

Provider:

Dr. MANDER

Family Doctor:

Date: **21-Feb-2013**

Time: 11:11

Visit Type: Walk In

Visit Ref#: 184447

Patient:**AALTINK, AARON M** (M)

721 1/2 BEACH BLVD

HAMILTON, ON L8H6Y5

Phone: (289) 389-6369 File: 32885**DOB:** 05-Feb-2008 **Age:** 10 yr**HCN:** 4881580718 JH (ON)**Medications:****Allergies:****Reason:****Vitals:**

T:

BP:

WT:

HR:

Notes:

Diagnosis _____

Signature: _____

Stoney Creek Medical Walk-In Clinic

140 Centennial Parkway North, Unit 2A, STONEY CREEK, ON L8E 1H9 t:(905) 561-9255 f:(905) 561-4391