

Age: 23**DOB:** May 16, 1996**Visit:** May 17, 2019**Provider:** Anne H Smith HH**Gender:** Female**Phone:** 4363453**Service:** A service for existing **Provider NPI:** 8759962158**SUBJECTIVE**

Temperature: The patient has aversions to wind and dampness. Patient's fever & chill: fever only, chills only, fever is alternating with chills, feels hot no fever and low grade fever is acute.

Jfkdkkskksks

Head: Lips: normal and lip color is blue. Headache: Aggravating factors (morning and dry) and Relieving factors (afternoon, damp and morning), pain scale is 4/10. Facial pain: pain scale is 5/10 and quality is numbness.

Thirst: Patient's thirst: normal, excessive and low thirst. Accompanied by vomiting after drinking.

OBJECTIVE

This is a test

OBJECTIVE - TONGUE

All : smooth, stiff, withered, tongue fur is dry, thick, thin, slimy.

Kidney / Bladder : smooth, stiff, tongue fur is old.

OBJECTIVE - PULSE

Bp: 120/80 and BPM: 120

Bilateral Overall: rough, tight, floating, long, large, replete and testing.

OBJECTIVE - CHANNEL PALPATION

Oh my god y'all

OBJECTIVE - PHYSICAL EXAM

Pain: Lower L. Abd., Upper R. Abd.: Patient describes pain as heavy, sharp and tight.

Rom: cervical extension; active 14°; passive 15°; pain point between 0° and 15°.

Ortho Test: Jackson's Test, Cervical, bilateral, + result

Rom: (L) shoulder abduction; active 38°; passive 20°; pain point between 0° and 18°.

ASSESSMENT

Testing

DIAGNOSIS CODES

M25.50 M25.519 M25.53 M54.5

Patient 1

MY2-0002467

Age: 23

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Gender: Female

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PLAN - ACU RX

Set	Plan
Set 1	10 mins / SP-7 [Moxa only]; Hey yall
Set 2	20 mins / SI-6
Set 3	30 mins / SI-9 [E-Stim +]

CPT CODES

123 x [1]: Second Item

VITAL SIGNS

HR	RR	BP	Wt	Ht	T
120 BPM	12 BRPM	120/80 mm Hg	220 lbs	6 ft "	98.5

PLAN - EXTERNAL THERAPY

Hello

PLAN - TREATMENT PRINCIPLE

Treat pract1 Keep the updates on your phone so I could see what it was doing in a few hours but then yes you would like that if it's the first thing.

PLAN - ADVICE RX

My first autocomplete for practitioner1 advice rx.

MEDICATIONS

Name	Dosage	Frequency/Duration
surf	1000mg	2xday

PHOTOS

Patient 1

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Subjective



Objective



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Plan - External Therapy

