

	- AS	Phone: (816) 799	-0123 Fax: (8	16) 931-0282	FOR:			
MEDICAT	TIONS	HOU	IR		ORDERS			
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MEDS REVIEWED BY:			PHYSICIAN'S SIG	SNATURE				
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CHARTING FOR		THROUGH	4					
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ALLERGIES				REHABILITATIVE				
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MEDICAID NUMBER	MEDICA	RE NUMBER	COMPLETED ENTR	ES CHECKED				
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			101.	DATE OF BIRTH	PATIENT CODE	ROOM NO.	BED	FACILITY CODE
PATIENT				TO THE REAL PROPERTY OF THE PARTY OF THE PAR		TOOM NO.		THOMAS TO CODE