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**AMENDED NOTICE OF HOSPITAL LIEN**

**(NRS 108.590-108.660; Ca. Civ. Code 3045.1-3045.6)**

Notice is hereby given that BARTON MEMORIAL HOSPITAL ("BARTON") has rendered services in hospitalization for BARBIE LOGRANDE SUDER, a person who was injured on or about June 6, 2001; and that BARTON hereby claims a lien upon any money due or owing or any claim for compensation, damages, contribution, settlement or judgment from any person alleged to have caused the injuries, or any other person, corporation or association liable for the injury. The hospitalization was rendered to the injured person on February 23, 2002 to February 26, 2002. A copy of the itemized statement is attached hereto.

That ninety (90) days have not elapsed since the termination of hospitalization; that the claimant's demands for such care or service is in the sum of \$17,940.77 (SEVENTEEN THOUSAND, NINE HUNDRED AND FORTY DOLLARS AND SEVENTY-SEVEN CENTS), and that no part thereof has been paid except \$0 (zero), and that there is now due and owing and remaining unpaid of such sum, after deducting all credits and offsets, the sum of \$17,940.77 (SEVENTEEN THOUSAND, NINE HUNDRED AND FORTY DOLLARS AND SEVENTY-SEVEN CENTS), in which amount lien is hereby claimed.

DATED: This 11<sup>th</sup> day of September, 2002.

  
JEFFREY K. RAHBECK, ESQ.  
Attorney for Barton Memorial Hospital  
P.O. Box 435  
Zephyr Cove, Nevada 89448  
(775) 588-5602 (office)  
(775) 588-8548 (fax)


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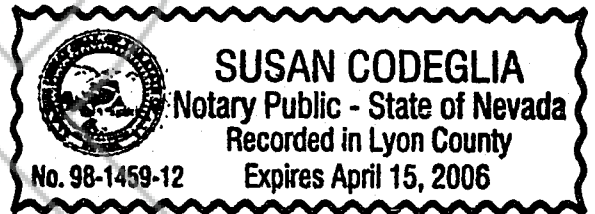
STATE OF NEVADA        )  
                                  ) ss.  
COUNTY OF DOUGLAS    )

I, JEFFREY K. RAHBECK, ESQ., being first duly sworn, on oath say that I am the attorney for BARTON MEMORIAL HOSPITAL, named in the foregoing claim of lien; that I have read the same and know the contents thereof and believe the same to be true.

  
\_\_\_\_\_  
JEFFREY K. RAHBECK, ESQ.

SUBSCRIBED AND SWORN TO before me this  
11<sup>th</sup> day of September, 2002.

  
\_\_\_\_\_  
NOTARY PUBLIC



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Itemized Statement

04/26/2002

-Barton Memorial Hospital  
Carson Valley Medical Center-  
P.O. Box 9578  
South Lake Tahoe, CA 96158  
(530) 542-3003

Patient:  
LOGRANDE SUDER, BARBIE J  
Attending Physician:  
WATSON, RANDY C.  
Guarantor:

ACCT #: 100259410  
Admit Date: 02/23/02  
Discharge Date: 02/26/02

LOGRANDE SUDER, BARBIE J  
1660 BRENTWORTH WAY  
RENO, NV 89511

Charge Detail

Service Date	Charge Code	Qnt.	Description	Amount
02/23/02	31802011	1	CRTHO DAILY ROOM CHARGE - SEMIPRIVAT	1015.00
02/23/02	47102544	1	DIPHENHYDRAMINE 50MG CAPSULE /510790	7.48
02/23/02	47102544	1	DIPHENHYDRAMINE 50MG CAPSULE /510790	7.48
02/23/02	47111011	2	ANCEF 1 GM	68.92
02/23/02	47106792	2	IVPB CHARGE /000000000000	50.00
02/23/02	47110676	2	SODIUM CHLORIDE 0.9% IV SOLN 50ML /0	60.32
02/23/02	47104936	1	KETOROLAC TROMETHAMINE INJ 30MG/ML /	41.00
02/23/02	47103806	8	HYDROXYZINE PAMOATE 50MG CAPSULE /51	39.12
02/23/02	47111011	1	ANCEF 1 GM	34.46
02/23/02	47106792	1	IVPB CHARGE /000000000000	25.00
02/23/02	47104970	1	EPHEDRINE SULFATE INJ 50MG/ML /51079	29.00
02/23/02	47106325	1	ONDANSETRON HCL INJ 2MG/ML /00173044	76.77
02/23/02	47101282	1	LIDOCAINE HCL INJ 2%/00074428202	28.70
02/23/02	47104588	1	PROPOFOL INJ 10MG/ML 20ML /003100300	41.85
02/23/02	47103430	1	SUCCINYLCHOLINE CHLORIDE INJ 20MG/ML	28.38
02/23/02	47110128	1	FENTANYL CITRATE 0.05MG/ML INJ /0007	27.70
02/23/02	47110128	1	FENTANYL CITRATE 0.05MG/ML INJ /0007	27.70
02/23/02	47102986	1	HYDROMORPHONE HCL INJ 2MG/ML/0000802	28.58
02/23/02	47102986	1	HYDROMORPHONE HCL INJ 2MG/ML/0000802	28.58
02/23/02	47106286	1	ROCURONIUM BROMIDE INJ 10MG/ML /0005	66.48
02/23/02	47103704	1	MORPHINE SULFATE PCA INJ 1MG/ML/0007	58.89
02/23/02	47103738	1	DIAZEPAM INJ 5MG/ML 2ML/00641037125	32.58
02/23/02	47101550	1	PROMETHAZINE INJ 50MG/ML/00641149635	29.91
02/23/02	47104340	2	DROPERIDOL INJ 2.5MG/ML/00517970210	70.30
02/23/02	47103704	1	MORPHINE SULFATE PCA INJ 1MG/ML/0007	58.89
02/23/02	44100209	2	IRRIGATION SOLUTION 1500CC	18.84
02/23/02	44100210	4	IRRIGATION SOLUTION 3000CC	47.36
02/23/02	44500608	1	CIRCUIT, ANES BREATH	59.80
02/23/02	44500612	3	IV SOLUTION 1000ML	20.13
02/23/02	44100782	1	FIBEROPTIC SCOPE	25.21
02/23/02	44100431	1	KNEE ARTHROSCOPY PACK	316.70
02/23/02	44500124	1	BAIR HUGGER BLANKET	63.60
02/23/02	44500397	1	ET TUBE	12.64
02/23/02	44500266	1	ANGICATH IV CATHETER	10.82
02/23/02	44500623	1	CLAVE TWIN SITE EXTENSION 32"	21.47
02/23/02	44500626	1	IV TUBING, PRIMARY IV SET	31.89

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## Itemized Statement

04/26/2002

-Barton Memorial Hospital  
Carson Valley Medical Center-  
P.O. Box 9578  
South Lake Tahoe, CA 96158  
(530) 542-3003

## Patient:

LOGRANDE SUDER, BARBIE J

Attending Physician:

WATSON, RANDY C.

Guarantor:

LOGRANDE SUDER, BARBIE J  
1660 BRENTWORTH WAY  
RENO, NV 89511

ACCT #: 100259410

Admit Date: 02/23/02

Discharge Date: 02/26/02

## Charge Detail

Service Date	Charge Code	Qnt.	Description	Amount
02/23/02	44110011	1	IV TUBING-PCA PUMP	29.47
02/23/02	44100235	8	GLOVE SURGN STERL PR	41.52
02/23/02	44100375	1	SURGEON GOWNS DISP	26.41
02/23/02	44100310	1	HEMOVAC DRAIN & RESERVOIR KIT	105.05
02/23/02	44100138	1	BOVIE, GROUNDING PAD	24.05
02/23/02	44100308	1	OR DISP NEEDLES/PKG	21.42
02/23/02	44100317	1	OR SUCTION LINER	0.00
02/23/02	44100118	1	ALL LASER HANDPIECE	515.75
02/23/02	44100137	1	ARTHROSCOPIC SHAVER BLADE/ALL	254.05
02/23/02	44100121	1	ARTHROSCOPY PUMP TUBING	326.56
02/23/02	44100379	3	COMMON SUTURE W/NEEDLE	59.91
02/23/02	44100301	3	4.5 CORTICAL SCREWS	104.31
02/23/02	46305093	1	FLUORO/C-ARM	288.78
02/23/02	46300117	1	KNEE 2V	141.28
02/23/02	44200102	1	MAJOR SURGERY-ORTHOPEDIC/ARTHROSCOPI	3360.90
02/23/02	44200586	7	SURG ORTHO 1/4H FRAC	4048.10
02/23/02	44500012	11	GEN ANESTH CARE 1/4 HR	2099.57
02/23/02	44200057	1	RECOVERY 1ST 1/2 HR	475.98
02/23/02	44200065	4	RECOVERY 1/4HR FRACT	428.68
02/23/02			Service Date Total:	14963.34
02/24/02	31802011	1	ORTHO DAILY ROOM CHARGE - SEMIPRIVAT	1015.00
02/24/02	47102544	1	DIPHENHYDRAMINE 50MG CAPSULE /510790	7.48
02/24/02	47106131	3	ESTROGEN, CONJUGATED 0.9MG TAB /0004	25.86
02/24/02	47104724	6	MEDROXYPROGESTERONE ACETATE TABLET 2	27.84
02/24/02	47101550	1	PROMETHAZINE INJ 50MG/ML/00641149635	29.91
02/24/02	47106665	2	VENLAFAXINE CR 150MG CAPSULE /000080	17.62
02/24/02	47104340	1	DROPERIDOL INJ 2.5MG/ML/00517970210	35.15
02/24/02	47103984	2	ACETAMINOPHEN 500MG TABLET /00045045	14.48
02/24/02	47103704	2	MORPHINE SULFATE PCA INJ 1MG/ML/0007	117.78
02/24/02	47103738	1	DIAZEPAM INJ 5MG/ML 2ML/00641037125	32.58
02/24/02	44704920	1	IV SOLUTION, 1000 CC	32.52
02/24/02	44704920	1	IV SOLUTION, 1000 CC	32.52
02/24/02	44704425	1	IV SECONDARY TUBING	4.09
02/24/02	44713384	1	LINER, SUCTION, USE	0.00
02/24/02	44711222	1	TUBE, SUCT CONN 10'	0.00

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Itemized Statement

04/26/2002

-Barton Memorial Hospital  
 Carson Valley Medical Center-  
 P.O. Box 9578  
 South Lake Tahoe, CA 96158  
 (530) 542-3003

Patient:  
 LOGRANDE SUDER, BARBIE J  
 Attending Physician:  
 WATSON, RANDY C.  
 Guarantor:

ACCT #: 100259410  
 Admit Date: 02/23/02  
 Discharge Date: 02/26/02

LOGRANDE SUDER, BARBIE J  
 1660 BRENTWORTH WAY  
 RENO, NV 89511

Charge Detail

Service Date	Charge Code	Qty.	Description	Amount
02/24/02	44708491	1	CONNECTOR Y/SIN/ALL	0.00
02/24/02	47707102	1	PT TREATMENT-30 MIN (MCAL)	118.03
02/24/02			Service Date Total:	1510.86
02/25/02	31802011	1	ORTHO DAILY ROOM CHARGE - SEMIPRIVAT	1015.00
02/25/02	47104724	2	MEDROXYPROGESTERONE ACETATE TABLET 2	9.28
02/25/02	47102570	1	MAGNESIUM HYDROXIDE SUSPENSION/51079	7.87
02/25/02	47102570	1	MAGNESIUM HYDROXIDE SUSPENSION/51079	7.87
02/25/02	47105859	4	PROMETHAZINE INJ 25MG/ML /0064114953	116.76
02/25/02	47106933	6	OXYCODONE HCL/APAP 7.5-500MG TAB /63	55.14
02/25/02	47704001	2	GAIT TRNG 15M	114.42
02/25/02	47704004	1	THER EX 15M	57.21
02/25/02			Service Date Total:	1383.55
02/26/02	47106933	6	OXYCODONE HCL/APAP 7.5-500MG TAB /63	55.14
02/26/02	47102620	1	MEPERIDINE HCL INJ 50MG/ML/000080602	27.88
02/26/02			Service Date Total:	83.02

Charge Summary

Code	Revenue Description	Amount
120	ROOM-BOARD/SEMI	3045.00
250	PHARMACY	1556.73
258	IV SOLUTIONS	211.17
270	MED-SUR SUPPLIES	511.80
272	STERILE SUPPLY	1378.81
274	PROSTHETIC DEV	104.31
320	DX X-RAY	430.06
360	OR SERVICES	7409.00
370	ANESTHESIA	2099.57
420	PHYSICAL THERP	289.66
710	RECOVERY ROOM	904.66

TOTAL CHARGES 17940.77

TOTAL PAYMENTS AND ADJUSTMENTS: 0.00

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Itemized Statement

04/26/2002

-Barton Memorial Hospital  
Carson Valley Medical Center-  
P.O. Box 9578  
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(530) 542-3003

Patient:  
LOGRANDE SUDER, BARBIE J  
Attending Physician:  
WATSON, RANDY C.  
Guarantor:

ACCT #: 100259410  
Admit Date: 02/23/02  
Discharge Date: 02/26/02

LOGRANDE SUDER, BARBIE J  
1660 BRENTWORTH WAY  
RENO, NV 89511

TOTAL AMOUNT DUE:

17940.77

**COPIES**

REQUESTED BY  
*Jeffrey Rahbeck*  
IN OFFICIAL RECORDS OF  
DOUGLAS CO., NEVADA

2002 SEP 12 AM 9:44

LINDA SLATER  
RECORDER

\$ 19.<sup>00</sup> PAID *KJ* DEPUTY

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