

TEST, OOI (id #7939, dob: 10/03/1903)

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Interpath Laboratory

Interpath Lab Order Form

NWN-2136,182CE19112

EREQ**Account #:** NWN-2136**Account Name:** SELKIRK NEUROLOGY PLLC - SELKIRK
NEUROLOGY PLLC**Address:** 610 S SHERMAN, STE 201**City, State Zip:** SPOKANE, WA 99202-1342**Phone:** (509) 473-0885

For lab use only

Patient InformationTEST, OOI
MH
BOSTON, MA 12345
111-11-1111

To INTERPATH LAB(2460 SW PERKINS AVE , PENDLETON,OR, 97801)

Requisition #: 182CE19112 Collection Date: Time:	Pat ID: 7939 DOB: 10/03/1903 Sex: F
Ordering Provider: ANNE-MARIE C. BERGELEEN, NP, S NPI: 1053716381 Responsible Party: TEST, OOI Phone: 111-11-1111 MH BOSTON, MA 12345	Bill Type: Patient Bill Primary Insurance: Insurance #: Group #: Relation: DOB: Address: , , , Secondary Insurance: Insurance #: Group #: Relation: DOB: Address: , , ,

Profiles/Tests

Order generated: 05/01/2019 02:05 PM

APPROVED BJMCG 05/2/2019

Orders included: 1

Myasthenia gravis | ICD-10: G70.00: Myasthenia gravis without (acute) exacerbation

• 2046 | ALT (SGPT) | BILL: Patient

End of Requisition