

McLaren Print System Order

Order No: 45158
 Order Date: 2019-05-07
 User: Denise Maginity
 Phone: 810-342-5470

Ship Location: BARIATRIC & METABOLIC INSTITUTE/BEECH HILL CENTRE
 G-3200 Beecher Road, MBI
 Flint, MI 48532

Forms

Quantity: 500
 Paragon Dept No: 36810
 Dept Name: BARIATRIC & METABOLIC INSTITUTE
 Company Number: 60

Order Total Price: 18.00

Item Number: 17576-A
 Item Description: Ambulatory Medication Reconciliation Form
 Revision Date: 12/2008
 Print: 1 sided black and white
 Paper: 20# White Text
 Size: 8.5 x 11
 Fold:
 Finish: None
 Drill: 5 Hole Top
 Misc Info:

McLaren Flint
 Flint, Michigan

AMBULATORY MEDICATION RECONCILIATION FORM

ALLERGIES: _____ Date/Initials _____
 ALLERGIES: _____ Date/Initials _____
 PHARMACY: _____ Phone: _____

CURRENT HOME MEDICATIONS (PRESCRIPTIONS, OTC, HERBALS, FITCHES, INHALERS, EYE DROPS, SUPPLEMENTS, RESINOR BINDS, ETC.)					
Drug Name* (include dose, route, frequency)	Date Renowned + Initials	Date Renowned + Initials	Date Renowned + Initials	Date Renowned + Initials	Date Renowned + Initials

Spec Info:

KEY:
 Initials _____ Name _____ Clinic _____ Initials _____ Name _____ Clinic _____
 Initials _____ Name _____ Clinic _____ Initials _____ Name _____ Clinic _____
 Initials _____ Name _____ Clinic _____ Initials _____ Name _____ Clinic _____