Tab 62

NSN [illegible]

A[illegible] FOR LOCAL REPRODUCTION

M[illegible] RECORD

CHRONOLOGICAL RECORD OF MEDICAL CARE

[illegible]MPTONS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)

19 Dec 02

My name is Dr. Fred[illegible] [illegible]ass.
I am at this very moment taking care of a patient who has potentially taken an overdose of your product "Yellow Jackets". I do not wish to know the entire formula, however I do need to know the amount of ephedrine & synephrine in a capsule. Any help would be appreciated.

Sincerely,

HOSPITAL OR MEDICAL FACILITY	STATUS	DEPART./SERVICE	RECORDS MAINTAINED AT
SPONSOR'S NAME	SSN/ID NO.	RELATIONSHIP TO SPONSOR	

PATIENT'S IDENTIFICATION: (For typ[illegible] or written entries, give: Name - last, first, middle; ID No or SSN; Sex; Date of [illegible]; Rank/Grade.)

REGISTER NO.	WARD NO.

CHRONOLOGICAL RECORD OF MEDICAL CARE

[illegible]ical Rec[illegible]

STA[illegible] FORM 600 ([illegible])