

This patient was seen at a HealthEast Clinic on 6/12/13

This patient was not seen at a HealthEast Clinic, but was given advice/treatment regarding home care.

The patient is unable to attend work/school from 6/12/13 through 6/15/13

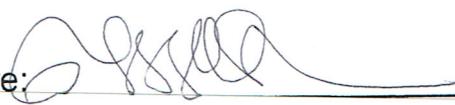
Limitations: No Yes If Yes, explain type and duration:

This patient did not contact HealthEast during the illness, but later reported that he/she was ill and unable to attend work/school from _____ through _____

Problem:

Acute Medical Illness

Other comments:

Signature: 

SCHOWALTER, AMANDA M	07/16/79	33
115 10TH AVE	612-695-6395	MRN 544514
ST PAUL PK, MN	55071	4945752
06/12/13	SULLIVAN MD, PEGGY A	CGR
LCA0001	001207427	SELECT CARE LABOR CARE UH
		AUTO ASSIGNED SELF PAY