Name: _____

Date: _____

CURRENT REGIMEN:

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Office: 731-541-6939

Fax: 731-541-4570

Email: MSPArecords@wth.org

www.midsouthperinatal.com

Date	Fasting	2hr After Breakfast	Lunch	2hr After Lunch	Supper	2hr After Supper	Bedtime	2:00 AM