

Encounter

SuperEMR
patient, 4 months

MRN: 001001 Sex: Female Age: 9 months DOB: 09/15/2007
Ref. Phy.: Tel: Date: 05/17/2008
Ins.: Doctor:

Welcome: Super User

Home

Task

Patient

Demographics

Chart

Payment

Billing

Front Desk

Patient Balance

Report

Encounter

Eligibility

Appointments

Document

Care Management

Reminder

Hospitalization

Lab Results

Signoff

Admin

System

Change Password
 About
 Help
 Exit

From date: January / 1 / 2008 To date: June / 18 / 2008 Patient: Current

Type: - Doctor: - Facility: -

	Date	MRN	Patient	Type	Facility	Doctor	Comment	Signed date
<input type="checkbox"/>	05/21/2008	001001	patient, 4 months	Reminder (No Show)				-
<input type="checkbox"/>	05/17/2008	001001	patient, 4 months	Office Visit	San Gabriel Office	Dr. Kildare		-
<input type="checkbox"/>	05/17/2008	001001	patient, 4 months	Vaccination (DTaP)	San Gabriel Office	Dr. Kildare		-
<input type="checkbox"/>	05/17/2008	001001	patient, 4 months	Vaccination (Hepatitis B)	San Gabriel Office	Dr. Kildare		-
<input type="checkbox"/>	05/17/2008	001001	patient, 4 months	Vaccination (H1B)	San Gabriel Office	Dr. Kildare		-
<input type="checkbox"/>	05/17/2008	001001	patient, 4 months	Vaccination (IPV)	San Gabriel Office	Dr. Kildare		-
<input type="checkbox"/>	05/17/2008	001001	patient, 4 months	Vaccination (PCV)	San Gabriel Office	Dr. Kildare		-
<input type="checkbox"/>	05/17/2008	001001	patient, 4 months	Vaccination (Rotavirus)	San Gabriel Office	Dr. Kildare		-
<input type="checkbox"/>	03/20/2008	001001	patient, 4 months	Office Visit	San Gabriel Office	Dr. Kildare		-
<input type="checkbox"/>	03/20/2008	001001	patient, 4 months	Vaccination (DTaP)	San Gabriel Office	Dr. Kildare		-
<input type="checkbox"/>	03/20/2008	001001	patient, 4 months	Vaccination (Hepatitis B)	Garfield Hospital	Dr. Kildare		-
<input type="checkbox"/>	01/20/2008	001001	patient, 4 months	Office Visit	San Gabriel Office	Dr. Kildare		-

Total = 12

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