Opportunity N	ledical Cente	r			
Account # Admit Date 72645 06/21/201	Admit Time Reg Init	Brought By	Info Provided By Husband	MR Number 99065239	
				Discharge	
Admitting Physician Courtney Patterson	Primary Care Phys. Timothy Contreras	Room #	Type Service Surgery	Date Time	
Timothy Control Timothy Control as		[051	Surgery		
Patient Last Name	First Middle	Former Name	Race Rel F	Pref Social Security #	
Roberts Barry			PI yes	864-37-5912	
Patient Address	Apt. No	. City	State Zip Coo	le Patient Phone #	
30748 Smith Haven		Kimberlybe	PA 19018	473-457-7850	
Driver's License # Age	e Birth Date Birth	place Gender	MS Occupation	n Accident? Date/Time	
75	03/21/19· PA	M	M Company		
Patient Employer	Employer	Address		Employer Phone	
Lee LLC 8259 Shane Motorway				8243598059	
Spouse Name	Spouse Address		City	State Spouse Phone	
Brendan Lara	34660 Jonathan Fo	ord	New Paulberd	MI 869-068-4949	
Emergency Contact	Relationship	Home Pho	ne Cell Phone	e Work Phone	
Terry Austin	Friend	238940035			
	Thend				
Admitting Diagnosis Admit Type ICD9				CD9 Admit Source	
Breast disease Surgery Surgery					
Primary Insurance Plan	Primary Policy #	Authorization	n # Primary Policy	/ Holder	
Pacific Care	04-0320-9710				
Insurance Plan #2	Secondary Policy # Authorization # Secondary Pol			licy Holder	
Eastern Care	945-3941				
Insurance Plan #3	Tertiary Policy #	Authorization	Holder		
	7				
Guarantor Name	Rel to Pt Maili	ng Address		Guarantor Phone	
Guarantor Hamo		ng / taurooc			
Guarantor Occupation Employer Employer Address				Employer Phone	
Employer Address					
Billing Remarks:					
Principal Diagnosis: Breast disease Code: 34396					
Secondary Diagnosis: Code:					
Operations and Procedu	ıres:		Physici	an Date Code	
Consulting Physician:					
Final Disposition: O Discharged O Transferred O Left AMA O Expired O Autopsy O Yes O No					
I certify that my identification of the principal and secondary diagnosis					
and the procedures performed is accurate to the best of my knowledge.					
Opportunity Medi	cai Center	Attend	ing Physician	 Date	
i e		,			