

Jan. 24, 2019 12:50PM

East Montgomery Primary Medicine

Fax # 244. 5147 P. 1



Telephone:

Fax: 334-244-4321

Name: FAUST, WANDA J

MRN:

Date of Birth: 07/02/1952 **Age:** 66 Y

Height: 65 in **Weight:** 88.4 kg

Sex: Female

Allergies: No Known Medication Allergies

Order Date/Time: 01/17/19 CST

Ordering MD: Tolentino, Louisa M., MD

Supervising MD: None

Location: East Montgomery Primary Medicine/EMP

Order Requisition Laboratory

Order: T4 FREE

Order DX: Hypothyroidism (E03.9)

Ordered And Electronically Signed By: Tolentino, Louisa M., MD

Communication Type: Written or Faxed Order

Specimen Type: Blood

Collection Priority: Routine

Date and Time to be Collecte 01/17/19 15:00:00 CST

Nurse Collect:

Stop Date/Time: 01/17/19 15:00:00 CST

Collected: No

Outside Facility:

PLEASE NOTE: ** THIS ORDER HAS BEEN ENTERED INTO THE BAPTIST HEALTH EMR SYSTEM **

Order Requisition Laboratory

Order: TSH

Order DX: Hypothyroidism (E03.9)

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Communication Type: Written or Faxed Order

Specimen Type: Blood

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Stop Date/Time: 01/17/19 15:00:00 CST

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Outside Facility:

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Louisa M. Tolentino MD