

McLaren Print System Order

Order No: 85962
Order Date: 2024-06-04
User: Jilianne Sperling
Phone:

Ship Location: McLaren BHV Suite 8
2110 M76
West Branch MI,48661

Brochures
Quantity: 100
Paragon Dept No: 50618
Dept Name: Bay Heart and Vascular West Branch
Company Number: MMG20

Order Total Price: 52.50

Item Number: MM-10335
Item Description: Patient Health Wallet Card
Revision Date: 7/2016
Print:
Paper:
Size:
Fold:
Finish:
Drill:
Poster:
Misc Info: 50 per package; laminated with rounded corners; slot punch

McLaren MEDICAL GROUP
Patient Health Wallet Card

Name: _____
DOB: _____
Address: _____

Emergency Contact
Emergency Contact Phone #: (____) _____

Provider(s) - Please list below

Phone: (____) _____

Phone: (____) _____

Phone: (____) _____

Pharmacy Phone # (____) _____

Allergies & Reactions:
 Latex Contrast Media (Iodine or IVP dye)
 Medications (include reactions)

Food (include reactions)

McLaren MEDICAL GROUP
Patient Health Wallet Card

Name: _____
DOB: _____
Address: _____

Emergency Contact
Emergency Contact Phone #: (____) _____

Provider(s) - Please list below

Phone: (____) _____

Phone: (____) _____

Phone: (____) _____

Pharmacy Phone # (____) _____

Allergies & Reactions:
 Latex Contrast Media (Iodine or IVP dye)
 Medications (include reactions)

Food (include reactions)

Medications <small>(include eye drops, inhalers, creams, patches, vitamins, herbs and over the counter medications)</small>	Dose	How often is it taken? <small>(every day / as needed)</small>

Medications <small>(include eye drops, inhalers, creams, patches, vitamins, herbs and over the counter medications)</small>	Dose	How often is it taken? <small>(every day / as needed)</small>

Spec Info: