

Auburn Montgomery Warhawk Health Services

7461 East Dr STE 102
Montgomery AL, 36117-8092
(334) 244-3281

Date: 09/02/22

PATIENT: REED, CODY **DOB:** 04/02/2002 **Gender:** MALE **MRN:** 5114 **AGE:** 20 Years

VISIT TYPE: Lab Only

CHIEF COMPLAINT: Varicella titer

ALLERGIES: No Known Drug Allergies

MEDICATIONS:

No Known Medications

ORDERS:

VARICELLA-ZOSTER VIRUS AB (IgG) (QUEST) (1 unit(s)): Quest Diagnostics

ASSESSMENT:

Z01.84 - Encounter for antibody response examination (PRIMARY).

PLAN:

Follow up with results.

Electronically signed by Lindsey Barton, CRNP on 09/02/22 8:30 AM

A handwritten signature in blue ink that reads "J. Barton, CRNP". The signature is written in a cursive, flowing style.