HCAH Northwest

Patient: NATHAN ALEXANDER JONES
Acct Num: BN0253387223
Med Rec Num: H010585127
Location: SPRING PSED
Primary Provider: Bartasis,Dennis L
Date: 10/26/26

7 Day Work/ School Excuse

* JONES,NATHAN ALEXANDER may return to work/school in 7 days with no restrictions, unless
* listed below.

* After this date, this patient should be able to participate fully in all
* work/school activities.

* NOTE: If symptoms continue beyond this date, the patient must return to this
* facility or make an appointment with the referral physician for further
* evaluation.

Dennis L Bartasis, DO

Provider