

- **Name:**
- **MRN:**
- **UHID:**
- **Age:** 26 y.o. **DOB:** 1/1/1998 **Sex:** female
- **Phone Number:**
- **Country Of Origin:**
- **A.F Submission date:**

Surgery Information (418162)

Surgery Date: 22/10/2024	Admission Date: 22/10/2024
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Vaginal Delivery Only (With Or Without Episiotomy And/Or Forceps) Including Postpartum Care - [59410 (Cpt®)]
Surgeon(s): OBS-GYN, MD

Service: Obstetrics	Anesthesia Type: * No anesthesia type entered *
Patient Class Surgery Admit	
	Procedure Type:Surgical

Diagnosis (ICD10):

Encounter for induction of labor
1857720

Admission Information

Admission Source: Physician Clinic	Billing Class: NA
Admission Service: Obstetrics	
Expected Length of Stay: 2	Room and Bed Request: RF

Brief Description of Medical Condition: IOL, term

High Dollar Supplies:

Are there any Prosthesis, Medical Supplies, Laparoscopic Instruments, Stent, Apparatus?: No

Order and Preadmission Testing

Pau Needed:No
Medical Test/Images: No Tests or Images Requested
Transfusions: N/A

MPI History

Action Date	ID Type	Old ID	Validity	New ID	Unmerged ID	Action Type	User	Source ID
28/06/2024 06:35 PM	(NO ZEROS)					NEW		
13/09/2018 07:24 AM	ENTERPRISE ID NUMBER					NEW		
13/09/2018 07:24 AM	AUB MRN					NEW		