

Continuity of Care Document

Summarization of Episode Note | 05/27/2024 to 05/27/2024

Source: Georgetown University Hospital

Created: 11/26/2025

Demographics

Contact Information:

2520 MASSACHUSETTS AVE NW, WASHINGTON, DC 20008, USA

Tel: (415)605-9076 (Primary Home)

Email: AYEYSMT@GMAIL.COM

Previous Address(es):

--

Marital Status: Single

Religion: None

Race: --

Previous Name(s): --

Date of Death: //

Ethnic Group: Not Hispanic or Latino

Language: dn

ID: 50804262

Care Team

No Data to Display

Relationships

No Data to Display

Document Details

Source Contact Info

3800 Reservoir Road202-444-2000202-444-3597202-444-6473, Washington, DC 20007- , USA

Tel: (202)444-2000

Author Contact Info

11/26/2025 6:01 AM

Georgetown University Hospital

Recipient Contact Info

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Healthcare Professionals

No Data to Display

IDs & Code Type Data

Document Type ID: 2.16.840.1.113883.1.3 : POCD_HD000040

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Document Language Code: en-US

Document Set ID: --

Document Version Number: --

Primary Encounter

Encounter Information

Registration Date: 05/27/2024

Discharge Date: 05/27/2024

Visit ID: --

Location Information

Georgetown University Hospital

(Work): 3800 Reservoir Road, Washington, DC 20007- , USA

Providers

Type	Name	Address	Phone
Admitting	Glasser, Eric G.	(Work): 3800 Reservoir Rd., NWGround Floor, CCC, Washington, DC 20007- , USA	Tel: (202)444-2116 (Work)
Attending	Glasser, Eric G.	(Work): 3800 Reservoir Rd., NWGround Floor, CCC, Washington, DC 20007- , USA	Tel: (202)444-2116 (Work)
Referring	SELF-REFERRED, SELF	--	--

Encounter

GUH FIN 7731765769 Date(s): 5/27/24 - 5/27/24

Georgetown University Hospital 3800 Reservoir Road Washington, DC 20007- USA (202) 444-2000

Encounter Diagnosis

Adverse drug interaction (Discharge Diagnosis) - 5/27/24

Adverse effect of unspecified drugs, medicaments and biological substances, initial encounter (Final) - 5/27/24

Redness of right eye (Discharge Diagnosis) - 5/27/24

Unspecified adverse effect of drug or medicament, initial encounter (Final) - 5/27/24

Discharge Disposition: Disch to home or self care-Routine

Attending Physician: Glasser, MD, Eric G.

Admitting Physician: Glasser, MD, Eric G.

Referring Physician: SELF-REFERRED, SELF

Encounter Type: Emergency

Reason for Visit

ALLERGIC REACTION FR ADVIL

Allergies, Adverse Reactions, Alerts

No Known Medication Allergies

Author: Hernandez, Jocelyn Samantha, MedStar GUH Neurology at Beverly Rd

Last Modified: 07/7/2025 2:20 PM

Substance	Criticality	Severity	Reaction	Reaction Severity	Status
Pollen <i>Author: Eith, Jeremy M, MedStar Medical Group Primary Care at Lafayette Centre</i> <i>Last Modified: 08/27/2025 1:56 PM</i>			eye irritation sneezing throat irritation		Active

Treatment Plan

Future Scheduled Tests

Radiology:

US Breast Complete Bilateral 8/19/25

Author: Eith, Jeremy M, MedStar Health

Last Modified: 08/19/2025 8:04 PM

US Transvaginal 8/19/25

Author: Eith, Jeremy M, MedStar Health

Last Modified: 08/19/2025 8:04 PM

Immunizations

No data available for this section

Medications

<p>drospirenone-ethinyl estradiol (Yaz 3 mg-0.02 mg oral tablet)</p> <p>Status: Ordered</p> <p>Start Date: 11/8/24</p> <p>1 Tablet(s) By Mouth every day. start first tablet today. Refills: 4.</p> <p>Ordering provider: Buek, MD, John David</p> <p><i>Author: Buek, John David, MedStar WHC OB/GYN at Lafayette Centre</i></p> <p><i>Last Modified: 11/8/2024 2:18 PM</i></p>	<p>CVS/pharmacy #5674</p> <p>3700 Newark St NW Washington, DC 200163036</p>
<p>ethinyl estradiol-norethindrone (Junel Fe 1 mg-20 mcg oral tablet)</p> <p>Status: Ordered</p> <p>Start Date: 10/9/25</p> <p>1 Tablet(s) By Mouth every day. Refills: 3.</p> <p>Ordering provider: Quiett, MD, Valencia M.</p> <p><i>Author: Quiett, Valencia M., MedStar WHC OB/GYN at Lafayette Centre</i></p> <p><i>Last Modified: 10/9/2025 7:19 PM</i></p>	<p>CVS/pharmacy #1347</p> <p>6 Dupont Cir NW Washington, DC 200361108</p>
<p>naproxen (naproxen sodium 550 mg oral tablet)</p> <p>Status: Ordered</p> <p>Start Date: 8/27/25</p> <p>1 Tablet(s) By Mouth 2 times a day as needed migraine. can take with caffeinated beverage.</p> <p>Refills: 1.</p> <p>Ordering provider: Schreiber, PA-C, Lisa Marlene</p> <p><i>Author: Schreiber, Lisa Marlene, MedStar NRN Psychiatry at Lafayette Centre</i></p> <p><i>Last Modified: 08/27/2025 2:27 PM</i></p>	<p>CVS/pharmacy #1347</p> <p>6 Dupont Cir NW Washington, DC 200361108</p>
<p>drospirenone-ethinyl estradiol (Yaz 3 mg-0.02 mg oral tablet)</p> <p>Status: Completed</p> <p>Start Date: 8/22/24</p> <p>Stop Date: 11/8/24</p> <p>1 Tablet(s) By Mouth every day. Refills: 4.</p> <p>Ordering provider: Buek, MD, John David</p> <p><i>Author: Buek, John David, MedStar WHC OB/GYN at Lafayette Centre</i></p> <p><i>Last Modified: 11/8/2024 2:18 PM</i></p>	<p>CVS/pharmacy #5674</p> <p>3700 Newark St NW Washington, DC 200163036</p>
<p>mupirocin topical (mupirocin 2% topical ointment)</p> <p>Status: Completed</p> <p>Start Date: 6/7/24</p> <p>Stop Date: 6/17/24</p> <p>1 Application Topical 2 times a day for 10 Day(s). Refills: 0.</p> <p>Ordering provider: Russo, MD, Mark E.</p> <p><i>Author: MedStar Medical Group Ear Nose and Throat at Lafayette MACC</i></p> <p><i>Last Modified: 06/17/2024 3:46 PM</i></p>	<p>CVS/pharmacy #5674</p> <p>3700 Newark St NW Washington, DC 200163036</p>
<p>naproxen (naproxen sodium 550 mg oral tablet)</p> <p>Status: Discontinued</p> <p>Start Date: 7/7/25</p> <p>Stop Date: 8/27/25</p> <p>1 Tablet(s) By Mouth 2 times a day as needed migraine. can take with caffeinated beverage.</p> <p>Refills: 1.</p> <p>Ordering provider: Schreiber, PA-C, Lisa Marlene</p> <p><i>Author: Schreiber, Lisa Marlene, MedStar GUH Neurology at Beverly Rd</i></p> <p><i>Last Modified: 08/27/2025 2:27 PM</i></p>	<p>CVS/pharmacy #1347</p> <p>6 Dupont Cir NW Washington, DC 200361108</p>

acetaminophen (Tylenol) Status: Voided Start Date: 6/7/24 Stop Date: 7/7/25 By Mouth. <i>Author: Hernandez, Jocelyn Samantha, MedStar Medical Group Ear Nose and Throat at Lafayette MACC</i> <i>Last Modified: 07/7/2025 1:22 PM</i>	
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Problem List

Condition	Confirmation	Course	Effective Dates	Status	Health Status	Informant
Migraine with aura <i>Author: Tinsley, Amanda Grace, MedStar GUH Neurology at Beverly Rd</i> <i>Last Modified: 07/7/2025 1:56 PM</i>	Confirmed			Active <i>Author: Tinsley, Amanda Grace, MedStar GUH Neurology at Beverly Rd</i> <i>Last Modified: 07/7/2025 1:56 PM</i>		
Prolonged aura migraine <i>Author: Tinsley, Amanda Grace, MedStar GUH Neurology at Beverly Rd</i> <i>Last Modified: 07/7/2025 2:03 PM</i>	Confirmed			Active <i>Author: Tinsley, Amanda Grace, MedStar GUH Neurology at Beverly Rd</i> <i>Last Modified: 07/7/2025 2:03 PM</i>		
Numbness <i>Author: Tinsley, Amanda Grace, MedStar GUH Neurology at Beverly Rd</i> <i>Last Modified: 07/7/2025 2:02 PM</i>	Confirmed			Active <i>Author: Tinsley, Amanda Grace, MedStar GUH Neurology at Beverly Rd</i> <i>Last Modified: 07/7/2025 2:02 PM</i>		

Procedures

No data available for this section

Results

5/27/24:

Test	Result	Reference Range	Specimen Source	Laboratory
BP Extremity, Automated <i>Author: Katsafanas, Christina, Georgetown University Hospital</i> <i>Last Modified: 05/27/2024 3:40 PM</i>	Left upper			
Diastolic BP, Automated <i>Author: Katsafanas, Christina, Georgetown University Hospital</i> <i>Last Modified: 05/27/2024 3:40 PM</i>	74 mmHg	(Normal is 60-89 mmHg)		
MAP, Automated <i>Author: Katsafanas, Christina, Georgetown University Hospital</i> <i>Last Modified: 05/27/2024 3:40 PM</i>	87 mmHg			
Peripheral Pulse Rate <i>Author: Katsafanas, Christina, Georgetown University Hospital</i> <i>Last Modified: 05/27/2024 3:40 PM</i>	89 bpm	(Normal is 60-100 bpm)		

Respiratory Rate <i>Author: Katsafanas, Christina, Georgetown University Hospital</i> <i>Last Modified: 05/27/2024 3:40 PM</i>	16 BR/min	(Normal is 12-20 BR/min)		
Systolic BP, Automated <i>Author: Katsafanas, Christina, Georgetown University Hospital</i> <i>Last Modified: 05/27/2024 3:40 PM</i>	113 mmHg	(Normal is 90-139 mmHg)		
Temperature Oral <i>Author: Katsafanas, Christina, Georgetown University Hospital</i> <i>Last Modified: 05/27/2024 3:40 PM</i>	37.1 DegC	(Normal is 36-37.8 DegC)		
Body Mass Index Dosing <i>Author: Riley, June, Georgetown University Hospital</i> <i>Last Modified: 05/27/2024 3:44 PM</i>	18.29 kg/m2	(Normal is 40 kg/m2)		
BSA Dosing <i>Author: Riley, June, Georgetown University Hospital</i> <i>Last Modified: 05/27/2024 3:44 PM</i>	1.49 m2			
Dosing Height Method <i>Author: Riley, June, Georgetown University Hospital</i> <i>Last Modified: 05/27/2024 3:44 PM</i>	Estimated			
Dosing Weight Method <i>Author: Riley, June, Georgetown University Hospital</i> <i>Last Modified: 05/27/2024 3:44 PM</i>	Estimated			
Height/Length Dosing <i>Author: Riley, June, Georgetown University Hospital</i> <i>Last Modified: 05/27/2024 3:44 PM</i>	162 cm	(Normal is 129-213 cm)		
Weight Dosing <i>Author: Riley, June, Georgetown University Hospital</i> <i>Last Modified: 05/27/2024 3:44 PM</i>	48 kg			
Peripheral Pulse Rate <i>Author: Katsafanas, Christina, Georgetown University Hospital</i> <i>Last Modified: 05/27/2024 3:33 PM</i>	89 bpm	(Normal is 60-100 bpm)		
Diastolic BP, Automated <i>Author: Katsafanas, Christina, Georgetown University Hospital</i> <i>Last Modified: 05/27/2024 3:33 PM</i>	74 mmHg	(Normal is 60-89 mmHg)		
MAP, Automated <i>Author: Katsafanas, Christina, Georgetown University Hospital</i> <i>Last Modified: 05/27/2024 3:33 PM</i>	87 mmHg			
Systolic BP, Automated <i>Author: Katsafanas, Christina, Georgetown University Hospital</i> <i>Last Modified: 05/27/2024 3:33 PM</i>	113 mmHg	(Normal is 90-139 mmHg)		
Temperature Oral <i>Author: Katsafanas, Christina, Georgetown University Hospital</i> <i>Last Modified: 05/27/2024 3:33 PM</i>	37.1 DegC	(Normal is 36-37.8 DegC)		

Vital Signs

5/27/24

Temperature Oral Author: Katsafanas, Christina, Georgetown University Hospital Last Modified: 05/27/2024 3:40 PM	37.1 DegC	(Normal is 36-37.8 DegC)
Temperature Oral Author: Katsafanas, Christina, Georgetown University Hospital Last Modified: 05/27/2024 3:33 PM	37.1 DegC	(Normal is 36-37.8 DegC)
Peripheral Pulse Rate Author: Katsafanas, Christina, Georgetown University Hospital Last Modified: 05/27/2024 3:40 PM	89 bpm	(Normal is 60-100 bpm)
Peripheral Pulse Rate Author: Katsafanas, Christina, Georgetown University Hospital Last Modified: 05/27/2024 3:33 PM	89 bpm	(Normal is 60-100 bpm)
Respiratory Rate Author: Katsafanas, Christina, Georgetown University Hospital Last Modified: 05/27/2024 3:40 PM	16 BR/min	(Normal is 12-20 BR/min)
Blood Pressure Author: Katsafanas, Christina, Georgetown University Hospital Last Modified: 05/27/2024 3:40 PM	113/74 mmHg Author: Katsafanas, Christina, Georgetown University Hospital Last Modified: 05/27/2024 3:40 PM Author: Katsafanas, Christina, Georgetown University Hospital Last Modified: 05/27/2024 3:40 PM	(Normal is 90-139/60-89 mmHg)
Blood Pressure Author: Katsafanas, Christina, Georgetown University Hospital Last Modified: 05/27/2024 3:33 PM	113/74 mmHg Author: Katsafanas, Christina, Georgetown University Hospital Last Modified: 05/27/2024 3:33 PM Author: Katsafanas, Christina, Georgetown University Hospital Last Modified: 05/27/2024 3:33 PM	(Normal is 90-139/60-89 mmHg)
BP Extremity, Automated Author: Katsafanas, Christina, Georgetown University Hospital Last Modified: 05/27/2024 3:40 PM	Left upper	
MAP, Automated Author: Katsafanas, Christina, Georgetown University Hospital Last Modified: 05/27/2024 3:40 PM	87 mmHg	
MAP, Automated Author: Katsafanas, Christina, Georgetown University Hospital Last Modified: 05/27/2024 3:33 PM	87 mmHg	
Height/Length Dosing Author: Riley, June, Georgetown University Hospital Last Modified: 05/27/2024 3:44 PM	162 cm	(Normal is 129-213 cm)

Body Mass Index Dosing <i>Author: Riley, June, Georgetown University Hospital</i> <i>Last Modified: 05/27/2024 3:44 PM</i>	18.29 kg/m2	(Normal is 40 kg/m2)
Weight Dosing <i>Author: Riley, June, Georgetown University Hospital</i> <i>Last Modified: 05/27/2024 3:44 PM</i>	48 kg	

Social History

Social History Type	Response
Tobacco/Nicotine	Use: Past. <i>Author: Brown, Marquita Chauntice</i> <i>Last Modified: 05/27/2024 12:36 PM</i>
Birth Sex <i>Author: MedStar Health</i> <i>Last Modified: 11/5/2025 3:53 PM</i>	Female
Sex Representation <i>Author: MedStar Health</i> <i>Last Modified: 11/5/2025 3:53 PM</i>	Female (finding)
Pregnancy Status <i>Author: Brown, Marquita Chauntice, Georgetown University Hospital</i> <i>Last Modified: 05/27/2024 4:34 PM</i>	Patient denies
Pregnancy Status <i>Author: Riley, June, Georgetown University Hospital</i> <i>Last Modified: 05/27/2024 3:44 PM</i>	Patient denies

Goals

No data available for this section

Hospital Discharge Instructions

Section Author: , Georgetown University Hospital, 05/27/2024 6:30 PM

Patient Education

05/27/2024 14:30:36

KJS-Stye (Custom)

You have some redness to the lower eyelid which resembles a stye. If you notice significant redness, increased swelling, drainage, or vision changes, please return to the ED

Stye

A stye, also known as a hordeolum, is a bump that forms on an eyelid. It may look like a pimple next to the eyelash. A stye can form inside the eyelid (internal stye) or outside the eyelid (external stye). A stye can cause redness, swelling, and pain on the eyelid.

Styes are very common. Anyone can get them at any age. They usually occur in just one eye at a time, but you may have more than one in either eye.

What are the causes?

A stye is caused by an infection. The infection is almost always caused by bacteria called *Staphylococcus aureus*. This is a common type of bacteria that lives on the skin.

An internal stye may result from an infected oil-producing gland inside the eyelid. An external stye may be caused by an infection at the base of the eyelash (hair follicle).

What increases the risk?

You are more likely to develop a stye if:

- You have had a stye before.
- You have any of these conditions:
 - Red, itchy, inflamed eyelids (blepharitis).
 - A skin condition such as seborrheic dermatitis or rosacea.
 - High fat levels in your blood (lipids).
 - Dry eyes.

What are the signs or symptoms?

The most common symptom of a stye is eyelid pain. Internal styes are more painful than external styes. Other symptoms may include:

- Painful swelling of your eyelid.
- A scratchy feeling in your eye.
- Tearing and redness of your eye.
- A pimple-like bump on the edge of the eyelid.
- Pus draining from the stye.

How is this diagnosed?

Your health care provider may be able to diagnose a stye just by examining your eye. The health care provider may also check to make sure:

- You do not have a fever or other signs of a more serious infection.
- The infection has not spread to other parts of your eye or areas around your eye.

How is this treated?

Most styes will clear up in a few days without treatment or with warm compresses applied to the area. You may need to use antibiotic drops or ointment to treat an infection. Sometimes, steroid drops or ointment are used in addition to antibiotics.

In some cases, your health care provider may give you a small steroid injection in the eyelid.

If your stye does not heal with routine treatment, your health care provider may drain pus from the stye using a thin blade or needle. This may be done if the stye is large, causing a lot of pain, or affecting your vision.

Follow these instructions at home:

- If you were prescribed an antibiotic medicine, steroid medicine, or both, apply or use them as told by your health care provider. Do not stop using the medicine even if your condition improves.
- Apply a warm, wet cloth (warm compress) to your eye for 5–10 minutes, 4 to 6 times a day.
- Clean the affected eyelid as directed by your health care provider.
- Do not wear contact lenses or eye makeup until your stye has healed and your health care provider says that it is safe.
- Do not try to pop or drain the stye.
- Do not rub your eye.

Contact a health care provider if:

- You have chills or a fever.
- Your stye does not go away after several days.
- Your stye affects your vision.
- Your eyeball becomes swollen, red, or painful.

Get help right away if:

- You have pain when moving your eye around.

Summary

- A stye is a bump that forms on an eyelid. It may look like a pimple next to the eyelash.
- A stye can form inside the eyelid (internal stye) or outside the eyelid (external stye). A stye can cause redness, swelling, and pain on the eyelid.
- Your health care provider may be able to diagnose a stye just by examining your eye.
- Apply a warm, wet cloth (warm compress) to your eye for 5–10 minutes, 4 to 6 times a day.

This information is not intended to replace advice given to you by your health care provider. Make sure you discuss any questions you have with your health care provider.

Document Revised: 02/23/2022 Document Reviewed: 02/23/2022

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Drug Allergy, Easy-to-Read

Please do not take ibuprofen as you may have an allergy to the medication.

Drug Allergy

A drug allergy is when your body reacts in a bad way to a medicine. The reaction may be mild or very bad. In some cases, it can be life-threatening.

If you have an allergic reaction, get help right away. You should get help even if the reaction seems mild.

What are the causes?

This condition is caused by a reaction in your body's defense system. The system sees a medicine as being harmful when it is not.

What are the signs or symptoms?

Symptoms of a mild reaction

- A stuffy nose.
- Tingling in your mouth.
- An itchy, red rash.

Symptoms of a very bad reaction

- Swelling of your eyes, lips, face, tongue, mouth or back of your throat.
- Itchy, red, swollen areas of skin.
- Feeling dizzy or light-headed.
- Feeling mixed up.
- Pain in your belly.
- Trouble with breathing, talking, or swallowing.
- A tight feeling in your chest.
- Fast heartbeat.
- Vomiting or watery poop (diarrhea).

How is this treated?

There is no cure for allergies. An allergic reaction can be treated with:

- Medicines to help your symptoms.
- Medicines that you breathe into your lungs (respiratory inhalers).
- A shot for a very bad allergic reaction (epinephrine).

For a very bad reaction, you may need to stay in the hospital. Your doctor may teach you how to use an allergy kit and how to give yourself an allergy shot. You can give yourself an allergy shot with what is called an auto-injector "pen."

Follow these instructions at home:

If you have a very bad allergy:

- Always keep an allergy pen or your kit with you. This could save your life. Use it as told by your doctor.
- Make sure that you, the people who live with you, and your employer know how to use your allergy pen or kit.
- If you used your allergy pen or kit:
 - Get more medicine for it right away. This is important in case you have another reaction.
 - Get help right away.
- Wear a medical alert bracelet or necklace that says you have an allergy, if your doctor tells you to do this.

General instructions

- Avoid medicines that you are allergic to.
- Take over-the-counter and prescription medicines only as told by your doctor.
- If you were given allergy medicines, do not drive until your health care provider tells you it is safe.
- If you have hives or a rash:
 - Use over-the-counter medicines as told by your doctor.
 - Put cold, wet cloths on your skin.
 - Take baths or showers in cool water. Avoid hot water.
- It is up to you to get your test results. Ask how to get your results when they are ready.
- Tell all your doctors that you have a medicine allergy.
- Keep all follow-up visits.

Contact a doctor if:

- You think that you are having a mild allergic reaction.

- You have symptoms that last more than 2 days after your reaction.

- You get new symptoms.

Get help right away if:

- You had to use your allergy pen or kit. You must go to the emergency room, even if the medicine seems to be working.

- Your symptoms get worse.

- You have symptoms of a very bad allergic reaction.

These symptoms may be an emergency. Use your allergy pen or kit as you have been told. Get medical help right away. Call your local emergency services (911 in the U.S.).

- Do not wait to see if the symptoms will go away.

- Do not drive yourself to the hospital.

Summary

- A drug allergy is when your body reacts in a bad way to a medicine.

- Take medicines only as told by your doctor.

- Tell all your doctors that you have a medicine allergy.

- Always keep an allergy pen or kit with you if you have a very bad allergy.

This information is not intended to replace advice given to you by your health care provider. Make sure you discuss any questions you have with your health care provider.

Document Revised: 05/30/2022 Document Reviewed: 05/30/2022

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Follow Up Care

05/27/2024 11:28:35

With: Return to Emergency Department

Address: Unknown

When:

Unknown

Comments: for worsening symptoms

With: Follow up with primary care provider

Address: Unknown

When:

Unknown

Reason for Referral

No data available for this section

Health Concerns

No data available for this section

Implantable Device List

No data available for this section

Discharge instructions

Event Display: Discharge Instructions

Author: Georgetown University Hospital

Last Modified: 05/31/2024 2:30 PM

Patient Care team information

Care Team Personnel

Name: Garcia, Gladys
Position: Ambulatory: Clinic Staff Co-sign Preg
Member Role: Diabetic Educator (Lifetime)

Author: Garcia, Gladys, MedStar Health

Last Modified: 11/5/2025 4:01 PM

Care Team Related Persons

Name: LEE, JONG HYUN

Author: MedStar Health

Last Modified: 05/2/2025 10:48 AM

Name: LEE, JONG HYUN HYUN

Author: MedStar Health

Last Modified: 05/2/2025 10:48 AM

Name: LEE, JONG HYUN HYUN HYUN

Author: MedStar Health

Last Modified: 05/2/2025 10:48 AM

Name: LEE, JONG HYUN HYUN HYUN HYUN

Author: MedStar Health

Last Modified: 05/2/2025 10:48 AM

Family History

No data available for this section

Insurance Providers

Guarantor name: NA

Health Plan Information #: 1

Payer: AETNA OPEN

Payer Identifier: NA

Member Number: 904150909

Group Number: NA

Subscriber Identifier: 904150909

Relationship to Subscriber: self

Coverage Type: HMO

Coverage Verification Date: NA

Telecom: NA

Address: NA