Dr P Finestone

Accounts 041 373 7243 | Appointments 041 373 7243 | Emergency 041 374 0480
Accounts accounts@drphil.co.za

PRACTICE ADDRESS
P.O. Box 27927
Greenacres
Port Elizabeth
6057

STATEMENT

MR D POTGIETER
54 NORFOLK STREET
SHERWOOD
PORT ELIZABETH
6025

DATE	2025/07/23
ACCOUNT NO.	0031359
PRACTICE NO.	2604043
VAT NO.	4790196598
SCHEME	DISCOVERY - SMART ESSENTIAL ACUTE
MEMBERSHIP NO.	154218450
ID NO.	9005085114080
E-MAIL	dewie125@gmail.com
CELLULAR	0724186867
WORK TEL.	

DETAILS	AMOUNT	PATIENT	SCHEME	BALANCE
2025/07/07 Patient: POTGIETER D MR (DEWALD) 00 1990/05/08 Treating provider: FINESTONE P DR 2604043 MP0381411				
0190 x 1.00 NEW AND ESTABLISHED PATIENT: CONSULTATION/VISIT ICD-10: Z01.0 EDI: Rejected by medical scheme	R662.70	R662.70	R0.00	R662.70
3003 x 1.00 FUNDUS CONTACT LENS OR 90 D LENS EXAMINATION (NO ICD-10: Z01.0 EDI: Rejected by medical scheme	R168.60	R168.60	R0.00	R168.60
3009 x 1.00 BASIC CAPITAL EQUIPMENT USED IN OWN ROOMS BY OPH ICD-10: Z01.0 EDI: Rejected by medical scheme	R281.90	R281.90	R0.00	R281.90
3014 x 1.00 TONOMETRY PER TEST WITH MAXIMUM OF 2 TESTS FOR P ICD-10: Z01.0 EDI: Rejected by medical scheme	R168.60	R168.60	R0.00	R168.60
3028 x 1.00 OPTICAL COHERENT TOMOGRAPHY (OCT) OF OPTIC NERVE ICD-10: Z01.0 EDI: Rejected by medical scheme	R965.40	R965.40	R0.00	R965.40
CREDITS				
2025-07-07 - Payment received: Credit card: Patient (Doc. no: 72927)	-R8 138.20	R0.00	R0.00	R0.00

Patient due	Scheme due	Total due	Current	30 days	60 days	90 days	120 days	150+ days
R2 247.20	R0.00	R2 247.20	R2 247.20	R0.00	R0.00	R0.00	R0.00	R0.00

BANK DETAILS
Account name: Dr P Finestone Inc.
Bank: NEDBANK Branch: Branch code: 198765
Account type: Account no.: 1051408229 Payment reference: 0031359

 User: Claire Peltenburg 23/07/2025 14:21:26