TeleHepatology

EXISTING PATI	ENT FOLLOW-UP INFORMATION
Patient Name:	☐ Male ☐ Female
DOB	Provider
Facility	Current Meds
Genotype	
Start Date	Week of treatment HCV Meds.
Brief progress note	
LABS	<u>LIVER BX</u>
PCR Quant.	Viral Log GRADE STAGE
WBC	ANC HGB PLT AST ALT T.BILI
TSH	
HEPATOLOGIST I	RECOMMENDATIONS (OFFICE USE ONLY)
<u>LABS</u>	
☐ CBC	☐ CMP ☐ AFP ☐ PT/INR ☐ TSH ☐ HCV PCR QUANT.
PREG. TEST	UTOX SERUM ETOH
Continue trea	tment and present next telehealth session
Additional comments	
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Signature	Date
	Joykumar Patel, MD, Trushar Patel, MD

Contact: Patti Burris, RN
Telehealth Nurse/Consultant
Phone: 405-951-2907 Fax: 405-979-8338
email: patti.burris@integrisok.com

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