

Fictional Medical Record

Patient Information:

Name: [REDACTED] J. Harper

[REDACTED] [REDACTED] [REDACTED]

Gender: Male

Ethnicity: [REDACTED] [REDACTED]

Address: [REDACTED] Maple [REDACTED] [REDACTED] [REDACTED]

Phone: [REDACTED] [REDACTED]

[REDACTED] [REDACTED]

[REDACTED] [REDACTED]

Insurance Information:

Provider: [REDACTED]

Plan: [REDACTED] Gold [REDACTED]

Member ID: AETX34059812

Group Number: [REDACTED]

Payer ID: [REDACTED]

Medical Details:

Primary Diagnosis: Type II Diabetes with [REDACTED]

ICD-10 Code: E11.40

Date of Diagnosis: [REDACTED] [REDACTED] [REDACTED]

Physician: Dr. [REDACTED] Yates, [REDACTED] [REDACTED] [REDACTED]

Facility: Baylor [REDACTED] & White Medical Center - [REDACTED]