

ROMAN RODRIGUEZ, VICTOR (id #15241, dob: 04/14/1938)

Referral Order

10/15/2015

To Provider		From Provider	
RALPH BOCCIA 19735 GERMANTOWN RD STE 255 GERMANTOWN, MD 20874 Phone: Phone: (301) 571-0019 Fax: Fax: (301) 571-0988			
Diagnosis	Anemia ICD-10		
Order Name	Orders in Anemia ICD-10: D • HEMA S H	Hx of anemia. Most recent	
Notes	Hx of ane	15.	
Patient Name		ROMAN	
Sex - DOB - Age		M 04/14/1938	
Address		1146 KNOLL MIST LN GAITHERSBURG, MD 20879	
Phone		H: (301) 820-5909 W: (301) 820-5909 M: (301) 820-5909	
Primary Insurance		MEDICARE B-MD: NOVITAS SOLUTIONS MEDICARE - MONTGOMERY AND PRINCE GEORGE COUNTIES ID: 217836018M Policy Holder: ROMAN RODRIGUEZ, VICTOR R	
Secondary Insurance		MEDICAID-MD ID: 40024197200 Policy Holder: ROMAN RODRIGUEZ, VICTOR A	



RENEE LAPOINTE