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Multi-Reports Reporting System

Clinic: Kerry Solomon, M.D.
Report Name: May 2013 LVC report
Type: Detailed Leads Report
Frequency: Summary
Date Range: May 1, 2013 - May 31, 2013
Generated on: Jan 8, 2014 9:44:29 AM
Email Data: [Download](#)
Filter (Categories) : LVC

PRINT

DETAILED LEADS REPORT

	DATE	FORM	LEAD NAME	STATUS	DATA
1	05/31/2013 06:27 PM	Schedule Appointment	Heather Hale mrs.haleyeh@yahoo.com	Consultation	Name: Heather Hale Age: 34 Address: 102 Desi Ct. City State Zip: Summerville, SC 29485 Hear About Us: Word of Mouth Contact Via: Both Formmail Mail Email: mrs.haleyeh@yahoo.com Phone: 610-787-1147 Special Offers Option: on
	COMMENTS				
	TASKS				
2	05/30/2013 06:12 PM	Manual Form	Sabrina Pugliese Sabrina spugliese77@gmail.com	Post Treatment	Name: Sabrina Pugliese Fname: Sabrina Lname: Pugliese Email: spugliese77@gmail.com Address: 313 Duck Pond Lane Zip: 29483 City: Summerville State: SC Phone: (843) 810-6607 Cell Phone: Dob: 11/9/1977 Other Phone: (843) 654-7755
	COMMENTS				
	TASKS				
3	05/30/2013 06:05 PM	Manual Form	Laurel Mastin Laurel lcmastin2@gmail.com	Post Treatment	Name: Laurel Mastin Fname: Laurel Lname: Mastin Email: lcmastin2@gmail.com Address: 304 Judy Drive Zip: 29445 City: Goose Creek State: SC Phone: (843) 303-2014 Cell Phone: Dob: 11/2/1980 Other Phone: (843) 576-1129
	COMMENTS				
	TASKS				
4	05/30/2013 04:30 PM	Manual Form	Nancy H. Collins Nancy H. ncollins@cmc-sc.com	Post Treatment	Name: Nancy H. Collins Fname: Nancy H. Lname: Collins Email: ncollins@cmc-sc.com Address: 153 Pottery Landin Drive Zip: 29527 City: Conway State: SC Phone:
	COMMENTS				



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				Cell Phone: (843) 222-7826	
				Dob: 9/8/1977	
				Other Phone: (843) 347-7216	
5				No-Show	Name: Jay Gibson Fname: Jay Lname: Gibson Email: datank1996@hotmail.com Address: 415 Sweet Gum Court Zip: 29461 City: Moncks Corner State: SC Phone: (843) 926-5683 Cell Phone: (843) 926-5683 Dob: 8/27/1958 Other Phone:
	COMMENTS	1 06/17/2013 04:14 PM keribogan	NO SHOW - Left message - email sent - cah		
		2 05/30/2013 04:13 PM keribogan	Pt. scheduled for measurement exam - will decide if to proceed with sx at that visit - cah		
	TASKS				
6	05/29/2013 04:11 PM	Manual Form	James Emory James james.emory@bp.com	Consultation	Name: James Emory Fname: James Lname: Emory Email: james.emory@bp.com Address: 123 Pinewood Drive Zip: 29461 City: Moncks Corner State: SC Phone: Cell Phone: (843) 881-5134 Dob: 9/27/1961 Other Phone:
	COMMENTS	1 05/29/2013 04:12 PM keribogan	Appointment scheduled with Dr. Hood for contact lens trial 1st to make decision if to proceed with LASIK - cah		
		TASKS			
7	05/29/2013 04:08 PM	Manual Form	Gregory Forbes Gregory greg.forbes@bp.com	Cancelled	Name: Gregory Forbes Fname: Gregory Lname: Forbes Email: greg.forbes@bp.com Address: 108 Webb Street Zip: 29431 City: Bonneau State: SC Phone: Cell Phone: (843) 209-9515 Dob: 12/18/1961 Other Phone: (843) 856-5477
	COMMENTS	1 06/13/2013 07:58 AM keribogan	Pt. CANCELLED procedure - called pt. spoke with his wife - said, he wants to think about it somemore - CAH		
		2 05/29/2013 04:08 PM keribogan	Procedure scheduled - cah		
	TASKS				
8	05/29/2013 10:55 AM	Manual Form	Robert McDaniel Robert robertmcdaniel@mail.com	Lead	Name: Robert McDaniel Fname: Robert Lname: McDaniel Email: robertmcdaniel@mail.com Address: 1822 Mallard Circle Zip: 29461 City: Moncks Corner State: SC Phone: (843) 860-7292 Cell Phone: Dob: 6/19/1965 Other Phone:
	COMMENTS	1 06/03/2013 10:49 AM keribogan	PT DECIDED TO POSPONE LASIK FOR TIME BEING. WILL CALL FOR CONSULT WHEN READY TO PURSUE. CSMILLIE		
		2 05/29/2013 10:57 AM keribogan	Consult rescheduled - cah		
	TASKS				
9	05/28/2013 02:57 PM	Manual Form	KERRINGTON WILSON KERRINGTON kerringtonwilson@gmail.com	Lead	Name: KERRINGTON WILSON Fname: KERRINGTON Lname: WILSON Email: kerringtonwilson@gmail.com Address: 411 MEETING STREET APT 5112 Zip: 29403 City: CHARLESTON State: SC
	COMMENTS	1 09/17/2013 02:42 PM keribogan	followed up via email		
	2 05/28/2013 03:01 PM keribogan	pt out of town, will call back to r/s when returns. csmillie			



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				Phone:	864-361-6348
				Cell Phone:	
				Dob:	06/06/1991
				Other Phone:	
10	02:54 PM	Form	DAVIDWBYRD@BELLSOUTH.NET	Treatment	Name: DAVID BYRD Fname: DAVID Lname: BYRD Email: DAVIDWBYRD@BELLSOUTH.NET Address: 2329 ETIWAN WAVE Zip: 29414 City: CHARLESTON State: SC Phone: 843-763-2973 Cell Phone: Dob: 2/16/60 Other Phone:
	COMMENTS				
	TASKS				
11	05/28/2013 02:01 PM	Manual Form	EDWARD BEHRENS EDWARD ED_BEHRENS@HOMESC.COM	Post Treatment	Name: EDWARD BEHRENS Fname: EDWARD Lname: BEHRENS Email: ED_BEHRENS@HOMESC.COM Address: 647 ISLAND PARK DRIVE Zip: 29492 City: DANIEL ISLAND State: SC Phone: 843-881-7431 Cell Phone: Dob: 12/14/61 Other Phone:
	COMMENTS	1 06/26/2013 12:20 PM procedure complete clarissa			
	TASKS				
12	05/23/2013 11:59 AM	Manual Form	LORNIA WINNEN LORNIA Gr8history2share@yahoo.com	Not a Candidate	Name: LORNIA WINNEN Fname: LORNIA Lname: WINNEN Email: Gr8history2share@yahoo.com Address: 180 WINDING ROCK RD Zip: 29445 City: GOOSE CREEK State: Phone: 843 764 3494 Cell Phone: Dob: 01/06/1959 Other Phone:
	COMMENTS	1 05/23/2013 12:00 PM CONSIDER RLE CSMILLIE keribogan			
	TASKS				
13	05/23/2013 11:44 AM	Manual Form	RICHARD PASS RICHARD RICHARD.PASS@NAVY.MIL	Post Treatment	Name: RICHARD PASS Fname: RICHARD Lname: PASS Email: RICHARD.PASS@NAVY.MIL Address: 116 ESTON DRIVE Zip: 29445 City: GOOSE CREEK State: SC Phone: 843-553-6719 Cell Phone: Dob: 4/8/58 Other Phone:
	COMMENTS	1 06/26/2013 12:26 PM Procedure complete clarissa			
	TASKS				
14	05/23/2013 09:56 AM	Manual Form	MARGARET DEVANE MARGARET maggie@attorneyscharleston.com	Lead	Name: MARGARET DEVANE Fname: MARGARET Lname: DEVANE Email: maggie@attorneyscharleston.com Address: 106 COLLINGOOD AVE Zip: 29407 City: CHARLESTON
	COMMENTS	1 09/17/2013 01:34 PM followed up via email keribogan			



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/S missed appt. CSmillie

State:
Phone: 843 696 2413
Cell Phone:
Dob: 09/27/1982
Other Phone:

15	05/23/2013 09:36 AM	Manual Form	CHRISTINE ONEAL CHRISTINE SUMMERVILLEMOMOF3@GMAIL.COM	Not a Candidate	Name: CHRISTINE ONEAL Fname: CHRISTINE Lname: ONEAL Email: SUMMERVILLEMOMOF3@GMAIL.COM Address: 109 CREEK BEND DRIVE Zip: City: SUMMERVILLE State: SC Phone: 843 259 4137 Cell Phone: Dob: 04/10/1976 Other Phone:
	COMMENTS				
	TASKS				
16	05/23/2013 08:46 AM	Manual Form	JOHN GLASGOW JOHN	Not a Candidate	Name: JOHN GLASGOW Fname: JOHN Lname: GLASGOW Email: Address: 574 HIDDEN BLVD Zip: 29464 City: MT PLEASANT State: SC Phone: 843-849-6914 Cell Phone: Dob: 01/04/1965 Other Phone:
	COMMENTS				
	TASKS				
17	05/22/2013 08:01 PM	Schedule Appointment	Chris O'Neal summervillemomof3@gmail.com	Lead	Name: Chris O'Neal Age: 37 Address: 109 Creek Bend Drive City State Zip: Summerville, SC 29485 Hear About Us: Referral Contact Via: Both Formmail Mail Email: summervillemomof3@gmail.com Phone: 843-259-4137 Special Offers Option: on
	COMMENTS				
	TASKS				
18	05/22/2013 11:33 AM	Manual Form	GAIL LANE GAIL GAILLANE0D@GMAIL.COM	Not a Candidate	Name: GAIL LANE Fname: GAIL Lname: LANE Email: GAILLANE0D@GMAIL.COM Address: PO BOX 2154 Zip: 29484 City: SUMMERVILLE State: SC Phone: 843-530-5620 Cell Phone: Dob: 12/5/59 Other Phone:
	COMMENTS				
	TASKS				
19	05/22/2013 10:44 AM	Manual Form	SAMUEL HEDRICK SAMUEL SAM.HEDRICK@COMCAST.NET	Not a Candidate	Name: SAMUEL HEDRICK Fname: SAMUEL Lname: HEDRICK Email: SAM.HEDRICK@COMCAST.NET Address: 331 OAK POINT LANDING DRIVE Zip: 29464 City: MT PLEASANT State: SC Phone: 843-991-7264
	COMMENTS		1 05/22/2013 10:45 AM REFERRED BY KRISTI LENTSAL CSMILLIE keribogan		



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Cell Phone:
Dob: 11/27/59
Other Phone:

20	COMMENTS	1	06/04/2013 09:54 AM	Procedure complete - cah keribogan	ALEXANDRA @.COM	Post Treatment	Name:	ALEXANDRA PARKER
	TASKS						Fname:	ALEXANDRA
							Lname:	PARKER
							Email:	ALIXPARKER_91@YAHOO.COM
							Address:	305 OAKMONT DRIVE
							Zip:	29621
							City:	ANDERSON
							State:	SC
							Phone:	864-934-3573
							Cell Phone:	
							Dob:	6/14/91
							Other Phone:	
21	COMMENTS				SARAH BREWER SARAH SLB0530@YAHOO.COM	Not a Candidate	Name:	SARAH BREWER
	TASKS						Fname:	SARAH
							Lname:	BREWER
							Dob:	5/30/84
							Email:	SLB0530@YAHOO.COM
							Address:	529 ST ANDREWS BLVD
							Zip:	29407
							City:	CHARLESTON
							State:	SC
							Phone:	502-294-9705
							Cell:	
							Other:	
							Cell Phone:	
							Other Phone:	
							Lead Name:	1lead
							Assigned:	
							Ref Id:	1645
22	COMMENTS	1	09/17/2013 01:39 PM	followed up via email keribogan	Davida Harman Davida vidastar21@hotmail.com	Lead	Name:	Davida Harman
	TASKS						Fname:	Davida
							Lname:	Harman
							Email:	vidastar21@hotmail.com
							Address:	114 Bassett Court
							Zip:	29445
							City:	Goose Creek
							State:	SC
							Phone:	(843) 530-8107
							Cell Phone:	(843) 345-0385
							Dob:	1/22/1985
							Other Phone:	
23	COMMENTS	1	05/21/2013 05:09 PM	Procedure scheduled - cah keribogan	Dianne Ray Dianne michael@surffishrealty.com	Post Treatment	Name:	Dianne Ray
	TASKS						Fname:	Dianne
							Lname:	Ray
							Email:	michael@surffishrealty.com
							Address:	P.O. Box 1376
							Zip:	29439
							City:	Folly Beach
							State:	SC
							Phone:	(843) 633-0199
							Cell Phone:	(843) 478-0662
							Dob:	7/22/1974
							Other Phone:	
24	COMMENTS				Jennifer Stewart Jennifer jenniferah072806@yahoo.com	Post Treatment	Name:	Jennifer Stewart
	TASKS						Fname:	Jennifer
							Lname:	Stewart



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INNER - Procedure scheduled - cah	Email: jenniferah072806@yahoo.com Address: 2517-D South Live Oak Drive Zip: 29461 City: Moncks Corner State: SC Phone: Cell Phone: (843) 789-0446 Dob: 7/17/1988 Other Phone:
-----------------------------------	--

25	TASKS				
	05/21/2013 03:51 PM	Schedule Appointment	Matt Sand mattsand@msn.com	Cancelled	Name: Matt Sand Age: 29 Address: 853 Center Park St City State Zip: Daniel Island, SC 29492 Hear About Us: Radio Contact Via: Both Formmail Mail Email: mattsand@msn.com Phone: 4065391823 Special Offers Option: on
	COMMENTS	1 06/24/2013 05:45 PM Pt. has postpone procedure until after the summer - will call clarissa back in the Fall - trouble being out of contact lens 2 05/30/2013 06:23 PM Procedure scheduled - cah keribogan			
TASKS					

26	05/20/2013 07:20 PM	Schedule Appointment	Delicia Deen Ddeen@marshallwalker.com	Post Treatment	Name: Delicia Deen Age: 36 Address: 1034 Delsey St City State Zip: North Charleston, SC 29405 Hear About Us: Referral Contact Via: Both Formmail Mail Email: Ddeen@marshallwalker.com Phone: 843.901.0190 Special Offers Option: on
	COMMENTS	1 05/29/2013 10:14 AM Procedure scheduled - cah keribogan			
	TASKS				

27	05/20/2013 04:22 PM	Manual Form	MARY PROZZI MARY rprozzi@gmail.com	Cancelled	Name: MARY PROZZI Fname: MARY Lname: PROZZI Email: rprozzi@gmail.com Address: 1491 CAMBRIDGE LAKES D Zip: 29464 City: MT PLEASANT State: Phone: 704 995 1674 Cell Phone: Dob: 10/01/1987 Other Phone:
	COMMENTS	1 06/14/2013 01:34 PM CANCELLED procedure - Got new job - only have 3 days of keribogan per year - will call back when schedule permits - cah 2 05/21/2013 04:56 PM Cancelled for now - Will call back to reschedule in July - cah keribogan			
	TASKS				

28	05/20/2013 04:02 PM	Manual Form	Martin Padgett Martin	Lead	Name: Martin Padgett Fname: Martin Lname: Padgett Email: Address: Zip: City: State: Phone: Cell Phone: (803) 682-3820 Dob: Other Phone:
	COMMENTS	1 09/17/2013 01:42 PM followed up via email keribogan 2 05/28/2013 02:03 PM Im for pt to call and r/s missed appt. csmillie keribogan 3 05/20/2013 04:04 PM 5/14 - Pt. called spoke to Pam - wanted info - had previous LASIK - not sure which doctor - CAH left message @ 11:19 AM - cah 5/16 - Left message @ 5:02 Left message @ 4:00 - cah			
	TASKS				

29	05/20/2013 02:10 PM	Manual Form	TYLER DORMAN TYLER THD87@ICLOUD.COM	Lead	Name: TYLER DORMAN Fname: TYLER Lname: DORMAN Email: THD87@ICLOUD.COM Address: 1916 SAM RITTENBERG BLVD Zip: 29407 City: CHARLESTON State: SC
	COMMENTS	1 06/11/2013 09:45 AM DID NOT PROVIDE SS# keribogan 2 05/20/2013 02:11 PM CC DENIED CSMILLIE keribogan			



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Phone: 843-270-7827
Cell Phone:
Dob: 11/4/87
Other Phone:

30	02:05 PM	Form		Post Treatment	Name: WENDY FRANK Fname: WENDY Lname: FRANK Email: Address: 400 IRELAND HILL Zip: 29488 City: WALTERBORO State: SC Phone: 843 782 3767 Cell Phone: Dob: 10/16/1982 Other Phone:
	COMMENTS	1	06/04/2013 09:58 AM	Procedure complete - cah keribogan	
	TASKS				

31	05/20/2013 11:21 AM	Manual Form	Arnie Selorio Arnie Arnieselorio14@gmail.com	Lead	Name: Arnie Selorio Fname: Arnie Lname: Selorio Email: Arnieselorio14@gmail.com Address: 8439 Dorchester Rd. 818 Zip: 29420 City: North Charleston State: SC Phone: 8189164213 Cell Phone: Dob: 27 Other Phone:
	COMMENTS	1	06/10/2013 08:46 AM	Im 6-3-2013 keribogan	
	TASKS				

32	05/20/2013 11:07 AM	Manual Form	Helen Schuller Helen Schuller.helen@gmail.com	Lead	Name: Helen Schuller Fname: Helen Lname: Schuller Email: Schuller.helen@gmail.com Address: 112 Cherry Hill Ave Zip: 29445 City: Goose Creek State: SC Phone: 8434081287 Cell Phone: Dob: 41 Other Phone:
	COMMENTS				
	TASKS				

33	05/20/2013 11:01 AM	Manual Form	Teresa Compton Teresa Teresa.compton@hcahealthcare.com	Consultation	Name: Teresa Compton Fname: Teresa Lname: Compton Email: Teresa.compton@hcahealthcare.com Address: 8729 Laurel Grove Lane Zip: 29420 City: North Charleston State: Phone: 8435683057 Cell Phone: Dob: 44 Other Phone:
	COMMENTS	1	06/10/2013 08:54 AM	schedule LASIK eval for 6-6-2013 keribogan	
	TASKS				

34	05/20/2013 10:53 AM	Manual Form	Robert Buzard Robert a.buzard@hotmail.com	Lead	Name: Robert Buzard Fname: Robert Lname: Buzard Dob: 32 Email: a.buzard@hotmail.com Address: Zip:
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City:
 State: AL
 Phone:
 Cell:
 Other:
 Cell Phone:
 Other Phone:
 Lead Name: 1lead
 Assigned:
 Ref Id: 0

35	05/20/2013 10:52 AM	Manual Form	Juan Trejo Juan Colleenp@tds.net	Not a Candidate	Name: Juan Trejo Fname: Juan Lname: Trejo Email: Colleenp@tds.net Address: 6415 the home place Zip: 29429 City: Awendaw State: Phone: 8434424130 Cell Phone: Dob: Other Phone:
	COMMENTS	1 06/10/2013 08:49 AM keribogan 6-3-2013 spoke w/ Colleen and she said she would speak with her husband and give me a call back.			
	TASKS				

36	05/20/2013 10:34 AM	Manual Form	Terry Campbell Terry martingang61@yahoo.com	Lead	Name: Terry Campbell Fname: Terry Lname: Campbell Email: martingang61@yahoo.com Address: 2623 Mona Ave Zip: 29414 City: Charleston State: SC Phone: 843-452-5497 Cell Phone: Dob: 42 Other Phone:
	COMMENTS				
	TASKS				

37	05/20/2013 10:29 AM	Manual Form	Amanda Bowden Amanda amanda.bowden27@gmail.com	Lead	Name: Amanda Bowden Fname: Amanda Lname: Bowden Email: amanda.bowden27@gmail.com Address: 4504 Jenwood St Zip: 29456 City: Ladson State: SC Phone: 843-847-8335 Cell Phone: Dob: 27 Other Phone:
	COMMENTS				
	TASKS				

38	05/20/2013 10:29 AM	Manual Form	ROBERT ANDERSON ROBERT ANDY.KIAWAH@YAHOO.COM	Lead	Name: ROBERT ANDERSON Fname: ROBERT Lname: ANDERSON Email: ANDY.KIAWAH@YAHOO.COM Address: 13-B ANDERSON AVE Zip: 29412 City: CHARLESTON State: SC Phone: 80-627-1636 Cell Phone: Dob: 2/1/80 Other Phone:
	COMMENTS	1 05/20/2013 10:30 AM keribogan PT UNABLE TO COMMIT TO 200 PER MONTH CARE CREDIT PAYMENT AT THIS TIME. WILL DISCUSS WITH GIRLFRIEND AND CALL BACK TO SCH WHEN ABLE. CSMILLIE			
	TASKS				



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				Lead	Name: Lauri Watson Fname: Lauri Lname: Watson Email: dixndraz@yahoo.com Address: 128 Duck Blind Ct Zip: 29483 City: Summerville State: SC Phone: Cell Phone: Dob: 31 Other Phone:
39	COMMENTS				
	TASKS				
40	05/20/2013 10:24 AM	Manual Form	Dana Lundhagen Dana lundhagendana@yahoo.com	Lead	Name: Dana Lundhagen Fname: Dana Lname: Lundhagen Email: lundhagendana@yahoo.com Address: 804 Alwyn Blvd Zip: 29485 City: Summerville State: SC Phone: 843-271-6434 Cell Phone: Dob: 51 Other Phone:
	COMMENTS				
	TASKS				
41	05/20/2013 10:21 AM	Manual Form	Edward Ahere Edward eddie@glavefamily.com	Lead	Name: Edward Ahere Fname: Edward Lname: Ahere Email: eddie@glavefamily.com Address: Zip: City: State: SC Phone: Cell Phone: Dob: 44 Other Phone:
	COMMENTS				
	TASKS				
42	05/20/2013 10:20 AM	Manual Form	Mark Drolshagen Mark	Lead	Name: Mark Drolshagen Fname: Mark Lname: Drolshagen Email: Address: Zip: City: State: Phone: Cell Phone: (843) 345-5290 Dob: Other Phone:
	COMMENTS	1 06/11/2013 09:44 AM 199 56 2253 keribogan 2 05/20/2013 10:22 AM 5/14 - Left message @ 12:35 5/16 - Left message @ 4:54 Spoke with patient today - Previous LASIK - Dr. O'Day - CL wearer - gave cost - will call back to schedule after he sells his boat - cah			
	TASKS				
43	05/20/2013 10:19 AM	Manual Form	Christy Roling Christy cxe134@yahoo.com	Lead	Name: Christy Roling Fname: Christy Lname: Roling Email: cxe134@yahoo.com Address: 2274 Ashley River Rd, Apt 302 Zip: 29414 City: Charleston State: SC Phone: Cell Phone: Dob: 34 Other Phone:
	COMMENTS				
	TASKS				



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			NDRA	Lead	Name: SANDRA LANDWEHR Fname: SANDRA Lname: LANDWEHR Email: slandwehr@sc.rr.com Address: 111 OBANNON CT Zip: 29483 City: SUMMERVILLE State: Phone: 708 4039 Cell Phone: Dob: 07/30/1968 Other Phone:
44		2	05/20/2013 10:20 AM keribogan	PT TO CONSIDER SX. MENTIONED DIDNT EXPECT IT WOULD COST SO MUCH. OFFERRED FINANCING, PT EST WITH CARE CREDIT. WILL CALL BACK ONCE DECIDED. CSMILLIE	
	TASKS				
45	05/20/2013 10:18 AM	Manual Form	LaSonja James LaSonja jameslasonja@yahoo.com	Lead	Name: LaSonja James Fname: LaSonja Lname: James Email: jameslasonja@yahoo.com Address: 248 W Boundary St Zip: 29485 City: Summerville State: SC Phone: 843-209-9637 Cell Phone: Dob: 43 Other Phone:
	COMMENTS	1	06/10/2013 08:57 AM keribogan	called 6-3-2013 not a working #	
	TASKS				
46	05/20/2013 10:12 AM	Manual Form	Katie McCann Katie katiebmccann713@gmail.com	Lead	Name: Katie McCann Fname: Katie Lname: McCann Email: katiebmccann713@gmail.com Address: Zip: City: State: SC Phone: Cell Phone: Dob: 28 Other Phone:
	COMMENTS				
	TASKS				
47	05/20/2013 10:11 AM	Manual Form	Kathy Vazquez Kathy vazquez3@comcast.net	Lead	Name: Kathy Vazquez Fname: Kathy Lname: Vazquez Email: vazquez3@comcast.net Address: 419 Pandora Dr Zip: 29445 City: Goose Creek State: SC Phone: 843-709-5888 Cell Phone: Dob: 50 Other Phone:
	COMMENTS				
	TASKS				
48	05/20/2013 10:10 AM	Manual Form	Dhara Crajjar Dhara dhara_99@yahoo.com	Lead	Name: Dhara Crajjar Fname: Dhara Lname: Crajjar Email: dhara_99@yahoo.com Address: 115 Salt Meadow Lane Zip: 29483 City: Summerville State: SC Phone: 803-378-0708
	COMMENTS				



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				Cell Phone:	
				Dob:	42
				Other Phone:	
49				Lead	Name: Tonya Grant Fname: Tonya Lname: Grant Email: mstonyagrants@yahoo.com Address: Zip: City: State: Phone: Cell Phone: Dob: 33 Other Phone:
	COMMENTS				
	TASKS				
50	05/20/2013 09:59 AM	Manual Form	Patricia Wagner Patricia wagnerp@muscedu	Lead	Name: Patricia Wagner Fname: Patricia Lname: Wagner Email: wagnerp@muscedu Address: Zip: City: State: Phone: Cell Phone: Dob: 16 Other Phone:
	COMMENTS				
	TASKS				
51	05/20/2013 09:06 AM	Schedule Appointment	David Stewart scott.stewart42@yahoo.com	Lead	Name: David Stewart Age: 46 Address: 2428 Kendall DrivenCharleston SC City State Zip: 29414 Hear About Us: Word of Mouth Contact Via: Both Comments: Would like to be eval for lasik I have astigmatism Formmail Mail Email: scott.stewart42@yahoo.com Phone: 843 696 6486 Special Offers Option: on
	COMMENTS				
	TASKS				
52	05/18/2013 01:25 AM	Schedule Appointment	Denise Howard ddhoward128@aol.com	Lead	Name: Denise Howard Age: 51 Address: 179 Waterfront Dr. City State Zip: Moncks Corner, SC 29461 Hear About Us: Radio Contact Via: Email Comments: Heard about the current 3x savings offer...nl have waited a long time for this to be more affordable . Formmail Mail Email: ddhoward128@aol.com Phone: 8437610547 Special Offers Option: on
	COMMENTS				
	TASKS				
53	05/16/2013 03:45 PM	Manual Form	JANICE BENNETT JANICE melissaonfolly@hotmail.com	Lead	Name: JANICE BENNETT Fname: JANICE Lname: BENNETT



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				today	Email: melissaonfolly@hotmail.com Address: 1241 TEAL AVE Zip: 29412 City: CHARLESTON State: SC Phone: 904 253 0731 Cell Phone: Dob: 08/31/1979 Other Phone:
TASKS					
54	05/16/2013 03:42 PM	Manual Form	MAHGAN BARTON MAHGAN	Lead	Name: MAHGAN BARTON Fname: MAHGAN Lname: BARTON Email: Address: 114 LAUREL AVE Zip: 29445 City: GOOSE CREEK State: Phone: 843 312 6790 Cell Phone: Dob: 08/08/1990 Other Phone:
	COMMENTS	1 09/11/2013 11:20 AM mailed card to extend complimentary exam keribogan 2 09/10/2013 04:33 PM patient didn't show for appointment on 5-16-2013 keribogan 3 05/16/2013 03:43 PM NO VOICE MAIL TO LEAVE MESSAGE, NO EMAIL. keribogan CSMILLIE			
	TASKS				
55	05/16/2013 03:27 PM	Manual Form	Alexander Henson Alexander	Lead	Name: Alexander Henson Fname: Alexander Lname: Henson Email: Address: Zip: City: State: Phone: Cell Phone: (860) 214-1382 Dob: Other Phone:
	COMMENTS	1 05/16/2013 03:27 PM Pt. price shopping - cah keribogan			
	TASKS				
56	05/16/2013 02:49 PM	Manual Form	PHYER EMILY PHYER RHYRE.EMILY@YAHOO.COM	Not a Candidate	Name: PHYER EMILY Fname: PHYER Lname: EMILY Email: RHYRE.EMILY@YAHOO.COM Address: 1300 PARK WEST BLVD UNIT 220 Zip: 29466 City: MT PLEASANT State: SC Phone: 843-696-4923 Cell Phone: Dob: 9/10/81 Other Phone:
	COMMENTS				
	TASKS				
57	05/16/2013 12:56 PM	Manual Form	GUILBERT LACSAMANA GUILBERT mike_5_24_79@yahoo.com	Post Treatment	Name: GUILBERT LACSAMANA Fname: GUILBERT Lname: LACSAMANA Email: mike_5_24_79@yahoo.com Address: 120 B BRALY DRIVE Zip: 29485 City: SUMMERVILLE State: SC Phone: 843 817 6576 Cell Phone: Dob: 05/24/1979 Other Phone:
	COMMENTS	1 05/24/2013 12:19 PM Procedure complete - cah keribogan			
	TASKS				



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				Post Treatment	Name: ERIK DAVIS Fname: ERIK Lname: DAVIS Email: EDAVIS084@YAHOO.COM Address: 5064 NW 66TH DRIVE Zip: 33067 City: CORAL SPRINGS State: FL Phone: 954-304-6278 Cell Phone: Dob: 3/23/84 Other Phone:
		keribogan			
		TASKS			
59	05/16/2013 08:54 AM	Contact Us Form	Jennifer Krause realestatefingergmail.com	Post Treatment	Name: Jennifer Krause Email: realestatefingergmail.com Phone: 8438470007 Contactus: I heard the radio advertisement regarding the lasi k special for month of May and would like to sched ule an appointment. Lasikkitt: Yes, I would like LASIK information Submitcontact: Submit
		COMMENTS	1 05/21/2013 02:02 PM Procedure sheduled - cah keribogan		
		TASKS			
60	05/15/2013 07:07 PM	Contact Us Form	Brittany Bruce bbuce_87@yahoo.com	Lead	Name: Brittany Bruce Email: bbruce_87@yahoo.com Phone: 843-475-5104 Contactus: Interested in a free consultation about LASIK and if I would qualify. In north charleston. Lasikkitt: Yes, I would like LASIK information Submitcontact: Submit
		COMMENTS			
		TASKS			
61	05/15/2013 02:33 PM	Manual Form	CHRISTINE DURANT CHRISTINE CDURANT01@GMAIL.COM	Post Treatment	Name: CHRISTINE DURANT Fname: CHRISTINE Lname: DURANT Email: CDURANT01@GMAIL.COM Address: 45 NORVIEW DRIVE Zip: 29407 City: CHARLESTON State: SC Phone: 843-224-9875 Cell Phone: Dob: 9/25/66 Other Phone:
		COMMENTS	1 06/26/2013 12:17 PM Procedure complete clarissa		
		TASKS			
62	05/15/2013 02:19 PM	Manual Form	ROBERT SOLOMON ROBERT robertsolomon53@gmail.com	Not a Candidate	Name: ROBERT SOLOMON Fname: ROBERT Lname: SOLOMON Email: robertsolomon53@gmail.com Address: 706 GREYMOHR LANE Zip: 29445 City: GOOSE CREEK State: Phone: 843 408 1827 Cell Phone: Dob: 10/24/1979 Other Phone:
		COMMENTS	1 05/21/2013 04:58 PM COST BARRIER - Care Credit denied - cah keribogan 2 05/15/2013 02:38 PM emailed pt to r/s appt. csmillie keribogan		
		TASKS			
63	05/15/2013 12:11 PM	Manual Form	JONATHON KANE JONATHON NANCYJONATHON@BELLSOUTH.NET	Consultation	Name: JONATHON KANE Fname: JONATHON Lname: KANE Email: NANCYJONATHON@BELLSOUTH.NET Address: 1301 BASKET WEAVER WAY



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STURGES TO ADDRESS ET. WILL SEEING HER. CSMILLIE	Zip: 29410 City: HANAHAN State: SC Phone: 843-312-5377 Cell Phone: Dob: 7/23/80 Other Phone:
--	---

64	05/15/2013 12:09 PM	Contact Us Form	Erin Gibbs e.gibbs3@att.net	Post Treatment	Name: Erin Gibbs Email: e.gibbs3@att.net Phone: 843-884-4241 Contactus: I would like a consultation to see if I qualify fo r LASIK. Also information on cost, insurance cover age, and payment options. Lasikkitt: Yes, I would like LASIK information Submitcontact: Submit
	COMMENTS				
	TASKS				

65	05/15/2013 11:29 AM	LASIK Quiz!	Jamie Hanagan jamie.rosenthal@yahoo.com	Lead	Glasses: Both Health: Yes Age: 29 Surgery: No Injuries: No Conditions: Myopia (Nearsightedness) Night: Poorly Important: Safety Procedure: Possibly Risk: Possibly Eval: No Name: Jamie Hanagan Email: jamie.rosenthal@yahoo.com
	COMMENTS				
	TASKS				

66	05/15/2013 10:09 AM	Manual Form	ZOLA DEFRESNE ZOLA ZOLATCOLA@ICLOUD.COM	Lead	Name: ZOLA DEFRESNE Fname: ZOLA Lname: DEFRESNE Email: ZOLATCOLA@ICLOUD.COM Address: 104 INNIS BROOK BEND Zip: 29483 City: SUMMERVILLE State: Phone: Cell Phone: Dob: 08/28/1959 Other Phone:
	COMMENTS				
	TASKS				

67	05/15/2013 09:31 AM	Manual Form	DAVID PROUJAN DAVID DPROUJAN@COMCAST.NET	Consultation	Name: DAVID PROUJAN Fname: DAVID Lname: PROUJAN Email: DPROUJAN@COMCAST.NET Address: 2223 BRANCH CREEK DRIVE Zip: 29466 City: MT PLEASANT State: SC Phone: 843-871-6204 Cell Phone: Dob: 10/3/61 Other Phone:
	COMMENTS				
	TASKS				

68	05/15/2013 09:28 AM	Manual Form	ZACHARY HAEUSSNER ZACHARY ZHAEUSSNER@YAHOO.COM	Post Treatment	Name: ZACHARY HAEUSSNER Fname: ZACHARY Lname: HAEUSSNER Dob: 3/25/81 Email: ZHAEUSSNER@YAHOO.COM Address: 836 DETYENS ROAD
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Zip: 29464
City: MT PLEASANT
State: SC
Phone: 978-604-2212
Cell:
Other:
Cell Phone:
Other Phone:
Lead Name: 3surg
Assigned:
Ref Id: 1593

	TASKS				
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69	05/15/2013 03:09 AM	LASIK Quiz!	SIYUN CAI CAI.114@OSU.EDU	Lead	Name: SIYUN CAI Phone: 4192833868 Email: CAI.114@OSU.EDU
	COMMENTS				
	TASKS				

70	05/15/2013 03:08 AM	LASIK Quiz!	siyun cai kplzvnet@gmail.com	Lead	Glasses: Both Health: Yes Age: 23 Surgery: No Injuries: Yes Conditions: Astigmatism Night: OK, but could be better Bifocals: NO Important: Being free of my glasses or contacts Procedure: Yes Risk: No Eval: No Name: siyun cai Email: kplzvnet@gmail.com
	COMMENTS				
	TASKS				

71	05/14/2013 11:46 PM	LASIK Quiz!	Amy Ropp amymarieropp@gmail.com	Lead	Glasses: Both Health: Yes Age: 32 Surgery: No Injuries: No Conditions: Myopia (Nearsightedness); Astigmatism Night: OK, but could be better Important: Being free of my glasses or contacts Procedure: Yes Risk: Possibly Eval: Yes Name: Amy Ropp Phone: 843.822.6244 Email: amymarieropp@gmail.com
	COMMENTS				
	TASKS				

72	05/14/2013 04:11 PM	Manual Form	KELLY DELEAN KELLY KKD3072@GMAIL.COM	Evaluation	Name: KELLY DELEAN Fname: KELLY Lname: DELEAN Email: KKD3072@GMAIL.COM Address: 3072 LINKSLAND RD Zip: 29466 City: MT PLEASANT State: SC Phone: 843-971-4270 Cell Phone: Dob: 4/4/79 Other Phone:
	COMMENTS	1	05/14/2013 04:13 PM keribogan	PT WILL DISCUSS DATES/COST WITH MOM AND SPOUSE AND CALL BACK TO SCHEDULE. CSMILLIE	
	TASKS				

73	05/14/2013 03:44 PM	Manual Form	ERIC GRAHAM ERIC GRAHAMEM@MUSC.EDU	Evaluation	Name: ERIC GRAHAM Fname: ERIC Lname: GRAHAM Email: GRAHAMEM@MUSC.EDU
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Address: 1382 TIDAL CREEK CIRCLE
Zip: 29412
City: CHARLESTON
State: SC
Phone: 843-406-9864
Cell Phone:
Dob: 10/22/73
Other Phone:

74	05/14/2013 02:28 PM	Manual Form	ALEXANDER LO ALEXANDER ALEXLO@YAHOO.COM	Evaluation	Name: ALEXANDER LO Fname: ALEXANDER Lname: LO Email: ALEXLO@YAHOO.COM Address: 1446 CALDWELL CT Zip: 29466 City: MT PLEASANT State: SC Phone: 843-469-8271 Cell Phone: Dob: 6/14/69 Other Phone:
	COMMENTS	1 05/20/2013 12:32 PM NO SHOW for repeat Pentacam - cah keribogan			
	TASKS				

75	05/14/2013 02:09 PM	Manual Form	ZACHARY WATERS ZACHARY	Lead	Name: ZACHARY WATERS Fname: ZACHARY Lname: WATERS Email: Address: 3011 W MONTAGUE ST Zip: 29418 City: N CHARLESTON State: Phone: 843 847 8976 Cell Phone: Dob: 04/06/1964 Other Phone:
	COMMENTS	1 09/17/2013 02:41 PM followed up via email today keribogan 2 05/14/2013 02:10 PM TRIED TO CONTACT PT TO OFFER R/S. NO ANSWER/VOICEMAIL/EMAIL. CSMILLIE keribogan			
	TASKS				

76	05/14/2013 11:30 AM	Manual Form	Luke Gayle Luke	Lead	Name: Luke Gayle Fname: Luke Lname: Gayle Email: Address: Zip: City: State: Phone: Cell Phone: (843) 406-8268 Dob: Other Phone:
	COMMENTS	1 05/16/2013 03:24 PM Pt returned call - will check work schedule and call back for consultation - cah keribogan 2 05/16/2013 10:04 AM 5/16/13 - Left message - cah 5/15/13 @ 5:01 PM Left message - cah keribogan 3 05/14/2013 11:32 AM Pt. referred by Dr. Steve Dean - spoke with pt. - he's at work - will call us back later today - cah keribogan			
	TASKS				

77	05/14/2013 11:13 AM	LASIK Quiz!	Mike Conner conner.michael.a@gmail.com	Lead	Health: Yes Age: 53 Surgery: No Injuries: No Conditions: Hyperopia (Farsightedness); Astigmatism Night: OK, but could be better Bifocals: yes Important: Experience of doctor Procedure: Possibly Risk: Possibly Eval: No Name: Mike Conner Email: conner.michael.a@gmail.com
	COMMENTS				
	TASKS				



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78				Lead	Glasses: Glasses Health: Yes Age: 60 Surgery: No Injuries: No Conditions: Myopia (Nearsightedness); Astigmatism Night: OK, but could be better Bifocals: reading glasses Important: Experience of doctor Procedure: No Risk: Possibly Eval: No Name: Lark Margaret Hiser Phone: 413-281-4674 Email: lark.hiser@rsfh.com
	COMMENTS				
	TASKS				
79	05/14/2013 08:57 AM	LASIK Quiz!	heather barnes pennybarnessantee@yahoo.com	Consultation	Glasses: Both Health: Yes Age: 21 Surgery: No Injuries: No Conditions: Myopia (Nearsightedness); Astigmatism Night: OK, but could be better Important: Affordability Procedure: Yes Risk: No Eval: No Name: heather barnes Phone: 8034782249 Email: pennybarnessantee@yahoo.com
	COMMENTS				
	TASKS				
80	05/13/2013 09:24 PM	LASIK Quiz!	j j	Lead	Glasses: Both Health: Yes Age: 31 Surgery: No Injuries: No Conditions: Myopia (Nearsightedness); Astigmatism Night: OK, but could be better Bifocals: no Important: Being free of my glasses or contacts Procedure: No Risk: Possibly Eval: No Name: j Email: j
	COMMENTS				
	TASKS				
81	05/13/2013 05:30 PM	Manual Form	Sarah Orberson Sarah saraheorberson@gmail.com	Cancelled	Name: Sarah Orberson Fname: Sarah Lname: Orberson Dob: 2/21/1988 Email: saraheorberson@gmail.com Address: 434 Sanders Farm Lane Zip: 29492 City: Charleston State: SC Phone: (843) 729-4211 Cell: Other: Cell Phone: Other Phone: Lead Name: cancel Assigned: Ref Id: 0 Lead Date:
	COMMENTS	1 10/30/2013 03:59 PM Procedure cancelled - TOO small of a prescription to correct with ASA clarissa 2 05/21/2013 01:17 PM 5/15 - Left Message @ 9:51 AM 5/16 - Left Message @ 4:58 PM NO SHOW today for Measurement exam - sent email - cah keribogan 3 05/13/2013 05:31 PM Measurement scheduled - called pt. to discuss cost and sx dates - cah keribogan			
	TASKS				



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82				Lead	Glasses: Glasses Health: Yes Age: 32 Surgery: No Injuries: No Conditions: Myopia (Nearsightedness); Hyperopia (Farsightedness); Astigmatism Night: Poorly Bifocals: glasses Important: Experience of doctor Procedure: Possibly Risk: Yes Eval: No Name: Danielle Diaz Phone: 6316719418 Email: dndiaz0710@aol.com
	COMMENTS				
	TASKS				
83	05/13/2013 12:31 PM	LASIK Quiz!	Heather Helmuth libragrl22000@yahoo.com	Lead	Glasses: Contact Lenses Health: Yes Age: 36 Surgery: No Injuries: No Conditions: Myopia (Nearsightedness) Night: Very Well Bifocals: No Important: Being free of my glasses or contacts Procedure: Possibly Risk: Possibly Eval: No Name: Heather Helmuth Phone: 843-819-2424 Email: libragrl22000@yahoo.com
	COMMENTS				
	TASKS				
84	05/13/2013 09:37 AM	Contact Us Form	Josh Doran doran39@hotmail.com	Lead	Name: Josh Doran Email: doran39@hotmail.com Phone: 843-302-1585 Contactus: lasik consultation Lasikkit: Yes, I would like LASIK information Submitcontact: Submit
	COMMENTS				
	TASKS				
85	05/13/2013 09:11 AM	LASIK Quiz!	Josh Doran doran39@hotmail.com	Lead	Glasses: Glasses Health: Yes Age: 33 Surgery: No Injuries: No Conditions: Myopia (Nearsightedness) Night: OK, but could be better Bifocals: No Important: Safety Procedure: Yes Risk: Yes Eval: No Name: Josh Doran Phone: 843-302-1585 Email: doran39@hotmail.com
	COMMENTS				
	TASKS				
86	05/12/2013 05:39 PM	LASIK Quiz!	Lexie lexiepeifer@hotmail.com	Lead	Glasses: Both Health: Yes Age: 21 Surgery: No Injuries: No Conditions: Myopia (Nearsightedness) Night: OK, but could be better



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Bifocals: No
Important: Being free of my glasses or contacts
Procedure: No
Risk: Possibly
Eval: No
Name: Lexie
Email: lexiepeifer@hotmail.com

87

05/11/2013 11:23 PM	LASIK Quiz!	Ernie Mennes EMennes@yahoo.com	Lead
COMMENTS			
TASKS			

Glasses: Glasses
Health: Yes
Age: 49
Surgery: Yes
Injuries: No
Conditions: Astigmatism
Night: Poorly
Bifocals: Yes
Important: Experience of doctor
Procedure: No
Risk: Yes
Eval: No
Name: Ernie Mennes
Phone: 480 242-2885
Email: EMennes@yahoo.com

88

05/11/2013 03:22 PM	LASIK Quiz!	Nicole Hays browneyednicki@yahoo.com	Lead
COMMENTS			
TASKS			

Glasses: Contact Lenses
Health: Yes
Age: 30
Surgery: No
Injuries: No
Conditions: Myopia (Nearsightedness)
Night: OK, but could be better
Bifocals: no
Important: Affordability
Procedure: Possibly
Eval: No
Comments: I'm extremely weary of people messing with my eyes, so I've been afraid!!
Name: Nicole Hays
Email: browneyednicki@yahoo.com

89

05/10/2013 10:51 AM	LASIK Quiz!	April Alexander alexanderapril@gmail.com	Lead
COMMENTS			
TASKS			

Glasses: Both
Health: Yes
Age: 35
Surgery: No
Injuries: No
Conditions: Myopia (Nearsightedness); Astigmatism
Night: OK, but could be better
Bifocals: NO
Important: Being free of my glasses or contacts
Procedure: Yes
Risk: No
Eval: No
Name: April Alexander
Email: alexanderapril@gmail.com

90

05/09/2013 02:12 PM	Contact Us Form	Kelly Gosnell kcgosnel@gmail.com	Lead
COMMENTS			
TASKS			

Name: Kelly Gosnell
Email: kcgosnel@gmail.com
Phone: 843
Submitcontact: Submit

91

05/09/2013 02:09 PM	LASIK Quiz!	Kelly Gosnell kcgosnel@gmail.com	Lead
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Glasses: Contact Lenses
Health: Yes
Age: 25
Surgery: No



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	TASKS				Injuries: No Conditions: Myopia (Nearsightedness) Night: Very Well Bifocals: no Important: Experience of doctor Procedure: No Risk: Possibly Eval: No Name: Kelly Gosnell Phone: 8432097173 Email: kcgosnel@gmail.com
92	05/09/2013 09:53 AM	Manual Form	SHANNON WEBBER SHANNON SRLITTLE77@YAHOO.COM	Post Treatment	Name: SHANNON WEBBER Fname: SHANNON Lname: WEBBER Email: SRLITTLE77@YAHOO.COM Address: 233 DANATELLA DRIVE Zip: 29445 City: GOOSE CREEK State: SC Phone: 843-406-3120 Cell Phone: Dob: 12/12/77 Other Phone:
	COMMENTS				
	TASKS				
93	05/09/2013 09:25 AM	Manual Form	GREGG GRIFFITH GREGG gregggriffith0214@att.net	Lead	Name: GREGG GRIFFITH Fname: GREGG Lname: GRIFFITH Email: gregggriffith0214@att.net Address: 1455 COLES RD Zip: 29455 City: JOHNS ISLAND State: SC Phone: 843 514 8679 Cell Phone: Dob: 02/14/1959 Other Phone:
	COMMENTS	1	05/09/2013 09:27 AM keribogan	SPOKE WITH PT. UNDECIDED ON LASIK AND HAS DECIDED NOT TO PURSUE AT THIS TIME. CSMILLIE	
	TASKS				
94	05/08/2013 05:43 PM	LASIK Quiz!	Brandon Joyner heyjude1980@hotmail.com	Lead	Glasses: Both Health: Yes Age: 33 Surgery: No Injuries: No Conditions: Astigmatism Night: OK, but could be better Bifocals: Yes Important: Being free of my glasses or contacts Procedure: Possibly Risk: No Eval: No Name: Brandon Joyner Phone: 843 860 5881 Email: heyjude1980@hotmail.com
	COMMENTS				
	TASKS				
95	05/08/2013 03:06 PM	Manual Form	ROSIE MORRIS ROSIE	Lead	Name: ROSIE MORRIS Fname: ROSIE Lname: MORRIS Email: Address: 207 PELICAN Zip: 29456 City: LADSON State: SC
	COMMENTS				



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				Phone: 843-532-6041	
				Cell Phone:	
				Dob: 11/12/1968	
				Other Phone:	
96	09:48 AM	Form	XANDRA	Consultation	Name: ALEXANDRA VASKO Fname: ALEXANDRA Lname: VASKO Email:
	COMMENTS	1	05/10/2013 10:38 AM keribogan	Feels best to wait to pursue sx, pt moving to Australia July 2013. Would need f/u while in Australia per KDS. Pt will consider procedure in teh future. csmilie	Address: 721 HIBBENS GRANT BLVD Zip: 29464 City: MT PLEASANT State: SC Phone: 302-383-7051 Cell Phone:
	TASKS				Dob: 1/10/87 Other Phone:
97	05/08/2013 09:47 AM	Manual Form	CAMERON MONTEITH CAMERON CMONTEITH@CLEMSON.EDU	Not a Candidate	Name: CAMERON MONTEITH Fname: CAMERON Lname: MONTEITH Email: CMONTEITH@CLEMSON.EDU Address: 302 N. SHELMORE Zip: 29464 City: Mount Pleasant State: SC Phone: 843-259-1432 Cell Phone:
	COMMENTS				Dob: 6/27/90 Other Phone:
	TASKS				
98	05/08/2013 09:45 AM	Manual Form	GREGORY BROWN GREGORY greggory.blitzboy.brown@gmail.com	Lead	Name: GREGORY BROWN Fname: GREGORY Lname: BROWN Email: greggory.blitzboy.brown@gmail.com Address: 1948 RIVER RD Zip: 29455 City: JOHNS ISLAND State: SC Phone: 843 494 3320 Cell Phone:
	COMMENTS	1	05/16/2013 03:57 PM keribogan	Im for pt to call and r/s csmillie	
		2	05/08/2013 09:45 AM keribogan	R/S TO MAY 16 2013	
99	05/08/2013 06:08 AM	Contact Us Form	Jennifer Davis angelmonkey42086@yahoo.com	Lead	Name: Jennifer Davis Email: angelmonkey42086@yahoo.com Phone: 843-817-4305 Contactus: I saw your promotion about \$900 off and was just w ordering if you could give a round about amount of how much it would cost do have lLasik done. My i nsurance also covers either 15% off of standar d pricing or 5% off of any promotional pricing . Also how would i go about getting financed throu gh that 2 years no interest deal? Thanks for the i nfo. Lasikkit: Yes, I would like LASIK information Submitcontact: Submit
	COMMENTS				
	TASKS				
100	05/07/2013 01:49 PM	Manual Form	Laurie Zirbel Laurie lauriezirbel7120@comcast.net	Not a Candidate	Name: Laurie Zirbel Fname: Laurie Lname: Zirbel Email: lauriezirbel7120@comcast.net Address: 2222 Ashley River Road 2J
	COMMENTS				



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Pt. has cataracts - AC scheduled with

Zip: 29414
 City: Charleston
 State: SC
 Phone: (843) 367-7160
 Cell Phone:
 Dob: 1/19/1961
 Other Phone:

101	05/07/2013 10:53 AM	Manual Form	MARCIE ROY MARCIE MNMROY3000@YAHOO.COM	Lead	Name: MARCIE ROY Fname: MARCIE Lname: ROY Email: MNMROY3000@YAHOO.COM Address: 1178 STARTRAIL LN Zip: 29455 City: Johns Island State: SC Phone: 843-475-2268 Cell Phone: Dob: 43 Other Phone:
	COMMENTS				
	TASKS				
102	05/07/2013 10:31 AM	Manual Form	ALLYSON DESHURKO ALLYSON ALLY_DESHURKO@KIAWAHRESORT.COM	Lead	Name: ALLYSON DESHURKO Fname: ALLYSON Lname: DESHURKO Email: ALLY_DESHURKO@KIAWAHRESORT.COM Address: 3330 HABITAT BLVD Zip: 29455 City: Johns Island State: SC Phone: 937-689-2919 Cell Phone: Dob: 24 Other Phone:
	COMMENTS				
	TASKS				
103	05/07/2013 10:28 AM	Manual Form	DASHAWN BROWN DASHAWN DASHAWNBROWN@GMAIL.COM	Lead	Name: DASHAWN BROWN Fname: DASHAWN Lname: BROWN Email: DASHAWNBROWN@GMAIL.COM Address: 1021 SUMMERALL DR Zip: 29455 City: Johns Island State: SC Phone: 843-559-3934 Cell Phone: Dob: 27 Other Phone:
	COMMENTS				
	TASKS				
104	05/07/2013 10:23 AM	Manual Form	CARLA WEDENMAN CARLA CARLA_JAM6@YAHOO.COM	Lead	Name: CARLA WEDENMAN Fname: CARLA Lname: WEDENMAN Email: CARLA_JAM6@YAHOO.COM Address: 3431 PINOCA LANE Zip: 29420 City: North Charleston State: SC Phone: 404-717-3670 Cell Phone: Dob: 39 Other Phone:
	COMMENTS				
	TASKS				
105	05/07/2013 09:03 AM	LASIK Quiz!	Cynthia Karst cynkarst14@aol.com	Lead	Glasses: Both Health: Yes



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					Age: 52 Surgery: No Injuries: No Conditions: Hyperopia (Farsightedness); Astigmatism Night: Poorly Bifocals: yes Important: Experience of doctor Procedure: Possibly Risk: Possibly Eval: Yes Comments: it scared me and then I was harrassed to make the a ppointment. Name: Cynthia Karst Phone: 843-460-4599 Email: cynkarst14@aol.com
	TASKS				
106	05/07/2013 07:50 AM	LASIK Quiz!	Emily Rhyne rhyne_emily@yahoo.com	Consultation	Glasses: Glasses Health: Yes Age: 31 Surgery: No Injuries: No Conditions: Astigmatism Night: Poorly Bifocals: No Important: Affordability Procedure: Possibly Risk: No Eval: Yes Name: Emily Rhyne Email: rhyne_emily@yahoo.com
	COMMENTS				
	TASKS				
107	05/06/2013 04:33 PM	Contact Us Form	Kristen Conant Kristenconant@gmail.com	Post Treatment	Name: Kristen Conant Email: Kristenconant@gmail.com Phone: 973-224-9564 Contactus: I would like to schedule a LASIK consultation Lasikkit: Yes, I would like LASIK information Submitcontact: Submit
	COMMENTS				
	TASKS				
108	05/06/2013 02:51 PM	LASIK Quiz!	James Kirwan jkirwan96@gmail.com	Lead	Glasses: Both Health: Yes Age: 18 Surgery: Yes Injuries: Yes Conditions: Astigmatism Night: OK, but could be better Bifocals: bifocals Important: Being free of my glasses or contacts Procedure: No Risk: No Eval: No Name: James Kirwan Email: jkirwan96@gmail.com
	COMMENTS				
	TASKS				
109	05/06/2013 12:27 PM	LASIK Quiz!	Suzanne Meszner-Eltrich asmesc@yahoo.com	Lead	Glasses: Glasses Health: Yes Age: 60 Surgery: Yes Injuries: No Conditions: Myopia (Nearsightedness); Hyperopia (Farsightedness) Night: Very Well
	COMMENTS				
	TASKS				



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					Bifocals: both Important: Safety Procedure: Possibly Risk: Possibly Eval: No Comments: not sure if it is suitable for me Name: Suzanne Meszner-Eltrich Phone: 843 566 5130 Email: asmesc@yahoo.com
110	05/06/2013 12:13 PM	LASIK Quiz!	Molly Bisceglia mbisce20@gmail.com	Post Treatment	Glasses: Both Health: Yes Age: 23 Surgery: No Injuries: No Conditions: Myopia (Nearsightedness); Astigmatism Night: OK, but could be better Important: Experience of doctor Procedure: Possibly Risk: No Eval: No Name: Molly Bisceglia Email: mbisce20@gmail.com
	COMMENTS	1	05/24/2013 12:16 PM	Procedure complete - cah keribogan	
	TASKS				
111	05/06/2013 09:07 AM	LASIK Quiz!	Angela Fletcher angelevans_1994@yahoo.com	Lead	Glasses: Both Health: Yes Age: 41 Surgery: No Injuries: No Conditions: Myopia (Nearsightedness); Astigmatism Night: OK, but could be better Bifocals: no Important: Being free of my glasses or contacts Procedure: Possibly Risk: Possibly Eval: No Name: Angela Fletcher Phone: 8436708387 Email: angelevans_1994@yahoo.com
	COMMENTS				
	TASKS				
112	05/06/2013 07:53 AM	LASIK Quiz!	Steven Crisanti scrisanti15@yahoo.com	Lead	Glasses: Contact Lenses Health: Yes Age: 29 Surgery: No Injuries: No Conditions: Myopia (Nearsightedness) Night: OK, but could be better Bifocals: no Important: Being free of my glasses or contacts Procedure: Possibly Risk: No Eval: No Name: Steven Crisanti Email: scrisanti15@yahoo.com
	COMMENTS				
	TASKS				
113	05/05/2013 05:40 PM	LASIK Quiz!	Jennifer jenniferaj072806@yahoo.com	Lead	Glasses: Glasses Health: Yes Age: 24 Surgery: No Injuries: No Conditions: Myopia (Nearsightedness) Night: Very Well



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Bifocals: no
Important: Being free of my glasses or contacts
Procedure: Possibly
Risk: No
Eval: No
Name: Jennifer
Email: jenniferaj072806@yahoo.com

114	05/05/2013 12:38 PM	Contact Us Form	Susan Dugger susandugger@bellsouth.net	Lead	Name: Susan Dugger Email: susandugger@bellsouth.net Phone: 843 324 6594 Contactus: I would like to schedule a consultation Lasikkit: Yes, I would like LASIK information Updates: Yes, Please email me with promotions and news upda tes Submitcontact: Submit
	COMMENTS				
	TASKS				
115	05/04/2013 01:53 PM	Contact Us Form	Tim Connolly connollysbtw@gmail.com	Consultation	Name: Tim Connolly Email: connollysbtw@gmail.com Phone: 631-484-2120 Contactus: I would like to schedule an appointment to discuss lasik surgery for myself. Submitcontact: Submit
	1 05/09/2013 01:56 PM PT UNDECIDED: CONSIDERING RLE/LASIK/ASA keribogan				
	TASKS				
116	05/03/2013 03:10 PM	LASIK Quiz!	kelly lewin kellylewin@hotmail.com	Lead	Glasses: Both Health: Yes Age: 34 Surgery: No Injuries: No Conditions: Myopia (Nearsightedness); Astigmatism Night: Poorly Bifocals: reading glasses Important: Affordability Procedure: No Risk: Yes Eval: No Name: kelly lewin Phone: 843-270-4214 Email: kellylewin@hotmail.com
	COMMENTS				
	TASKS				
117	05/03/2013 01:37 PM	Manual Form	MICHELLE SUGGS MICHELLE michellesuggs0866@yahoo.com	Lead	Name: MICHELLE SUGGS Fname: MICHELLE Lname: SUGGS Email: michellesuggs0866@yahoo.com Address: 1325 OLD TOWN RD Zip: 29407 City: CHARLESTON State: SC Phone: 843 568 9332 Cell Phone: Dob: 08/14/1966 Other Phone:
	1 05/03/2013 01:38 PM lm to r/s appt. csmillie keribogan				
	TASKS				
118	05/03/2013 01:33 PM	Manual Form	DARREN VANCE DARREN darren.vance@yahoo.com	Lead	Name: DARREN VANCE Fname: DARREN Lname: VANCE Email: darren.vance@yahoo.com Address: 2057 CHILHOWEE RD Zip: 29455 City: JOHNS ISLAND State: SC Phone: 843 735 8868
	1 05/03/2013 01:37 PM spoke with pt. he will call back to r/s missed appt. csmillie keribogan				
	TASKS				



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				Cell Phone:	
				Dob:	07/30/1967
				Other Phone:	
119			BRANDY BASKINS	Lead	Name: BRANDY BASKINS Fname: BRANDY Lname: BASKINS Email: BLBASKING@G.COSC.EDU Address: 1082 GREENWOOD DR Zip: 29431 City: Bonneau State: SC Phone: 843-607-4421 Cell Phone: Dob: 12/30/1989 Other Phone:
	COMMENTS				
	TASKS				
120	05/03/2013 06:20 AM	Manual Form	ANDREA MATTHEWS ANDREA DRAYE807@HOTMAIL.COM	Lead	Name: ANDREA MATTHEWS Fname: ANDREA Lname: MATTHEWS Email: DRAYE807@HOTMAIL.COM Address: 328 GUADAL CANAL ST Zip: 29445 City: Goose Creek State: SC Phone: 843-789-4178 Cell Phone: Dob: 4/27/1978 Other Phone:
	COMMENTS	1 06/11/2013 09:42 AM 554 83 8841 keribogan 2 05/08/2013 11:00 AM spoke to pt. unable to afford procedure at this time. csmillie keribogan 3 05/06/2013 11:05 AM Pt took pricing info (Astig campaign). Will discuss dates/\$ with spouse. Pt advised pricing good for 30 days. CSmillie keribogan			
	TASKS				
121	05/03/2013 06:19 AM	Manual Form	RENEE THOMAS RENEE MS.RENEE.THOMAS@GMAIL.COM	Treatment	Name: RENEE THOMAS Fname: RENEE Lname: THOMAS Email: MS.RENEE.THOMAS@GMAIL.COM Address: 1320 MARYLAND DR Zip: 29456 City: Ladson State: SC Phone: 843-298-1121 Cell Phone: Dob: 2/7/1974 Other Phone:
	COMMENTS	1 06/11/2013 09:42 AM DID NOT PROVIDE A SS# keribogan 2 05/08/2013 11:05 AM Pt. has United Health Care - which gives her a 15% discount - making it 2380 per eye - Pt. notified - gave Care Credit option - still have to get her funds together and give us a call back - cah keribogan			
	TASKS				
122	05/03/2013 06:17 AM	Manual Form	DEBBIR KNOWLES DEBBIR	Lead	Name: DEBBIR KNOWLES Fname: DEBBIR Lname: KNOWLES Email: Address: Zip: City: State: SC Phone: 843-609-8998 Cell Phone: Dob: Other Phone:
	COMMENTS				
	TASKS				
123	05/03/2013 06:15 AM	Manual Form	WILLIAM PEBBLES WILLIAM	Lead	Name: WILLIAM PEBBLES Fname: WILLIAM Lname: PEBBLES Email: Address: Zip: City: State: SC
	COMMENTS				



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				Phone: 843-200-5463	
				Cell Phone:	
				Dob:	
				Other Phone:	
124	06:10 AM	Form	CHENITAYFRI65@GMAIL.COM	Lead	Name: CHENITA FRIERSON Fname: CHENITA Lname: FRIERSON Email: CHENITAYFRI65@GMAIL.COM
	COMMENTS	1 09/11/2013 11:18 AM mailed card to extend complimentary exam keribogan 2 05/14/2013 12:12 PM LM FOR PT TO RESCHEDULE. CSMILLIE (SECOND N/S) keribogan			Address: Zip: City: State: SC Phone: Cell Phone: Dob: 5/4/1965 Other Phone:
	TASKS				
125	05/03/2013 06:10 AM	Manual Form	JOHN GIBSON JOHN	Lead	Name: JOHN GIBSON Fname: JOHN Lname: GIBSON Email: Address: Zip: City: State: SC Phone: 843-908-5103 Cell Phone: Dob: 2/20/1970 Other Phone:
	COMMENTS	1 05/08/2013 09:39 AM SPOKE W FEMALE, NOT INTERESTED IN R/S AT THIS keribogan TIME. CSMILLIE			
	TASKS				
126	05/03/2013 06:09 AM	Manual Form	KELLY HINSON KELLY HINSONK@MUSC.EDU	Lead	Name: KELLY HINSON Fname: KELLY Lname: HINSON Email: HINSONK@MUSC.EDU Address: 1715 CARLIN AVE Zip: 29412 City: Charleston State: SC Phone: 843-412-4006 Cell Phone: Dob: 12/12/1982 Other Phone:
	COMMENTS				
	TASKS				
127	05/03/2013 06:09 AM	Manual Form	KAREN BRAHAM KAREN	Lead	Name: KAREN BRAHAM Fname: KAREN Lname: BRAHAM Email: Address: 220 PIMPERNEL ST Zip: 29483 City: Summerville State: Phone: 843-810-6278 Cell Phone: Dob: Other Phone:
	COMMENTS				
	TASKS				
128	05/03/2013 06:07 AM	Manual Form	ROBERT KAMPERT ROBERT ROBKAMPERTS@GMAIL.COM	Lead	Name: ROBERT KAMPERT Fname: ROBERT Lname: KAMPERT Email: ROBKAMPERTS@GMAIL.COM
	COMMENTS	1 09/11/2013 11:21 AM mailed card to extend complimentary exam keribogan			Address: 161 N LAKESHORE DR Zip: 29445 City: Goose Creek



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State:
Phone: 843-460-4267
Cell Phone:
Dob: 9/30/1987
Other Phone:

129	05/03/2013 06:05 AM	Manual Form	BRANDON DUBOISE BRANDON	Lead	Name: BRANDON DUBOISE Fname: BRANDON Lname: DUBOISE Email: Address: Zip: City: State: SC Phone: 843-599-9663 Cell Phone: Dob: Other Phone:
	COMMENTS				
	TASKS				
130	05/03/2013 06:04 AM	Manual Form	BRITT BOSWELL BRITT	Lead	Name: BRITT BOSWELL Fname: BRITT Lname: BOSWELL Email: Address: Zip: City: State: SC Phone: 843-217-3378 Cell Phone: Dob: 1/8/1957 Other Phone:
	COMMENTS				
	TASKS				
131	05/03/2013 05:51 AM	Manual Form	ROBERT AHLEMANN ROBERT RAHLEMANN@CHARLESTONCOUNTY.ORG	Lead	Name: ROBERT AHLEMANN Fname: ROBERT Lname: AHLEMANN Email: RAHLEMANN@CHARLESTONCOUNTY.ORG Address: 119 SAVANNAH ROUND Zip: 29485 City: Summerville State: SC Phone: 843-469-8388 Cell Phone: Dob: 02/10/1963 Other Phone:
	COMMENTS	1	05/06/2013 09:41 AM keribogan	pt in no hurry to schedule, has two kids in college. gave prices and offered financing. CSmillie	
	TASKS				
132	05/03/2013 05:50 AM	Manual Form	JAMES STEVERSON, JR JAMES	Lead	Name: JAMES STEVERSON, JR Fname: JAMES Lname: STEVERSON, JR Email: Address: Zip: City: State: SC Phone: 843-819-0911 Cell Phone: Dob: 09/01/1988 Other Phone:
	COMMENTS				
	TASKS				
133	05/03/2013 05:48 AM	Manual Form	EMILY SHOWN EMILY EMILYRSHOWN@GMAIL.COM	Lead	Name: EMILY SHOWN Fname: EMILY Lname: SHOWN Email: EMILYRSHOWN@GMAIL.COM
	COMMENTS				



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complimentary exam	Address: 26 GORDON ST Zip: 29403 City: Charleston State: SC Phone: 336-816-2121 Cell Phone: Dob: 9/17/1987 Other Phone:
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134	05/03/2013 05:46 AM	Manual Form	IAN DUTHIE IAN	Lead	Name: IAN DUTHIE Fname: IAN Lname: DUTHIE Email: Address: 128 DOVETAIL CIR Zip: 29483 City: Summerville State: Phone: 716-946-7226 Cell Phone: Dob: 12/4/1984 Other Phone:
	COMMENTS				
	TASKS				

135	05/03/2013 05:44 AM	Manual Form	JASON TERRY JASON	Lead	Name: JASON TERRY Fname: JASON Lname: TERRY Email: Address: 1481 CENTER ST EXT Zip: 29464 City: Mount Pleasant State: Phone: 843-321-5660 Cell Phone: Dob: Other Phone:
	COMMENTS				
	TASKS				

136	05/03/2013 05:42 AM	Manual Form	Nancy Vazquez Nancy nancyq1970@yahoo.com	Not a Candidate	Name: Nancy Vazquez Fname: Nancy Lname: Vazquez Email: nancyq1970@yahoo.com Address: 401 Haverstraw Ct Zip: 29483 City: Summerville State: Phone: 843-345-0702 Cell Phone: Dob: 05/05/1970 Other Phone:
	COMMENTS				
	TASKS				

137	05/02/2013 02:25 PM	Manual Form	AARON SOMMERS AARON aaronjsommers@hotmail.com	Lead	Name: AARON SOMMERS Fname: AARON Lname: SOMMERS Email: aaronjsommers@hotmail.com Address: 507 STINSON DRIVE UNIT A 7 Zip: 29407 City: CHARLESTON State: SC Phone: 563-343-0010 Cell Phone: Dob: 04/08/1983 Other Phone:
	COMMENTS 1 09/11/2013 11:17 AM mailed card to extend complimentary exam keribogan				
	TASKS				

138	05/02/2013 02:22 PM	Manual Form	ANDREA SEARSON ANDREA AUN@KNOLOGY.NET	Not a Candidate	Name: ANDREA SEARSON Fname: ANDREA Lname: SEARSON
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Email: AUN@KNOLOGY.NET
Address: 2907 FOXHALL RD
Zip: 29414
City: CHARLESTON
State: SC
Phone: 843 225 1961
Cell Phone:
Dob: 07/11/1961
Other Phone:

139	05/02/2013 02:20 PM	Manual Form	PAYTON MCDONALD PAYTON paytonmcdonaldladson@YAHOO.COM	Lead	Name: PAYTON MCDONALD Fname: PAYTON Lname: MCDONALD Email: paytonmcdonaldladson@YAHOO.COM Address: 4148 MIAMI ST Zip: 29456 City: LADSON State: SC Phone: 843 425 9559 Cell Phone: Dob: 06/22/1992 Other Phone:
	COMMENTS	1 05/15/2013 10:08 AM LM TO CALL AND R/S APPT. CSMILLIE keribogan 2 05/09/2013 02:20 PM R/S MISSED CONSULT TO 5/15 @ 8:45 CSMILLIE keribogan			
	TASKS				

140	05/02/2013 02:18 PM	Manual Form	TERESA ROWLEY TERESA rowley83078@yahoo.com	Lead	Name: TERESA ROWLEY Fname: TERESA Lname: ROWLEY Email: rowley83078@yahoo.com Address: 3152 SONJA WAY Zip: 29466 City: MT PLEASANT State: SC Phone: 843 834 0171 Cell Phone: Dob: 04/13/1966 Other Phone:
	COMMENTS	1 09/11/2013 11:16 AM mailed card to extend complimentary exam keribogan			
	TASKS				

141	05/02/2013 11:59 AM	Manual Form	RICHARD BARBER RICHARD BARBER_CLAY@CHINACONSTRUCTION.US	Lead	Name: RICHARD BARBER Fname: RICHARD Lname: BARBER Email: BARBER_CLAY@CHINACONSTRUCTION.US Address: 4585 GREAT OAK DRIVE Zip: 29418 City: N. CHAS State: SC Phone: 803-608-7722 Cell Phone: Dob: 9/16/77 Other Phone:
	COMMENTS	1 05/02/2013 12:02 PM lm to r/s missed appt. csmillie keribogan			
	TASKS				

142	05/02/2013 10:27 AM	LASIK Quiz!	Kevin Mischke kevmisc1@aol.com	Lead	Glasses: Glasses Health: Yes Age: 47 Surgery: No Injuries: No Conditions: Myopia (Nearsightedness); Hyperopia (Farsightedness); Astigmatism Night: OK, but could be better Bifocals: bifocals Important: Safety Procedure: Yes
	COMMENTS				



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						Risk: No
						Eval: No
						Name: Kevin Mischke
						Email: kevmisc1@aol.com
143	10:15 AM	Form	russell.johnston.jr@gmail.com	SSELL	Treatment	Name: RUSSELL JOHNSTON Fname: RUSSELL Lname: JOHNSTON Email: russell.johnston.jr@gmail.com Address: 2932 TREADWELL ST Zip: 29466 City: MT PLEASANT State: Phone: 843 718 6505 Cell Phone: Dob: 08/18/1980 Other Phone:
	COMMENTS	1	05/09/2013 02:06 PM	Pt. scheduled procedure - Dr. Hood to review chart with Dr. keribogan Solomon - cah		
	TASKS					
144	05/02/2013 09:41 AM	Manual Form	JIMMIE CROWE JIMMIE crowe1286@gmail.com		Lead	Name: JIMMIE CROWE Fname: JIMMIE Lname: CROWE Email: crowe1286@gmail.com Address: 5300 PATRON PLACE APT 621 Zip: 29485 City: SUMMERVILLE State: Phone: 843 532 5588 Cell Phone: Dob: 03/02/1985 Other Phone:
	COMMENTS	1	09/11/2013 11:19 AM	mailed card to extend complimentary exam keribogan		
		2	05/16/2013 11:05 AM	lm to r/s missed consult. Csmillie keribogan		
	TASKS					
145	05/02/2013 09:20 AM	Manual Form	JAYNE HALL JAYNE JAYNEHALL78@GMAIL.COM		Lead	Name: JAYNE HALL Fname: JAYNE Lname: HALL Email: JAYNEHALL78@GMAIL.COM Address: 104 MIDDLETON DRIVE Zip: 29445 City: GOOSE CREEK State: SC Phone: 931-409-0051 Cell Phone: Dob: 2/18/60 Other Phone:
	COMMENTS	1	09/11/2013 11:15 AM	mailed card to extend complimentary exam keribogan		
		2	09/10/2013 04:43 PM	missed appt on 4/18 and r/s to 5/2 but no showed for this appointment as well. keribogan		
		3	05/02/2013 09:23 AM	LM TO R/S CSMILLIE keribogan		
	TASKS					
146	05/02/2013 08:09 AM	Manual Form	LINDA BEHRENS LINDA LBEHRENS@HOMESC.COM		Post Treatment	Name: LINDA BEHRENS Fname: LINDA Lname: BEHRENS Email: LBEHRENS@HOMESC.COM Address: 647 ISLAND PARK DRIVE Zip: 29492 City: DANIEL ISLAND State: SC Phone: 843-881-7431 Cell Phone: Dob: 02/12/57 Other Phone:
	COMMENTS	1	05/02/2013 08:09 AM	SCHEUDLED FOR RLE EVAL. CSMILLIE keribogan		
	TASKS					
147	05/01/2013 04:16 PM	Manual Form	RENEE JUSTINIANO RENEE mrsjustiniano@yahoo.com		Lead	Name: RENEE JUSTINIANO Fname: RENEE Lname: JUSTINIANO Email: mrsjustiniano@yahoo.com Address: 7630 VANDERBROOK PLACE Zip: 29420



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City: N CHARLESTON
State: SC
Phone: 843 437 4223
Cell Phone:
Dob: 12/31/1993
Other Phone:

148	05/01/2013 03:40 PM	LASIK Quiz!	Morgan mcollins3@ymail.com	Lead	Glasses: Both Health: Yes Age: 25 Surgery: No Injuries: No Conditions: Myopia (Nearsightedness); Astigmatism Night: OK, but could be better Important: Being free of my glasses or contacts Procedure: Possibly Risk: No Eval: Yes Name: Morgan Email: mcollins3@ymail.com
	COMMENTS				
	TASKS				
149	05/01/2013 11:22 AM	Manual Form	ROBERT ROBERT	Lead	Name: ROBERT Fname: ROBERT Lname: Email: Address: Zip: City: State: SC Phone: 843-740-2284 Cell Phone: Dob: Other Phone:
	COMMENTS				
	TASKS				
150	05/01/2013 11:22 AM	Manual Form	RONI ABDELLA RONI ronijocbo@gmail.com	Post Treatment	Name: RONI ABDELLA Fname: RONI Lname: ABDELLA Email: ronijocbo@gmail.com Address: 203 HICKORYNUT DR Zip: 29448 City: HARLEYVILLE State: SC Phone: 843 209 3275 Cell Phone: Dob: 12/07/1961 Other Phone:
	COMMENTS	1 05/24/2013 12:12 PM Procedure complete - cah keribogan			
	TASKS				
151	05/01/2013 11:20 AM	Manual Form	CYNTHIA BRINSON CYNTHIA trussyj@yahoo.com	Lead	Name: CYNTHIA BRINSON Fname: CYNTHIA Lname: BRINSON Email: trussyj@yahoo.com Address: 5048 ANAVESTA PARK COU Zip: 29449 City: HOLLYWOOD State: SC Phone: 843 425 2440 Cell Phone: Dob: 03/28/1977 Other Phone:
	COMMENTS	1 09/17/2013 01:32 PM followed up via email keribogan 2 05/09/2013 02:22 PM PHONE # D/C. SENT EMAIL TO R/S APPT. CSMILLIE keribogan			
	TASKS				
152	05/01/2013 11:18 AM	Manual Form	MICHELLE VEHORN MICHELLE	Lead	Name: MICHELLE VEHORN Fname: MICHELLE Lname: VEHORN Email:



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complimentary exam

Address: 15B MARLOW DRIVE
Zip: 29403
City: CHAS
State: SC
Phone: 843-302-1235
Cell Phone:
Dob: 9/16/78
Other Phone:

153	05/01/2013 11:17 AM	Manual Form	LAURA FULK LAURA FULKLAURA@GMAIL.COM	Lead	Name: LAURA FULK Fname: LAURA Lname: FULK Email: FULKLAURA@GMAIL.COM Address: Zip: City: State: SC Phone: 843-270-0135 Cell Phone: Dob: Other Phone:
	COMMENTS				
	TASKS				

154	05/01/2013 11:15 AM	Manual Form	STEVEN SAMS STEVEN	Lead	Name: STEVEN SAMS Fname: STEVEN Lname: SAMS Email: Address: Zip: City: State: SC Phone: 843-209-8885 Cell Phone: Dob: 02/28/1957 Other Phone:
	COMMENTS				
	TASKS				

155	05/01/2013 11:12 AM	Manual Form	ELLIE COLLEY ELLIE edencolley@gmail.com	Cancelled	Name: ELLIE COLLEY Fname: ELLIE Lname: COLLEY Email: edencolley@gmail.com Address: 234 RED POP LANE Zip: 29479 City: ST STEPHEN State: SC Phone: 843 693 5061 Cell Phone: Dob: 08/14/1990 Other Phone:
	COMMENTS 1 05/09/2013 02:01 PM Per Ashley S. - patient called to CANCEL procedure same day of consult 5/8 - CAH left message for patient to call office - cah keribogan				
	TASKS				

156	05/01/2013 11:08 AM	Manual Form	MIKE MIKE	Lead	Name: MIKE Fname: MIKE Lname: Email: Address: Zip: City: State: SC Phone: 843-860-4037 Cell Phone: Dob: Other Phone:
	COMMENTS				
	TASKS				

157	05/01/2013 11:07 AM	Manual Form	ANN NAULT ANN ANN@CHEFANNSGOURMET2U.COM	Lead	Name: ANN NAULT Fname: ANN Lname: NAULT
-----	------------------------	-------------	--	------	--



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Email: ANN@CHEFANNSGOURMET2U.COM
Address:
Zip:
City:
State:
Phone: 843-425-1939
Cell Phone:
Dob:
Other Phone:

158	05/01/2013 10:19 AM	Manual Form	WILLIAM HANKS WILLIAM	Lead	Name: WILLIAM HANKS Fname: WILLIAM Lname: HANKS Email: Address: Zip: City: State: SC Phone: 404-819-2885 Cell Phone: Dob: Other Phone:
	COMMENTS	1 05/01/2013 03:45 PM called pt at bad tme, he will call back. csmillie keribogan			
	TASKS				

159	05/01/2013 10:19 AM	Manual Form	AMANDA SHANNON AMANDA ASHANNON3@COMCAST.NET	Lead	Name: AMANDA SHANNON Fname: AMANDA Lname: SHANNON Email: ASHANNON3@COMCAST.NET Address: 1405 BROCKMAN CIR Zip: 29412 City: Charleston State: SC Phone: 843-437-1318 Cell Phone: Dob: 4/26/1966 Other Phone:
	COMMENTS	1 09/11/2013 11:16 AM mailed card to extend complimentary exam keribogan			
	TASKS				

160	05/01/2013 10:17 AM	Manual Form	RICHARD BABER RICHARD BABER_CLAY@CHINACONSTRUCTION.US	Lead	Name: RICHARD BABER Fname: RICHARD Lname: BABER Email: BABER_CLAY@CHINACONSTRUCTION.US Address: 4585 GREAT OAK DR Zip: 29418 City: North Charleston State: SC Phone: 803-608-7722 Cell Phone: Dob: 09/16/1977 Other Phone:
	COMMENTS	1 09/11/2013 11:20 AM mailed card to extend complimentary exam keribogan 2 09/10/2013 04:33 PM patient was scheduled for 5-2-2013 but no showed. keribogan			
	TASKS				

161	05/01/2013 10:16 AM	Manual Form	GLENDASHOEMAKER GLENDA TAYLORGLENDAS83@YAHOO.COM	Lead	Name: GLENDA SHOEMAKER Fname: GLENDA Lname: SHOEMAKER Email: TAYLORGLENDAS83@YAHOO.COM Address: 1687 MULBERRT ST, APT D Zip: 29407 City: Charleston State: Phone: 321-201-1976 Cell Phone: Dob: 02/17/1977 Other Phone:
	COMMENTS				
	TASKS				



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				Lead	Name: AUSTIN JOHNSON Fname: AUSTIN Lname: JOHNSON Email: ATJOHN00@YAHOO.COM Address: Zip: City: State: Phone: 843-991-0813 Cell Phone: Dob: Other Phone:
	COMMENTS				
	TASKS				
163	05/01/2013 10:13 AM	Manual Form	RYAN HAAG RYAN HAAG117@GMAIL.COM	Consultation	Name: RYAN HAAG Fname: RYAN Lname: HAAG Email: HAAG117@GMAIL.COM Address: 121 HONEY SUCKLE LN Zip: 29485 City: Summerville State: SC Phone: 609-220-3458 Cell Phone: Dob: 02/12/1985 Other Phone:
	COMMENTS	1 05/08/2013 10:55 AM LM, FOR PT TO CALL ME WITH A UPDATE ON keribogan SCHEUDLING. CSMILLIE 2 05/02/2013 02:37 PM needs to discuss with wife. interested in study. csmillie keribogan			
	TASKS				
164	05/01/2013 10:12 AM	Manual Form	MATTHEW SCHNEIDER MATTHEW	Lead	Name: MATTHEW SCHNEIDER Fname: MATTHEW Lname: SCHNEIDER Email: Address: Zip: City: State: SC Phone: 843-568-2963 Cell Phone: Dob: 08/20/1981 Other Phone:
	COMMENTS				
	TASKS				
165	05/01/2013 10:11 AM	Manual Form	DEBBIE GARRISON DEBBIE	Lead	Name: DEBBIE GARRISON Fname: DEBBIE Lname: GARRISON Email: Address: Zip: City: State: SC Phone: 843-343-7137 Cell Phone: Dob: Other Phone:
	COMMENTS				
	TASKS				
166	05/01/2013 10:07 AM	Manual Form	JENNIFER SHORE JENNIFER JENSHORE81@GMAIL.COM	Cancelled	Name: JENNIFER SHORE Fname: JENNIFER Lname: SHORE Email: JENSHORE81@GMAIL.COM Address: 5113 PARKSIDE DR Zip: 29405 City: North Charleston State: SC Phone: 843-530-7200 Cell Phone: Dob: 12/25/1981 Other Phone:
	COMMENTS	1 05/21/2013 12:50 PM CANCELLED Procedure - Had a family emergency - had to keribogan go out of town - cah			
	TASKS				



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			DARREN	Not a Candidate	Name: DARREN BURKHARD Fname: DARREN Lname: BURKHARD Email: DKBURKHARD@ATT.NET Address: 6200 FIELDSTONE CIR Zip: 29414 City: Charleston State: SC Phone: 717-816-9504 Cell Phone: 717-262-8756 Dob: 02/19/1967 Other Phone:	
167	COMMENTS	1	05/02/2013 01:56 PM KERATACONOUS keribogan			
	TASKS					
168		05/01/2013 10:04 AM	Manual Form	BRANDON OQUINN BRANDON BRADLEYTHEIRISH@LOWCOUNTRY.COM	Lead	Name: BRANDON OQUINN Fname: BRANDON Lname: OQUINN Email: BRADLEYTHEIRISH@LOWCOUNTRY.COM Address: 2545 PENIEL RD Zip: 29488 City: Walterboro State: SC Phone: 843-908-4014 Cell Phone: Dob: 9/29/1976 Other Phone:
	COMMENTS	1	09/11/2013 11:22 AM mailed card to extend complimentary exam keribogan			
	TASKS					
169		05/01/2013 10:02 AM	Manual Form	SUSAN WHITE SUSAN SUSIERENEE21@YAHOO.COM	Cancelled	Name: SUSAN WHITE Fname: SUSAN Lname: WHITE Email: SUSIERENEE21@YAHOO.COM Address: PO BOX 891 Zip: 29461 City: Moncks Corner State: SC Phone: 843-847-5035 Cell Phone: Dob: 01/19/1963 Other Phone:
	COMMENTS	1	07/15/2013 06:28 PM Dr. Solomon reviewed pentacams - feels like she should be fine for LASIK - wanted them repeated again - would do at measurement exam - pt. notified - stated need to hold off for right now. will call back when she is ready			
		2	05/02/2013 02:07 PM SPOKE WIHT PT. DECLINED TO R/S, "NEEDS TO WAIT A LITTEL BIT" WILL CALL BACK TO R/S WHEN READY. CSMILLIE			
	TASKS					
170		05/01/2013 10:02 AM	Manual Form	STEPHEN ZERINGUE STEPHEN SZEERINGUE21@YAHOO.COM	Lead	Name: STEPHEN ZERINGUE Fname: STEPHEN Lname: ZERINGUE Email: SZEERINGUE21@YAHOO.COM Address: Zip: City: State: SC Phone: 843-270-2606 Cell Phone: Dob: Other Phone:
	COMMENTS					
	TASKS					
171		05/01/2013 10:01 AM	Manual Form	KERRI METZENDORF KERRI KERRIMETZ6@GMAIL.COM	Lead	Name: KERRI METZENDORF Fname: KERRI Lname: METZENDORF Email: KERRIMETZ6@GMAIL.COM Address: 541 HORSE POND RD Zip: 29047 City: Elloree State: SC Phone: 843-607-6287
	COMMENTS					



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					Cell Phone: Dob: Other Phone:
172	COMMENTS			Lead	Name: GAYLE CAMPBELL Fname: GAYLE Lname: CAMPBELL Email: Address: Zip: City: State: SC Phone: 843-571-1820 Cell Phone: Dob: Other Phone:
	TASKS				
173	05/01/2013 10:00 AM	Manual Form	TRAVIS BROTON TRAVIS	Lead	Name: TRAVIS BROTON Fname: TRAVIS Lname: BROTON Email: Address: 4536 PERISHVILLE RD Zip: 29449 City: Hollywood State: SC Phone: 843-532-8450 Cell Phone: Dob: 7/8/1988 Other Phone:
	COMMENTS	1 09/11/2013 11:20 AM mailed card to extend complimentary exam keribogan 2 09/10/2013 04:34 PM patient is only available after 4:30-5pm. would like someone to call him if they can be available. keribogan			
	TASKS				
174	05/01/2013 09:59 AM	Manual Form	DENNIS MACKENZIE DENNIS DMACKAN@GMAIL.COM	Not a Candidate	Name: DENNIS MACKENZIE Fname: DENNIS Lname: MACKENZIE Email: DMACKAN@GMAIL.COM Address: 407 CITADEL ST Zip: 29456 City: Ladson State: SC Phone: 508-450-4129 Cell Phone: Dob: 7/26/1959 Other Phone:
	COMMENTS				
	TASKS				
175	05/01/2013 09:58 AM	Manual Form	ANGELA BUXTON ANGELA angiebuxton1@gmail.com	Cancelled	Name: ANGELA BUXTON Fname: ANGELA Lname: BUXTON Email: angiebuxton1@gmail.com Address: 103 COOKE STREET Zip: 29492 City: WANDO State: Phone: 843 557 3390 Cell Phone: Dob: 08/08/1967 Other Phone:
	COMMENTS	1 07/22/2013 05:31 PM Got repond to email from patient today - Separating from her clarissa husband - COST BARRIER 2 07/22/2013 08:42 AM 7/15 - left message 7/16 - left message 7/18 - left message - clarissa called from my cell phone to see if she would pick up 7/19 - left message 7/22 - pt. NO SHOWED for LASIK measurement appointment, left message @ 8:42 - sent email			
	TASKS				
176	05/01/2013 09:58 AM	Manual Form	MARK COOPER MARK	Lead	Name: MARK COOPER Fname: MARK Lname: COOPER Email: Address: 1005 BARBADOS WAY Zip: 29412 City: Charleston State: SC
	COMMENTS				



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Phone: 843-642-4259
 Cell Phone:
 Dob: 10/11/1961
 Other Phone:

		SEBASTIAN		Lead	Name: SEBASTIAN CULPEPPER Fname: SEBASTIAN Lname: CULPEPPER Email: SEBASTIAN.CULPEPPER@GMAIL.COM Address: 8530 WYNNEFIELD DR Zip: 29420 City: North Charleston State: SC Phone: 843-819-1008 Cell Phone: Dob: 03/29/1975 Other Phone:		
177	09:57 AM	Form	SEBASTIAN.CULPEPPER@GMAIL.COM				
	COMMENTS	1 06/11/2013 09:41 AM keribogan DID NOT PROVIDE A SS# 2 05/06/2013 03:18 PM keribogan NON CANDIDATE for LASIK - Dr. Solomon recommends ICL, LRI & LASIK to touch it up - Pt. state too much money - will come back in a year to be reevaluated - Possible new technology available - cah					
	TASKS						
178	05/01/2013 09:56 AM	Manual Form	SHANNON PARRIS SHANNON SHANNONCPARRIS@YAHOO.COM		Not a Candidate	Name: SHANNON PARRIS Fname: SHANNON Lname: PARRIS Email: SHANNONCPARRIS@YAHOO.COM Address: 1458 SIMMONS ST Zip: 29464 City: Mount Pleasant State: SC Phone: 843-367-2984 Cell Phone: 843-856-3598 Dob: 05/21/1960 Other Phone:	
	COMMENTS						
	TASKS						

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