

COMPLEJO MÉDICO FRANCLAR

FICHA DE CITA



DATOS DEL PACIENTE

NÚMERO DE CITA	1		
NOMBRE DE PACIENTE	PRUEBA		
FECHA DE NACIMIENTO	2012-06-06	IDENTIDAD	0205199500032
EDAD	8 Años	FECHA DE ATENCIÓN	2020-12-11 22:35:29
GÉNERO	Masculino	ESTADO CIVIL	Casado(a)
DOMICILIO	PRUEBA		

SIGNOS VITALES

PRESIÓN ARTERIAL	25	FRECUENCIA CARDIACA	25
FRECUENCIA RESPIRATORIA	25	TEMPERATURA	25
PRESIÓN ARTERIAL MEDIA	25	GLUCOMETRÍA	25
PESO	25	TALLA	25

DETALLES DE LA CONSULTA

ANAMNESIS

EGDGDGFGHDFGHFDG BDFGHFGHFDGHDGFECDGDFGHDFGHFDG
 BDFGHFGHFDGHDGFECDGDFGHDFGHFDG BDFGHFGHFDGHDGFECDGDFGHDFGHFDG
 BDFGHFGHFDGHDGFECDGDFGHDFGHFDG BDFGHFGHFDGHDGFECDGDFGHDFGHFDG
 BDFGHFGHFDGHDGFECDGDFGHDFGHFDG BDFGHFGHFDGHDGFECDGDFGHDFGHFDG
 BDFGHFGHFDGHDG

EXAMEN FÍSICO

EGDGDGFGHDFGHFDG BDFGHFGHFDGHDGFECDGDFGHDFGHFDG
 BDFGHFGHFDGHDGFECDGDFGHDFGHFDG BDFGHFGHFDGHDGFECDGDFGHDFGHFDG
 BDFGHFGHFDGHDGFECDGDFGHDFGHFDG BDFGHFGHFDGHDGFECDGDFGHDFGHFDG
 BDFGHFGHFDGHDGFECDGDFGHDFGHFDG BDFGHFGHFDGHDGFECDGDFGHDFGHFDG
 BDFGHFGHFDGHDG

DIAGNÓSTICO

EGDGDGFGHDFGHFDG BDFGHFGHFDGHDGFECDGDFGHDFGHFDG
 BDFGHFGHFDGHDGFECDGDFGHDFGHFDG BDFGHFGHFDGHDGFECDGDFGHDFGHFDG
 BDFGHFGHFDGHDGFECDGDFGHDFGHFDG BDFGHFGHFDGHDGFECDGDFGHDFGHFDG
 BDFGHFGHFDGHDGFECDGDFGHDFGHFDG BDFGHFGHFDGHDGFECDGDFGHDFGHFDG
 BDFGHFGHFDGHDG

TRATAMIENTO

EGDGDGFGHDFGHFDG BDFGHFGHFDGHDGFECDGDFGHDFGHFDG
 BDFGHFGHFDGHDGFECDGDFGHDFGHFDG BDFGHFGHFDGHDGFECDGDFGHDFGHFDG
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