

McLaren Print System Order

Order No: 86582
Order Date: 2024-06-28
User: Michael Loniewski
Phone: 517-975-3283

Ship Location: McLaren Greater Lansing Outpatient Care Center Endoscopy
3520 Forest Road
Lansing, MI 48910

Form
Quantity: 1000
Paragon Dept No: 22400
Dept Name: Endoscopy
Company Number:

Order Total Price: 31.00

Item Number: MGL-053 (646-21)
Item Description: ENDO DISCHARGE INSTRUCTION PATIENT SIGNATURE Form
Revision Date: 04/2024
Print: 1 sided black and white
Paper: 20# White Text
Size: 8.5 x 11
Fold:
Finish: None
Drill: None
Poster:
Misc Info: SS, Black



Endoscopy Department

Acknowledgment of Receipt of Discharge Instructions

I have received and understand the Endoscopy Department Discharge Instructions for the following procedure(s).

- Colonoscopy
- EGD
- Sigmoidoscopy
- Bronchoscopy
- Other: _____

Patient / Family / Responsible Adult Signature Date / Time

Spec Info:

Relationship to Patient

Nurse Signature Date / Time



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