

**A WELL WOMEN EXAM WHICH INCLUDES THE FOLLOWING SERVICES SHOULD INCLUDE THE FOLLOWING PROCEDURES. PLEASE USE CPT4 90769.**

- HISTORY
- PHYSICAL EXAMINATIONS OF BREASTS AND PELVIC ORGANS
- PAP SMEAR (IF INDICATED, PERFORMED THROUGH AN MCC PARTICIPATING
- LABORATORY
- IN-OFFICE MICROSCOPIC EXAM OF VAGINAL SMEAR (IF INDICATED)
- TREATMENT OF MINOR VAGINAL INFECTIONS (I.E. YEAST, TRICHOMONAS)
- RECTAL EXAM (INCLUDES HEMOCCULT)
- BIRTH CONTROL ADMINISTRATION
- URINALYSIS

**TOTAL OB CARE PACKAGE INCLUDES THE FOLLOWING SERVICES**

- PRENATAL SERVICES
- PHYSICAL EXAM
- INITIAL & SUBSEQUENT HISTORY
- WEIGHT AND BLOOD PRESSURE
- FETAL MONITORING STRIP
- MATERNITY COUNSELING
- GENETIC COUNSELING (NOT TESTING)
- PROSTAGLANDIN GEL INSERTION
- ARTIFICIAL RUPTURE OF MEMBRANES
- FALSE LABOR EPISODES
- BREAST STIMULATION STUDIES
- DELIVERY (INCLUDES MULTIPLE BIRTHS)
- FETAL SCALP MONITORING
- INDUCTION OF LABOR
- ROUTINE LAB TEST
- VACUUM EXTRACTIONS