Medical Records - CONFIDENTIAL

FROM: NM - RMCHCS

520 NM HWY 564, GALLUP, NM 87301-4873 Phone: (505) 863-2273 Fax: (505) 722-3594

TO:

Name: ACOTHLEY, FREDDIE

DOB: 02/04/1962 Date Range: to

This document contains the following records of the patient:

- Allergy List
 Care Plan Audit
- **Denied Medications**
- Facesheet
- Medication List
- **Patient Photo ID**
- Vaccination History

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Allergy List

None recorded.

Care Plan Audit

Care Management Events

None recorded

Health Concerns

None recorded

Goals

None recorded

Patient Tasks

None recorded

Care Team Tasks

None recorded

Health Status

None recorded

Denied Medications

Denied Date Name

Asmanex Twisthaler 220 mcg/actuation(30 doses) breath activated inhalr

prednisone 20 mg tablet

Facesheet

Demographics	
Patient Name	ACOTHLEY, FREDDIE
Sex	M
DOB	02/04/1962
Address	PO BOX 293
City/State/Zip	CHAMBERS, AZ 86502
Home Phone	(928) 221-7792
Insurance	Med Contracts: AMERICAN SUBSTANCE ABUSE PROFESSIONALS Insurance # : 526294337

Height / Weight / BMI / BP

None recorded.

Problems

None recorded.

Surgical & Procedure History

None recorded.

Medications

Asmanex Twisthaler 220 mcg/actuation(30 doses) breath activated inhalr

04/11/16 filled

predniSONE 20 mg tablet 04/11/16 filled

Vaccines

None recorded.

Allergies / Adverse Reactions

None recorded.

Past Medical History

(none recorded)

Social History None recorded.

Family History None recorded.

Patient History - Other None recorded.

Screening

None recorded.

Medication List

Asmanex Twisthaler 220 mcg/actuation(30 doses) breath activated inhalr

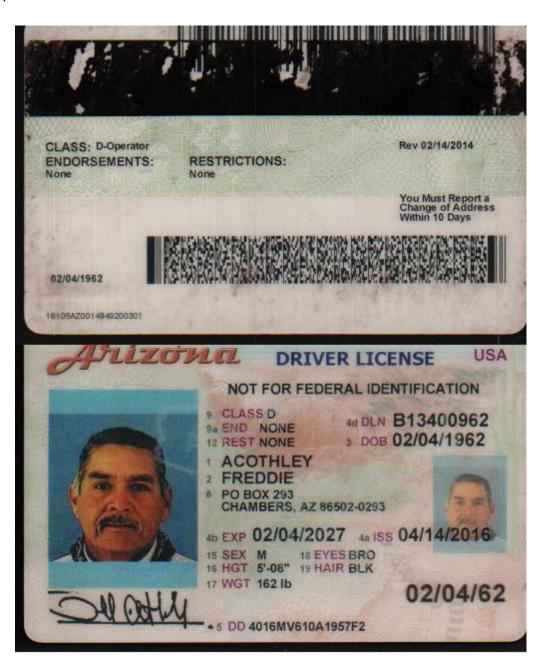
04/11/16 filled

predniSONE 20 mg tablet 04/11/16 filled

Patient Photo ID

Upload Date

04-11-2017



Vaccination History

None recorded.