

# Client Flow Team: Hospital Case #208

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Client details	
Name: <b>Bridgette Goodwin</b>	
Date of birth: <b>05/11/1969</b>	
NHS number: <b>943-476-5919</b>	MRN number: <b>expedita</b>
Gender: <b>Female</b>	
Address: <b>8213 Classie Rue, Suite 448, North Jeanmarie, YH8 3BX</b>	
Phone: <b>0409 4219089 / 02207 1063783</b>	Email: <b>bridgette_goodwin@example.com</b>
GP: <b>Miller Group (LE4), excepturi</b>	
Next of kin: <b>Sequi aut voluptates quas atque pariatur.</b>	
Relevant medical history: <b>Fuga occaecati velit vero ex labore.</b>	
Mobility issues: <b>Harum aperiam nobis numquam itaque amet magni architecto.</b>	
Memory issues: <b>No memory issues, MCI, Memory problems, Undiagnosed dementia</b>	
Existing package of care: <b>Libero illo fugiat occaecati dolores vel.</b>	
Living arrangements: <b>Lives with partner/spouse. Modi sit quam accusamus molestias.</b>	
Client is/was in military services: <b>Yes</b>	

Admission reason
Esse nemo voluptates voluptatum recusandae ipsum.

Referrals
30/12/2024: <b>Referred by Josie Gibson, josie_gibson@example.com, 02929 9099347, Therapist, source: Frailty Intervention Team (FIT), Physiotherapist, Home First Team</b>

Hospital case details	
Hospital: <b>jr</b>	
Seen in hospital by: -	
Has pendant alarm?	Has key safe?
Digital support required?	
Financial Entitlements:	

Support required post discharge:

Follow up needed?

Office tasks:

Actions taken: ,

Discharge destination/date: ,

## Notes