

**Event Summary**

27 Jul 2022

MR Rrtwo **SURGDRY**

DoB 1 Jan 1951 (71 years\*)

SEX Male

MRN 525518

**Start of Document****Coffs Harbour Health Campus**

**Author** William ROSS ()  
**Phone** (02) 6656 7000  
**Encounter Period** 27 Jul 2022 to 29 Jul 2022

For further patient information please contact the Health Information and Record Service Coffs Harbour 02 66567448.

This message contains information intended solely for the use of the addressee. If you are not the intended recipient DO NOT COPY or disseminate this message. Notify the sender via fax 02 66567446, then delete or destroy the message.

For further information about these notifications visit [www.hnc.org.au/ADN-MNC](http://www.hnc.org.au/ADN-MNC)

**Discharge Event Notification**

Dear Dr Ross,  
Please note that your patient Rrtwo SURGDRY has been discharged from SURG A at Coffs Harbour Health Campus, Discharge Date: 29/07/2022  
Presenting Problem: Appendicectomy

**Five Most Recent Encounters**

Admission Date	Discharge Date	Reason for Visit	Specialty	AMO	Facility	Encounter Type
18-Jul-2022		testing	Brain Injury Unit	CAMERON SMAIL Ruaridh	Royal North Shore Hospital	Inpatient
12-Jul-2022	13-Jul-2022	testing	Brain Injury Unit	CAMERON SMAIL Ruaridh	Royal North Shore Hospital	Inpatient
16-May-2022	13-Jul-2022	testing	Brain Injury Unit	CAMERON SMAIL Ruaridh	Royal North Shore Hospital	Inpatient
23-Mar-2022			Geriatrics		Lower North Shore Community Health	Outpatient
23-Mar-2022			Geriatric medicine		Lower North Shore Community Health	Recurring Patient

**Five Most Recent NSW Health Documents**

Date	Document Title	Facility
31 Jul 2022	Specialist Letter	St Somewhere's Hospital
31 Jul 2022	Discharge Summary	St Somewhere's Hospital
20 Jul 2022	Specialist Letter	Elsewhere Medical Centre

**Administrative Details**

Patient Details	Value	Author Details	Value
<b>Name</b>	MR Rrtwo SURGDRY	<b>Name</b>	William ROSS
<b>Sex</b>	Male	<b>Organisation</b>	Coffs Harbour Health Campus
<b>Date of Birth</b>	1 Jan 1951 (71 years) * Age is calculated from DoB	<b>Work Place</b>	345 Pacific Highway, Coffs Harbour, NSW, 2450, Australia
<b>IHI</b>	Not Provided		

<b>Patient Details</b>	<b>Value</b>	<b>Author Details</b>	<b>Value</b>
<b>Local Identifiers</b>	3099249 (NCAHS AUID) 525518 (Mid North Coast Northern MRN) 9999999999 (Medicare Card Number)	<b>Phone</b>	(02) 6656 7000 (Workplace)
<b>Home Address</b>	53 Ten Mile Creek Rd, NARRACAN, VIC, 3824, Australia	<b>Clinical Document Details</b>	<b>Value</b>
<b>Contact Details</b>	Not Provided	<b>Document Type</b>	Event Summary
		<b>Creation Date</b>	27 Jul 2022 21:19+1000
		<b>Date Attested</b>	27 Jul 2022 21:19+1000
		<b>Document ID</b>	83fdf807-b984-4f56-a1cd-353f0c7b5549
		<b>Document Set ID</b>	c58b0dad-43f1-4120-ae77-21e37dbe8915
		<b>Document Version</b>	1
		<b>Completion Code</b>	Final

---

### Primary Recipients

Name	Contact	Address	Organisation
Dr William ROSS	Not Provided	Not Provided	ST TESTING MEDICAL CENTRE

End of Document