



**MedStar Medical Group Primary Care at Lafayette Centre**

1133 21st Street NW  
Building 2  
Washington, DC 20036-  
(202) 416-2000

Patient: **YOSHIMOTO, AYAE**

MRN: MPP-000007764936

FIN: MPP-60073154902

DOB/Age/Sex: 10/26/1994 31 years

Female

Date of Service: 8/27/2025

Attending Provider: Horan,MD,Merlene V.

***Patient Viewable Documents***

DOCUMENT NAME:

RAD Order Requisition

PERFORM INFORMATION:

RESULT STATUS:

Auth (Verified)

SERVICE DATE/TIME:

8/19/2025 00:00 EDT

SIGN INFORMATION:

**RADORDREQ-31621158187.PDF**

Please Click On Link to see attachment

**Report Request ID:**

825624643

Page 1 of 2

**Print Date/Time:**

11/26/2025 06:05

This report is confidential medical information. The unauthorized disclosure of this information may subject you to civil and criminal penalties.

**www.medstarhealth.org**

MEDICAL RECORD NUMBER  
**MPP-000007764936**

EMPI NUMBER  
**050804262**

PATIENT ACCOUNT NUMBER  
**MPP-60073154902**

MedStar Medical Group Primary Care at Lafayette Centre  
1133 21st Street NW Building 2 Washington DC - 20036  
Business: 202-416-2000

<b>PATIENT NAME:</b> YOSHIMOTO, AYAE		<b>DOB:</b> 10/26/94
<b>ADMIT DX:</b>	JAPANESE EMBASSY	<b>AGE:</b> 30 Years
<b>ENCOUNTER TYPE:</b>	Clinic	<b>HGT/WT:</b> 155 cm/43.8 kg
<b>ISOLATION STATUS:</b>		<b>SEX:</b> Female
<b>VISIT DATE:</b>	08/27/25	<b>Lab Name:</b> MMG PC at Lafayette Centre
<b>CLINIC:</b>	MMG PC at Lafayette Centre	<b>Lab Acct #:</b> 3548.00
<b>ALLERGIES:</b> No Known Medication Allergies		
<b>Primary Insurance:</b>		<b>Secondary Insurance:</b>
<b>Company:</b>	EXEC PHYSICALS	<b>Company:</b>
<b>Group#:</b>		<b>Group#:</b>
<b>Member#:</b>		<b>Member#:</b>
<b>Guarantor:</b>	YOSHIMOTO, AYAE	<b>Guarantor:</b>

**ORDER: US Breast Complete Bilateral**

**ORDER DATE/TIME:** 08/19/25 16:03  
**ORDERING MD:** Schreiber, PA-C, Lisa Marlene **NPI:** 1396875399  
**ENTERED BY:** Eith, Jeremy Morry  
**CRITICAL RESULTS CONTACT #:** 2024162000  
**CC PROVIDER:**  
**ORDER NUMBER:** 31621158187.00  
 For more information about your provider or to locate a different provider, please visit  
**DIAGNOSIS CODES:** Encounter for general adult medical examination w/ (Z00.00)  
**Indication:** Other (Specify)  
**Clinical History:** EOJ PHYSICAL  
**Special Instructions:**

**Performing Location:** MRN Lafayette II  
**Scheduling Phone Number:** 202-748-8830  
**Schedule Appointment by:** 08/19/2025  
**Priority:** Routine **May Modify per Radiology Protocol:** Yes

**AUC Order Adherence Mod:**  
**Qualified CDSM Utilized:**

**Authorizing Signature (electronic):** Schreiber, PA-C, Lisa Marlene

**Date/Time:** 08/19/25 16:03