

Saltmarsh Regional Hospital

Health Information Management / Release of Information
3100 Saltmarsh Regional Way, Tampa, FL 33614

Tel (813) 555-0110

Fax (813) 555-0111

CERTIFICATION OF MEDICAL RECORDS CUSTODIAN

Request received: 03/17/2026 Requestor: Corwin & Ashby, P.A. Authorization: HIPAA-1 dated 03/05/2026

Patient: Dana M. Linacre DOB: 06/14/1987 Dates of service: 03/03/2026 to 03/03/2026

I, the undersigned, am a duly authorized custodian of the medical records of Saltmarsh Regional Hospital. I certify that the attached records, consisting of 28 pages of clinical records and 3 pages of billing records, are true and complete copies of the records in the custody of the hospital for the dates of service stated, that they were made at or near the time of the acts and events recorded by, or from information transmitted by, persons with knowledge, that they were kept in the course of the regularly conducted activity of the hospital, and that it was the regular practice of the hospital to make such records. This certification is made under s. 90.902(11), Florida Statutes.

K. Dalloway-Pruitt

HIM Release of Information Specialist ID 20417

Record set	Pages
ED clinical record	28
Itemized statement and UB summary	3
Total released	31

SALTMARSH REGIONAL HOSPITAL**EMERGENCY DEPARTMENT RECORD**

3100 Saltmarsh Regional Way, Tampa, FL 33614 | (813) 555-0110

Patient: LINACRE, DANA M DOB: 06/14/1987 (38 y) Sex: F MRN: SRH-00418823
Encounter: V2603031741 Arrival: 03/03/2026 20:14 Attending: Renata Oxbury, MD

REGISTRATION / FACE SHEET

Field	Value
Patient name	Dana M. Linacre
Address	2716 W. Corrigan Hollow Ln, Tampa, FL 33611
Phone	(813) 555-0147
Marital status	Married
Employer	Palmetto Bend Family Dental (office manager)
Emergency contact	Spouse, (813) 555-0148
Arrival mode	Private vehicle (driven by spouse)
Arrival date / time	03/03/2026 20:14
Chief complaint	MVC - neck and back pain
Accident related	YES - auto accident, 03/03/2026 approx 17:40, FL
Primary payer	Seagrape Casualty Insurance Company - PIP policy SGC-7730415-FL
Secondary payer	Employer health plan (card not presented)
Guarantor	Dana M. Linacre
Financial class	AUTO / PIP
Disposition	Discharged home 03/03/2026 23:02

SALTMARSH REGIONAL HOSPITAL**EMERGENCY DEPARTMENT RECORD**

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Patient: LINACRE, DANA M DOB: 06/14/1987 (38 y) Sex: F MRN: SRH-00418823
Encounter: V2603031741 Arrival: 03/03/2026 20:14 Attending: Renata Oxbury, MD

TRIAGE ASSESSMENT

Time	BP	HR	RR	Temp	SpO2	Pain	ESI
20:21	138/86	92	18	98.4 F	99%	7/10	3

Chief complaint: "I got rear-ended at a red light, my neck and back hurt."

Triage RN: Imogen Saltash, RN

Triage note

38 y/o F ambulatory to triage with spouse. Restrained driver, stopped at light, rear-ended by pickup approx 17:40. Denies LOC, denies airbag deployment. States head went back into headrest. C/o posterior neck pain radiating to bilateral trapezius, low back pain, mild frontal headache onset about 1 hr after MVC. Pt reports intermittent low back pain x 2 yrs, worse since MVC. Denies numbness/tingling, denies bowel/bladder changes. Seatbelt mark noted L shoulder. Ambulatory with steady gait. Refused EMS at scene.

Screening

Item	Response
Allergies	NKDA
Current medications	Norgestimate/ethinyl estradiol daily
LMP	02/16/2026
Pregnant?	Unknown - hCG ordered
Fall risk (Morse)	15 - low
Suicide risk screen	Negative
Tobacco	Never
Alcohol	Social, 1-2/week
Tetanus status	Up to date (2021)
Abuse / neglect screen	Negative

Acuity: ESI 3. To Pod B, room 14. C-collar applied per protocol pending eval.

Electronically signed: Imogen Saltash, RN 03/03/2026 20:29

Patient: LINACRE, DANA M	DOB: 06/14/1987 (38 y)	Sex: F	MRN: SRH-00418823
Encounter: V2603031741	Arrival: 03/03/2026 20:14	Attending: Renata Oxbury, MD	

ED PHYSICIAN NOTE (page 1 of 3)

Seen: 03/03/2026 20:48
Provider: Renata Oxbury, MD

History of present illness

38-year-old female presents after a motor vehicle collision at approximately 17:40 today. She was the restrained driver of a sedan stopped at a red light when she was struck from behind by a pickup truck. She estimates the other vehicle was going 30 to 35 mph. No airbag deployment. Her head moved backward into the headrest. No loss of consciousness, no amnesia. She self-extricated and was ambulatory at the scene. She declined EMS transport. Since the collision she has developed posterior neck pain, 7/10, worse with rotation to the left, with tightness into both trapezius regions. She also reports low back pain, 6/10, aching, worse with bending and prolonged sitting, without radiation into the legs. Mild frontal headache. No vision change, no vomiting. No numbness, weakness, saddle anesthesia or incontinence.

Past history

Past medical history	None significant
Past surgical history	Tonsillectomy (childhood)
Medications	Oral contraceptive
Allergies	No known drug allergies
Social	Married, dental office manager, never smoker, social alcohol
Family history	Noncontributory
Prior neck injury	Denies

Review of systems

Constitutional: negative for fever. Eyes: negative. ENT: negative. Cardiovascular: negative for chest pain. Respiratory: negative for shortness of breath. GI: negative for abdominal pain, nausea. GU: negative. Musculoskeletal: positive for neck pain, back pain. Skin: positive for bruise left shoulder. Neuro: positive for headache; negative for numbness, weakness, dizziness. All other systems reviewed and negative.

Patient: LINACRE, DANA M DOB: 06/14/1987 (38 y) Sex: F MRN: SRH-00418823
Encounter: V2603031741 Arrival: 03/03/2026 20:14 Attending: Renata Oxbury, MD

ED PHYSICIAN NOTE (page 2 of 3)**Physical examination**

General Alert, oriented x3, uncomfortable but nontoxic, in soft C-collar.

HEENT Atraumatic, normocephalic. PERRL. No hemotympanum. No facial tenderness.

Neck Midline tenderness at C5-C6 to palpation, mild. Bilateral paraspinal and trapezius tenderness with spasm, L greater than R. Range of motion deferred until imaging.

Chest Linear ecchymosis 9 cm over L clavicle and L upper chest consistent with seatbelt. No crepitus. Chest wall nontender otherwise. Lungs clear bilaterally.

Abdomen Soft, nontender, no seatbelt sign across the abdomen.

Back No midline thoracic or lumbar step-off. Lumbar midline nontender. Bilateral lumbar paraspinal tenderness with spasm L4-S1 region. Straight leg raise negative bilaterally.

Extremities Full range of motion all extremities. Distal pulses 2+ and symmetric.

Neuro CN II-XII intact. Strength 5/5 upper and lower extremities. Sensation intact to light touch. Reflexes 2+ symmetric. Gait steady.

Skin As above. No lacerations.

ED course

Canadian C-spine rule applied: dangerous mechanism not met, but midline tenderness present, so imaging ordered. CT cervical spine without contrast obtained. Lumbar spine plain films ordered for paraspinal pain and patient concern. Urine hCG negative. Ketorolac 30 mg IM given at 21:10 with improvement in pain to 4/10. Collar cleared after CT read.

Patient: LINACRE, DANA M DOB: 06/14/1987 (38 y) Sex: F MRN: SRH-00418823
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ED PHYSICIAN NOTE (page 3 of 3)**Results reviewed**

- CT cervical spine without contrast: no acute fracture or malalignment. Straightening of the normal lordosis, which may be positional or related to muscle spasm.
- X-ray lumbosacral spine 2-3 views: no acute fracture or listhesis.
- Urine hCG: negative.

Diagnoses

ICD-10-CM	Description
S16.1XXA	Strain of muscle, fascia and tendon at neck level, initial encounter
S39.012A	Strain of muscle, fascia and tendon of lower back, initial encounter
S20.212A	Contusion of left front wall of thorax, initial encounter
R51.9	Headache, unspecified
V43.52XA	Car driver injured in collision with other motor vehicle in traffic accident, initial encounter

Plan

- Cyclobenzaprine 10 mg PO at bedtime as needed for spasm, #10. Ibuprofen 600 mg PO every 6 hours with food as needed.
- Ice 20 minutes several times daily for 48 hours, then heat. Gentle range of motion.
- Soft collar for comfort only, no more than 2-3 days.
- Follow up with primary care, orthopedics or chiropractic within 3 to 5 days for continued care.
- Return precautions given for worsening pain, numbness, weakness, or bowel or bladder changes.
- Work note: excused 03/04/2026 through 03/06/2026.

Electronically signed: Renata Oxbury, MD 03/03/2026 22:51

Patient: LINACRE, DANA M	DOB: 06/14/1987 (38 y)	Sex: F	MRN: SRH-00418823
Encounter: V2603031741	Arrival: 03/03/2026 20:14	Attending: Renata Oxbury, MD	

MEDICAL DECISION MAKING AND DISPOSITION

Differential considered included cervical fracture, ligamentous injury, lumbar fracture, intrathoracic injury and intra-abdominal injury. Imaging negative for fracture. Exam without neurologic deficit and without abdominal seatbelt sign. Presentation is most consistent with acute cervical and lumbar strain and chest wall contusion following a rear-impact motor vehicle collision. Moderate complexity: prescription drug management, independent interpretation of imaging, discussion with radiology.

Disposition

Disposition	Discharged home
Condition at discharge	Stable, improved
Discharge time	03/03/2026 23:02
Accompanied by	Spouse
Pain at discharge	4/10

Emergency medical condition (s. 627.732(3), F.S.)

Based on my examination of the patient, I have determined that the patient presented with an emergency medical condition: a medical condition manifesting itself by acute symptoms of sufficient severity, which may include severe pain, such that the absence of immediate medical attention could reasonably be expected to result in serious jeopardy to patient health, serious impairment to bodily functions, or serious dysfunction of a body organ or part.

EMC determination: YES Physician: Renata Oxbury, MD 03/03/2026 22:53

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ORDERS

Time	Order	Ordered by	Status
20:22	Cervical collar per triage protocol	Imogen Saltash, RN	Completed 20:24
20:55	CT cervical spine w/o contrast	Renata Oxbury, MD	Resulted 21:58
20:55	XR lumbosacral spine 2-3 views	Renata Oxbury, MD	Resulted 22:20
20:55	Urine hCG, POC	Renata Oxbury, MD	Resulted 21:02
21:05	Ketorolac 30 mg IM once	Renata Oxbury, MD	Given 21:10
22:40	Cyclobenzaprine 10 mg PO once	Renata Oxbury, MD	Given 22:44
22:41	Collar discontinue, C-spine cleared	Renata Oxbury, MD	Completed 22:45
22:48	Discharge patient	Renata Oxbury, MD	Completed 23:02
22:48	Rx: cyclobenzaprine 10 mg #10	Renata Oxbury, MD	E-prescribed
22:48	Rx: ibuprofen 600 mg #30	Renata Oxbury, MD	E-prescribed

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NURSING NOTES (1 of 2)

Time	Note	By
20:24	C-collar applied per protocol. Pt tolerating. Placed in Pod B room 14.	IS, RN
20:31	Pt resting on stretcher, spouse at bedside. Call light in reach.	IS, RN
20:48	Dr. Oxbury at bedside.	IS, RN
21:02	POC urine hCG negative, reported to MD.	IS, RN
21:10	Ketorolac 30 mg IM L deltoid. Pt tolerated.	IS, RN
21:18	To CT via stretcher with log-roll precautions.	IS, RN
21:41	Returned from CT. No distress.	IS, RN
21:46	To X-ray for lumbar films.	IS, RN

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NURSING NOTES (2 of 2)

Time	Note	By
22:05	Returned from X-ray. Pt states pain 5/10, neck stiff.	IS, RN
22:30	Reassessed. Pain 4/10. Pt asking about returning to work.	IS, RN
22:44	Cyclobenzaprine 10 mg PO given, pt advised re: drowsiness, will not drive.	IS, RN
22:45	Collar removed per MD order. Pt moving neck slowly, guarded.	IS, RN
22:58	Discharge instructions reviewed with pt and spouse, verbalized understanding. Rx sent to pharmacy.	IS, RN
23:02	Discharged ambulatory with spouse. Steady gait.	IS, RN

Nursing assessment at discharge

System	Finding
Neuro	A&O x4, MAE, sensation intact
Musculoskeletal	Neck and low back tenderness, guarded ROM
Skin	Ecchymosis L clavicle/chest
Pain	4/10 neck, 4/10 low back
Education	Discharge, meds, return precautions

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VITAL SIGNS FLOWSHEET

Time	BP	HR	RR	SpO2	Temp	Pain	By
20:21	138/86	92	18	99%	98.4 F	7/10	IS, RN
21:00	132/84	88	16	99%		7/10	IS, RN
21:45	126/80	84	16	98%		5/10	IS, RN
22:30	122/78	80	16	99%	98.2 F	4/10	IS, RN
22:58	120/76	78	16	99%		4/10	IS, RN

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MEDICATION ADMINISTRATION RECORD

Time	Medication	Dose / route	Site	Given by
21:10	Ketorolac tromethamine	30 mg IM	L deltoid	Imogen Saltash, RN
22:44	Cyclobenzaprine	10 mg PO		Imogen Saltash, RN

Pre-administration checks: allergies verified NKDA, pregnancy test negative, renal function not indicated for single dose.

Patient: LINACRE, DANA M DOB: 06/14/1987 (38 y) Sex: F MRN: SRH-00418823

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MEDICATION RECONCILIATION AND ALLERGIES

Home medication	Dose	Last taken	Action
Norgestimate/ethinyl estradiol	1 tab daily	03/03/2026	Continue
New prescription	Sig	Qty	
Cyclobenzaprine 10 mg tab	1 tab PO at bedtime PRN spasm	10	
Ibuprofen 600 mg tab	1 tab PO q6h PRN pain with food	30	

Allergies:

No known drug allergies (verified 20:21)

Reconciled by:

Imogen Saltash, RN / Renata Oxbury, MD

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RADIOLOGY REPORT - CT CERVICAL SPINE WITHOUT CONTRAST

Exam: CT CERVICAL SPINE W/O CONTRAST (CPT 72125)

Performed: 03/03/2026 21:24

Indication: MVC, midline cervical tenderness

Read by: on-call teleradiology radiologist, 21:58

Findings

Vertebral body heights and alignment are maintained. There is straightening of the normal cervical lordosis. No acute fracture. No prevertebral soft tissue swelling. The dens is intact. The atlantodental interval is normal. Disc spaces are preserved. No significant spinal canal or foraminal stenosis. The visualized lung apices are clear.

Impression

1. No acute fracture or traumatic malalignment of the cervical spine.
2. Straightening of the cervical lordosis, which may be positional or related to muscle spasm.

Patient: LINACRE, DANA M DOB: 06/14/1987 (38 y) Sex: F MRN: SRH-00418823
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RADIOLOGY REPORT - X-RAY LUMBOSACRAL SPINE

Exam: XR LUMBOSACRAL SPINE 2-3 VIEWS (CPT 72100)

Performed: 03/03/2026 21:52

Indication: MVC, low back pain

Findings

Five lumbar-type vertebral bodies. Alignment is anatomic. Vertebral body heights are maintained. No acute fracture. Disc space heights are preserved. Sacroiliac joints are unremarkable. Soft tissues are unremarkable.

Impression

No acute osseous abnormality of the lumbosacral spine.

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LABORATORY RESULTS

Test	Result	Reference	Collected
hCG, urine, qualitative (POC)	NEGATIVE	Negative	03/03/2026 20:58

Patient: LINACRE, DANA M DOB: 06/14/1987 (38 y) Sex: F MRN: SRH-00418823
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DISCHARGE INSTRUCTIONS - NECK SPRAIN / STRAIN

You have been diagnosed with a neck strain. This happens when the muscles or tendons of the neck are stretched or torn, often in a car crash when the head moves suddenly. Your imaging did not show a broken bone.

Most neck strains improve over days to weeks. Pain and stiffness are often worse the day after the injury.

Home care: Use ice for 20 minutes at a time, several times a day for the first 2 days. After that, heat may help. Take medicines as directed. Keep your neck moving gently. Use the soft collar only for comfort and only for a short time.

Sleep with a pillow that keeps your neck in line with your body. Avoid heavy lifting and contact sports until cleared.

Patient: LINACRE, DANA M DOB: 06/14/1987 (38 y) Sex: F MRN: SRH-00418823 Encounter: V2603031741 Arrival: 03/03/2026 20:14 Attending: Renata Oxbury, MD
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NECK SPRAIN / STRAIN (continued)

Call your doctor or return to the emergency department right away if you have: new numbness, tingling or weakness in your arms or legs; trouble walking; loss of bowel or bladder control; severe headache that does not go away; vomiting; confusion or trouble staying awake.

Follow-up: See your primary care doctor, an orthopedic doctor or a chiropractor within 3 to 5 days. Bring this paper.

Patient: LINACRE, DANA M	DOB: 06/14/1987 (38 y)	Sex: F	MRN: SRH-00418823
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DISCHARGE INSTRUCTIONS - LOW BACK STRAIN

You have been diagnosed with a low back strain, an injury to the muscles and tendons of the lower back. Your X-rays did not show a broken bone.

Home care: Stay active as much as you can. Bed rest for more than a day or two can slow healing. Use ice and then heat. Avoid lifting, bending and twisting while it hurts. When you sit, use a small pillow behind your lower back.

Patient: LINACRE, DANA M	DOB: 06/14/1987 (38 y)	Sex: F	MRN: SRH-00418823
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LOW BACK STRAIN (continued)

Return right away for: pain that travels down one or both legs, numbness in the groin or inner thighs, loss of control of your bladder or bowels, weakness in your legs, fever with back pain.

Most people with a low back strain feel better within a few weeks. If you are not improving, follow up for further care.

Patient: LINACRE, DANA M DOB: 06/14/1987 (38 y) Sex: F MRN: SRH-00418823
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MEDICATION INFORMATION - CYCLOBENZAPRINE

Cyclobenzaprine is a muscle relaxant. It can make you drowsy and dizzy. Do not drive, operate machinery or drink alcohol while taking it. Take it at bedtime.

Side effects may include dry mouth, drowsiness and constipation. Stop and call your doctor if you have a fast heartbeat, confusion or a rash.

Patient: LINACRE, DANA M DOB: 06/14/1987 (38 y) Sex: F MRN: SRH-00418823 Encounter: V2603031741 Arrival: 03/03/2026 20:14 Attending: Renata Oxbury, MD
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MEDICATION INFORMATION - IBUPROFEN

Ibuprofen is an anti-inflammatory pain reliever. Take it with food. Do not take more than directed. Do not take it with other anti-inflammatory medicines such as naproxen or aspirin.

Stop and seek care if you have black or bloody stools, vomiting blood, or severe stomach pain.

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FOLLOW-UP AND WORK NOTE

Patient: Dana M. Linacre Seen: 03/03/2026

Follow up with: primary care, orthopedics or chiropractic in 3 to 5 days.

Work / school excuse: Please excuse the patient from work 03/04/2026 through 03/06/2026. May return 03/07/2026 as tolerated.

Provider: Renata Oxbury, MD

Dana Linacre

Patient signature 03/03/2026 22:58

Patient: LINACRE, DANA M DOB: 06/14/1987 (38 y) Sex: F MRN: SRH-00418823
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CONSENT TO TREATMENT (page 1 of 2)

I consent to emergency medical screening, examination and treatment by the physicians, nurses and staff of Saltmarsh Regional Hospital, including diagnostic tests, imaging and medications that are considered necessary.

I understand that the practice of medicine is not an exact science and that no guarantee has been made to me about the results of examination or treatment.

I understand that physicians who provide services in the emergency department may be independent contractors and may bill separately for their professional services.

I authorize the hospital to release information from my record to my insurance carriers, including any personal injury protection carrier, to the extent necessary to obtain payment for services.

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CONSENT TO TREATMENT (page 2 of 2)

I have read this form, or it has been read to me, and I have had the opportunity to ask questions.

Dana Linacre

Patient signature 03/03/2026 20:19

Imogen Saltash RN

Witness

3100 Saltmarsh Regional Way, Tampa, FL 33614 | (813) 555-0110

Patient: LINACRE, DANA M DOB: 06/14/1987 (38 y) Sex: F MRN: SRH-00418823 Encounter: V2603031741 Arrival: 03/03/2026 20:14 Attending: Renata Oxbury, MD
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ACKNOWLEDGMENT OF NOTICE OF PRIVACY PRACTICES

I acknowledge that I have been offered a copy of the Saltmarsh Regional Hospital Notice of Privacy Practices.

Dana Linacre

Patient signature 03/03/2026 20:19

Patient: LINACRE, DANA M	DOB: 06/14/1987 (38 y)	Sex: F	MRN: SRH-00418823
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ASSIGNMENT OF BENEFITS AND FINANCIAL RESPONSIBILITY

I assign to Saltmarsh Regional Hospital all personal injury protection benefits, medical payments benefits and health insurance benefits otherwise payable to me for services rendered. I understand I am responsible for any amount not paid by insurance, including PIP coinsurance and any amount denied, to the extent permitted by law.

Payer	Policy	Claim
Seagrape Casualty Insurance Company (PIP)	SGC-7730415-FL	pending

Dana Linacre

Patient signature 03/03/2026 20:19

SALTMARSH REGIONAL HOSPITAL

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EMERGENCY DEPARTMENT RECORD

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PIP EMERGENCY MEDICAL CONDITION CERTIFICATION

Patient	Dana M. Linacre
Date of accident	03/03/2026
Date of service	03/03/2026
PIP carrier	Seagrape Casualty Insurance Company
Policy	SGC-7730415-FL

Pursuant to section 627.736(1)(a), Florida Statutes, I certify that I have determined that the injured person has an emergency medical condition.

☒ Emergency medical condition: YES

☐ Emergency medical condition: NO

Renata Oxbury MD

Renata Oxbury, MD Date 03/03/2026

Saltmarsh Regional Hospital

Patient Financial Services
PO Box 1907, Tampa, FL 33601

Tel (813) 555-0112

SUMMARY OF CHARGES (UB-04 SUMMARY)

Patient Dana M. Linacre	Account V2603031741	Type of bill 0131 Outpatient
Statement period 03/03/2026 - 03/03/2026	Fed tax no. 59-XXX4417	Payer Seagrape Casualty - PIP
Diagnosis codes S16.1XXA S39.012A S20.212A R51.9 V43.52XA		

Rev	Description	Total charges
0450	EMERGENCY DEPT VISIT LEVEL 4	\$2,150.00
0350	CT CERVICAL SPINE W/O CONTRAST	\$2,480.00
0320	X-RAY LUMBOSACRAL SPINE 2-3 VIEWS	\$640.00
0636	KETOROLAC TROMETHAMINE PER 15 MG	\$96.00
0250	PHARMACY - ORAL MEDS (CYCLOBENZAPRINE 10MG)	\$44.00
0300	URINE PREGNANCY TEST VISUAL	\$62.00
0270	CERVICAL COLLAR FLEXIBLE NON-ADJ	\$188.00
0981	ED PHYSICIAN PROFESSIONAL FEE LVL 4	\$1,190.00
0001	TOTAL CHARGES	\$6,850.00

ITEMIZED STATEMENT OF CHARGES

DOS	Rev	CPT/HCPCS	Description	Units	Charge
03/03/2026	0450	99284	EMERGENCY DEPT VISIT LEVEL 4	1	\$2,150.00
03/03/2026	0350	72125	CT CERVICAL SPINE W/O CONTRAST	1	\$2,480.00
03/03/2026	0320	72100	X-RAY LUMBOSACRAL SPINE 2-3 VIEWS	1	\$640.00
03/03/2026	0636	J1885	KETOROLAC TROMETHAMINE PER 15 MG	2	\$96.00
03/03/2026	0250		PHARMACY - ORAL MEDS (CYCLOBENZAPRINE 10MG)	1	\$44.00
03/03/2026	0300	81025	URINE PREGNANCY TEST VISUAL	1	\$62.00
03/03/2026	0270	L0120	CERVICAL COLLAR FLEXIBLE NON-ADJ	1	\$188.00
03/03/2026	0981	99284	ED PHYSICIAN PROFESSIONAL FEE LVL 4	1	\$1,190.00
TOTAL CHARGES					\$6,850.00

ICD-10-CM

S16.1XXA strain of neck; S39.012A strain of lower back; S20.212A contusion left front wall of thorax; R51.9 headache; V43.52XA car driver injured in collision with other motor vehicle, traffic.

Saltmarsh Regional Hospital

Patient Financial Services
PO Box 1907, Tampa, FL 33601

Tel (813) 555-0112

PATIENT ACCOUNT STATEMENT

Date	Description	Amount	Balance
03/03/2026	Total charges, ED visit	\$6,850.00	\$6,850.00
04/02/2026	Payment - Seagrape Casualty Insurance Company (PIP)	-\$3,412.40	\$3,437.60
04/02/2026	Contractual adjustment - PIP fee schedule	-\$2,584.50	\$853.10

Amount due: \$853.10 (PIP coinsurance 20%)

This balance is your responsibility. If you are represented by an attorney, please have your attorney contact our office regarding a lien or letter of protection.