

<p>Patient: SMITH,JOHN (M) 123 KING ST. WEST HAMILTON, ON L9A A8A</p> <p>Phone: 416-999-9999 File: 123455 DOB: 1-MAY-2000 Age: 17 y/o HCN: 5700 168 742 MF (ON)</p>	<p>Medications:</p>
<p>Provider: John White Family Doctor: Dr. Good</p>	<p>Date: 31-Oct-2017 Time: 11:42</p> <p>Visit Id: 12345</p>
<p>Reason:</p>	
<p>Allergies: _____ T _____ P _____ BP _____ WT _____ HR _____</p>	
<p>Diagnosis _____</p> <p>Signature: _____</p>	