



IMT Patient Log Sheet



# CardioRisk Laboratories

At the Heart of Good Health

Date: Sept 9 2015

Facility: Ivy Creek - Wetumpka

Sonographer: Billy Lane RVT

▼	<u>Patient Name</u>	<u>Doctor</u>	<u>D.O.B.</u>	<u>M</u> <u>F</u>	<u>Prior Scan</u>	<u>IMT</u>	<u>Endo</u>	<u>Comments</u> <small>Indicate Ethnic Origin if not Caucasian</small>
1	<u>Priest, Dorothy</u>		<u>9-19-44</u>	<u>F</u>		<u>✓</u>		<u>possible 80% stenosis</u>
2	<u>Albright, Paula</u>		<u>10-9-60</u>	<u>F</u>		<u>✓</u>		
3	<u>Hartzog, Katie</u>		<u>8-15-80</u>	<u>F</u>		<u>✓</u>		
4	<u>OURO, Jeanne</u>		<u>9-16-64</u>	<u>F</u>		<u>✓</u>		
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\* Signature of physician of representative is acknowledgement of responsibility to pay CardioRisk Laboratories, Inc., for all patients listed on this patient data sheet, according to agreement between the parties or in the event of an absence of a written agreement, as is customary and usual between the parties.

Representative: \_\_\_\_\_ Date: \_\_\_\_\_