM	2:05 PM	2:47 PM	1:36 PM	2:52 PM	17 15075-2	Left: Excisic HND	Nesbitt Silo ORT	GA
OR 2	3/19/2019	2:30 PM	3:08 PM	4:58 PM	3:43 PM	4:41 PM	3:08 PM	4:53 PM	16 20345-2	Left: Arthro ORT	Nesbitt Silo ORT	GA
OR 2	3/21/2019	8:30 AM	8:23 AM		8:38 AM	8:48 AM	8:23 AM	8:53 AM	15 20611-1	Left: Releas ORT	Nesbitt Silo ORT	MAC
OR 2	3/21/2019	9:30 AM	9:09 AM	9:42 AM	9:24 AM	9:29 AM	9:09 AM	9:35 AM	16 20618-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2		10:30 AM	9:48 AM	10:21 AM	9:56 AM	10:09 AM		10:14 AM	13 20033-2	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2							11:18 AM					
OR 2				12:55 PM	12:36 PM			12:48 PM	64 14148-1 20 20897-1	Left: Excisic ORT	Nasbitt Sila ORT	MAC
OR 2	3/21/2019	1:30 PM	12:14 PIVI 12:58 PM	1:31 PM	1:19 PM		12:14 PM	1:24 PM		Right: Excls GEN	Nesbitt Sila ORT	MAC
									10 20612-1	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	3/21/2019	2:30 PM	1:44 PM	2:27 PM	1:58 PM	2:23 PM	1:44 PM	2:20 PM	20 20613-1	Left: Excisic ORT	Nesbitt Silo ORT	MAC
OR 2	3/21/2019	3;30 PM	2:34 PM	3:26 PM	3:00 PM	3:08 PM	2:34 PM	3:29 PM	14 20965-1	Right: Close ORT	Nesbitt Silo ORT	GA
OR 2	3/22/2019	8:00 AM		10:12 AM	8:40 AM	10:01 AM		10:09 AM	19 20816-1	Bilateral Se PLS	Mecinski, A PLS	GA
OR 2	3/22/2019					10:56 AM			20 20945-1	Debrideme ORT	Mecinski, A PLS	MAC
OR 2	3/22/2019							12:05 PM	19 20370-4	Removal of ORT	Macinski, A PLS	GA
OR 2			12:18 PM		12:41 PM		12:18 PM	1:16 PM	13 20953-1	Open Redu ORT	Mecinski, A PLS	GA
OR 2	3/22/2019	1:15 PM	1:35 PM	2:10 PM	1:47 PM	2:01 PM	1:35 PM	2:06 PM	19 20967-1	Removal Ri PLS	Mecinski, APLS	MAC
OR 2	3/22/2019	2:00 PM	2:19 PM	2:53 PM	2:31 PM	2:44 PM	2:19 PM	2:50 PM	13 20968-1	Flap Closur ENT	Mecinski, A PLS	MAC
OR 2	3/22/2019	2:45 PM			3:16 PM	3:21 PM	2:58 PM	3:22 PM	8 20775-2	Removal PI ORT	Mecinski, A PLS	L
OR 2	3/22/2019	3:15 PM			3:47 PM	3:59 PM	3:30 PM	4:02 PM	8 18550-2	Debrideme ORT	Mecinski, APLS	L
OR 2	3/25/2019	10:00 AM	11:02 AM	1:02 PM	11:45 AM		11:02 AM	1:02 PM	114 17242-2	Right: Arthi ORT	Levine, Mar ORT	BLG
OR 2	3/26/2019	8:30 AM	8:08 AM	8:31 AM	8:20 AM	8:28 AM	8:08 AM	8:31 AM	11 19586-2	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	3/26/2019	9:30 AM	8:41 AM	9:04 AM	8:54 AM	9:00 AM	8:41 AM	9:04 AM	10 20648-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	3/26/2019		9:14 AM	9:40 AM	9:28 AM	9:36 AM	9:14 AM	9:40 AM	10 18389-3	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2	3/26/2019		9:52 AM			10:18 AM		10:22 AM	12 20684-2	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2								10:57 AM	9 20906-1	Left: Left Er ORT		
OR 2	3/26/2019			11:53 AM					32 20619-1	Left: Left Er ORT	Nesbitt Silo ORT	MAC
	2, 20, 2013	2.30 / 191						-2-35 MM	25 50013-I	SOLUTION LICENTA	Nesbitt Silo ORT	MAC

OR 2	0/00/004												
	3/26/201			И 1:11 PN	4 12:29 PM	1:05 PM	12:09 PM	1 1:11 PM	1	6 16458-2	Left: Left Er ORT	Nesbitt 51fo ORT	GA
OR 2	3/27/201	1A 0E:8 P.	VI		8:52 AM	8:56 AM	8:50 AN	MA 80;0 N	1	2 20978-1	Excision Le: PLS	Mecinski, A PLS	L
OR 2	3/27/201	.9 9:30 Ar	M		9:32 AM	9:46 AM				2 20994-1			
OR 2	3/27/201		И 11:21 AN	И 12:18 PM							Drain Hemi PLS	Mecinski, APLS	L
OR 2								12:13 PM	9	1 19449-3	Debrideme ORT	Mecinski, APLS	GA
	3/27/201					2:07 PM	12:47 PM	1 2:15 PM	3	4 20957-1	Right; Right ORT	Walsh, Cor ORT	GA
OR 2	3/28/201	9 8:30 AM	/ 8:28 A∧	A 9:08 AN	1 8:47 AM	9:05 AM	8:28 AM	9:08 AM	1	4 20658-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	3/28/201	9 9:30 AN	/ 9:21 AN	4 10:00 AN	9:36 AM	9:51 AM				3 20705-1			
OR 2	3/28/201	9 10:30 AN									Right: Excis GEN	Nesbitt Silo ORT	GA
OR 2									1	2 20649-1	Right: Revi: ORT	Nesbitt Sila ORT	GA
	3/28/201					11:29 AM	11:03 AM	1 11:33 AM	10	20607-2	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	3/28/201	9 12:30 PN	4 11:45 AN	4 12:11 PM	1 11:58 AM	12:07 PM	11:45 AV	12:11 PM	1	2 20660-1	Left: Releas ORT	Nesbitt Silo ORT	
OR 2	3/28/201	9 1:30 PN	4 12:32 PM	4 1:01 PM									MAC
OR 2	3/28/2019									1 20707-1	Left: Left Ei ORT	Nesbitt 5ilo ORT	MAC
						2:23 PM	1:20 PM	2:29 PM	1	20996-1	Right: Oper ORT	Nesbitt Sila ORT	GΑ
OR 2	3/29/2019			1 11:16 AM	10:48 AM	11.04 AM	10:32 AM	11:13 AM	19	20995-1	Repair Exte HND	Mecinski, APLS	GA
OR 2	3/29/2019	9 11:30 AN	1		11:35 AM	11:45 AM	11:29 AM	11:47 AM		20962-1	Excision Ca ENT		
OR 2	3/29/2019	9 12:45 PM	1		12:21 PM							Mecinski, A PLS	L
OR 2						12:26 PM			29	20818-2	Removal Pi ORT	Mecinski, A PLS	L
	3/29/2019				1:10 PM	1:19 PM	1:05 PM	1:22 PM	33	3 21004-1	Repair Left GEN	Mecinski, A PLS	L
OR 2	4/1/2019	9:45 AM	1 10:34 AM	1 12:43 PM	11:15 AM	12:22 PM	10:34 AM	12:38 PM	43	20856-1	Left: Arthrc ORT	Levine, Mar ORT	BLG
OR 2	4/1/2019	12:00 PM	1:07 PM	1 2:33 PM	1:32 PM	2:22 PM	1:07 PM			20992-1			
OR 2	4/2/2019				,						Right: Dista ORT	Levine, Mar ORT	GA
						8:45 AM	8:23 AM	8:49 AM	11	20650-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	4/2/2019		9:00 AM	1 9:49 AM	9:20 AM	9:34 AM	9:00 AM	9:44 AM	11	21021-1	Right Close ORT	Nesbitt Silo ORT	GA
OR 2	4/2/2019	10:15 AM	9:54 AM	10:35 AM	10:11 AM	10:25 AM	9:54 AM	10;30 AM		20605-2	Right; Rele: ORT		
OR 2	4/2/2019	11:00 AM	10:41 AM									Nesbitt Silo ORT	MAC
OR 2						11:13 AM			11	. 20277-2	Right: Excis ORT	Nesbitt Silo ORT	MAC
	4/2/2019				11:46 AM	11:54 AM	11:31 AM	12:00 PM	11	20704-2	Left: Left Er ORT	Nesbitt Sila ORT	MAC
OR 2	4/2/2019	12:30 PM	12:10 PM	12:46 PM	12:23 PM	12:38 PM	12:10 PM	12:41 PM	10	15520-2	Left: Left Er ORT	Nesbitt Silo ORT	
OR 2	4/2/2019	1:15 PM	12:49 PM	2:48 PM	1:21 PM	2:33 PM		2:43 PM					MAC
OR 2	4/3/2019									20719-1	Left: Arthrc ORT	Nesbitt Silo ORT	GΑ
	-					1:52 PM	1:10 PM	1:59 PM	24	20786-2	Debrideme ORT	Mecinski, A PLS	MAC
OR 2	4/4/2019		8:03 AM	8:36 AM	8:15 AM	8:31 AM	8:03 AM	8:36 AM	9	20723-1	Right: Excis ORT	Nesbitt Silo ORT	MAC
OR 2	4/4/2019	9:00 AM	8:45 AM	9:11 AM	8:58 AM	9:06 AM	8:45 AM	9:11 AM		20769-1	Right: Right ORT		
OR 2	4/4/2019	9:45 AM	9:19 AM			9:39 AM	9:19 AM					Nesbitt Silo ORT	MAC
OR 2								9:43 AM	8	20618-2	Left: Left Er ORT	Nesbitt Silo ORT	MAC
	4/4/2019				10:11 AM	10:17 AM	9:56 AM	10:22 AM	13	17638-3	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	4/4/2019	11:15 AM	10:33 AM	11:25 AM	10:51 AM	11:19 AM	10:33 AM	11:25 AM	11	20550-1	Left: Left El ORT	Nesbitt Silo ORT	
OR 2	4/4/2019	1:00 PM	11:41 AM	1:09 PM	12:12 PM	1:03 PM		1:09 PM					GA
OR 2	4/4/2019									21028-1	Right: Oper ORT	Nesbitt Silo ORT	GA
				2:11 PM	1:40 PM	2:02 PM	1:23 PM	2:11 PM	14	21040-1	Right: Close ORT	Nesbitt Silo ORT	GΑ
OR 2	4/5/2019		8:51 AM	10:28 AM	9:13 AM	10:15 AM	8:51 AM	10:24 AM	24	18828-6	Exchange L PLS	Mecinski, A PLS	GA
OR 2	4/5/2019	10:00 AM	10:50 AM	1:34 PM	11:20 AM	1:20 PM	10:50 AM	1:30 PM		21025-1	Bilateral Br PLS		
OR 2	4/5/2019	2:00 PM			2:02 PM	2:21 PM						Mecinski, A PLS	GA
OR 2	4/5/2019						1:58 PM	2:23 PM	48	18142-2	Excision Mi ENT	Mecinski, A PLS	L
					2:41 PM	2:46 PM	2:39 PM	2:51 PM	16	20997-1	Injection LeGEN	Mecinski, A PLS	L
OR 2	4/5/2019	4:15 PM			3:21 PM	3:28 PM	3:15 PM	3:31 PM	24	20967-2	Debrideme ORT	Mecinski, A PLS	Ë
OR 2	4/5/2019	3:30 PM			3:41 PM	3:56 PM	3:37 PM	3:58 PM		21044-1			-
OR 2	4/8/2019	9:45 AM	10:13 AM	12:01 084							Excision Mr PLS	Mecinski, A PLS	L
					10:53 AM		10:13 AM	11:56 AM	26	20898-1	Right Shoul ORT	Levine, Mar ORT	GA
OR 2	4/8/2019	12:00 PM	12:21 PM	2:33 PM	1:07 PM	2:13 PM	12:21 PM	2:28 PM	25	20980-1	Right: Arthi ORT	Levine, Mar ORT	BLG
OR 2	4/8/2019	2:15 PM	3:00 PM	4:31 PM	3:27 PM	4:19 PM	3:00 PM	4:26 PM		21029-1	Right: Quar ORT		
OR 2	4/8/2019	4:30 PM	4:48 PM	6:07 PM	5:18 PM	5:50 PM						Levine, Ma ORT	GΑ
OR 2	4/9/2019						4:48 PM	6:02 PM		21051-1	Right Ankle ORT	Levine, Ma ORT	GA
		8:15 AM	8:10 AM	8:46 AM	8:26 AM	8:39 AM	8:09 AM	8:40 AM	7	10590-2	Right: Excis ORT	Nesbitt Silo ORT	MAC
OR 2	4/9/2019	9:00 AM	8:51 AM	9:40 AM	9:06 AM	9:30 AM	8:51 AM	9:34 AM	11	20883-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	4/9/2019	10:00 AM	9:46 AM	10:50 AM	10:06 AM	10:35 AM	9:46 AM	10:44 AM		20722-1	Right: Right ORT		
OR 2	4/9/2019	11:00 AM	10:57 AM	12:10 PM								Nesbitt Silo ORT	GΑ
							10:57 AM	12:04 PM	13	12150-2	Right: Expl: ORT	Nesbitt Sila ORT	GA
OR 2	4/9/2019		12:19 PM	1:08 PM	12:36 PM	12:57 PM	12:19 PM	1:02 PM	15	17476-4	Left: Left O ORT	Nesbitt Silo ORT	GA
OR 2	4/9/2019	1:15 PM	1:34 PM	2:10 PM	12:47 PM	2:00 PM	12:34 PM	2:04 PM	28	17300-2	Left: Releas ORT	Nesbitt Silo ORT	MAC
OR 2	4/9/2019	2:00 PM			2;33 PM	2:44 PM	2:18 PM	2:50 PM					
OR 2	4/10/2019		11,77 614	12.12 044						14816-3	Left: Exclsic ORT	Nesbitt Silo ORT	L
			11,27 AIV	12:12 PM			11:27 AM	12:06 PM	53	21079-1	Excision Ler PLS	Mecinski, A PLS	MAC
OR 2	4/10/2019	1:00 PM			12:44 PM	12:58 PM	12:37 PM	1:07 PM	31	20962-2	Excision Ca ENT	Mecinski, A PLS	1
OR 2	4/11/2019	8:15 AM	8:12 AM	8:46 AM	8:24 AM	8:40 AM	8:12 AM	8:46 AM		20662-1	Left: Releas ORT		
OR 2	4/11/2019	9:45 AM	8:12 AM	8:40 AM								Nesbitt Sllo ORT	MAC
					8:24 AM	8:40 AM	8:12 AM	8:46 AM	34	20880-2	Left: Hardw ORT	Nesbitt Silo ORT	MAC
OR 2	4/11/2019	9:00 AM	8:59 AM	9:51 AM	9:18 AM	9:46 AM	8:59 AM	9:51 AM	13	20746-1	Left: Revisi: ORT	Nesbitt Sila ORT	GA
OR 2	4/11/2019	10:45 AM	10:49 AM	11:14 AM	11:02 AM	11:09 AM	10:49 AM	11:14 AM	58	20749-1	Right: Righi ORT		
OR 2	4/11/2019	11:30 AM	11:27 AM	11;52 AM								Nesbitt Sila ORT	MAC
OR 2						11:47 AM				14906-3	Right: Right ORT	Nesbitt Silo ORT	MAC
	4/11/2019	12:15 PM	12:05 PM		12:21 PM	12:55 PM	12:05 PM	1:01 PM	13	16328-2	Right: Repa ORT	Nesbitt Silo ORT	GA
OR 2	4/12/2019	8:45 AM	8:40 AM	11:43 AM	9:00 AM	11:33 AM	8:40 AM	11:43 AM	36	21049-1	Bilateral Br PLS	Mecinski, A PLS	GA
OR 2	4/12/2019	1:00 PM	12:35 PM	1:22 PM	12:48 PM	1:18 PM	12:35 PM	1:22 PM		21093-1		-	
OR 2	4/15/2019	9:45 AM	10:06 AM								Reconstruc PLS	Mecinski, A PLS	GA
OR 2	4/16/2019							11:43 AM		20817-1	Left: Arthrc ORT	Levine, Ma [,] ORT	BLG
		8:15 AM	8:23 AM	9:21 AM	8:40 AM	9:08 AM	8:23 AM	9:14 AM	14	20752-1	Bilateral: Bi ORT	Nesbitt Silo ORT	MAC
OR 2	4/16/2019	9:00 AM	9:30 AM	10:07 AM	9:45 AM	9:56 AM	9:30 AM	10:00 AM	16	20731-1	Right: Rele: HND	Nesbitt Silo ORT	MAC
OR 2	4/16/2019	9:45 AM	10:24 AM					11:03 AM		20651-1			
OR 2	4/16/2019	10:45 AM	11:30 AM								Right: Bone GEN	Nesbitt Silo ORT	MAC
					12:01 PM	1:29 PM	11:30 AM	1:34 PM	27	10580-2	Right: Right HND	Nesbitt Silo ORT	BLG
OR 2	4/18/2019	8:15 AM	8:17 AM	8:44 AM	8:33 AM	8:39 AM	8:17 AM	8:44 AM	10	20388-2	Right: Righl ORT	Nesbitt Síla ORT	MAC
OR 2	4/18/2019	9:00 AM	8:54 AM	9:20 AM	9:07 AM	9:15 AM	8:54 AM	9:20 AM		20753-1	Right: Right ORT	Nesbitt Silo ORT	
OR 2	4/18/2019	9:45 AM	9:30 AM	9:58 AM	9:44 AM	9:53 AM	9:30 AM						MAC
								9:58 AM		15306-3	Right: Rele: ORT	Nesbitt Silo ORT	MAC
OR 2			10:07 AM				10:07 AM		9	21014-1	Right: Excls ORT	Nesbitt Silo ORT	MAC
OR 2	4/18/2019	11:15 AM	11:00 AM	11:24 AM	11:13 AM	11:19 AM	11:00 AM	11:24 AM		20707-2	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	4/18/2019		11:27 AM										
								11:56 AM		20754-1	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2	4/18/2019		12:08 PM				12;08 PM	12:43 PM	12	20502-2	Left: Excisic ORT	Nesbitt Sila ORT	MAC
OR 2	4/19/2019	9:45 AM	9:25 AM	9:55 AM	9:38 AM	9:44 AM	9:25 AM	9:48 AM		20829-1	Left: Left Er ORT	Nesbitt Sila ORT	MAC
OR 2	4/19/2019	10:30 AM	10:01 AM					10:36 AM					
										21053-1	Left: Releas ORT	Nesbitt Silo ORT	MAC
OR 2	4/19/2019		10:50 AM				10:50 AM		14	20820-1	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2	4/19/2019	11:15 AM	11:33 AM	12:13 PM	11:47 AM 1	L1:59 AM	11:33 AM	12:02 PM	15	20838-2	Left: Hardy ORT	Nesbitt Sila ORT	MAC
OR 2							12:20 PM						
										20802-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2		12:45 PM	1:03 PM	1:39 PM	1;21 PM	1:27 PM	1:03 PM	1:32 PM	18	20943-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	4/22/2019	9:15 AM	9:32 AM	10:51 AM	10:01 AM 1	LO:33 AM	9:32 AM	10:42 AM	18	21042-1	Right Shoul GEN	Levine, Mar ORT	GA
OR 2	4/22/2019	10:30 AM	11:16 AM				11:16 AM	1:13 PM		14839-2	Left: Arthrc ORT		
OR 2		12:45 PM	1:47 PM	3:37 PM								Levine, Mar ORT	BLG
					2:26 PM	3:06 PM	1:47 PM	3:25 PM		21056-1	Right: Arth: ORT	Levine, Ma [.] ORT	BLG
OR 2	4/23/2019	8:15 AM	8:20 AM	8:49 AM	8:35 AM	8:47 AM	8:20 AM	8:46 AM	13 2	20784-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	4/23/2019	9:00 AM	9:03 AM	10:18 AM	9:26 AM 1	.0:05 AM	9:03 AM	10:13 AM			Left: Left Er ORT	Nesbitt Silo ORT	
OR 2													GA
							l0:31 AM				Left: Left W ORT	Nesbitt Silo ORT	GA
OR 2	4/23/2019						L2:04 PM	12:32 PM	80 2	0585-2	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	4/23/2019	12:15 PM	12:42 PM	1:13 PM	12:57 PM	1:06 PM 3	L2:42 PM	1:10 PM			Right: Right ORT	Nesbitt Silo ORT	MAC
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OR 2		4/23/2019	1:00 PM	1:24 PM	3:00 PM	1:55 PM	2:49 PM	1:24 PM	2:56 PM	1.4	20785-1	Right: Arth: ORT	Nesbitt Silo ORT	GA
OR 2		4/23/2019	2:45 PM	3:09 PM	4:09 PM	3:29 PM	3:56 PM	3:09 PM	4:04 PM	13	21118-1	Right Little ORT	Nesbitt Silo ORT	GA
OR 2		4/25/2019	8:45 AM	9:01 AM	9:45 AM	9:16 AM	9:33 AM	9:01 AM	9;38 AM	1.2	20788-1	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2		4/25/2019	9:45 AM	9:52 AM	10:26 AM	10:06 AM	10:15 AM	9:52 AM	10:19 AM	14	20984-1	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2		4/25/2019	10:30 AM	10:31 AM	11:10 AM	10:46 AM	10:57 AM	10:31 AM	11:03 AM	12	20787-1	Right: Excls GEN	Nesbitt Sila ORT	GA
OR 2		4/25/2019	11:30 AM	11:17 AM	11:51 AM	11:31 AM	11:32 AM	11:17 AM	11:44 AM	14	20965-2	Right: Rem ORT	Nesbitt Sila ORT	MAC
OR 2		4/25/2019	12:30 PM	11:57 AM	2:36 PM	12:21 PM	2:18 PM	11:57 AM	2:29 PM	13	20797-1	Left: Tendo ORT	Nesbitt Sila ORT	GA
OR 2		4/25/2019	2:45 PM	2:48 PM		3:21 PM	4:31 PM	2:48 PM	4:38 PM	19	21102-1	Right: Right ORT	Nesbitt Silo ORT	GA
OR 2		4/26/2019	8:30 AM	8:30 AM	9:46 AM	8:39 AM	9:30 AM	8:30 AM	9:41 AM	20	21114-1	Excision Ma PLS	Mecinski, APLS	MAC
OR 2		4/26/2019	10:30 AM	10:07 AM	11:48 AM	10:31 AM	11:27 AM	10:07 AM	11:43 AM	26	21139-1	Open Redu ORT	Mecinski, APLS	GA
OR 2		4/26/2019	12:00 PM			12:05 PM	12:14 PM	11:58 AM	12:19 PM	15	20839-2	Excision Le: PLS	Mecinski, A PLS	L
OR 2		4/26/2019	2:00 PM			1:10 PM		1:05 PM			21124-1	Excision Me PLS	Mecinski, APLS	Ĺ
OR 2		4/26/2019	1:00 PM			1:51 PM		1:45 PM			21115-1	Excision Ba ENT	Mecinski, APLS	Ë
OR 2		4/26/2019	2:45 PM			2:24 PM		2:15 PM			21078-1	Amputation Right Ind		ī
OR 2		4/26/2019	3:30 PM			3:12 PM		3:08 PM			19494-5	Excision Ma PLS	Mecinski, A PLS	Ĺ
OR 2		4/29/2019	9:45 AM	9:55 AM	10:40 AM			9:55 AM			21066-1	Left Knee: / ORT	Levine, Ma ORT	GA
OR 2		4/29/2019	11:00 AM	11:13 AM							17961-3	Left: Arthrc ORT	Levine, Ma ORT	BLG
OR 2		4/29/2019	1:15 PM	1:16 PM	2:46 PM		2:34 PM				21108-1	Left: Arthrc ORT	Levine, Ma ORT	BLG
OR 2		4/30/2019	8:15 AM	8:07 AM	8:35 AM			8:07 AM			20890-1	Right: Excis ORT	Nesbitt Silo ORT	MAC
OR 2		4/30/2019	9:00 AM	8:51 AM	9:20 AM			8:51 AM			20588-1	Left; Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2		4/30/2019	9:45 AM	9:32 AM	9:59 AM	9:47 AM	9:53 AM				20161-2	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2		4/30/2019		10:09 AM		10:28 AM					20830-1	Right: Relei HND	Nesbitt Silo ORT	GA
OR 2		4/30/2019	12:15 PM	11:13 AM	12:13 PM	11:31 AM					21116-1	Left: Explor ORT	Nesbitt Silo ORT	GA
OR 2		4/30/2019	2:00 PM	12:53 PM	1:25 PM		1:20 PM		1:25 PM		21144-1	Left: Closec ORT	Nesbitt Silo ORT	GA
OR 2		4/30/2019	3:45 PM	12,331	T123 F W	2:00 PM	2:10 PM	1:45 PM			20167-2	Left: Excisic ORT	Nesbitt Silo ORT	
OR 2		5/1/2019	11:15 AM			10:43 AM					21136-1	Excision Ba ENT		L
OR 2		5/1/2019	12:15 PM			11:40 AM		11:37 AM			12636-10		Mecinski, APLS	L
OR 2				1,00,001	2:01.014							Excision Let PLS	Mecinski, APLS	L
UK Z	10	5/1/2019	1:00 PM	1:06 PM	2:01 PM	1:26 PM	1:40 PM	1:06 PM	1:55 PM		21067-1	Right: Arthi ORT	Steinberg, . ORT	GA
00.3	18	5/2/2019 5/2/2019	8:15 AM	8:17 AM	8:56 AM	8:31 AM	8:48 AM	8:17 AM	8;48 AM		20832-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2		, , ,	9:15 AM	9:08 AM	9:34 AM	9:22 AM	9:29 AM	9:08 AM	9;34 AM		20721-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2		5/2/2019	10:00 AM	9:49 AM		10:09 AM		9:49 AM			15768-3	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2		5/2/2019	10:45 AM	10:24 AM	11:11 AM	10:47 AM	11:06 AM	10:24 AM			20462-2	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2		5/2/2019	11:45 AM	11:27 AM	11:55 AM	11:41 AM	11:49 AM	11:27 AM			17916-3	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2		5/2/2019	12:30 PM	12:04 PM	12:34 PM		12:30 PM		12:34 PM		19069-2	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2		5/2/2019	1:15 PM	12:47 PM	1:16 PM	1:01 PM	1:09 PM	12:47 PM	1:14 PM		21117-1	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2		5/3/2019	8:30 AM	8:25 AM	8:55 AM	8:38 AM	8:47 AM	8:25 AM	8:52 AM		21113-1	Right: Rele: ORT	Nesbitt Silo ORT	MAC
OR 2		5/3/2019	9:15 AM	9:11 AM	9:51 AM	9:27 AM	9:40 AM	9:11 AM	9:46 AM		20908-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2		5/3/2019	10:00 AM	9:58 AM	10:28 AM	10:14 AM	10:19 AM	9:58 AM	10:25 AM		20998-1	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2		5/3/2019	10:45 AM	10:35 AM	11:09 AM	10:49 AM	11:00 AM		11:05 AM		20940-1	Right: Rele: ORT	Nesbitt Silo ORT	MAC
OR 2		5/3/2019	11:30 AM	11:44 AM	12;13 PM	11:58 AM	12:04 PM	11:44 AM	12:10 PM		17638-4	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2		5/6/2019	7:30 AM	8:13 AM	9:41 AM	8:41 AM	9:27 AM	8:13 AM	9:37 AM		20982-1	Left: Distal ORT	Levine, Ma ORT	GA
OR 2		5/6/2019	9:45 AM	9:53 AM	10;44 AM	10:13 AM	10:35 AM	9:53 AM	10:42 AM		21059-1	Right: Arthi ORT	Levine, Ma ORT	GA
OR 2		5/6/2019		10:57 AM	11:52 AM	11:14 AM			11:50 AM		21017-1	Right Knee: ORT	Levine, Ma ORT	GA
OR 2		5/6/2019	12:15 PM	12:13 PM	2:15 PM	1:12 PM	2:03 PM	12:13 PM	2:10 PM		21100-1	Right: Arthi ORT	Levine, Ma ORT	BLG
OR 2		5/7/2019	8:15 AM	8:15 AM	8:52 AM	8;29 AM	8:40 AM	8:15 AM	8:45 AM		20907-1	Right: Excis GEN	Nesbitt Silo ORT	MAC
OR 2		5/7/2019	9:00 AM	9:00 AM	9:41 AM	9:16 AM	9:28 AM	9:00 AM	9:34 AM	15	20893-1	Right: Excis ORT	Nesbitt Silo ORT	MAC
OR 2		5/7/2019	9:45 AM	9:46 AM	10:20 AM	10:01 AM	10:06 AM	9:46 AM	10:13 AM	12	21068-1	Right: Right ORT	Nasbitt Silo ORT	MAC
OR 2		5/7/2019	10:30 AM	10:24 AM	10:57 AM	10:38 AM	10:44 AM	10:24 AM	10:50 AM	11	21147-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2			11:15 AM	11:01 AM	12:00 PM	11:16 AM	11:48 AM	11:01 AM	11:53 AM	11	21043-1	Bilateral: Bi ORT	Nesbitt Silo ORT	MAC
OR 2		5/7/2019		12;04 PM	12:39 PM	12:21 PM	12:26 PM	12:04 PM	12:32 PM	11	20920-1	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2		5/7/2019	12:45 PM	12:48 PM	1:21 PM	1:04 PM	1:10 PM	12:48 PM	1:14 PM	16	20909-1	Left: Left Ei ORT	Nespitt Silo ORT	MAC
OR 2		5/7/2019	1;30 PM	1:30 PM	2:40 PM	1:49 PM	2;26 PM	1:30 PM	2:33 PM	16	21148-1	Left: Explor ORT	Nesbitt Silo ORT	GA
OR 2		5/7/2019	3:15 PM			3:09 PM	3:30 PM	2:48 PM	3:35 PM	15	20891-1	Right: Excls ORT	Nesbitt 5lla ORT	L
OR 2		5/8/2019	8:15 AM			8:42 AM	9:02 AM	8:30 AM	9:09 AM		16828-2	Excision Ke PLS	Mecinski, A PLS	L
OR 2		5/8/2019	9:15 AM			9:30 AM	9;50 AM	9:25 AM	9;55 AM	16	21180-1	Excision Mr PLS	Mecinski, A PLS	L
OR 2		5/9/2019	8;15 AM	8:24 AM	8:54 AM	8:40 AM	8;45 AM	8:24 AM	8:51 AM	10	20895-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2		5/9/2019	9:00 AM	9:03 AM	9:32 AM	9:17 AM	9:24 AM	9:03 AM	9:29 AM	12	21033-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2		5/9/2019	9:45 AM		10:28 AM	10:01 AM	10:15 AM	9:43 AM	10:26 AM	14	21047-1	Right: Excis ORT	Nesbitt Silo ORT	GA
OR 2		5/9/2019	10:30 AM	10:45 AM	11:21 AM	11:03 AM	11:13 AM	10:45 AM	11:18 AM	19	10145-2	Right: Excis GEN	Nesbitt Silo ORT	MAC
OR 2					12:45 PM	12:01 PM	12:35 PM	11:39 AM	12:41 PM	21	20460-2	Right: Righi ORT	Nesbitt Silo ORT	GA
OR 2			12:30 PM	12:56 PM	1:47 PM	1:11 PM	1:38 PM	12:56 PM	1:44 PM		21123-1	Bilateral: Bi ORT	Nesbitt Silo ORT	MAC
OR 2		5/9/2019	1:15 PM	1:59 PM	2:38 PM	2:14 PM	2:28 PM	1:59 PM	2:35 PM		20755-1	Left: Left Er ORT	Nesbitt 5llo ORT	MAC
OR 2		5/9/2019	2:15 PM	2:45 PM	3:14 PM	2:59 PM	3:04 PM	2:45 PM	3:11 PM	10	20955-1	Left: Left Er ORT	Nesbitt Sila ORT	MAC
OR 2		5/9/2019	3:00 PM	3:25 PM	3:56 PM	3:41 PM	3:46 PM	3:25 PM	3:53 PM		21157-1	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2		5/10/2019	8:45 AM	8:28 AM	9:10 AM	8:43 AM	8:57 AM	8:28 AM	9:07 AM	32	19864-3	Incision and ORT	Mecinski, A PLS	MAC
OR 2		5/10/2019	9:45 AM	9:32 AM	10:19 AM	9:41 AM	10:02 AM	9:32 AM	10:15 AM	25	16297-4	Debrideme ORT	Mecinski, A PLS	GA
OR 2			11:00 AM			10:52 AM		10:44 AM		29	20844-2	Excision Ne PLS	Mecinski, A PLS	L
OR 2			12:00 PM			11:35 AM	11:50 AM	11:30 AM	11:54 AM	22	21204-1	Excision Ma PLS	Mecinski, APLS	L
OR 2		5/13/2019	9:45 AM	10:51 AM	12:42 PM	11:16 AM	12:38 PM	10;51 AM	12:42 PM	26	20899-1	Left Knee: / ORT	Levine, Mar ORT	GA
OR 2			12:00 PM	1:01 PM	1:45 PM	1:22 PM	1:38 PM	1:01 PM	1:45 PM	19	21030-1	Left Knee: / ORT	Levine, Ma ORT	GA
OR 2		5/13/2019	1:15 PM	2:08 PM	4:14 PM	2:38 PM	4:01 PM	2:08 PM	4:14 PM	23	21142-1	Right: Arthi ORT	Levins, Ma [.] ORT	BLG
OR 2		5/13/2019	3:30 PM	4:34 PM	5:43 PM	4:52 PM	5:35 PM	4:34 PM	5:43 PM	20	21210-1	Left: Distal ORT	Levine, Ma ORT	GA
OR 2		5/14/2019	8:15 AM	8:14 AM	8:50 AM	8:29 AM	8:39 AM	8:14 AM	8:46 AM	10	20901-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2		5/14/2019	9:15 AM	8:56 AM	9:26 AM	9:11 AM	9:19 AM	8:57 AM	9:23 AM	11	20944-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2			10:00 AM	9:36 AM	11:00 AM	10:01 AM	10:48 AM	9:36 AM	10:57 AM	13	13246-1	Right: Subt-HND	Nesbitt Silo ORT	GA
OR 2		5/14/2019	11:15 AM	11:36 AM	12:05 PM	11:51 AM	11:55 AM	11:36 AM	12:01 PM	39	19906-2	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2		5/14/2019	12:00 PM	12:15 PM	12:52 PM	12:36 PM	12:44 PM	12:15 PM	12:48 PM	14	20554-2	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2		5/14/2019	12:45 PM	1:00 PM	1:32 PM	1:16 PM	1:23 PM	1:00 PM	1:28 PM	12	20932-1	Left: Left E _I ORT	Nesbitt Silo ORT	MAC
OR 2		5/15/2019	10:30 AM	10:54 AM	12:40 PM	11:19 AM	12:28 PM	10:54 AM	12:37 PM	173	21219-1	Right Clavic ORT	Levine, Mar ORT	GA
OR 2		5/16/2019	8;15 AM	8:16 AM	8:49 AM	8:31 AM	8:40 AM	8:16 AM	8:46 AM		20933-1	Right: Excis GEN	Nesbitt Silo ORT	MAC
OR 2		5/16/2019	9:00 AM	8;55 AM	9:36 AM	9:08 AM	9:28 AM	8:55 AM	9:33 AM		20960-1	Right: Excis ORT	Nesbitt Silo ORT	MAC
OR 2		5/16/2019	9:45 AM	9:44 AM	10:11 AM	9:56 AM	9:56 AM	9:44 AM	10:08 AM		21172-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2		5/16/2019	10:30 AM	10:20 AM	11:00 AM	10:33 AM		10:20 AM			21225-1	Right: Repa HND	Nesbitt Silo ORT	MAC
OR 2		5/16/2019	11:30 AM	11:08 AM				11:08 AM			20927-1	Left: Releas ORT	Nesbitt Silo ORT	MAC
OR 2		5/16/2019	12:15 PM					11:46 AM	12:11 PM		20640-2	Left: Left El ORT	Nesbitt Sila ORT	MAC
OR 2		5/16/2019	1:00 PM	12:20 PM			12:44 PM				21077-1	Left: Left El ORT	Nesbitt Silo ORT	MAC

OR 2	5/16/20:	19 1:45 P	M 1:11 P	VI 3:01 PN	/ 1:39 PM	4 2,47 0	4.44.5						
OR 2	5/17/201									20894-1	Left: Arthrc ORT	Nesbitt Silo ORT	GA
OR 2	5/17/20:									21183-1	Excision Mr PLS	Mecinski, APLS	MAC
OR 2	5/17/201									21223-1	Debrideme ORT	Mecinski, APLS	GA
OR 2	5/17/201			41 TZ.Z.J.C.N	12:41 PM					21186-1	Excision Mt PLS	Mecinski, APLS	GA
OR 2	5/17/201				1:20 PM					21228-1	Excision of PLS	Mecinski, APLS	L
OR 2	5/20/201			A 12:09 PN						21238-1	Exclaion of PLS	Mecinski, A PLS	L
OR 2	5/20/201									21045-1	Right Shoul ORT	Levine, Ma [.] ORT	GA
OR 2	5/20/201									21055-1	Right: Arthi ORT	Levine, Ma [.] ORT	BLG
OR Z	5/21/201									21187-1	Left Knee: / ORT	Levine, Ma ⁻ ORT	GA
OR 2	5/21/201								11 2	20606-2	Left: Left E: ORT	Nesbitt Silo ORT	MAC
OR 2	5/21/201								12 2	20936-1	Left: Releas ORT	Nesbitt Silo ORT	MAC
OR 2	5/21/201								12 2	21150-1	Left: Left E: ORT	Nesbitt Sila ORT	MAC
OR 2									12 2	21173-1	Left: Left E≀ ORT	Nesbitt Silo ORT	GA
OR 2	5/21/201							/ 11:27 AM	12 1	17457-2	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2	5/21/201							4 12:13 PM	11 2	20889-1	Right: Excis ORT	Nesbitt Sila ORT	GA
OR 2	5/21/201					12:50 PM	12:25 PN	1 12:53 PM	12 1	15942-3	Right: Rele: ORT	Nesbitt Silo ORT	MAC
OR 2	5/21/201					1:26 PM		1:30 PM	10 2	21179-1	Right: Excis GEN	Nesbitt Silo ORT	MAC
OR 2	5/21/201					2:21 PM	1:47 PM	1 2:24 PM	17 2	20230-2	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	5/21/2019					4:04 PM	1 3:03 PM	1 4:15 PM	39 2	1250-1	Right: Right ORT	Steinberg, . ORT	GA
	5/22/2019								39 1	.6972-2	Bilateral In PLS	Mecinski, A PLS	GA
OR 2	5/22/2019					12:00 PM	11:45 AM	1 12:05 PM	21 2	10953-3	Removal Pi ORT	Mecinski, A PLS	MAC
OR 2	5/22/2019			12:53 PM	12:30 PM	12:40 PM	12:22 PM	12:46 PM		1213-1	Incision and ORT	Mecinski, A PLS	MAC
OR 2	5/22/2019				1:08 PM	1:13 PM	1:02 PM	1:17 PM		1188-1	Exclsion Sq ENT	Macinski, A PLS	L
OR 2	5/22/2019		1		1:37 PM	1:43 PM	1:32 PM	1:45 PM		1259-1	Excision Le: ENT	Mecinski, A PLS	_
OR 2	5/22/2019		1		2:02 PM	2:10 PM	1:54 PM	2:13 PM		9939-2	Excision Ba PLS		L
OR 2	5/23/2019		4 8:34 AM	9:11 AM	8:49 AM	9:00 AM				0946-1	Right: Relei ORT	Mecinski, A PLS	L
OR 2	5/23/2019	9:15 AN	4 9:17 AM	9;51 AM	9:31 AM	9:37 AM	9:17 AM			0887-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	5/23/2019	10:00 AM	10:01 AM	10;37 AM	10:15 AM	10:26 AM	10:01 AM			0973-1	Right: Rele: ORT	Nesbitt Silo ORT	MAC
OR 2	5/23/2019	10:45 AM	1 10:45 AM	11:20 AM	11:01 AM	11:06 AM				3253-2	_	Nesbitt Silo ORT	MAC
OR 2	5/23/2019	11:30 AM	11:30 AM	12:02 PM	11:42 AM	11:51 AM				6782-2	Left: Left E) ORT	Nesbitt Silo ORT	MAC
OR 2	5/23/2019	12:15 PM	1 12:13 PM				12:13 PM				Left: Releas ORT	Nesbitt Silo ORT	MAC
OR 2	5/23/2019	1:00 PM		1:35 PM	1:06 PM	1:23 PM				6219-3	Left: Excisic GEN	Nesbitt Silo ORT	MAC
OR 2	5/24/2019	8:45 AM		9:22 AM	8:53 AM	9:10 AM	8:39 AM			1152-1	Left: Excisic ORT	Nesbitt Silo ORT	MAC
OR 2	5/24/2019				9;44 AM	10:01 AM	9:35 AM			1253-1	Repair Exte HND	Mecinski, A PLS	GA
OR 2	5/24/2019					10:46 AM				1254-1	Excision Ma PLS	Mecinski, A PLS	MAC
OR 2	5/24/2019					11:15 AM				1270-1	Incision ant GEN	Mecinski, A PLS	L
OR 2	5/24/2019				12:18 PM		11:02 AM			1255-1	Excision Mt PLS	Mecinski, A PLS	L
OR 2	5/24/2019					12:25 PM	12:14 PM			1181-1	Excision Le: ENT	Mecinski, A PLS	L
OR 2	5/28/2019			D.64 ANA	12:58 PM	1:11 PM		1:15 PM		1274-1	Excision Let GEN	Mecinski, A PLS	L
OR 2	5/28/2019			8:44 AM	8:32 AM	8:37 AM	8:19 AM	8:43 AM		0820-2	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	5/28/2019			9:31 AM	9:15 AM	9:24 AM	8:56 AM	9:29 AM	13 20	976-1	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2	5/28/2019			10:09 AM		10:01 AM	9:41 AM		12 20	281-2	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2				10:49 AM		10:43 AM	10:21 AM		14 17	7039-3	Left: Left & ORT	Nasbitt Silo ORT	MAC
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	5/28/2019			12:54 PM		12:43 PM	12:12 PM	12:52 PM	17 21	134-1	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	5/28/2019		1:11 PM	2:49 PM	1:41 PM	2:40 PM	1:11 PM	2:47 PM	19 20	892-1	Right: ArthrORT	Nesbitt Sila ORT	GA
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OR 2	5/30/2019	9:00 AM	8:57 AM	9:29 AM	9:11 AM	9:19 AM	8:57 AM	9:27 AM		245-1	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	5/30/2019	9:45 AM	9:41 AM	10:14 AM	9:55 AM	10:07 AM	9:41 AM		14 21		Left: Releas ORT	Nesbitt Silo ORT	
OR 2	5/30/2019	10:30 AM	10:25 AM	10:58 AM	MA 86:01	10:49 AM	10:25 AM	10:56 AM	13 21		Left: Releas ORT	Nesbitt Silo ORT	MAC
OR 2	5/30/2019	11:15 AM	11:06 AM		11:26 AM	11:56 AM	11:06 AM	12:03 PM	10 17		Left: Left El ORT		MAC
OR 2	5/30/2019	12:30 PM	12:25 PM	2:06 PM	12:59 PM	1:56 PM	12:25 PM	2:03 PM	22 20		Right: Arthi ORT	Nesbitt Silo ORT	GA
OR 2	5/31/2019	12:00 PM			10:39 AM	10:57 AM	10:39 AM	11:01 AM	35 21		Debrideme ORT	Nesbitt Sila ORT	BLG
OR 2	5/31/2019	1:30 PM				12:47 PM	11:18 AM		17 21			Mecinski, A PLS	L.
OR 2	5/31/2019	3:00 PM					11:53 AM	12:06 PM			Excision of ENT	Mecinski, APLS	L
OR 2	5/31/2019	3:45 PM					12:17 PM	12:38 PM	11 21		Excision Ba PLS	Mecinski, A PLS	L
OR 2	6/4/2019	8:15 AM	8:16 AM	9:53 AM	8:41 AM	9:37 AM	8:16 AM	9:51 AM			Excision Mt PLS	Mecinski, A PLS	L
OR 2	6/4/2019	10:00 AM					10:06 AM		13 213		Right: Expl: HND	Nesbitt Sila ORT	GA
OR 2	6/4/2019	11:15 AM	11:25 AM				11:25 AM		15 209		Right: Repa ORT	Nesbitt Silo ORT	GA
OR 2	6/4/2019	1:00 PM		Z.23 V	1:14 PM	1:22 PM		12:45 PM	11 208		Right: Right ORT	Nesbitt Silo ORT	GA
OR 2	6/6/2019	7:30 AM	7:40 AM	8:08 AM	7:53 AM		1:01 PM	1:28 PM	16 212		Right: Excis ORT	Nesbitt Sila ORT	L
OR 2	6/6/2019	8:15 AM	8:20 AM	8:51 AM	8:35 AM	7:58 AM 8:42 AM	7:40 AM	8:05 AM	0 142		Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	6/6/2019	9:00 AM	9:00 AM	9:29 AM	9:13 AM		8:20 AM	8:44 AM	15 212		Left: Left Er ORT	Nesbitt 5ilo ORT	MAC
OR 2	6/6/2019	9:45 AM		10:09 AM		9:20 AM	9:00 AM	9:26 AM	16 211		Left: Hardw OR⊤	Nesbitt Sila ORT	MAC
OR 2		10:30 AM				10:00 AM		10:06 AM	13 213		Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2		12:15 PM	10:20 AM					11:24 AM	14 213		Right: Repa ORT	Nesbitt Silo ORT	GA
OR 2	6/7/2019	8:45 AM			12:21 PM		11:50 AM	1:39 PM	26 213		Left: Open ORT	Nesbitt Sila ORT	GA
OR 2	6/7/2019	9:30 AM	8:45 AM 9:26 AM	9:17 AM		9:10 AM	8:45 AM	9:15 AM	32 211		Right: Excis ORT	Nesbitt Silo ORT	MAC
OR 2				9:57 AM		9:48 AM	9:26 AM	9:55 AM	11 210	090-1 I	Right: Right ORT	Nesbitt Silo ORT	MAC
							10:09 AM	10:36 AM	14 212	211-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2								11:18 AM	13 203	62-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2		11:45 AM				1:53 AM		12:01 PM	13 211		Right: Rela: ORT	Nesbitt Silo ORT	MAC
OR 2						.2:50 PM	12:27 PM	12:57 PM	26 206		Right: Right ORT	Nesbitt Sila ORT	MAC
OR 2	6/7/2019	1:15 PM	1:14 PM	2:26 PM	1:36 PM	2:12 PM	1:14 PM	2:24 PM	17 210		Right: Repa ORT	Nesbitt Silo ORT	GA
OR 2	6/7/2019	2:15 PM	2:37 PM	3:17 PM	2:54 PM	3:03 PM	2:37 PM	3:15 PM	13 210		eft: Excisic ORT	Nesbitt Silo ORT	MAC
OR 2	6/7/2019	3:00 PM	3:28 PM	3:59 PM		3:50 PM	3:28 PM	3:57 PM	13 211		eft: Left Et ORT	Nesbitt Sila ORT	MAC
OR 2	6/11/2019	8:15 AM	8:13 AM	8:45 AM		8:35 AM	8:13 AM	8:40 AM	9 212		Right: Right ORT	Nesbitt Silo ORT	
OR 2	6/11/2019	9:00 AM	8:54 AM	9:52 AM		9;38 AM	8:54 AM	9:48 AM	14 213		Right: Explc HND		MAC
OR 2	6/11/2019	10:15 AM		10:57 AM 1				10:53 AM	12 211			Nesbitt Sila ORT	GA
OR 2				11:52 AM 1				11:48 AM			eft: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2			12:04 PM	1:18 PM 1			12:03 AM	1:13 PM	12 208		eft: Excisic ORT	Nesbitt Silo ORT	GA
OR 2	6/11/2019	1:15 PM	1:36 PM	3:28 PM		3:12 PM	1:36 PM		16 194		eft: Left El ORT	Nesbitt Silo ORT	GA
OR 2								3:23 PM	23 210		eft: Arthrc ORT	Nesbitt Silo ORT	GA
OR 2	6/12/2019	1:00 PM	1:38 PM					11:53 AM	53 211:		temoval Pi ORT	Mecinski, APLS	MAC
OR 2	6/13/2019	8:15 AM	8:27 AM			3:06 PM	1:38 PM	3:18 PM	105 213		eft: Open ORT	Steinberg, . ORT	GA
OR 2	6/13/2019	9:00 AM				8:46 AM	8:27 AM	8:53 AM	28 2098		light: Relei ORT	Nesbitt Sila ORT	MAC
OR 2	6/13/2019	9:45 AM				9:29 AM	9:02 AM	9:32 AM	29 2100		ight: Excis ORT	Nesbitt Silo ORT	MAC
-··· -	~, <u>~~) ~~17</u>	ALIAN WIAI	J.HJ AIVI]	.0:19 AM	9:56 AM 10	0:10 AM	9:43 AM	LU:19 AM	11 2098	83-1 R	ight: Right ORT	Nesbitt Silo ORT	MAC

OR 2	6/13/2019	10:30 AM	10:27 AM	10:56 AM	10:41 AM	10:51 AM	10:27 AM	10:56 AM	8 21245-2	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	6/13/2019	11:15 AM	11:04 AM	11:31 AM	11:19 AM	11:25 AM	11:04 AM	11:31 AM	8 10834-2	Left: Left Er ORT	Nasbitt Silo ORT	MAC
OR 2	6/13/2019	12:00 PM	11;42 AM	12:08 PM		12:02 PM	11:42 AM	12:08 PM	11 21196-1	Left: Left Er ORT	Nesbitt Sila ORT	MAC
OR 2	6/13/2019	12:45 PM	12:23 PM	1:02 PM	12:36 PM	12:58 PM	12:23 PM	1:02 PM	15 15751-5	Left: Releas ORT	Nesbitt Sila ORT	MAC
OR 2	6/13/2019	1:30 PM	1:11 PM	1:44 PM	1:26 PM	1;39 PM	1:11 PM	1:44 PM	9 21327-1	Release Fir: HND	Nesbitt Sila ORT	MAC
OR 2	6/13/2019	2:15 PM	1:57 PM	3:12 PM	2:17 PM	3:06 PM	1:57 PM	3:12 PM	13 21345-1	Right: Close ORT	Nesbitt Sila ORT	GA
OR 2	6/17/2019	8:45 AM	9:19 AM	11:14 AM	9:51 AM	10:57 AM	9:19 AM	11:11 AM	33 21390-1	Left Elbow: ORT	Levine, Ma ORT	GA
OR 2	6/17/2019	10:30 AM	11:34 AM	12:48 PM	11:59 AM	12:38 PM	11:34 AM	12:45 PM	23 18572-2	Left Knee: / ORT	Levine, Ma ORT	GA
OR 2	6/17/2019	11:45 AM	1:11 PM	2:41 PM	1:34 PM	2:31 PM	1:11 PM	2:39 PM	26 21278-1	Left Patella ORT	Levine, Ma ORT	GA
OR 2	6/18/2019	8:15 AM	8:19 AM	8:50 AM	8:31 AM	8;41 AM	8:19 AM	8:47 AM	14 21275-1	Right: Rele: HND	Nesbitt Silo ORT	MAC
OR 2	6/18/2019	9:00 AM	8:57 AM	9:25 AM	9:10 AM	9;17 AM	8:57 AM	9:22 AM	10 21212-1	Left: Left E: ORT	Nesbitt Silo ORT	MAC
OR 2	6/18/2019	9:45 AM	9:33 AM	10:01 AM	9:46 AM	9;55 AM	9:33 AM	10:00 AM	11 21217-1	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	6/18/2019	10:30 AM	10:12 AM	10:40 AM	10:24 AM	10:31 AM	10:11 AM	10:38 AM	11 17836-2	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	6/18/2019		10:51 AM	11;23 AM	11:06 AM	11:13 AM	10:51 AM	11:20 AM	13 21153-1	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	6/18/2019	12:00 PM	11:30 AM	1.2:07 PM	11:46 AM	12:01 PM	11:30 AM	12:06 PM	10 21292-1	Left; Excisic ORT	Nesbitt Silo ORT	MAC BLG
OR 2	6/18/2019	12:45 PM	12:29 PM	1:55 PM	12:56 PM	1:48 PM 2:55 PM	12;29 PM	1:53 PM	23 13313-2	Left: Left Ti ORT	Nesbitt Silo ORT Nesbitt Silo ORT	GA
OR 2	6/18/2019	2;30 PM	2:11 PM	3:06 PM	2:41 PM	8:39 AM	2:18 PM 8:17 AM	3:01 PM 8:44 AM	25 21393-1 13 21339-1	Right: Oper ORT Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	6/20/2019	8:15 AM	8:17 AM	8:47 AM 9:44 AM	8:31 AM 9:14 AM	9:31 AM	8:55 AM	9:41 AM	11 15642-3	Right: Subt HND	Nesbitt Silo ORT	GA
OR 2	6/20/2019 6/20/2019	9:00 AM 10:00 AM	8:55 AM 9:54 AM	10:48 AM	10:08 AM	10:40 AM	9:54 AM	10:45 AM	13 21073-1	Bilateral: Bi ORT	Nesbitt Silo ORT	MAC
OR 2 OR 2	6/20/2019	10:45 AM	11:00 AM	11:50 AM	11:17 AM	11:39 AM	11:00 AM	11:47 AM	15 20993-1	Left: Left H HND	Nesbitt Silo ORT	GA
OR 2	6/20/2019	11:45 AM	12:00 PM	1:36 PM		1:20 PM	12:00 PM	1:33 PM	13 21135-1	Left; Subto HND	Nesbitt Silo ORT	GA
OR 2	6/20/2019	1:30 PM	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2,301111	2:02 PM	2:15 PM	1:46 PM	2:20 PM	13 13794-2	Left: Remo PLS	Nesbitt Silo ORT	L
OR 2	6/21/2019	9:15 AM	9:28 AM	10;25 AM	9:29 AM	10:10 AM	9:28 AM	10:18 AM	17 21300-1	Excision Cy PLS	Mecinski, A PLS	MAC
OR 2	6/21/2019			11:41 AM	10:45 AM	11:25 AM	10:31 AM	11:34 AM	13 21381-1	Excision Mi PLS	Mecinski, A PLS	GA
OR 2	6/21/2019	12:15 PM			11:54 AM	12:13 PM	11:46 AM	12:15 PM	12 21384-1	Wide Excisi PLS	Mecinski, A PLS	L
OR 2	6/21/2019	1:15 PM			12:40 PM	1:05 PM	12:30 PM	1:07 PM	15 21311-1	Excision Le: ENT	Mecinski, A PLS	L
OR 2	6/21/2019	2:15 PM	12:00 AM	12:00 AM	1;21 PM	1:28 PM	1:16 PM	1:31 PM	9 21403-1	Right Excisi ENT	Macinskl, A PLS	L
OR 2	6/24/2019	8:45 AM	9:28 AM	11:44 AM	10:12 AM	11:26 AM	9:28 AM	11:39 AM	33 21352-1	Left: Arthrc ORT	Levine, Ma ORT	BLG
OR 2	6/25/2019	8:15 AM	8:16 AM	8:49 AM	8:31 AM	8:38 AM	8:16 AM	8:44 AM	11 21211-2	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2	6/25/2019	9:00 AM	8:52 AM	9:25 AM	9:06 AM	9:15 AM	8:52 AM	9:20 AM	8 21340-1	Left; Left Ej ORT	Nesbitt Sila ORT	MAC
OR 2	6/25/2019	9:45 AM	9:30 AM	10:04 AM	9:46 AM	9:56 AM	9:30 AM	9:59 AM	10 21319-1	Left; Left Ei ORT	Nesbitt Sila ORT	MAC
OR 2	6/25/2019	10:30 AM	10:15 AM	10:47 AM	10:30 AM	10:37 AM	10:15 AM	10:43 AM	16 16782-3	Release A1 ORT	Nesbitt Sila ORT	MAC
OR 2	6/25/2019	12:00 PM	10:58 AM	11:30 AM	11:11 AM	11:19 AM	10:58 AM	11:25 AM	15 21054-1	Right: Right ORT	Nesbitt Sila ORT	MAC
OR 2	6/25/2019	12:45 PM	11:37 AM	12:57 PM	11:58 AM	12:46 PM	11:37 AM	12:52 PM	12 21201-1	Right: Right ORT	Nesbitt Silo ORT	GA
OR 2	6/25/2019	2:00 PM	1:10 PM	2:22 PM	1:35 PM	2:11 PM	1:10 PM	2:17 PM	18 21230-1	Right: Right ORT	Nesbitt Silo ORT	GA
OR 2	6/25/2019	3:15 PM	2:38 PM	3:41 PM	2:58 PM	3:22 PM	2:38 PM	3:36 PM	21 21396-1	Right: Close ORT	Nesbitt Silo ORT	GA
OR 2	6/25/2019	4:30 PM			4:04 PM	4:15 PM	3:49 PM	4:19 PM	13 21354-1	Left: Exclsic GEN	Nesbitt Silo ORT	l.
OR 2	6/26/2019	10:45 AM	11:02 AM	11:16 AM		11:10 AM	11:02 AM	11:15 AM	27 21418-1	Closed Nas ENT	Mecinski, A PLS	GA
OR 2	6/25/2019	11:30 AM		0.00.444	11:30 AM	11:38 AM	11:25 AM	11:42 AM	10 21411-1	Excision of ENT	Mecinski, A PLS	L
OR 2	6/27/2019	8:15 AM	8:21 AM	9:38 AM	8:44 AM	9:22 AM	8:21 AM	9:33 AM	15 20768-2	Right; Right ORT	Nesbitt Silo ORT	GA
OR 2	6/27/2019	9:30 AM	9:47 AM 10:30 AM	10:23 AM	10:03 AM 10:46 AM	10:14 AM 10:56 AM	9:47 AM 10:30 AM	10:19 AM 11:04 AM	14 21277-1 11 20418-2	Left: Relea: ORT Right: Rele: ORT	Nesbitt Silo ORT	MAC MAC
OR 2 OR 2	6/27/2019 6/27/2019	10:15 AM 11:00 AM	11:14 AM	11:08 AM 11:50 AM	11:29 AM	11:40 AM	11:14 AM		10 20893-2	Right: Excis ORT	Nesbitt Silo ORT Nesbitt Silo ORT	MAC
OR 2	6/27/2019	11:45 AM	11:14 AM	12:35 PM	12:16 PM	12:24 PM	11:59 AM	12:31 PM	12 21399-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	6/27/2019	12:30 PM	12:45 PM	1:44 PM	1:06 PM	1:32 PM	12:45 PM	1:39 PM	14 21320-1	Right: Repa ORT	Nesbitt Silo ORT	GA
OR 2	6/27/2019	1:45 PM	2;02 PM	2:53 PM	2:24 PM	2:38 PM	2:02 PM	2:48 PM	23 21410-1	Left: Closec ORT	Nesbitt Silo ORT	GA
OR 2	6/28/2019	7:30 AM	7:46 AM	8:06 AM	7:54 AM	8:04 AM	7:46 AM	8:06 AM	0 21164-2	Right Catar OPH	Thadani, St OPH	MAC
OR 2	6/28/2019	9:00 AM	8:15 AM	8:36 AM	8:23 AM	8:35 AM	8:15 AM	8:36 AM	9 21095-1	Right Catar OPH	Thadani, St OPH	MAC
OR 2	6/28/2019				10:11 AM	10:14 AM	10:06 AM	10:16 AM	90 21450-1	Excision/Bit ENT	Mecinski, A PLS	L
OR 2	6/28/2019	11:45 AM			10;43 AM	10:55 AM	10:25 AM	11:00 AM	9 21420-1	Debrideme ORT	Mecinski, A PLS	L
OR 2	6/28/2019	8:30 AM	10:38 AM	11:04 AM	10:46 AM	11:03 AM	10:38 AM	11:04 AM	22 21287-1	Right Catar OPH	Thadani, St OPH	MAC
OR 2	6/28/2019	9:15 AM	11:01 AM	1:12 PM	11:36 AM	12:49 PM	11:01 AM	1:06 PM	3 21202-1	Panniculed PLS	Mecinski, A PLS	GA
OR 2	6/28/2019	12:45 PM			11:16 AM	11:31 AM	11:08 AM	11:35 AM	118 21421-1	Drain Place GEN	Mecinski, A PLS	L
OR 2	7/1/2019	10:45 AM	11:27 AM	1:36 PM	12:09 PM	1:19 PM	12:09 PM	1:32 PM	74 21302-1	Right: Arthi ORT	Levine, Mar ORT	BLG
OR 2	7/1/2019	1:00 PM	2:06 PM	4:14 PM	2:43 PM	3:56 PM	2:06 PM	4:10 PM	34 21424-1	Right Clavic ORT	Levine, Ma [.] ORT	GA
OR 2	7/2/2019	8:15 AM	8:21 AM	8:54 AM	8:38 AM	8:43 AM	8:21 AM	8:49 AM	11 21039-1	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	7/2/2019	9:00 AM	9:00 AM	9:34 AM	9;17 AM	9:23 AM	9:00 AM	9:29 AM	11 13011-2	Right; Right ORT	Nesbitt Silo ORT	MAC
OR 2	7/2/2019	9:45 AM	9:43 AM	10:52 AM		10:39 AM	9:43 AM	10:47 AM	14 20977-1	Right: Right ORT	Nesbitt Silo ORT	GΑ
OR 2		11:30 AM	11:01 AM	12:09 PM	11:26 AM	11;54 AM	11:01 AM	12:00 PM	14 20277-3	Right: Explc ORT	Nesbitt Silo ORT	GA
OR 2	7/2/2019		12:32 PM	1:51 PM	12:54 PM	1:39 PM	12:32 PM	1:40 PM	32 21261-1	Left: Explor ORT	Nesbitt Silo ORT	GA
OR 2	7/3/2019	9:15 AM	10:02 AM	11:28 AM	10:27 AM	11:21 AM	10:02 AM		23 21460-1	Left; Distal ORT	Levine, Mar ORT	GA MAC
OR 2	7/5/2019	8:45 AM	8:27 AM	8:57 AM	8:34 AM	8:43 AM	8:27 AM	8:48 AM	21 21455-1	Incision and GEN	Mecinski, A PLS	MAC
OR 2	7/5/2019	9:45 AM		10:26 AM	9:42 AM	10:12 AM		10:21 AM	37 21480-1	Bilateral Ur OPH	Mecinski, A PLS	MAC
OR 2	7/5/2019			11:33 AM		11:20 AM 12:26 PM	10;36 AM 11;48 AM	12:30 PM	15 20402-3	Excision Ma PLS	Mecinski, APLS	GA GA
OR 2	7/5/2019 7/5/2019	12:15 PM 12:45 PM	11:40 AIVI	12:30 PM	12:01 PM 12:58 PM	1:08 PM	12:42 PM	1:14 PM	20 21484-1 12 16256-3	Suture Rem ENT Z-Plasty Rig PLS	Mecinski, A PLS Mecinski, A PLS	GA
OR 2	7/5/2019	1:45 PM			1:33 PM	1:37 PM	1;28 PM	1:40 PM	14 21385-1	Excision Le: ENT	Mecinski, A PLS	L L
OR 2 OR 2	7/5/2019	2:15 PM			1:57 PM	2:01 PM	1:50 PM	2:06 PM	10 12636-11	Excision Le: PLS	Mecinski, A PLS	Ĺ
OR 2	7/5/2019	2:45 PM			2:25 PM	2:51 PM	2:19 PM	2:57 PM	13 21487-1	Repair Righ HND	Mecinski, A PLS	Ĺ
OR 2	7/8/2019	9:45 AM	10:31 AM	12:04 PM	11:11 AM	11 46 AM	10:31 AM	12:00 PM	20 11753-2	Right Shoul ORT	Levine, Mar ORT	GΑ
OR 2	7/8/2019		12:20 PM	1:20 PM	12:42 PM	1:11 PM	12:20 PM	1:16 PM	20 15137-1	Left Knee: / ORT	Levine, Mar ORT	GA
OR 2	7/8/2019	1:15 PM	2:01 PM	3:50 PM	2:39 PM	3:31 PM	2:01 PM	3:46 PM	45 21449-1	Right: ArthrORT	Levine, Mar ORT	BLG
OR 2	7/12/2019	8:45 AM	8:42 AM	9:08 AM	8:50 AM	9:04 AM	8:42 AM	9:08 AM	24 21497-1	Excision Mt ENT	Mecinski, A PLS	GA
OR 2	7/12/2019		9:31 AM	9:47 AM	9:36 AM	9:42 AM	9:31 AM	9:47 AM	23 21498-1	Closed Nas: ENT	Mecinski, A PLS	GA
OR 2	7/12/2019	10:45 AM	10:11 AM	11:05 AM	10:26 AM	11:01 AM	10:11 AM	11:05 AM	24 21501-1	Left Digital HND	Mecinski, A PLS	GA
OR 2	7/12/2019		11:22 AM	12:04 PM	11:33 AM	11:59 AM	11:22 AM	12:04 PM	17 21502-1	Full Thickne PLS	Mecinski, A PLS	MAC
OR 2	7/12/2019		12:39 PM		12;53 PM	1:12 PM	12:39 PM	1:21 PM	35 21503-1	Excision of PLS	Mecinski, A PLS	GΑ
OR 2	7/12/2019	3:45 PM			1:49 PM	2:00 PM	1:45 PM	2:06 PM	24 21299-1	Excision Ski PLS	Mecinski, A PLS	L
OR 2	7/12/2019	2:45 PM			2:22 PM	2:39 PM	2:16 PM	2:42 PM	10 21492-1	Excision Le: PLS	MecInski, A PLS	L
OR 2	7/12/201 9	4:45 PM			2:59 PM	3:04 PM	2:55 PM	3;05 PM	13 21526-1	Repair Fore ENT	MecInski, A PLS	L
OR 2	7/15/2019	12:30 PM	12:18 PM		12:34 PM	1:05 PM	12:18 PM	1:09 PM	86 21392-1	Right: ArthrORT	Steinberg, . ORT	GA
OR 2	7/16/2019	8:15 AM	8:12 AM	8:44 AM	8:28 AM	8:36 AM	8:12 AM	8:41 AM	11 21386-1	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2	7/16/2019	9:00 AM	8:57 AM	9:26 AM	9:12 AM	9:18 AM	8:57 AM	9:24 AM	16 21406-1	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	7/16/2019	9:45 AM	9:40 AM	10:14 AM	9:54 AM	10:08 AM		10:11 AM	16 16030-2	Left Hand: ORT	Nesbitt Silo ORT	MAC
OR 2	7/16/2019	10:45 AM	10:32 AM	11:35 AM	10:57 AM	11:18 AM	10:32 AM	11:31 AM	21 21395-1	Left: Subto HND	Nasbitt Silo ORT	GA

OR 2	7/16/20	12:00	PM 11:54 A	M 1:00 P	M 12.12 DA	4 40:40.0							
OR 2	7/16/20								23	21215-1	l. Bilateral: Bi ORT	Nesbitt Silo ORT	MAC
OR 2	7/16/20								14	20998-2	Right: Right ORT	Nesbitt Sila ORT	MAC
OR 2								PM 2:22 PM	10	21394-1	. Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	7/16/20						M 2:34 F	PM 3;42 PM	12	16458-3		Nesbitt Silo ORT	GA
	7/17/20				M 9:35 AN	10:27 A	M 9:10 A	M 10:39 AM		21512-1		Levine, Mar ORT	
OR 2	7/18/20					1 8:34 A	M 8:14 A	M 8:40 AM		21054-2	•		GA
OR 2	7/18/20				VI 9:03 AM	1 9:11 A	M 8:47			21359-1		Nesbitt Silo ORT	MAC
OR 2	7/18/20		AM 9:27 AM	VI 10:06 AN	V 9:44 AN	1 9:58 AI				21360-1		Nesbitt Silo ORT	MAC
OR 2	7/18/20		AM 10:15 AM	M 10:51 AN	VI 10:31 AM					21387-1		Nesbitt Silo ORT	MAC
OR 2	7/18/20:	19 11:15 /	M 11:02 AN	V 11:32 AN	√ 11:15 AM							Nesbitt Silo ORT	MAC
OR 2	7/18/20:	19 12:00 F	M 11:52 AN							21443-1		Nesbitt Sllo ORT	MAC
OR 2	7/18/20:	19 1:15 F								11739-3	Left: Left Er ORT	Nesbitt Silo ORT	GA
OR 2	7/18/20:									21552-1	Left: Woun HND	Nesbitt Silo ORT	GA
OR 2	7/19/20:			. 3.11.74					11	21224-1	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	7/19/201			4 11:16 AN	10:24 AM				8	15575-3	Left: Excisic ORT	Nesbitt Silo ORT	L
OR 2	7/19/201								10	21464-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	7/19/201			1 11:54 AN					12	21425-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	7/19/201							M 12:31 PM	11	17640-3	Left: Releas ORT	Nesbitt Silo ORT	MAC
OR 2				1:19 PM	1 12:55 PM	1:14 PN	M 12:42 P.	M 1:24 PM	11	21469-1	Left: Excisic ORT	Nesbitt Silo ORT	GA
OR 2	7/19/201				1:42 PM			M 1:59 PM	4 .	21444-1	Left: Excisic ORT	Nesbitt Silo ORT	L
	7/22/201				11:08 AM	11:49 AN	A 10:30 A	M 12:05 PM		21525-1	Right: Repa ORT		
OR 2	7/23/201			1 8:58 AM	MA 05:8 1	8:50 AN	A 8:15 A	M 8:54 AM		10666-1	Right: Relei ORT	Levine, Mar ORT	GA
OR 2	7/23/201		M 9:08 AM	9:41 AM	1 9:23 AM	9:31 AN	4 9:08 A			20701-1		Nesbitt Silo ORT	MAC
OR 2	7/23/201	.9 9:45 A	M 9:48 AM	10:23 AM	10:05 AM	10:15 AM				17836-3	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	7/23/201	.9 10:30 A	M 10:34 AM	11:34 AM		11:20 AM					Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	7/23/201	9 11:15 A				12:32 PM				16489-2	Right: Syno ORT	Nesbitt Silo ORT	GA
OR 2	7/23/201	9 1:00 PI					1 12:55 PM			21414-1	Right: Repa HND	Nesbitt Silo ORT	GA
OR 2	7/25/201									21578-1	Right: Close ORT	Nesbitt Silo ORT	GA
OR 2	7/25/2019					8:35 AM				21559-1	Right: Excls ORT	Nesbitt Sila ORT	GA
OR 2	7/25/201					9:17 AN				21407-1	Left: Left & ORT	Nesbitt Silo ORT	MAC
OR 2	7/25/2019		VI 9:31 AIVI VI 10:10 AM			9:56 AM		****		12611-2	Left: Left Ei ORT	Nesbitt Sila ORT	MAC
OR 2	7/25/2019					11:34 AM			19 2	21582-1	Left: Open ORT	Nesbitt Silo ORT	BLG
OR 2				1:26 PM		1:21 PM	1 12:04 PN	/ 1:26 PM	19 2	21586-1	Left: Open ORT	Nesbitt Silo ORT	BLG
	7/25/2019				1:50 PM	2:02 PM	1:37 PN	4 2:09 PM	11 1	19506-2	Left: Excisic ORT	Nesbitt Silo ORT	L
OR 2	7/26/2019				9:04 AM	9:21 AM	8:50 AN	MA 08:9		21584-1	Excision of ENT	Mecinski, A PLS	
OR 2	7/26/2019					10:41 AM	9:58 AN	10:49 AM		1566-1	Debrideme ORT	Mecinski, APLS	GA
OR 2	7/26/2019		/ 11:09 AM	12:13 PM	11.22 AM	11:59 AM	11:09 AN			1458-1	Debrideme ORT		GA
OR 2	7/26/2019	3 2:00 PN	12:53 PM	1:22 PM	12:53 PM	1:18 PM				1593-1		Mecinski, A PLS	GA
OR 2	7/30/2019	8:15 AN	MA 01:8 N	8:36 AM	8:24 AM	8:30 AM					Exploration HND	Mecinski, A PLS	L
OR 2	7/30/2019	9:00 AN	A 8:45 AM	9:19 AM	9:03 AM	9:15 AM				0661-3	Right: Right ORT	Nesbitt Sila ORT	MAC
OR 2	7/30/2019			9:59 AM	9:45 AM	9:52 AM				1345-2	Right: Hard ORT	Nesbitt Silo ORT	MAC
OR 2	7/30/2019			10:45 AM						1396-2	Right: Remi ORT	Nesbitt Sila ORT	MAC
OR 2	7/30/2019					10:41 AM			10 2	1377-1	Left: Excisic ORT	Nesbitt Silo ORT	MAC
OR 2	7/30/2019			11:27 AM		11:22 AM			11 1	5718-3	Left: Releat ORT	Nesbitt Silo ORT	GA
OR 2	8/1/2019			12:13 PM		12:07 PM			19 2	1446-1	Left: Left Er ORT	Nesbitt Sila ORT	MAC
OR 2				9:26 AM	9:06 AM	9:15 AM	8:52 AM	9:21 AM	18 2	1532-1	Left: Left Er ORT	Nesbitt Silo ORT	MAC
	8/1/2019			10:20 AM	9:50 AM	10:08 AM	9:32 AM	10:16 AM	11 2:	1533-1	Left: Excisk GEN	Nesbitt Silo ORT	GA
OR 2	8/1/2019		1 10:23 AM	10:59 AM	10:42 AM	10:50 AM	10:23 AM	10:56 AM		1308-2	Left: Left Er ORT	Nesbitt Silo ORT	
OR 2	8/1/2019		11:05 AM	11:48 AM	11:30 AM	11:37 AM	11:05 AM	11:45 AM		1595-1	Left: Left Er ORT		MAC
OR 2	8/1/2019			12:36 PM	12:11 PM	12:28 PM	11:56 AM			1474-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	8/1/2019	12:00 PM	12:42 PM	1:58 PM	1:04 PM	1:40 PM				1475-1	_	Nesbitt Sila ORT	MAC
OR 2	8/1/2019	1:15 PM	2:10 PM	3:48 PM	2:33 PM	3:27 PM	2:10 PM			1938-2	Right: Right ORT	Nesbitt Sila ORT	GA
OR 2	8/2/2019	9:15 AM		10:20 AM		10:08 AM	9:15 AM				Right: Right ORT	Nesbitt Silo ORT	GA
OR 2	8/2/2019	10:30 AM				11:05 AM				1589-1	Excision Mt ENT	Mecinski, A PLS	MAC
OR 2		11:30 AM					10:31 AM			9540-2	Debrideme ORT	Mecinski, A PLS	GA
OR 2		12:15 PM				11:43 AM		11:45 AM		L346-2	Scar Revisic PLS	Mecinski, A PLS	L
OR 2	8/2/2019	1:15 PM				12:18 PM	11:55 AM		10 21	1299-2	Excision Ba PLS	Mecinski, A PLS	L
OR 2	8/5/2019		40.45.444	40.00	12:55 PM	1:17 PM	12:50 PM	1:24 PM	23 21	l620-1	Wide Excisi PLS	Mecinski, A PLS	L
OR 2		9:45 AM				12:01 PM	10:15 AM	12:08 PM	34 21	556-1	Right Shoul ORT	Levine, Mar ORT	BLG
	8/5/2019				12:53 PM	1:14 PM	12:31 PM	1:18 PM	23 21	580-1	Left Knee: / ORT	Levine, Mar ORT	GA
OR 2	8/6/2019	8:15 AM		9:29 AM	8:42 AM	9:17 AM	8:25 AM	9:23 AM	10 21	408-1	Bliateral: Bi ORT	Nesbitt Silo ORT	MAC
OR 2	8/6/201 9	9:00 AM		10:18 AM	9:50 AM :	10:07 AM	9:36 AM	10:12 AM		539-1	Right Right ORT	Nesbitt Sila ORT	GA
OR 2	8/6/2019	9:45 AM		11:22 AM	10:38 AM 1	11:10 AM		11:16 AM		553-1	Bilateral: Bi ORT	Nesbitt Silo ORT	
OR 2	8/6/2019	10:30 AM	11:26 AM	12:00 PM	11:41 AM 1		11:26 AM	11:54 AM	10 21		Right: Right ORT		MAC
OR 2	8/6/2019	11:15 AM	12:12 PM				12:12 PM	12:45 PM	18 21		Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	8/6/2019	12:00 PM	12:53 PM	1:30 PM	1:07 PM		12:53 PM	1:24 PM		314-1	Right: Rele: ORT	Nesbitt Silo ORT	MAC
OR 2	8/6/2019	12:45 PM	1:33 PM	2:13 PM		1:59 PM	1:34 PM	2:05 PM	10 21			Nesbitt Silo ORT	MAC
OR 2	8/6/2019	1:30 PM	2:17 PM	3:21 PM		3:09 PM	2:17 PM	3:15 PM			Right: Hard ORT	Nesbitt Silo ORT	MAC
OR 2	8/6/2019	2:30 PM	3:26 PM	4:33 PM		4:22 PM	3:26 PM		12 21		Right: Debr ORT	Nesbitt Silo ORT	MAC
OR 2	8/7/2019	2:15 PM	2:19 PM	4:21 PM				4:27 PM	11 21		Right: Right ORT	Nesbitt Sila ORT	GA
OR 2	8/7/2019	3:30 PM	4:38 PM	6:10 PM		3;58 PM	2:19 PM	4:14 PM	52 21		Left Radius ORT	Lavine, Mar ORT	GA
OR 2	8/8/2019	7:30 AM				6:00 PM	4:38 PM	6:10 PM	24 21		Left Patella ORT	Levine, Ma [.] ORT	GA
OR 2	8/8/2019	9:00 AM	8:38 AM 9:15 AM	9:10 AM		9:00 AM	8:37 AM	9:06 AM	24 21		Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	8/8/2019			9:47 AM		9:37 AM	9:15 AM	9:43 AM	9 205	556-2	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
		9:45 AM				0:18 AM	9.52 AM	10:20 AM	9 215	565-1	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2		10:30 AM		11:46 AM	10:47 AM 1	1:35 AM	10:31 AM	11:42 AM	11 214	476-1	Left: Subto HND	Nesbitt Silo ORT	GA
OR 2	8/8/2019	11:45 AM	12:00 PM			2:50 PM	12:00 PM	1:00 PM	18 216		Right: Close ORT	Nesbitt Silo ORT	GA
OR 2	8/8/2019	1:00 PM	1:27 PM	2:35 PM	1:46 PM	2:16 PM	1:27 PM	2:30 PM	27 216		Right: Close ORT	Nesbitt Sila ORT	
OR 2	8/8/2019	2:15 PM	2:38 PM	3:12 PM		3:00 PM	2:38 PM	3:07 PM	8 212		Right: Right ORT		GA MAC
OR 2	8/12/2019	7;30 AM	7:49 AM	9:25 AM		9:16 AM	7:49 AM	9:25 AM	102 160		Right: Arth: ORT	Nesbitt Silo ORT	MAC
OR 2	8/12/2019	9:45 AM				1:29 AM		11:35 AM				Levine, Mar ORT	BLG
OR 2	8/12/2019			0.48 AM 1					29 215		Left: Distal ORT	Levine, Ma ORT	GA
OR 2								10:47 AM	85 216		Right Elbov ORT	Steinberg, . ORT	GA
OR 2								12:40 PM	18 216		Right: Oper ORT	Steinberg, . ORT	GA
OR 2	8/12/2019	2:15 PM					12:09 PM	1:47 PM	31 215		eft: Arthrc ORT	Levine, Ma [,] ORT	BLG
OR 2	8/13/2019					3:51 PM	2:17 PM	3:58 PM	30 195		Right: Arth: ORT	Levine, Mar ORT	BLG
		8:15 AM				0:05 AM		10:10 AM	14 214	13-2 F	Right: Right ORT	Nesbitt Sila ORT	MAC
OR 2	8/13/2019						10:25 AM	11:15 AM	1 5 214		Right: Debr ORT	Nesbitt Silo ORT	MAC
OR 2					1:53 AM 1:	2:02 PM 1	11:38 AM	12:08 PM	. 23 214		eft: Laft Ei ORT	Nesbitt Silo ORT	MAC
OR 2					.2:38 PM 12	2:44 PM 1		12:49 PM	16 161		eft: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	8/13/2019			1:31 PM	1:17 PM 1		1:03 PM	1:31 PM	14 129		eft: Left Ei ORT	Nesbitt Silo ORT	
OR 2	8/13/2019	12:15 PM	1:47 PM	2:31 PM			1:47 PM	2:31 PM	16 109		eft: Left E) ORT	Nesbitt Sila ORT	MAC
												. TO DIE ON	GA

OR 2	8/13/2019	1:00 PM	2:47 PM	4:10 PM	3:07 PM	4:02 PM	2:47 PM	4:10 PM	16 21540-1	Left: Left Ei ORT	Nesbitt Sila ORT	GA
OR 2	8/14/2019	9:45 AM	9:05 AM	10:10 AM	9:30 AM	9:54 AM	9:05 AM	10:00 AM	36 21681-1	Debrideme ORT	Mecinski, A PLS	GA
OR 2	8/15/2019	8:15 AM	8:26 AM	8;57 AM	8:39 AM	8;48 AM	8:26 AM	8;52 AM	12 21453-1	Left: Left Ei ORT	Nesbitt Sila ORT	MAC
OR 2	8/15/2019	9:00 AM	9:04 AM	9:40 AM	9:21 AM	9:31 AM	9:04 AM	9:35 AM	12 21410-2	Left; Hardw ORT	Nesbitt Silo ORT	MAC
OR 2	8/15/2019	9:45 AM	9:47 AM	10:18 AM		10:08 AM		10:13 AM	12 21425-2	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2	8/15/2019		10;24 AM	11:03 AM	10:38 AM	10:53 AM		10:58 AM	11 21654-1	Left: Releas HND	Nesbitt Silo ORT	MAC GA
OR 2	8/15/2019	11:15 AM	11:13 AM	12:24 PM	11:33 AM	12:14 PM	11:13 AM 12:45 PM	12:19 PM 1:45 PM	15 21243-1 26 21682-1	Left: Left El ORT Left: Woun HND	Nesbitt Silo ORT Nesbitt Silo ORT	GA
OR 2	8/15/2019 8/15/2019	12:30 PM 1:30 PM	12:45 PM 2:02 PM	1:50 PM 3:36 PM	1:07 PM 2:24 PM	1:38 PM 3:23 PM	2:02 PM	3:29 PM	17 21597-1	Left: Left Er ORT	Nesbitt Silo ORT	GA
OR 2 OR 2	8/15/2019	8:45 AM	9:03 AM	9:25 AM	9:09 AM	9:14 AM	9:03 AM	9:22 AM	22 21448-1	Excision Rig ENT	Mecinski, A PLS	MAC
OR 2	8/16/2019		9:34 AM	11:30 AM	9:51 AM	11:16 AM		11:27 AM	12 21695-1	Repair to FIHND	Mecinski, APLS	GA
OR 2	8/16/2019	12:00 PM			11:55 AM	12:05 PM		12:07 PM	17 20029-2	Excision Let GEN	Mecinski, A PLS	L
OR 2	8/16/2019				12:25 PM	12:34 PM	12:20 PM	12:36 PM	13 21674-1	Repair Left PLS	Mecinski, A PLS	L
OR 2	8/16/2019	1:15 PM			1:13 PM	1:22 PM	1:09 PM	1:28 PM	33 10279-2	Excision of ENT	Mecinski, A PLS	L
OR 2	8/16/2019	2:00 PM			1:58 PM	2:02 PM	1:53 PM	2:05 PM	25 21696-1	Removal Er ENT	Mecinski, A PLS	L
OR 2	8/20/2019	9:45 AM	9:57 AM	10:42 AM	10:13 AM	1:34 PM	9:57 AM	10:40 AM	17 21599-1	Left: Revisi ORT	Nesbitt Silo ORT	GA
OR 2	8/20/2019	10:30 AM	10:52 AM	11:28 AM		11:21 AM	10:52 AM	11:25 AM	12 21600-1	Left: Left O ORT	Nesbitt Sila ORT	MAC
OR 2	8/20/2019	11:15 AM	11:36 AM	12:09 PM	11:49 AM	12:03 PM	11:36 AM	12:07 PM 1:03 PM	10 21640-1 19 21648-1	Left: Excisic ORT Left: Excisic ORT	Nesbitt Silo ORT Nesbitt Silo ORT	MAC MAC
OR 2	8/20/2019		12:26 PM	1:05 PM 1:42 PM	12:40 PM 1:25 PM	12:58 PM 1:35 PM	12:26 PM 1:13 PM	1:40 PM	10 19666-2	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	8/20/2019	12:45 PM 1:30 PM	1:13 PM 1:48 PM	2:32 PM	2:00 PM	2;24 PM	1:48 PM	2:30 PM	8 21686-1	Right: Excis ORT	Nesbitt Silo ORT	MAC
OR 2 OR 2	8/20/2019 8/20/2019	2:15 PM	1.40 ()4)	2.52 / 111	2:56 PM	3:18 PM	2:41 PM	3:23 PM	11 21641-1	Left: Excisic ORT	Nesbitt Silo ORT	L
OR 2	8/22/2019	8:15 AM	8:12 AM	8:40 AM	8:23 AM	8:31 AM	8:12 AM	8:36 AM	11 21532-2	Right: Right ORT	Neshitt Silo ORT	MAC
OR 2	8/22/2019	9:00 AM	8:51 AM	9:42 AM	9:05 AM	9:33 AM	8:51 AM	9:38 AM	15 21357-1	Bilateral: Bi ORT	Nesbitt Silo ORT	MAC
OR 2	8/22/2019	9:45 AM	9:49 AM	10:45 AM	10:05 AM	10:36 AM	9:49 AM	10:42 AM	11 17940-1	Bilateral: Bi ORT	Nesbitt Silo ORT	MAC
OR 2	8/22/2019	10:30 AM	10:58 AM	11:51 AM	11:33 AM	11:41 AM	10:58 AM	11:47 AM	16 21571-1	Left; Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	8/22/2019	11:15 AM	12:08 PM	12:52 PM		12:42 PM	12:08 PM		21 21677-1	Left: Excisic ORT	Nesbitt Silo ORT	MAC
OR 2	8/22/2019	12:00 PM	12:58 PM	2:23 PM	1:18 PM	2:15 PM	12:58 PM	2:19 PM	11 21379-1	Left: Left U ORT	Nesbitt Silo ORT	GA
OR 2	8/22/2019	1:15 PM	2:37 PM	3:52 PM	3:04 PM	3:37 PM	2:37 PM	3:43 PM	18 21601-1	Left: Left W ORT	Nesbitt Silo ORT	GA
OR 2	8/27/2019	8:30 AM	8:32 AM	9:01 AM	8:44 AM	8:53 AM	8:32 AM 9:04 AM	8:57 AM 9:40 AM	11 21545-1 7 20692-2	Left: Left Er ORT Left: Exclsic GEN	Nesbitt Silo ORT Nesbitt Silo ORT	MAC MAC
OR 2	8/27/2019 8/27/2019	9:15 AM 10:15 AM	9:08 AM 10:04 AM	9:44 AM 10:33 AM	9:22 AM 10:19 AM	9:36 AM 10:27 AM	10:04 AM		24 21630-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2 OR 2	8/27/2019		10:44 AM	11:45 AM	11:00 AM	11;35 AM	10:43 AM		10 19764-2	Left: Subto HND	Nesbitt Silo ORT	GA
OR 2	8/27/2019	12:15 PM	12:02 PM	12:51 PM	12:19 PM	12:42 PM	12:02 PM	12:51 PM	21 18699-2	Left: Subto HND	Nesbitt Silo ORT	GA
OR 2	8/27/2019	1:30 PM	12:59 PM	1:33 PM	1:14 PM	1:23 PM	12:59 PM	1:33 PM	8 21276-4	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	8/27/2019	2:15 PM	1:44 PM	2:23 PM	1:58 PM	2:14 PM	1:44 PM	2:19 PM	11 21602-1	Right: Righi ORT	Nesbitt Silo ORT	MAC
OR 2	8/27/2019	3:00 PM	2:29 PM	3:01 PM	2:43 PM	2:55 PM	2:29 PM	3:01 PM	10 21578-2	Right: Hard ORT	Nesbitt Silo ORT	MAC
OR 2	8/29/2019	8;15 AM	8:13 AM	8:54 AM	8:28 AM	8:48 AM	8:13 AM	8:31 AM	11 21667-1	Right: Rele: ORT	Nesbitt Silo ORT	MAC
OR 2	8/29/2019	9:00 AM	9:05 AM	9:43 AM	9:20 AM	9:36 AM	9:05 AM	9:40 AM	34 21678-1	Right: Excis ORT	Nesbitt Silo ORT	MAC
OR 2	8/29/2019	9:45 AM	9:54 AM	10:53 AM	10:11 AM	10:44 AM		10:50 AM	14 21651-1	Bilateral: BiORT	Nesbitt Silo ORT	MAC
OR 2	8/29/2019		11:10 AM	11:46 AM	11:27 AM	11:37 AM		11:43 AM	20 21717-1	Left: Hardw ORT	Nesbitt Silo ORT	MAC MAC
OR 2	8/29/2019	11:15 AM 1:15 PM	11:53 AM 2:04 PM	12:24 PM 3:14 PM	12:08 PM 2:22 PM	12:17 PM 3:03 PM	11:53 AM 2:04 PM	12:21 PM 3:11 PM	10 21637-1 103 21688-1	Right: Right ORT Left: Explor ORT	Nesbitt Silo ORT Nesbitt Silo ORT	GA
OR 2 OR 2	8/29/2019 8/30/2019	8:45 AM	8:51 AM	9:32 AM	9:00 AM	9:21 AM	8:51 AM	9:30 AM	25 21497-2	Excision of ENT	Mecinski, A PLS	GA
OR 2	8/30/2019		9:46 AM	10:12 AM	9;55 AM	10:05 AM		10:08 AM	16 19838-2	Wide Excisi ENT	Mecinski, APLS	MAC
OR 2	8/30/2019		10:26 AM	10:53 AM	10:36 AM	10:45 AM	10:26 AM	10:51 AM	18 21749-1	Excision Mt ENT	Mecinski, APLS	MAC
OR 2	8/30/2019	12:15 PM	11:29 AM	12;55 PM	11:44 AM	12:40 PM	11:29 AM	12:53 PM	38 21751-1	Repair Left HND	Mecinski, APLS	GA
OR 2	8/30/2019	2:30 PM	1:17 PM	2:17 PM	1:32 PM	2:06 PM	1:17 PM	2:15 PM	24 10694-4	Excision Ga ORT	Mecinski, APLS	GA
OR 2	8/30/2019	3:30 PM			2:28 PM	2:34 PM	2:20 PM	2:36 PM	5 16215-3	Excision Le: PLS	Mecinski, APLS	L
OR 2	8/30/2019	4:15 PM			3:06 PM	3:12 PM	3:00 PM	3:15 PM	24 21448-2	Excision Let ENT	Mecinski, APLS	L .
OR 2	9/4/2019	10:15 AM	11:08 AM	12:50 PM	11:40 AM	12:38 PM	11:08 AM 8:30 AM	12:43 PM	48 12111-11 15 21753-1	Right Breas PLS Excision of PLS	Andochick, PLS	GA
OR 2	9/6/2019 9/6/2019	8:30 AM 9:45 AM	8:30 AM 9:27 AM	9:15 AM 10:17 AM	8;44 AM 9;40 AM	8:59 AM 10:05 AM	9:27 AM	9:12 AM 10:14 AM	15 21785-1 15 21785-1	Wide Excisi ENT	Mecinski, APLS Mecinski, APLS	GA GA
OR 2 OR 2			10:39 AM	11:28 AM		11:15 AM	10:39 AM		25 21787-1	Excision McENT	Mecinski, A PLS	MAC
OR 2	9/6/2019			12:20 PM	11:50 AM	12:07 PM	11:39 AM		14 21789-1	Flap Closur PLS	Mecinski, APLS	GA
OR 2	9/6/2019	1:00 PM			12:34 PM	12:37 PM	12:30 PM	12:38 PM	13 21593-2	Removal Pi ORT	Mecinski, APLS	L
OR 2	9/6/2019	1:45 PM			12:54 PM	1:09 PM	12:52 PM	1:12 PM	14 21594-2	Removal Pi ORT	Mecinski, APLS	L
OR 2	9/6/2019	2:30 PM			1:27 PM	1:31 PM	1;25 PM	1:34 PM	13 21788-1	Incision and GEN	Mecínski, A PLS	L
OR 2	9/10/2019	8:15 AM	8;10 AM	8:40 AM	8:24 AM	8:31 AM	8;10 AM	8:35 AM	7 21545-2	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	9/10/2019	9:00 AM	8;44 AM	9:15 AM	8:58 AM	9:06 AM	8;44 AM	9:11 AM	9 21276-3	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	9/10/2019	9:45 AM	9:19 AM	9:50 AM	9:34 AM	9:40 AM	9:19 AM	9:45 AM 11:19 AM	8 20802-2	Left: Left ELORT	Nesbitt Silo ORT Nesbitt Silo ORT	MAC
OR 2	9/10/2019 9/10/2019		9:55 AM 11:38 AM	11:23 AM 1:08 PM	10:16 AM 12:01 PM	11:14 AM 12:58 PM	9:55 AM 11:38 AM	1:19 AM	10 21649-1 19 16342-3	Left: Left El ORT Left: Left Tl HND	Nesbitt Silo ORT	GA GA
OR 2 OR 2	9/12/2019	8:30 AM	8:26 AM	8:57 AM	8:44 AM	8:52 AM	8:26 AM	8:57 AM	9 21704-1	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	9/12/2019	9:15 AM	9:06 AM	9:50 AM	9:22 AM	9:40 AM	9;06 AM	9:46 AM	9 21548-1	Right: Right ORT	Nesbitt Sila ORT	MAC
OR 2	9/12/2019		9:55 AM	10:30 AM		10:20 AM	9:55 AM	10:26 AM	9 21555-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	9/12/2019	10:45 AM	10:36 AM	11:12 AM	10:48 AM	11:04 AM	10;36 AM	11:08 AM	10 21635-2	Right: Hard ORT	Nesbitt Sila ORT	MAC
OR 2	9/12/2019	11:30 AM	11:21 AM	12:23 PM	11:42 AM	12:11 PM	11;21 AM	12:18 PM	13 21784-1	Right: Repa HND	Nesbitt Sila ORT	GA
OR 2	9/13/2019	8:45 AM	8:50 AM	10:07 AM	9:10 AM	9:52 AM	8:50 AM	9:59 AM	19 21810-1	Repair Digital Nerve Le	Mecinski, APLS	GA
OR 2	9/13/2019		10:18 AM	11:12 AM		10:55 AM	10:18 AM		19 21835-1	Debridema ORT	Mecinski, APLS	GA
OR 2	9/13/2019		11:24 AM	12:58 PM	11:44 AM	12:47 PM	11:24 AM		22 21834-1	Repair Flex HND	Mecinski, A PLS	GA
OR 2	9/13/2019				1:13 PM	1:32 PM	1:07 PM	1:35 PM	16 21490-1	Scar Revisit PLS	Mecinski, APLS	L
OR 2 OR 2	9/13/2019 9/16/2019	1:45 PM 9:45 AM	10.12 464	11:51 AM	1:54 PM 10:45 AM	2:11 PM 11:39 AM	1:46 PM 10:12 AM	2:14 PM	11 21824-1 62 21671-1	Delayed Wi HND Right: Arthi ORT	Mecinski, APLS Levine, Mar ORT	L GA
OR 2	9/16/2019	12:00 PM	12:17 PM	1:37 PM	12:39 PM	1:27 PM	12:17 PM	1:32 PM	30 21786-1	Right: Right ORT	Levine, Mar ORT	GA
OR 2	9/17/2019	8:15 AM	8:11 AM	8:44 AM	8:24 AM	8:38 AM	8:11 AM	8:42 AM	12 21698-1	Right: Relei ORT	Nesbitt Silo ORT	MAC
OR 2	9/17/2019	9:00 AM	9;03 AM	9:37 AM	9:18 AM	9:32 AM	9:03 AM	9:35 AM	21 21645-2	Right: Hard ORT	Nesbitt Silo ORT	MAC
OR 2	9/17/2019	9:45 AM	9:43 AM	10:23 AM	9:58 AM	10:17 AM	9:43 AM		8 18338-2	Left: Releas ORT	Nesbitt Silo ORT	MAC
OR 2	9/17/2019		10:39 AM	11:23 AM	10:54 AM	11:17 AM			18 21745-1	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2	9/17/2019		11:38 AM	12:59 PM		12:52 PM	11:38 AM		17 21705-1	Left: Subto HND	Nesbitt Silo ORT	GA
OR 2	9/17/2019		1:29 PM	2:31 PM	1:51 PM	2:29 PM	1:29 PM	2:29 PM	32 20152-2	Left: Left El ORT	Nesbitt Silo ORT	GA
OR 2	9/17/2019	1:45 PM	3:00 PM	4:27 PM	3:32 PM	4:20 PM	3:00 PM	4:25 PM	31 21825-1	Left: Open ORT	Nesbitt Silo ORT	GA GA
OR 2	9/17/2019 9/18/2019	3:30 PM 9:30 AM	4:45 PM 10:11 AM	5:33 PM 10:49 AM	5:03 PM 10:19 AM	5:17 PM 10:34 AM	4:45 PM 10:11 AM	5:31 PM 10:42 AM	20 21837-1 23 21836-1	Right: Closs ORT Excision La: ENT	Nesbitt Silo ORT Mecinski, APLS	GA GA
OR 2 OR 2	9/18/2019	10:15 AM	10.11 AIVI	TO:43 KIVI	11:03 AM	11:22 AM	11:06 AM	11:26 AM	24 21838-1	Wide Excisi PLS	Mecinski, A PLS	L.
OR 2	9/19/2019	8:15 AM	8:25 AM	8:57 AM	8:41 AM	8:48 AM	8:25 AM	8:52 AM	10 21707-1	Right: Right ORT	Nesbitt Silo ORT	MAC
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OR 2	9/19/20:	19 9:00 A	M 9:05 A	M 9:38 AN	√1 9:22 AN	4 9:29 AM	4 0.05 6						
OR 2	9/19/20:			M 10:29 AN		л 3:29 AI Л 10:15 AN		M 9:33 AM M 10:24 AM		3 21736-1		Nesbitt Silo ORT	MAC
OR 2	9/19/20:									9 12352-7		Nesbitt Silo ORT	GA
OR 2	9/19/20:	L9 11:15 AI								2 20895-2 1 21758-1		Nesbitt Silo ORT	MAC
OR 2	9/19/201	L9 12:00 Pf	M 12:09 PM							21757-1 21757-1		Nesbitt Silo ORT	MAC
OR 2		12:45 Pf	M 12:54 PM	Vf 2:12 PN						9 21708-1	Left: Subto HND	Nesbitt Silo ORT	MAC
OR 2	9/19/201				2:38 PM					3 21747-1	Right: Excis ORT	Nesbitt Silo ORT Nesbitt Silo ORT	GA,
OR 2	9/20/201					1 9:46 AN	4 9:01 AM			7 21844-1	Repair Digit HND	Mecinski, A PLS	L GA
OR 2	9/20/201			M 10:51 AN	1 10:35 AM	1 10:48 AN	10:21 AN	V 10:51 AM		3 21861-1	Exploration HND	Mecinski, A PLS	GA
OR 2	9/20/201				11:19 AV	11:34 AN	1 11:10 AN	И 11:36 AM		21813-1	Wide Excisi PLS	Mecinski, A PLS	L
OR 2	9/20/201				12:13 PM		1 12:08 PM	/ 12:30 PM	32	10629-2	Excision M. PLS	Mecinski, A PLS	Ĺ
OR 2 OR 2	9/24/201								17	21636-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	9/24/201 9/24/201								19	21701-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	9/24/201									21748-1	Right: Right ORT	Nesbitt Sila ORT	GA
OR 2	9/24/201						12:05 PN			16036-3	Right: Arthi ORT	Nesbitt Silo ORT	GA
OR 2	9/25/201									21761-1	Left: Explor HND	Nesbitt Silo ORT	GA
OR 2	9/26/201									21852-1	Excision Ma PLS	Mecinski, A PLS	GA
OR 2	9/26/201					8:37 AM 9:54 AM				21595-2	Right: Right ORT	Nesbitt Sila ORT	MAC
OR 2	9/26/201									21618-1	Right: Right ORT	Nesbitt Silo ORT	GA
OR 2	9/26/201		1 11:01 AN				10:18 AM 11:01 AM			21650-1	Right: Relei ORT	Nesbitt Silo ORT	MAC
OR 2	9/26/2019		1 11:42 AM							21386-2	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	9/26/2019					1:17 PM				21767-1	Right: Rele: ORT	Nesbitt Silo ORT	MAC
OR 2	9/26/2019	1:15 PM				2:04 PM				21782-1 21606-1	Right: Revis ORT	Nesbitt Silo ORT	GA
OR 2	9/26/2019	2:00 PM				2:45 PM				21694-1	Left: Exclsic ORT	Nesbitt Sila ORT	MAC
OR 2	9/26/2019	2:45 PM	3:01 PM		3:20 PM	3:38 PM				21879-1	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	9/27/2019	8:15 AM	8:07 AM	8:50 AM		8:41 AM				21811-2	Left: Explor HND Amputatio: ORT	Nesbitt Silo ORT	GA
OR 2	9/27/2019	9:15 AM	1		8:58 AM	9:17 AM				21854-1	Excision Le: ENT	Mecinski, A PLS Mecinski, A PLS	GA
OR 2	9/27/2019				9:35 AM	9:36 AM				21890-1	Pin Remov: ORT	Mecinski, A PLS	L L
OR 2	9/27/2019				10:09 AM	10:15 AM	10:03 AM			21855-1	Repair Left ENT	Mecinski, A PLS	L
OR 2	9/27/2019				10:38 AM	10:48 AM	10:31 AM	10:55 AM		20029-3	Debrideme ORT	Mecinski, A PLS	Ĺ
OR 2		11:45 AM			11:17 AM	11:26 AM				21881-1	Excision Sq. PLS	Mecinski, A PLS	Ĺ
OR 2	9/27/2019				12:00 PM	12:05 PM	11:55 AM	12:07 PM	23	21788-2	Debrideme ORT	Mecinski, A PLS	- L
OR 2 OR 2	10/1/2019				8:39 AM	8:48 AM	8:23 AM	8:57 AM	16	21770-1	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	10/1/2019				9:14 AM	9:22 AM	9:01 AM		4	21679-2	Left; Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2	10/1/2019 10/1/2019		9:37 AM 10:13 AM		9:49 AM	9:59 AM	9:37 AM		11	21720-1	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	10/1/2019					10:54 AM	10:13 AM		11	21783-1	Bilateral: Bi ORT	Nesbitt Sila ORT	MAC
OR 2	10/1/2019				11:22 AM	11:31 AM	11:09 AM			21446-2	Right: Righ! ORT	Nesbitt Silo ORT	MAC
OR 2	10/1/2019			12:24 PM 2:28 PM	12:01 PM		11:43 AM			21795-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	10/3/2019	8:15 AM	8:22 AM	8:48 AM	1:14 PM 8:37 AM		12:54 PM	2:23 PM		21882-1	Right: Oper ORT	Nesbitt Silo ORT	GA
OR 2	10/3/2019	9:00 AM	8:58 AM	9:33 AM	9:13 AM	8:43 AM 9:24 AM	8:22 AM			21740-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	10/3/2019	9:45 AM	9:38 AM		9:56 AM	10:02 AM	8:58 AM 9:38 AM			21737-1	Right: Rele: HND	Nesbitt Silo ORT	MAC
OR 2	10/3/2019			10:52 AM	10:30 AM	10:43 AM	10:18 AM			21815-1	Left: Left Er ORT	Nesbitt Sila ORT	MAC
OR 2	10/3/2019		11:00 AM		11:17 AM	11:24 AM		10:47 AM 11:28 AM		21738-1	Left: Left Er ORT	Nesbitt Sila ORT	MAC
OR 2	10/3/2019				11:57 AM	12:13 PM	11:42 AM			19035-2 21798-1	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	10/4/2019	9:30 AM	8:53 AM	9:30 AM	9:10 AM	9:23 AM	8:53 AM	9:28 AM		21/98-1 21883-1	Left: Releas ORT	Nesbitt Silo ORT	MAC
OR 2	10/4/2019	8:45 AM	9:39 AM	10:12 AM		10:04 AM		10:10 AM		21876-1	Right: Right ORT Right: Rele: ORT	Nesbitt Sila ORT	MAC
OR 2	10/4/2019	10:15 AM	10:26 AM	10:55 AM	10:41 AM	10:48 AM		10:53 AM		21884-1	Right: Right ORT	Nesbitt Sila ORT	MAC
OR 2	10/4/2019	11:00 AM	11:10 AM	11:58 AM	10:27 AM	11:48 AM		11:55 AM		21902-1	Right: Right HND	Nesbitt Silo ORT Nesbitt Silo ORT	MAC
OR 2	10/4/2019	11:45 AM	12:15 PM	1:01 PM	12:34 PM	12:47 PM	12:15 PM	12:58 PM		19792-2	Left: Exclsic ORT	Nesbitt Silo ORT	MAC
OR 2	10/4/2019	12:45 PM	1:17 PM	2:28 PM	1:36 PM	2:15 PM	1:17 PM	2:25 PM		16256-4	Left: Left W HND	Nesbitt Silo ORT	MAC GA
OR 2	10/4/2019	2:00 PM	2:49 PM	3:55 PM	3:12 PM	3:40 PM	2:49 PM	3:53 PM		21901-1	Left: Closer ORT	Nesbitt Silo ORT	GA
OR 2	10/7/2019	9:45 AM	10:16 AM		10:51 AM	11:41 AM	10:16 AM	11;58 AM	33 :	14768-3	Right: Arth: ORT	Levine, Mar ORT	BLG
OR 2	10/8/2019	8:15 AM	8;28 AM	9;03 AM	8:41 AM	8:56 AM	8:28 AM	9:01 AM	13 2	21549-1	Right: Excis ORT	Nesbitt Silo ORT	MAC
OR 2	10/8/2019	9;00 AM	9:18 AM	9:46 AM	8:32 AM	9:41 AM	9:18 AM	9:44 AM	17 2	21221-1	Right: Right ORT	Nesbitt Sila ORT	MAC
OR 2	10/8/2019	9:45 AM				10:26 AM	10:01 AM	10:32 AM	17 2	21805-1	Right: Rele; ORT	Nesbitt Silo ORT	MAC
OR 2	10/8/2019	10:30 AM	10:48 AM				10:48 AM	11:21 AM	16 2	20546-3	Right: Rele: ORT	Nesbitt Sila ORT	MAC
OR 2 OR 2	10/8/2019 10/8/2019						11:35 AM	12:11 PM	14 2	21697-1	Right: Relei ORT	Nesbitt Sila ORT	MAC
OR 2	10/8/2019	12:00 PM	12:39 PM	2:19 PM	1:08 PM	2:10 PM	12:39 PM	2:16 PM		21540-2	Right: Right ORT	Nesbitt Silo ORT	GA
OR 2	10/9/2019	1:15 PM 8:45 AM	2:32 PM	3:54 PM	2:54 PM	3:27 PM	2:32 PM	3:42 PM		20675-1	Left: Subto HND	Nesbitt Silo ORT	GA
OR 2	10/9/2019	12:45 PM	DIOT WIN	11:47 AM	9:05 AM			11:41 AM		21907-1	Bilateral Br PLS	Mecinski, A PLS	GA
OR 2	10/9/2019	1:45 PM					12:37 PM	12:56 PM		21937-1	Excision Ma PLS	Mecinski, APLS	L
OR 2	10/10/2019	8:15 AM	8:25 AM	9:05 AM	1:17 PM	1:25 PM	1:11 PM	1:29 PM		1956-1	Wide Excisi ORT	Mecinski, A PLS	L
OR 2	10/10/2019	9:00 AM	9:12 AM	9:43 AM	8:40 AM 9:28 AM	8:58 AM	8:25 AM	9:01 AM		1741-1	Left: Excisic ORT	Nesbitt Silo ORT	MAC
OR 2	10/10/2019	9:45 AM				9:33 AM 11:14 AM	9:12 AM	9:39 AM		1801-1	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2	10/10/2019							11:16 AM		1802-1	Left: Left El ORT	Nesbitt Slio ORT	GA
OR 2	10/10/2019							12:02 PM		.6252-2	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	10/10/2019	12:30 PM	12:46 PM	1:20 PM	1:03 PM		12:46 PM	12:37 PM 1:16 PM		1763-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	10/10/2019	1:15 PM	1:28 PM	3:18 PM	2:04 PM	3:08 PM	1:28 PM			1803-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	10/11/2019	8:00 AM	8:13 AM	9;38 AM	8:27 AM	9:27 AM	8:13 AM	3:14 PM 9:32 AM		0345-3	Right: Arthi ORT	Nesbitt Sila ORT	GA
OR 2	10/11/2019	9:30 AM		11:06 AM		10:54 AM	9:51 AM			1877-1	Excision Mt PLS	Mecinski, A PLS	GA
OR 2		11:00 AM					11:20 AM			1716-1 1909-1	Removal BI PLS	Mecinski, APLS	GA
OR 2		11:45 AM						12:09 PM		1957-1	Excision Mr PLS	Macinski, APLS	L
OR 2		12:15 PM					12:30 PM			1957-1 1983-1	Debridame ORT	Mecinski, APLS	L
OR 2	10/11/2019	1:00 PM	1:29 PM	2:19 PM	1:41 PM	2:02 PM	1:29 PM	2:08 PM			Biopsy, Det PLS	Mecinski, APLS	L 1435
OR 2	10/11/2019	2:00 PM	2:23 PM	3:01 PM	2:32 PM	2:40 PM	2:23 PM	2:54 PM		8247-4 1982-1	Plap Closur PLS	Mecinski, APLS	MAC
OR 2	10/14/2019	8:45 AM		10:45 AM		0:34 AM	9:16 AM				Excision Let ENT Left: Open ORT	Mecinski, APLS	MAC
OR 2	10/15/2019	9:00 AM	8:17 AM	9:02 AM		8:53 AM	8:17 AM	8:57 AM			Left: Left E: ORT	Steinberg, . ORT	GA MAC
OR 2	10/15/2019	9:45 AM	9:09 AM	9:40 AM		9:31 AM	9:09 AM	9:36 AM			Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	10/15/2019	10:30 AM		10:19 AM		0:11 AM	9:48 AM				Right: Right ORT	Nesbitt Silo ORT Nesbitt Silo ORT	MAC
OR 2		11:15 AM		11:05 AM				11:00 AM			Right: Excis ORT	Nesbitt Silo ORT	MAC
OR 2			11:11 AM	11:44 AM 1				11:39 AM			Right: Right ORT	Nesbitt Silo ORT	MAC MAC
OR 2			12:02 PM		l2:19 PM 1		L2:02 PM	1:05 PM			Right: Explc ORT	Nesbitt Silo ORT	GA
OR 2	10/15/2019	2:30 PM	1:26 PM	3:11 PM	1:48 PM	2:57 PM	1:26 PM	3:05 PM			Left: Open ORT	Nesbitt Sila ORT	GA
											•		

OR 2	10/16/2019	4:00 PM			4:04 PM	4:14 PM	4:00 PM	4:23 PM	260 21997-1	Wide Excisi GEN	Mecinski, A PLS	L
OR 2	10/17/2019	8:15 AM	8:26 AM	9:00 AM	8:45 AM	8:51 AM	8:26 AM	8:57 AM	13 21077-2	Right: Righi ORT	Nesbitt Silo ORT	MAC
		9:00 AM		10:17 AM	9:31 AM	10:04 AM		10:14 AM	13 21821-1	Right: Righi ORT	Nesbitt Silo ORT	GA
OR 2	10/17/2019											MAC
OR 2	10/17/2019	10:15 AM	10:29 AM	11:20 AM	10:46 AM	11:10 AM	10:29 AM	11:17 AM	15 15288-2	Left: Left Ei ORT	Nesbitt Silo ORT	
OR 2	10/17/2019	11:00 AM	11:28 AM	11:59 AM	11:44 AM	11:53 AM	11:28 AM	11:56 AM	11 21839-1	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2	10/17/2019	11:45 AM	12:07 PM	12;36 PM	12:21 PM	12:28 PM	12:07 PM	12:33 PM	11 21806-1	Left: Excisic ORT	Nesbitt Silo ORT	MAC
OR 2	10/17/2019	12:30 PM	12:48 PM	1:18 PM	1:04 PM	1:10 PM	12:48 PM	1:15 PM	15 21999-1	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
	10/17/2019	1:15 PM	1:29 PM	3:25 PM	2:05 PM	3:15 PM	1:29 PM	3:21 PM	14 21840-1	Left: Arthrc ORT	Nesbitt Silo ORT	BLG
OR 2									69 22001-1			MAC
OR 2	10/18/2019	11:30 AM	12:00 PM	12:28 PM	12:09 PM	12:18 PM	12:00 PM	12:23 PM		Repair Nail ORT	Mecinski, A PLS	
OR 2	10/18/2019	10:45 AM	12:38 PM	1:18 PM	12:52 PM	1:07 PM	12:38 PM	1:13 PM	15 22000-1	Excision Bit PLS	Mecinski, A PLS	MAC
OR 2	10/18/2019	1:00 PM			1:32 PM	1:44 PM	1:30 PM	1:47 PM	17 21811-3	Removal Pl ORT	MecInski, A PLS	L
OR 2	10/18/2019	2:30 PM			2:12 PM	2:45 PM	2:09 PM	2:49 PM	22 21772-2	Pin Remov: ORT	Mecinski, APLS	L
OR 2	10/18/2019	3:00 PM			3:51 PM	4:08 PM	3:45 PM	4:11 PM	56 21998-1	Exclsion M: PLS	Mecinski, A PLS	L
				45.44 514					22 21960-1		Levine, Ma ORT	_
OR 2	10/21/2019	9:45 AM	11:10 AM	12:44 PM	11:36 AM	12;24 PM	11:10 AM	12:35 PM		Right: Right ORT	•	GA
OR 2	10/21/2019	11:30 AM	12:54 PM	2:58 PM	1:23 PM	2:39 PM	12:54 PM	2:48 PM	19 21987-1	Right: Arthi ORT	Levine, Ma ORT	GA
OR 2	10/24/2019	9:00 AM	8:33 AM	9:05 AM	8:45 AM	8:55 AM	8;33 AM	9:00 AM	10 20546-4	Left: Releas ORT	Nesbitt Sila ORT	MAC
OR 2	10/24/2019	7:30 AM	9:09 AM	9;52 AM	9:24 AM	9:38 AM	9:09 AM	9:47 AM	9 21808-1	Left: Left O ORT	Nesbitt Silo ORT	MAC
OR 2	10/24/2019	9:45 AM	9:54 AM	10:26 AM	10:09 AM	10:14 AM	9:54 AM	10;20 AM	7 21857-1	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
			10:29 AM	10:59 AM	10:43 AM	10:48 AM	10:29 AM	10;54 AM	9 20572-2	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	10/24/2019	10:30 AM										
OR 2	10/24/2019	11:15 AM	11:04 AM	11:35 AM	11:19 AM	11:26 AM	11:04 AM	11:30 AM	10 21118-3	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	10/24/2019	12:00 PM	11:39 AM	12:08 PM	11:51 AM	11:59 AM	11:39 AM	12:02 PM	9 21815-2	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	10/24/2019	12:45 PM	12:12 PM	12:44 PM	12:27 PM	12:34 PM	12:12 PM	12:39 PM	10 21704-2	Right: Right ORT	Nesbitt 5ilo ORT	MAC
OR 2	10/24/2019	1:30 PM	12:50 PM	1:29 PM	1:10 PM	1:18 PM	12:50 PM	1:24 PM	11 21837-2	Right: Hard ORT	Nesbitt Silo ORT	MAC
	10/24/2019	2:15 PM	1:40 PM	2:46 PM	1:57 PM	2:41 PM	1:40 PM	2:41 PM	16 21576-1	Right: Right ORT	Nesbitt Silo ORT	GA
OR 2			1.40 (1)	2.4011111						Excision Ma GEN		
OR 2	10/25/2019	11:15 AM			11:07 AM	11:14 AM	11:03 AM	11:18 AM	9 21921-1		Mecinski, A PLS	L
OR 2	10/28/2019	9:45 AM	10:40 AM	12:47 PM	11:08 AM	12;39 PM	10:40 AM	12:43 PM	47 22056-1	Left: Open ORT	Levine, Mar ORT	GΑ
OR 2	10/29/2019	8:15 AM	8:12 AM	9:00 AM	8:30 AM	8:48 AM	8:12 AM	8:52 AM	11 21825-2	Left: Remo ORT	Nesbitt Silo ORT	MAC
OR 2	10/29/2019	9:15 AM	9:05 AM	9:37 AM	9:19 AM	9:27 AM	9:05 AM	9:30 AM	13 21801-2	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	10/29/2019	10:00 AM	9:46 AM	10:25 AM	9:59 AM	10:15 AM	9:46 AM	10;18 AM	16 21887-1	Right: Excis ORT	Nesbitt Silo ORT	MAC
			10:34 AM	11:07 AM	10:46 AM	10:56 AM	10:34 AM	11:59 AM	16 15718-4	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	10/29/2019	10:45 AM										
OR 2	10/29/2019	11:30 AM	11:09 AM	11:45 AM	11:25 AM	11:34 AM	11:09 AM	11:38 AM	50 21896-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	10/29/2019	12:15 PM	12:01 PM	1:33 PM	12:31 PM	1:21 PM	12:01 PM	1:25 PM	23 22037-1	Right:Open ORT	Nesbitt Silo ORT	GΑ
OR 2	10/29/2019	2:00 PM			1:58 PM	2:11 PM	1:40 PM	2:13 PM	15 22008-1	Left: Excisic ORT	Nesbitt Silo ORT	L
OR 2	10/31/2019	8:15 AM	8:25 AM	9:01 AM	8:38 AM	8:50 AM	8:25 AM	8:55 AM	12 21842-1	Right: Relei ORT	Nesbitt Silo ORT	MAC
	1, 1,		9:07 AM		9:22 AM	9:29 AM	9:07 AM		12 21888-1	Right: Right ORT		MAC
OR 2	10/31/2019	9:00 AM		9:43 AM				9:36 AM			Nesbitt Silo ORT	
OR 2	10/31/2019	9:45 AM	9:47 AM	10:33 AM	10;07 AM	10:21 AM	9:47 AM	10:27 AM	11 21925-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	10/31/2019	10:30 AM	10:37 AM	11:09 AM	10;51 AM	10:57 AM	10:37 AM	11:03 AM	10 21926-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	10/31/2019	11:15 AM	11:16 AM	12:12 PM	11:39 AM	12:00 PM	11:16 AM	12:06 PM	13 21889-1	Right: Expic HND	Nesbitt Silo ORT	GA
OR 2	10/31/2019	12:30 PM	12:22 PM	2:05 PM	12:45 PM	1:46 PM	12:22 PM	1:59 PM	16 21415-1	Right: Fusic HND	Nesbitt Silo ORT	GA
		9:45 AM	10:01 AM	11:17 AM		11:10 AM	10:01 AM		11 21929-1	Right: Right ORT	Nesbitt Silo ORT	GA
OR 2	11/1/2019											
OR 2	11/1/2019	11:00 AM	11;29 AM	12:24 PM	11:48 AM	12:19 PM	11:29 AM	12:24 PM	12 21928-1	Bilateral: Bi ORT	Nesbitt Silo ORT	MAC
OR 2	11/1/2019	11:45 AM	12:41 PM	1:07 PM	12:55 PM	1:03 PM	12:41 PM	1:07 PM	17 21927-1	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	11/1/2019	12:30 PM	1:23 PM	1:53 PM	1:39 PM	1:47 PM	1:23 PM	1:53 PM	16 21947-1	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2	11/1/2019	1:15 PM	2:02 PM	2:37 PM	2:15 PM	2:30 PM	2:02 PM	2:37 PM	9 21984-1	Left: Excisic GEN	Nesbitt Silo ORT	MAC
OR 2	11/1/2019	2:15 PM	2:50 PM	3:59 PM	3:09 PM	3:49 PM	2:50 PM	3:59 PM	13 20900-1	Left: Left W. HND	Nesbitt Silo ORT	GA
					4:43 PM				22 22065-1			
OR 2	11/1/2019	3:30 PM	4:21 PM	5:25 PM		5:20 PM	4:21 PM	5:25 PM		Right; Oper ORT	Nesbitt Silo ORT	GA
OR 2	11/4/2019	7:30 AM	7:36 AM	9:34 AM	8:18 AM	9:25 AM	7:36 AM	9:29 AM	0 19504-3	Left: Arthrc ORT	Levine, Ma: ORT	GΑ
OR 2	11/4/2019	9:45 AM	10:01 AM	11:25 AM	10:41 AM	11:15 AM	10:07 AM	11:22 AM	38 21989-1	Left: Arthrc ORT	Levine, Ma: ORT	GΑ
OR 2	11/4/2019	12:00 PM	11:54 AM	12:47 PM	12:18 PM	12:44 PM	11:54 AM	12;47 PM	32 22034-1	Left: Arthrc ORT	Levine, Mar ORT	GΑ
OR 2	11/5/2019	7:30 AM	7:39 AM	8:10 AM	7:53 AM	8:01 AM	7:39 AM	8:04 AM	0 20955-2	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	11/5/2019	8:15 AM	8:17 AM	8:59 AM	8:31 AM	8:49 AM	8:17 AM	8:53 AM	13 21930-1	Right: Relea HND	Nesbitt Silo ORT	MAC
			9:03 AM	9:36 AM	9:18 AM	9:27 AM	9:03 AM	9:30 AM	10 21931-1			
OR 2	11/5/2019	9:00 AM								Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	11/5/2019	9:45 AM	9:46 AM	10:21 AM	9:58 AM	10:12 AM	9:46 AM	10:15 AM	16 21994-1	Right: Rele: ORT	Nesbitt Silo ORT	MAC
OR 2	11/5/2019	10:30 AM	10:29 AM	11:36 AM	10:45 AM	11:25 AM	10:29 AM	11:30 AM	14 12117-1	Right: Repa HND	Nesbitt Silo ORT	GΑ
OR 2	11/5/2019	11:45 AM	11:43 AM	12:16 PM	11:56 AM	12:04 PM	11:43 AM	12:10 PM	13 20362-2	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2	11/6/2019	9:45 AM			10:25 AM	10:33 AM	10:19 AM	10:36 AM	106 22089-1	Removal Fc ORT	Mecinski, A PLS	L
OR 2	11/6/2019	10:30 AM			11:03 AM	11:16 AM	10:57 AM	11:10 AM	21 22090-1	Pinning Ma HND	Mecinski, A PLS	L
	11/7/2019		O-DO ANA	9:17 AM	8:44 AM		8:30 AM	9:10 AM		Right: Rele: ORT		
OR 2		8:15 AM	8:30 AM			9:04 AM			16 21995-1	_	Nesbitt Silo ORT	MAC
OR 2	11/7/2019	9:00 AM	9:22 AM	9:59 AM	9:37 AM	9:47 AM	9:22 AM	9:51 AM	12 21949-1	Right: Excis ORT	Nesbitt Silo ORT	GA
OR 2	11/7/2019	9:45 AM	10:05 AM	10:50 AM	10:19 AM	10:37 AM	10:05 AM	10:42 AM	14 21934-1	Left: Excisic PLS	Nesbitt Silo ORT	MAC
OR 2	11/7/2019	10:30 AM	10:56 AM	11:41 AM	11:11 AM	11:29 AM	10:56 AM	11:33 AM	14 21993-1	Left: Excisic ORT	Nesbitt Silo ORT	MAC
OR 2	11/7/2019	11:15 AM	11:45 AM	12:53 PM	12:06 PM	12:38 PM	11:45 AM	12:45 PM	12 21799-1	Left: Left El ORT	Nesbitt Silo ORT	GA
OR 2	11/7/2019	12:30 PM	1:06 PM	2:26 PM	1:27 PM	2:07 PM	1:06 PM	2:18 PM	21 20593-2	Left: Subto HND	Nesbitt Silo ORT	GA
	11/8/2019	7:30 AM	7:30 AM	7:54 AM	7:39 AM	7:46 AM	7:30 AM	7:49 AM	0 21497-3	Debrideme ORT	Mecinski, A PLS	MAC
OR 2												
OR 2	11/8/2019	8:00 AM	8:14 AIVI	11:05 AM	8:43 AM	11:00 AM		11:00 AM	25 21974-1	Bilateral Br PLS	Mecinski, A PLS	GA
OR 2	11/8/2019	12:00 PM			11:29 AM	11:34 AM	11:23 AM	11:38 AM	23 22087-1	Excision Sq PLS	Mecinski, A PLS	L
OR 2	11/8/2019	12:45 PM			12:01 PM	12:09 PM	11:58 AM	12:20 PM	20 22107-1	Incision and GEN	Mecinski, A PLS	L
OR 2	11/11/2019	7:30 AM	7:44 AM	9:56 AM	8:26 AM	9:35 AM	7:44 AM	9:51 AM	0 22036-1	Left: Arthrc ORT	Levine, Ma ORT	GA
OR 2	11/11/2019	9:45 AM	10:14 AM	11:22 AM	10:45 AM	11:09 AM	10:14 AM		23 20576-2	Left: Arthrc ORT	Levine, Ma ORT	GA
	11/11/2019	11:00 AM	11:41 AM	2:06 PM	12:28 PM	1:44 PM	11:41 AM	2:01 PM	24 22066-1	Left: Arthrc ORT		
OR 2								8:41 AM	24 22086-1 14 21935-1		Levine, Mar ORT	BLG
OR 2	11/12/2019	8:15 AM	8:15 AM	8:43 AM	8:25 AM	8:36 AM	8:15 AM			Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	11/12/2019	9:00 AM	8:50 AM	9:42 AM	9:07 AM	9:36 AM	8:50 AM	9:41 AM	9 22010-1	Bilateral; Bi ORT	Nesbitt Silo ORT	MAC
OR 2	11/12/2019	10:00 AM	9:52 AM	10:27 AM	10:08 AM	10:21 AM	9:52 AM	10:25 AM	11 21901-2	Left: Remo ORT	Nesbitt Silo ORT	MAC
OR 2	11/12/2019	10:45 AM	10:44 AM	11:37 AM	11:03 AM	11:29 AM	10:44 AM	11:34 AM	19 21992-1	Left; Left E) ORT	Nesbitt Silo ORT	MAC
OR 2	11/12/2019	11:30 AM	11:51 AM	1:02 PM	12:13 PM	12:51 PM	11:54 AM	1:01 PM	20 21936-1	Left: Left El ORT	Nesbitt Silo ORT	GA
OR 2	11/12/2019	12:45 PM	1:21 PM	2:40 PM	1:46 PM	2:30 PM	1:21 PM	2:37 PM	20 21985-1	Left: Left S: HND	Nesbitt Silo ORT	GA
OR 2	11/13/2019	9:45 AM	9:56 AM	11:47 AM	10:29 AM	11:32 AM		11:42 AM	34 22125-1	Right: Dista ORT	Levine, Ma ORT	GA
	11/14/2019	8:15 AM	8:16 AM	8:53 AM	8:28 AM	8:43 AM	8:16 AM	8:46 AM	16 21943-1	Left: Excisic ORT	Nesbitt Silo ORT	MAC
OR 2		9:00 AM	9:02 AM	10:17 AM	9:23 AM	10:03 AM	9:02 AM	10:11 AM	16 20541-2	Left: Left E: ORT	Nesbitt Sila ORT	GA
OR 2 OR 2	11/14/2019			11:46 AM	10:31 AM	11:38 AM	10:31 AM		20 21261-2	Left: Left El ORT	Nesbitt Sila ORT	GA
OR 2			10:31 AM	#1,40 AIM								
OR 2 OR 2	11/14/2019	10:00 AM	10:31 AM			12:22 DM	11.50 //	12.27 01/	77 16752-7	Right: Dinh: OPT	Neshitt Rila ODT	DAMA
OR 2 OR 2 OR 2	11/14/2019 11/14/2019	10:00 AM 11:15 AM	11:59 AM	12:33 PM	12:12 PM	12:23 PM	11:59 AM		27 16753-2	Right: Right ORT	Nesbitt Sila ORT	MAC
OR 2 OR 2 OR 2 OR 2	11/14/2019 11/14/2019 11/14/2019	10:00 AM 11:15 AM 12:00 PM	11:59 AM 12:38 PM	12:33 PM 1:15 PM	12:12 PM 12:52 PM		12:38 PM	1:09 PM	11 19407-2	Right: Right ORT	Nesbitt Sila ORT	MAC
OR 2 OR 2 OR 2	11/14/2019 11/14/2019 11/14/2019 11/14/2019	10:00 AM 11:15 AM 12:00 PM 12:45 PM	11:59 AM 12:38 PM 1:19 PM	12:33 PM 1:15 PM 2:03 PM	12:12 PM 12:52 PM 1:35 PM	1:53 PM	12:38 PM 1:19 PM	1:09 PM 1:57 PM	11 19407-2 10 19879-1	Right: Right ORT Right: Excls GEN		
OR 2 OR 2 OR 2 OR 2	11/14/2019 11/14/2019 11/14/2019	10:00 AM 11:15 AM 12:00 PM	11:59 AM 12:38 PM	12:33 PM 1:15 PM	12:12 PM 12:52 PM		12:38 PM	1:09 PM	11 19407-2	Right: Right ORT	Nesbitt Sila ORT	MAC
OR 2 OR 2 OR 2 OR 2 OR 2 OR 2	11/14/2019 11/14/2019 11/14/2019 11/14/2019	10:00 AM 11:15 AM 12:00 PM 12:45 PM	11:59 AM 12:38 PM 1:19 PM	12:33 PM 1:15 PM 2:03 PM	12:12 PM 12:52 PM 1:35 PM	1:53 PM	12:38 PM 1:19 PM	1:09 PM 1:57 PM	11 19407-2 10 19879-1 19 21802-2	Right: Right ORT Right: Excls GEN	Nesbitt Silo ORT Nesbitt Silo ORT Nesbitt Silo ORT	MAC GA GA
OR 2 OR 2 OR 2 OR 2 OR 2	11/14/2019 11/14/2019 11/14/2019 11/14/2019 11/14/2019	10:00 AM 11:15 AM 12:00 PM 12:45 PM 1:45 PM	11:59 AM 12:38 PM 1:19 PM 2:16 PM	12:33 PM 1:15 PM 2:03 PM 3:50 PM	12:12 PM 12:52 PM 1:35 PM 2:39 PM	1:53 PM 3:33 PM	12:38 PM 1:19 PM 2:16 PM	1:09 PM 1:57 PM 3:41 PM	11 19407-2 10 19879-1	Right: Right ORT Right: Excls GEN Right: Right ORT	Nesbitt Sila ORT Nesbitt Sila ORT	MAC GA

OR 2	11/15/2	019 9:3	0 AM 9:27	AM 10:28 A	M 9:40 A	10.164							
OR 2	11/15/2		5 AM 10:42							5 22130-		ble Ne Mecinski, A PLS	GA
OR 2	11/15/2			AM 12:32 P						0 13596-		Mecinski, APLS	GA
OR 2	11/15/2		DPM	- 12,52 F					2	1 22153-	·1 Full Thickne PLS	Mecinski, APLS	MAC
OR 2	11/15/2		D PM		12:56 PN				2	6 22131-	1 Exclsion Bil HND	Mecinski, APLS	L
OR 2	11/19/2		5 AM 8:34	AM 9:09 A	1:37 PM				20	6 22147-	1 Debrideme ORT	Mecinski, A PLS	L
OR 2	11/19/2		OAM 9:25						13	3 21945-	1 Right: Rele; HND	Nesbitt Sila ORT	MAC
OR 2	11/19/2						-		19	9 22115-	 Bliateral: Bi ORT 	Nesbitt Sile ORT	MAC
OR 2	11/19/2								214	4 21782-	2 Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	11/19/20						-		15	5 19254-	2 Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	11/19/20								23	3 21946-	1 Left: Left El ORT	Nesbitt Silo ORT	GA
OR 2	11/19/20			PM 2:40 P					13	3 22148-	1 Left: Open ORT	Nesbitt Silo ORT	GA
OR 2	11/20/20			M 11.20 A	3:02 PN				14	22106-1	1 Left: Excisic PLS	Nesbitt Silo ORT	L.
OR 2	11/20/20								25	22088-	1 Right: Arthr ORT	Levine, Mar ORT	BLG
OR 2	11/20/20								37	22160-	 Left Should ORT 	Levine, Ma ORT	GA
OR 2	11/20/20								94	22179-1	1 Open Redu ORT	Mecinski, A PLS	GA
OR 2	11/20/20								16	21905-2		Macinski, A PLS	MAC
OR 2	11/21/20								16	22178-1	Incision and ORT	Mecinski, APLS	MAC
OR 2	11/21/20								17	22023-1	Right: Excis GEN	Nesbitt Silo ORT	MAC
OR 2	11/21/20								15	21981-1	Left; Releas ORT	Nesbitt Silo ORT	MAC
OR 2	11/21/20								17	22041-2		Nesbitt Silo ORT	MAC
OR 2	11/21/20							M 11:42 AM	12	21804-1		Nesbitt Silo ORT	GA
OR 2	11/21/20						/ 11:56 A/	И 1:16 PM	14	16717-5		Nesbitt Silo ORT	GA
OR 2	11/22/20								26	21809-1		Nesbitt Silo ORT	GA GA
OR 2	11/22/20							M 8:32 AM	6	19746-2		Thadani, St. OPH	MAC
OR 2	11/22/20								4	21922-2		Thadani, St. OPH	MAC
OR 2						9.20 AN	1 8:59 Af	4 9:22 AM	6	21697-2		Thadani, St. OPH	MAC
OR 2	11/22/20:					9:43 AN	1 9:27 AM	A 9:44 AM	15	22059-1		Thadani, St. OPH	
OR 2	11/22/20:					10:08 AM	9:48 AN	10:09 AM	14	22116-1	Left Catara OPH	Thadani, St OPH	MAC
OR 2	11/22/20:			VI 10:41 AM		10;34 AN	10:16 AN	10:36 AM	7	22132-1	Right Catar OPH	Thadani, St. OPH	MAC
OR 2	11/22/201				1:51 PM	1:56 PM	1:45 PN	1:59 PM		21181-2	Excision Le ENT	Mecinski, A PLS	MAC
OR 2	11/22/201				2:15 PM	2:21 PM	2:08 PA	1 2:23 PM		11923-2	Excision Ma PLS	Mecinski, A PLS	-
OR 2	11/26/201					9;03 AM	8:35 AN	1 9:08 AM	12	22006-1	Right: Excis ORT	Nesbitt Silo ORT	L
OR 2	11/26/201					9:42 AM	9:22 AN	9:48 AM		21950-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	11/26/201					10:18 AM	9:59 AM	1 10:24 AM		21868-1	Right: Right ORT	Nasbitt Silo ORT	MAC
OR 2	11/26/201					11:25 AM	10:38 AM	11:30 AM		21604-1	Bliateral: Bi ORT		MAC
	11/26/201					12:13 PM	11:45 AM	12:18 PM		21951-1	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	11/26/201		M 12:29 PM		12:45 PM	1:16 PM	12:29 PM	1:20 PM		22102-1	Bilateral: Bi ORT	Nesbitt Sile ORT	MAC
OR 2	11/26/201				2:29 PM	3:07 PM	2:06 PM	3:15 PM		21926-2	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	11/27/201			1 8:36 AM	8:12 AM	8:22 AM	8:03 AM			22184-1	Closed Nas ENT	Nesbitt Slie ORT	GA
OR 2	11/27/201			9:28 AM	9:03 AM	9:18 AM	8:54 AM			22217-1	Excision Ma PLS	Mecinski, APLS	GA
OR 2	11/27/201			10:30 AM	9:38 AM	10:24 AM	9:38 AM			13596-4	Removal in PLS	Mecinski, A PLS	MAC
OR 2	11/27/201		М		10:54 AM	11:34 AM				22152-1		Mecinski, A PLS	GA
OR 2	11/27/201		M			12:21 PM				22218-1	Excision Mr PLS Wide Excisi PLS	Mecinski, APLS	L
OR 2	12/2/201		M 10:00 AM	11:15 AM		11:02 AM	10:00 AM			21412-2	Left Knee: / ORT	Mecinski, APLS	L
OR 2	12/3/201		M 8:20 AM	8:51 AM	8:34 AM	8:43 AM	8:20 AM			22011-1		Levine, Mar ORT	GA
OR 2	12/3/2019		M 8:56 AM	9:30 AM	9:12 AM	9:18 AM	8:56 AM	9:24 AM		22038-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	12/3/2019		M 9:35 AM	10:16 AM	9:50 AM	10:06 AM		10:11 AM		22039-1	Right: Right ORT	Nesbitt Sila ORT	MAC
OR 2	12/3/2019		M 10:22 AM	11:19 AM	10:55 AM	11:09 AM		11:14 AM		L9189-2	Left: Releas ORT	Nesbitt Silo ORT	MAC
OR 2	12/3/2019		M 11:26 AM	12:31 PM		12:17 PM	11:26 AM			2223-1	Left: Releas ORT	Nesbitt Silo ORT	GA
OR 2	12/3/2019	12:00 P(M 12:54 PM	1:50 PM	1;23 PM	1:41 PM	12:54 PM	1:46 PM		16342-4	Left: Woun HND	Nesbitt Sllo ORT	MAC
OR 2	12/3/2019		M 2:08 PM	3:59 PM	2:33 PM	3:39 PM	2;08 PM	3:49 PM		2024-1	Left: Remo ORT	Nesbitt Silo ORT	GA
OR 2	12/6/2019		VI 8:13 AM	8:33 AM	8:18 AM	8:31 AM	8:13 AM	8:32 AM		2035-1	Left: Left Ti ORT	Nesbitt Silo ORT	GA
OR 2	12/6/2019	8:30 AN	M 8:38 AM	8:57 AM	8:49 AM	8:54 AM	8:38 AM	8:56 AM		2121-1	Right Catar OPH	Thadani, St OPH	MAC
OR 2	12/6/2019			9:28 AM	9:12 AM	9:25 AM	9:03 AM	9:27 AM		7374-2	Right Catar OPH	Thadani, St OPH	MAC
OR 2	12/6/2019			9:58 AM	9:39 AM	9:56 AM	9:32 AM	9:57 AM		2110-2	Right Catar OPH	Thadani, St OPH	MAC
OR 2	12/6/2019	10:00 AN	10:03 AM	10:29 AM	10:14 AM		10:03 AM			6121-2	Left Catara OPH Right Catar OPH	Thadani, Sc OPH	MAC
OR 2	12/6/2019	10:30 AN	/ 10:32 AM	11:02 AM			10:32 AM			2109-2		Thadani, St OPH	MAC
OR 2	12/6/2019			11:26 AM	11:13 AM :		11:08 AM			2060-2	Left Catara OPH	Thadani, St OPH	MAC
OR 2	12/6/2019	11:30 AN	4 11:32 AM	11:58 AM	11:37 AM :		11:32 AM	11:57 AM			Left Catara OPH	Thadani, St OPH	MAC
OR 2	12/6/2019		1		12:54 PM		12:49 PM	1:15 PM		4135-2 2232-1	Left Catara: OPH	Thadani, St OPH	MAC
OR 2	12/6/2019	2:15 PN	1		1:52 PM	2:05 PM	1:48 PM	2:10 PM		2228-1	Repair Righ HND	Mecinski, APLS	Ľ
OR 2	12/10/2019	8:15 AN	1 8:23 AM	8:51 AM	8:39 AM	8:45 AM	8:23 AM	8:48 AM		1839-2	Excision Let PLS	Mecinski, APLS	L
OR 2	12/10/2019	9:00 AM	9:00 AM	9:31 AM		9:24 AM	9:00 AM	9:28 AM		2204-1	Right: Right ORT	Nesbitt Sila ORT	MAC
OR 2	12/10/2019	9:45 AM				0:16 AM	9:47 AM			2204-1 0573-2	Right: Relei ORT	Nesbitt Silo ORT	MAC
OR 2	12/10/2019	10:30 AM					10:35 AM	11:01 AM			Right: Excis PLS	Nesbitt Silo ORT	MAC
OR 2	12/10/2019	11:15 AM						11:56 AM		1999-2 9615-3	Right: Right ORT	Nesbitt Sila ORT	MAC
OR 2	12/10/2019	12:15 PM	12:13 PM				12:13 PM	1:39 PM			Right: Excis ORT	Nesbitt Sllo ORT	GA
OR 2	12/10/2019	2:00 PM		3:40 PM		3:27 PM	2:07 PM	3:35 PM		2053-1	Right: Right ORT	Nesbitt Silo ORT	GA
OR 2	12/11/2019	9:15 AM		11:37 AM		1:20 AM		11:31 AM		3313-3	Right: Right ORT	Nesbitt Silo ORT	BLG
OR 2	12/11/2019	11:30 AM					12:09 PM	2:39 PM		196-1	Panniculed PLS	Mecinski, A PLS	GA
OR 2	12/11/2019	2:15 PM		3:39 PM		3:27 PM				421-4	Revision Bil PLS	Mecinski, A PLS	GA
OR 2	12/11/2019	3:00 PM		111		4:07 PM	2:59 PM 3:59 PM	3:33 PM		283-1	Incision and GEN	Mecinski, A PLS	GA
OR 2	12/12/2019	8:15 AM		9:10 AM		9:00 AM		4:10 PM	26 16		Excision Le: ENT	Mecinski, A PLS	L
OR 2	12/12/2019	9:00 AM		9:53 AM		9:42 AM	8:21 AM	9:04 AM	12 22		Right: Excis GEN	Nesbitt Silo ORT	MAC
OR 2	12/12/2019	9:45 AM					9:22 AM	9:47 AM	18 22		Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	12/12/2019	10:30 AM					MA 00:01		13 21		Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2	12/12/2019	11:15 AM					10:43 AM		15 22		Left: Left E: ORT	Nesbitt Silo ORT	MAC
OR 2	12/13/2019	8:45 AM	8:50 AM	9:26 AM				12:50 PM	15 14		Left: Subto HND	Nesbitt Sllo ORT	GA
OR 2	12/13/2019	9:30 AM		9:26 AM 10:12 AM		9:12 AM	8:50 AM	9:20 AM	39 220		Right: Hard ORT	Nesbitt Silo ORT	MAC
OR 2	12/13/2019	10:15 AM					9:35 AM		15 22:		Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2		11:00 AM						10:45 AM	11 22:		Right: Rele; ORT	Nesbitt Silo ORT	MAC
OR 2	12/13/2019	12:30 PM		11:41 AM 1				11:35 AM	22 22		Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	12/13/2019		11:44 AM 12:39 PM	12:29 PM 1		2.20 PM 1		12:23 PM	19 221		Left: Excisic ORT	Nesbitt Silo ORT	MAC
OR 2	12/15/2019						.2:39 PM	1:55 PM	16 112	210-3	Left: Left Er ORT	Nesbitt Silo ORT	GA
OR 2		11:00 AM		11:37 AM 1				L1:34 AM	26 221		Left Knee: / ORT	Levine, Ma ORT	GA
OR 2	12/16/2019	2:00 PM	12:06 PM	1:53 PM 1			2:06 PM	1:50 PM	32 215	522-2 I	Right: Arth: ORT	Levine, Ma ORT	GA
-··-	// 4013	Z.OU FIV	2:30 PM	4:02 PM	3:05 PM 3	3:49 PM	2:30 PM	3:58 PM	40 219	954-1	Port Remov GEN	Andochick, PLS	GA

OR 2	12/17/2019	8:45 AM	8:53 AM	9;27 AM	9:08 AM	9:15 AM	8:53 AM	9;21 AM	14 22128-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	12/17/2019	9:30 AM	9:31 AM	10:29 AM	9:48 AM	10:18 AM	9;31 AM	10:23 AM	10 22133-1	Bilateral: Bi ORT	Nesbitt Silo ORT	MAC
OR 2	12/17/2019	10:30 AM	10:34 AM	11:22 AM	10:56 AM	11:10 AM	10:34 AM	11:16 AM	11 22078-1	Left: Left R: ORT	Nesbitt Silo ORT	GA
OR 2	12/17/2019	11:30 AM	11:29 AM	12:34 PM	11:49 AM	12:22 PM	11:29 AM	12:28 PM	13 18533-3	Left: Left El ORT	Nesbitt Silo ORT	GA
OR 2	12/17/2019	12:45 PM	12:40 PM	1:27 PM	12:58 PM	1:16 PM	12:40 PM	1:21 PM	12 22077-1	Left: Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	12/17/2019	1:30 PM	1:38 PM	3:10 PM	2;11 PM	2:56 PM	1:38 PM	3:04 PM	17 22293-1	Left: Open ORT	Nesbitt Sila ORT	GΑ
OR 2	12/17/2019	2:45 PM			3:37 PM	3:45 PM	3:22 PM	3:49 PM	18 22134-1	Right: Excis ORT	Nesbitt Silo ORT	· L
OR 2	12/18/2019	8:45 AM	9:12 AM	11:23 AM	9;58 AM	11:05 AM	9:12 AM	11:17 AM	32 12845-3	Left: Arthrc ORT	Levine, Mar ORT	GΑ
OR 2	12/18/2019		11:56 AM	2:07 PM	12:21 PM	1:55 PM	11:56 AM	2:01 PM	39 22287-1	Left: Arthrc ORT	Levine, Ma [,] ORT	GΑ
OR 2	12/19/2019	7:30 AM	7:35 AM	8:12 AM	7:53 AM	8:00 AM	7:35 AM	8:06 AM	30 21389-2	Left: Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2	12/19/2019	8:15 AM	8:19 AM	9:34 AM	8:38 AM	9:18 AM	8:19 AM	9:28 AM	13 22015-1	Left: Left Ei ORT	Nesbitt Silo ORT	GA
OR 2	12/19/2019	9;30 AM	9:51 AM	10:26 AM		10:17 AM	9:51 AM	10:20 AM	23 17207-2	Left: Left Ei ORT	Nesb[tt Silo ORT	MAC
OR 2	12/19/2019	10:15 AM	10:32 AM	11:03 AM	10:45 AM	10:54 AM	10:32 AM	10:57 AM	12 22083-1	Left; Left Ei ORT	Nesbitt Silo ORT	MAC
OR 2	12/19/2019	11:00 AM	11:07 AM	11:37 AM	11:19 AM	11:28 AM	11:07 AM	11:31 AM	10 22084-1	Right; Righi ORT	Nesbitt Silo ORT	MAC
OR 2	12/19/2019	11:45 AM	11:44 AM	1:10 PM	12:02 PM	12:57 PM	11:44 AM	1:05 PM	13 22020-1	Right: Right ORT	Nesbitt Silo ORT	GA
OR 2	12/19/2019	1:00 PM	1:35 PM	3:29 PM	2:09 PM	3;13 PM	1:35 PM	3:22 PM	30 21039-2	Left: Left TI ORT	Nesbitt Sila ORT	BLG
OR 2	12/20/2019	8:30 AM	8;38 AM	9:05 AM	8:44 AM	8:58 AM	8:38 AM	9:00 AM	20 22241-1	Right Catar OPH	Thadani, St OPH	MAC
OR 2	12/20/2019	9:00 AM	9;08 AM	9:38 AM	9:11 AM	9:30 AM	9:08 AM	9:33 AM	28 22197-2	Right Catar OPH	Thadani, St OPH	MAC
OR 2	12/20/2019	9;30 AM	9;49 AM	10:16 AM	9:05 AM	10:08 AM	9:49 AM	10:10 AM	16 22242-1	Right Catar OPH	Thadani, St OPH	MAC
OR 2	12/20/2019	12:30 PM	12:40 PM	2:06 PM	1:04 PM	1:51 PM	12:40 PM	1:58 PM	150 22311-1	Left: Left D ORT	Levine, Mar ORT	GA
OR 2	12/20/2019	1:45 PM	2:09 PM	3:22 PM	2:35 PM	3:18 PM	2:09 PM	3:22 PM	11 14650-2	Revision Le ORT	Mecinski, A PLS	GA
OR 2	12/20/2019	3:00 PM	3:34 PM	3:59 PM	3:44 PM	3:56 PM	3:34 PM	3;59 PM	12 22156-1	Scar Revisic PLS	Mecinski, A PLS	MAC
OR 2	12/23/2019	8;45 AM	9;00 AM	10:02 AM	9;25 AM	9:53 AM	9:00 AM	10;00 AM	20 22165-1	Left Knee: / ORT	Levine, Ma ORT	GA
OR 2	12/23/2019	10:00 AM	10:20 AM	11:11 AM	10:40 AM	11:02 AM	10:20 AM	11:08 AM	20 22263-1	Right: Arthr ORT	Levine, Ma ORT	GA
OR 2	12/23/2019	11:15 AM		1:37 PM	12:19 PM	1:28 PM	11:41 AM	1:34 PM	33 22215-1	Right: Arthi ORT	Levine, Ma ORT	BLG
OR 2	12/24/2019	8:15 AM	8:12 AM	8:51 AM	8:26 AM	8:44 AM	8;12 AM	8:49 AM	10 18383-2	Left: Releas ORT	Nesbitt Silo ORT	MAC
OR 2	12/24/2019	9:00 AM	9:00 AM	9:27 AM	9:13 AM	9:21 AM	9:00 AM	9:25 AM	11 17098-3	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	12/24/2019	9:45 AM	9:35 AM		9:47 AM	9:58 AM	9:35 AM	10:03 AM	10 22136-1	Right: Rele; ORT	Nesbitt Silo ORT	MAC
OR 2	12/24/2019	10:30 AM		11:07 AM	10:44 AM	10:59 AM	10:17 AM	11:06 AM	14 22137-1	Right: Relei ORT	Nesbitt Silo ORT	MAC
OR 2	12/24/2019	11:15 AM		12:51 PM	11:45 AM	12:37 PM	11:17 AM	12:48 PM	11 18162-2	Right: Right ORT	Nesbitt Silo ORT	BLG
OR 2	12/26/2019	7:30 AM	8:28 AM	8;55 AM	8:36 AM	8;36 AM	8:28 AM	8:54 AM	13 22085-1	Left: Excisic ORT	Nesbitt Silo ORT	MAC
OR 2	12/26/2019	9:00 AM	9:08 AM	9:52 AM	9:23 AM	9:45 AM	9:08 AM	9;51 AM	14 22138-1	Right: Excis ORT	Nesbitt Silo ORT	MAC
OR 2	12/26/2019	9:45 AM			10:22 AM	10:28 AM	10:06 AM	10:34 AM	15 22205-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	12/26/2019	10:30 AM	10:51 AM	11:25 AM	11:08 AM	11:15 AM	10:51 AM	11:24 AM	17 22148-2	Left: Ramo ORT	Nesbitt Silo ORT	MAC
OR 2	12/26/2019	11:15 AM	11:40 AM	12:10 PM	11:55 AM	12:02 PM	11:40 AM	12:10 PM	16 22139-1	Left: Excisic ORT	Nesbitt Silo ORT	GA
OR 2	12/26/2019	12:00 PM		2:10 PM	1:00 PM	1:58 PM	12:27 PM	2:08 PM	17 22140-1	Left: Left TI ORT	Nesbitt Silo ORT	BLG
OR 2	12/26/2019	1:45 PM	2:29 PM	4:10 PM	2;58 PM	3:58 PM	2:29 PM	4:07 PM	21 22146-1	Left: Left TI ORT	Nasbitt Silo ORT	GA
OR 2	12/27/2019	11:45 AM		12:38 PM	11:29 AM	12:24 PM	11:15 AM	12:36 PM	27 22336-1	Wide Excisi PLS	Mecinski, A PLS	GA
OR 2	12/27/2019	2:00 PM			2:58 PM	3:07 PM	2:47 PM	3:10 PM	131 22338-1	Excision Le: PLS	Mecinski, APLS	L
OR 2	12/27/2019	2:45 PM			3;34 PM	3:44 PM	3:27 PM	3:47 PM	17 22319-1	Excision Cy. ORT	Macinski, A PLS	L
OR 2	12/27/2019	3:30 PM			4:00 PM	4:11 PM	3:54 PM	4:14 PM	27 21620-2	Excision Mr ENT	Mecinski, APLS	L
OR 2	12/31/2019	7:30 AM	7:35 AM	8:17 AM	7:46 AM	8:06 AM	7:35 AM	8:12 AM	40 22016-1	Right: Rele: ORT	Nesbitt Silo ORT	MAC
OR 2	12/31/2019	8:15 AM	8:22 AM	8:54 AM	8:37 AM	8;42 AM	8:22 AM	8:49 AM	10 22033-1	Right: Right ORT	Nesbitt 5lla ORT	MAC
OR 2	12/31/2019	9:00 AM	8:59 AM	9;36 AM	9:12 AM	9:26 AM	8:59 AM	9:31 AM	10 20893-3	Right: Excis ORT	Nesbitt 5/lo ORT	MAC
OR Z	12/31/2019	9;45 AM	9:44 AM		9:58 AM	10:06 AM	9:44 AM	10:11 AM	13 21462-1	Right: Right ORT	Nesbitt Silo ORT	MAC
OR 2	12/31/2019	10:30 AM	10:18 AM	10:55 AM	10:32 AM	10:42 AM	10:18 AM	10:50 AM	17 22187-1	Right: Rele: ORT	Nasbitt Silo ORT	MAC
OR 2	12/31/2019	11:15 AM	10:57 AM	11:32 AM	11:13 AM	11;22 AM	10:57 AM	11:27 AM	277 22334-1	Right: Right ORT	Nasbitt Silo ORT	MAC
OR 2	12/31/2019	12:00 PM	11:36 AM	12:26 PM	11:50 AM	12:18 PM	11:36 AM	12:26 PM	29 20748-1	Bilateral; Bi ORT	Nasbitt Silo ORT	MAC
OR 2	12/31/2019	1:00 PM	12:36 PM	1:11 PM	12:53 PM	1:01 PM	12:36 PM	1:06 PM	10 21395-2	Left; Left Er ORT	Nesbitt Silo ORT	MAC
OR 2	12/31/2019	1:45 PM	1:19 PM	2:59 PM	1:50 PM	2:44 PM	1:19 PM	2;54 PM	13 22345-1	Left: Open ORT	Nesbitt Sila ORT	GA
PR 1	3/12/2019	12:45 PM			1:25 PM	1:30 PM	1:21 PM	1;39 PM	59 19629-4	Biopsy of ScENT	Mecinski, APLS	L
PR 1	11/20/2019	3:00 PM			3:20 PM	3:35 PM	3:16 PM	3:37 PM	27 22193-1	Repair Fore ENT	Mecinski, A PLS	L
PR 1	12/27/2019	12:45 PM			1:57 PM	2:29 PM	1:52 PM	2:35 PM	104 22228-2	Wide Excisi PLS	Mecínski, A PLS	L
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