

Do

CV800 - City of Detroit



157980DJ

Appointment Date/Time
Monday 4th, May 2020 09:00
AM

PATIENT	LAST NAME	FIRST NAME	MI	GENDER	DATE OF BIRTH	LAST 4 OF SSN.
	Doe	Jane	A	female	1990-04-11	1234
	STREET	APT. #	CITY	STATE	ZIP	
	1050 Woodward Ave		Detroit	MI	48226	
AGE	CELL PHONE NO.	HOME PHONE NO.	PATIENT EMAIL			
30	586-899-2701		davidjuan@quickenloans.com			

PHYSICIAN	NAME	NPI #	PHONE NUMBER	SPECIMEN	Date of collection:
	Tim Brown	123456789	313-555-1212		Time of collection:
	RX DATE / TIME				Patient ID
2020-05-01 00:00:00				200504012569	
Address					
1 Woodward Ave					
Detroit, MI, 48226					

Nasopharynx (source)

TH68-0 Novel Coronavirus COVID-19 Nasopharynx

Doe, Jane, A
1990-04-11

Doe, Jane, A
1990-04-11

Doe, Jane, A
1990-04-11

Doe, Jane, A
1990-04-11