



PATIENT INFORMATION

Field	Details
Patient	John 2
Date of Birth	1/2/2000
Gender	male
Marital Status	N/A
Injury Date	N/A

INITIAL VISIT

- **Chief Complaint:**

Chief Complaint: ss

- **Chiropractic Other Notes:**

Chiropractic Other Notes:

- **Acupuncture Other Notes:**

Acupuncture Other Notes:

- **Treatment Frequency:**

Treatment Frequency: null times/week, re-eval in null weeks

- **Imaging:**

Imaging: XRAY: ; MRI: ; CT:

- **Restrictions:**

Restrictions: Avoid activity for null weeks, lifting limit null lbs

DISCHARGE VISIT

- **Diagnostic Study:**

Diagnostic Study: of :