

**IMPORTANT – New Summary Referral from Sharp Grossmont Hospital**

**To:** 2-1-1 San Diego  
**Fax:** 18584084496

**Date:** Mar 29 2016 3:01PM PT

**From:** Sharp Grossmont Hospital , SGR  
**Contact Information:**  
**Please call (619) 740-4190 with your referral response.**

**Re:** New Care to Community Connect Referral ID# 34191273

**Instructions:**

This Male patient is 72 years old with a diagnosis of "FAST HEARTRATE" CHF DN. We are projecting a discharge date of Mar 24 2016 11:00AM PT. We use a secure electronic referral delivery system that requires you to access our referral on the Internet using your computer and **Internet Explorer** web browser.

**TO VIEW THE REFERRAL**

1. Go to the website by typing [www.extendedcare.com](http://www.extendedcare.com) into the browser's address bar. Click on the Web Referral link on the Allscripts Care Management home page.
2. Enter **34191273** as the Referral ID.
3. Enter **F5868154** as your Access Code.
4. Click the "View Referral" button.
5. Review the referral information.
6. Print the referral by clicking the "Print" button at the bottom of the screen.
7. Separate supporting documents, such as **forms** or **files** may be attached for your review. To view or print, go to the upper right corner of the screen and click on the hyperlinks labeled "Forms" and/or "File Attachments". These documents should be viewed and printed separately from the referral.
8. **Respond** to the sender by using the contact information found above and on the referral.

Your Access Code expires on **Apr 5 2016 3:01PM PT**, or when the referral is placed elsewhere or closed , after which you will no longer have online access to this referral. If you do not have Internet access or need assistance, call (866) 790-8690 option 5.

**Confidentiality Notice**

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To learn more about becoming an online subscriber please call Allscripts at (888) 353-3726 option 3 or visit [www.extendedcare.com](http://www.extendedcare.com).

**Referral Information - Referral # 34191273**

<b>Sending Organization:</b>		Sharp Grossmont Hospital	
<b>Referral ID:</b>	34191273	<b>Referral Type:</b>	Care to Community Connect
<b>Date First Sent:</b>	3/29/2016 3:01 PM (PT)	<b>Most Recent Revision:</b>	3/29/2016 3:01 PM (PT)
<b>Respond by Date:</b>	3/29/2016 4:57 PM (PT)		
<b>Primary Referral Category:</b>		<b>Primary Referral Reason:</b>	

**Referral Comments**

Patient Abdulkadir Osman Phone 619-761-9800 (daughter Majida who speaks English and handles all patients affairs.  
 Patient birthdate : 7/10/1943  
 Pwas visiting from England and had medical issues bringing him to SGH. He is currently spending 2 weeks at a time with each of 3 daughters. He needs assistance establishing food and housing. Please screen for any additional resources he would be eligible for. This man is Somali.  
 Please call coach Christa 619-458-2283 with questions  
 thanks you

<b>Sender's last activity:</b>	3/29/2016 3:01 PM (PT)	<b>Your last activity:</b>	
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**Contact Information**

Please call (619) 740-4190 with your referral response.

**Patient Information - Referral # 34191273**

<b>Name:</b>	(Sender has not made this available)	<b>MRN:</b>	(Sender has not made this available)
<b>Date of Birth:</b>	72 years	<b>Gender:</b>	Male
<b>Address:</b>	(Sender has not made this available)	<b>Home: Work: Alt:</b>	(Sender has not made this available) (Sender has not made this available) (Sender has not made this available)
<b>Marital Status:</b>	(Sender has not made this available)	<b>SSN:</b>	(Sender has not made this available)
<b>Race:</b>	(Sender has not made this available)	<b>Race 2:</b>	(Sender has not made this available)
<b>Religion:</b>	(Sender has not made this available)		
<b>Emergency Contact 1:</b>	(Sender has not made this available)		

<b>Emergency Contact 2:</b>	(Sender has not made this available)	
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**Admission Information - Referral # 34191273**

<b>Account #:</b>	(Sender has not made this available)	<b>Patient Type:</b>	Inpatient Acute
<b>Admission Date:</b>	(Sender has not made this available)	<b>Projected Discharge Date:</b>	3/24/2016 11:00 AM (PT)
<b>Patient Class:</b>	Inpatient	<b>Admit Source:</b>	EME
<b>Service Type:</b>	INTERNAL MEDICINE	<b>Location:</b>	(Sender has not made this available)
<b>Facility:</b>	SGR	<b>Level of Care:</b>	
<b>Primary Diagnosis:</b>	"FAST HEARTRATE" CHF DN		

For additional information regarding the referral, please see Instruction Page 1 to log into the website.

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