

McLaren Print System Order

Order No: 49137 Reprint Previous Order No: 9446

Order Date: 2019-10-01 User: Lisa Ardanowski Phone: 810-768-2073

Ship Location: McLaren Surgery and Endoscopy Center Attn: Lisa Ardanowski

501 S. Ballenger Hwy

Flint, MI 48532

Forms Quantity: 500

Paragon Dept No: 30014

Dept Name: Surgery and Endoscopy Center Pain Clinic

Company Number: 60

Order Total Price: 27.40

Item Number: 2243

Item Description: MRI Outpatient Form

Revision Date: 12/2015 Print: 2 sided black and white Paper: 20# White Text

Size: 8.5 x 11

Fold:

Finish: Padded (50 Sheets Per Pad)

Drill: None

Misc Info: Order the amount of sheets you would like to receive.

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Mild.com MWV - Plant (3 170 South Beatman, Thing - Flant, MI 4850) Phone (810) 200-9011 - Plan (810) 200-9018	MicLane IIII - Clarkstee CS 579 Beer Front Dr., Suite 115 - Clarkstee, MI 48046 Phone (IHE) 503-5818 - Fax (IHE)459-5019
Patient Name:	Data of Birth:
Home Phone E.	regic
Cel Phone #	Social Security #
	Presufronzation No.:
Call Patient	Referring Physician
Appointment Date	
	Time
EXAM:	
Ds	
Signs / Symptoms:	
PHYSICIAN SIGNATURE REQUIRED	Dates
Office Contact Person	Phone fi
RADIOLOGIST WILL DETERMINE	APPROPRIATE USE OF CONTRAST
	or Cardiac Defibrillator (ICO) tes for MRI exams
DUTPMENT ORDER	ri .
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