Lactation Counseling Referral Portal

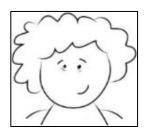
Overview

Record

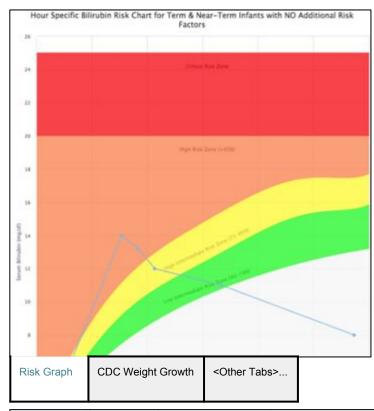
Questionnaire

Education

Patient Overview



Patient Name:	Jane Doe
Date of Birth:	1 January 1970
Phone:	1-800-636-1334
Email:	jane.doe@gmail.com
<other data=""></other>	<other data=""></other>



Date	Age	Weight (pounds)	CDC Percentile	
6/15/2009	Birth	7.5	50	
6/18/2009	3 days	7.1	23	
6/29/2009	2 weeks	7.4	15	
7/15/2009	1 month	9.5	42	
9/15/2009	3 months	12.75	49	

Lactation Referral: Recommended

Newborn has lost 10% of birthweight in first two weeks.

Patient has authorized release of data to lactation Consultant

Initiate Referral