

---

Doctor: Dr. Daniel .

Tipo de cita: Dental

Fecha: 2015-08-18 13:00:00.0

Paciente(s):

Ramon Farnos Parmes

AAAAAAAAAAAAA rrrrrrrrrrrrrrrrrr AAAAAAAAAAAAAA

QQQQQQQQQQQQQQ TTTTTTTTTTTTTTTTTTTTTT YYYYYYYYYYYYYY