Medical Record		Date:
RR: /Min BP: / mmHg	Weight : 4 S kg	Date: 17 DEC 2016 Time.
HR: /Min Temp>	Height : 55cm	Patient Name :
76,9	75	DOB
Allergies : Other	rs :	Address :
	16h 7hr	Contact Details :
Treating MD :	Time :	Follow Up Consultation
Present Complaint :		
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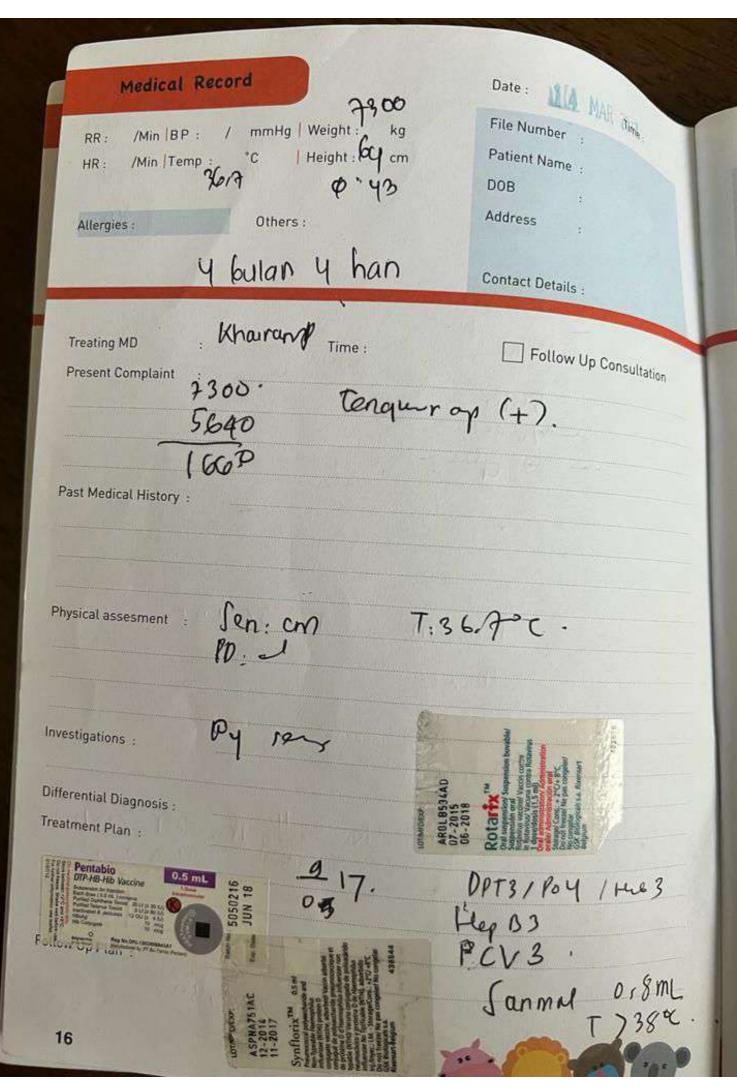
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13 JAN 2017 me: Medical Record RR: /Min | BP: / mmHg | Weight: kg | 0 File Number : HR: /Min |Temp: 36.2 | Height: 58cm Patient Name : DOB Others: Address Allergies: Contact Details : Follow Up Consultation Whom Time: Treating MD Present Complaint COMMUNICA LOT/MFO/EXP: 5640 AROLB470AE 05-2015 04-2018 ASPNA751AC 400 Rotarix" Past Medical History: T: 36.200 Jen cm Physical assesment : Po:ac Investigations: -3 H. DPT 2/ PO13. Differential Diagnosis: Has 3. Pentabio Vaccine PCV2. Sannie drig 0,6 mL Follow Up Plan : T 738 130 C



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Medical Record	Date: NIT(() . Time:		
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HR: /Min Temp : °C Height: 6 cm	Patient Name :		
Juya.	DOB :		
Allergies: Others:	Address :		
	Contact Details :		
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Investigations: Stat pm -atirai			
Differential Diagnosis :	PP-HB-HID Vaccine When to Fincish When the State of the		
Treatment Plan: - Plath upu (q 11112	Program Sandard Sandar		
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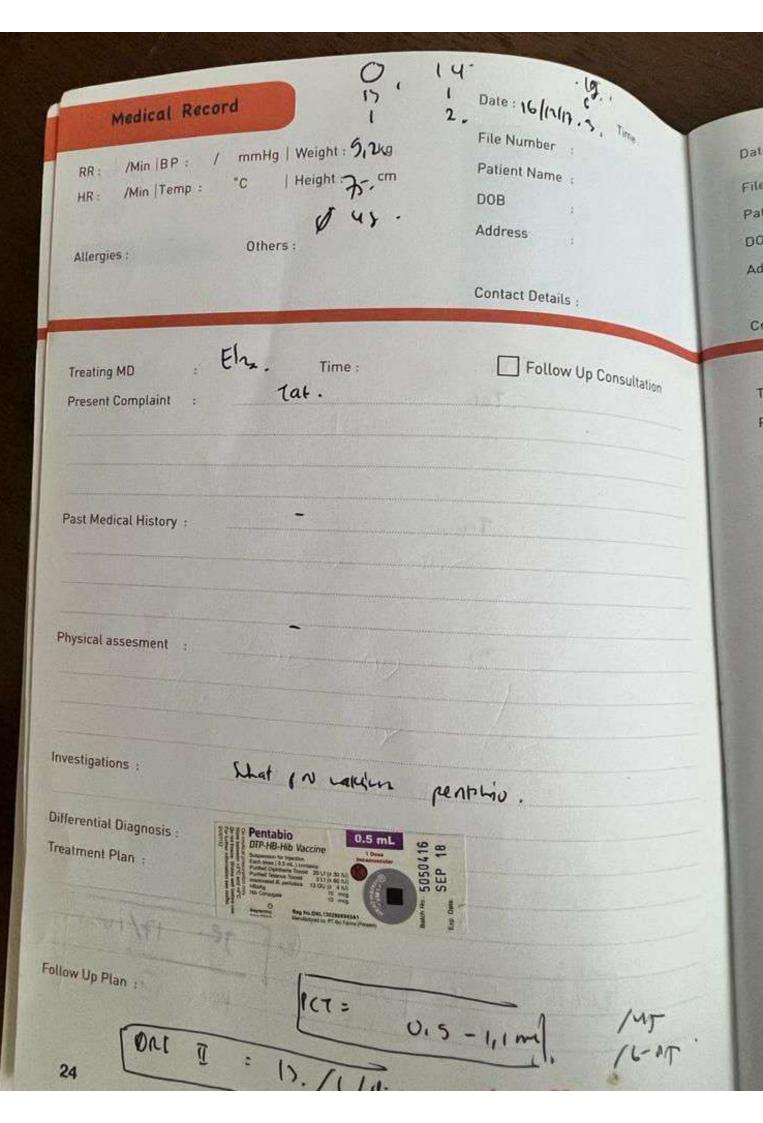
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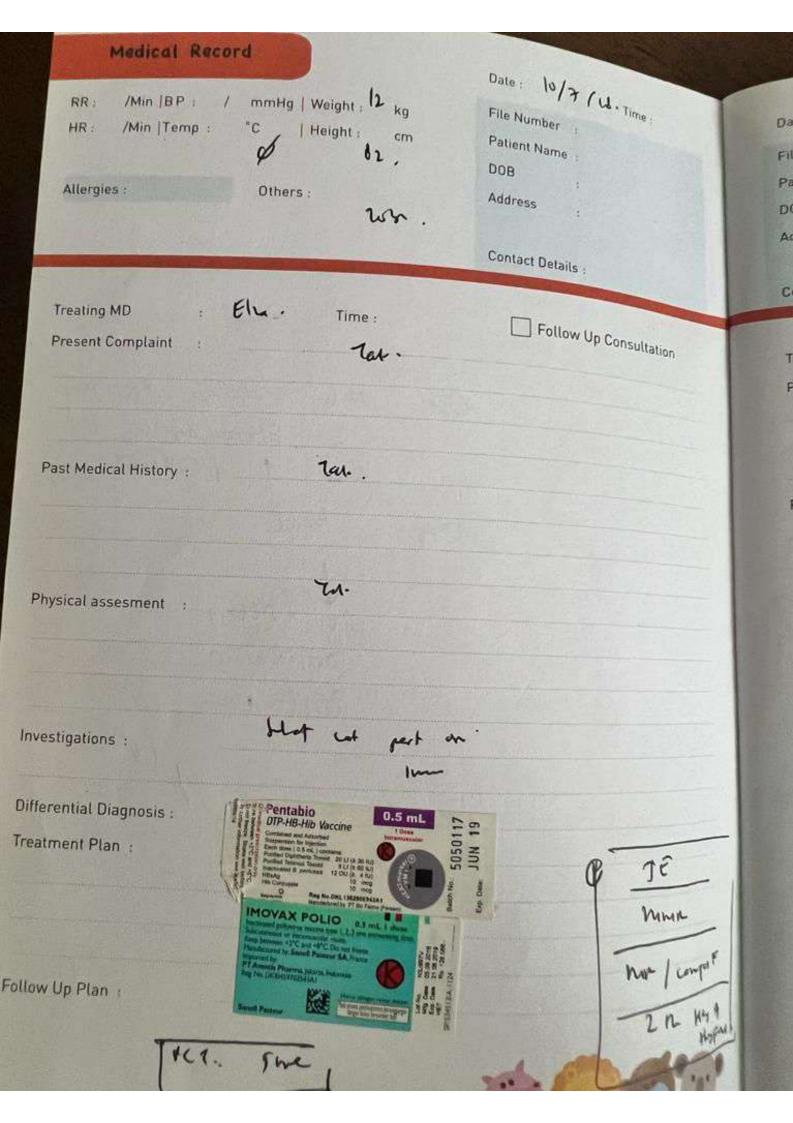
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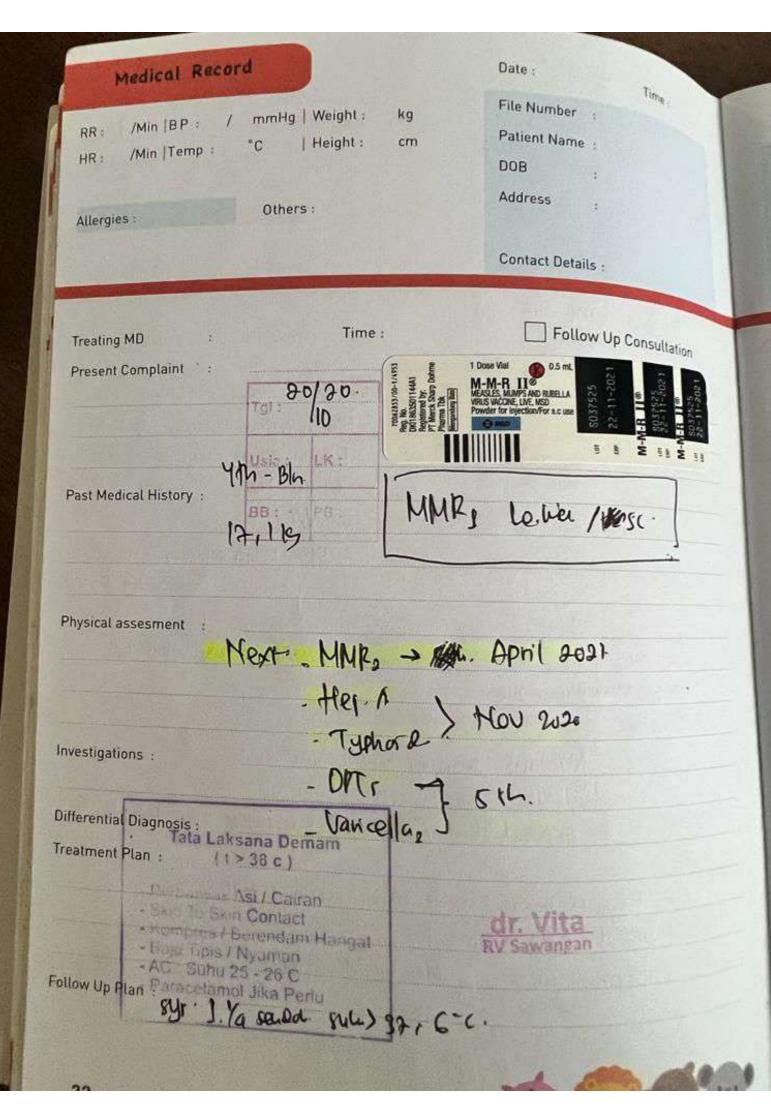
Date: 19/1/13 - Time:	Medical Record
File Number	RR / /Min BP : / mmHg Weight : 45 .kg
Patient Name :	HR: /Min Temp: °C Height: 24 cm
008	74.
Address :	Allergies: Others;
Contact Details :	
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10	
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5.	1 Single-dots 0.5 mit Tiel VARIVAX® VARICILIA VIRUS VACCINE LIVE To the boarding to the board
Differential Diagnosis:	MSD WAS DEAD REPEARED
Treatment Plan :	(All Mary Dates Process the St.
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Medical Record Date: 25/1/11 . Time: /Min |BP : / mmHg | Weight : 10 kg File Number RR: | Height : 76 cm °C HR: /Min |Temp : Patient Name : DOB Others: Allergies : Address Contact Details : Follow Up Consultation the . Time : Treating MD Present Complaint mart Past Medical History : Physical assesment : penthio II (on II). BonFon W Investigations: Differential Diagnosis: Pentabio DTP-HB-Hib Vaccine Treatment Plan: Follow Up Plan : 20/8/18. on 19 (on 10 117=110 -112h





Medical Record Time: Date : File Number : /Min | BP ; / mmHg | Weight : kg RR: Patient Name : cm HR: /Min | Temp : *C | Height : BOO Address. Others: Allergies: Contact Details : Follow Up Consultation Time: Treating MD # 794018 PE Prophi 000 IM. Present Complaint Tgl: 14/8/21 IM - SC 0,5 mL/0.5 mL 22012021 10,5 K3 V3B38 Past Medical History : 12-2021 VaxigripTetra® Quadrivalent influenza vaccine Vacuna antigripal tetravalente 2021 Physical assesment Investigations: Next: Fley A () J Eccepation
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Vari Differential Diagnosis: Treatment Plan: Follow Up Plan:

Medical Rec	ord)		Date:	
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	o i steen 1862	76	2°C	■ 809772 ■
Past Medical History :	018tgen 1862 101 4/2/22			DI-X STREET OF
	5th LK:	Maria San Desertation of the Control	1 Dose Vial 0.5 mL M-M-R II 0.5 mL MASLES MANYS AND RUBELLA VIRUS VACCINE, LIVE, MSD Powder for injection/For 8.c use	27072021 V3J19 06-2022 VaxigripTetra*
	19,1 120	Pharma Pharma	VISIO MACONE LIVE, MSD Powder for injection/For 8.c use	Vaccing
Physical assesment :	Tota Laksanı (1>30		111000	PIQ LYa
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Past Medical History:

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Treating MD

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Differential Diagnosis:

Treatment Plan :

Follow Up Plan :

