RECOVERY ROOM LOG

Office Name: ELKTON

Doctor: DR. SHEPARD / DR. WALKER

Date: 08/04/10

CHART #	PATIENT NAME	# of Weeks	PROCEDURE TOP/ LAM	LCL/TWL	Payment Type	Payment Amount
GRACE	M[redacted] L[redacted]	33	TOP	TWL	–	GRACE
GRACE	C[redacted] S[redacted]	18.2	TOP	TWL	–	GRACE
GRACE	W[redacted] B[redacted]	18.4	TOP	TWL	–	GRACE

Recovery Room Staff Initials