

# Apollo Family Care

**Name:** Tray Thompson

**Date of Birth:** 08/03

**Main Complaint:** Mouth Ulcers

**Allergies:** Local Anesthetics

**Medications:** Methylprednisolone, Meferamic Acid, Cimetidine

**Insurance:** Vitalore

I have been informed of the potential risks, complications and side effects associated with the proposed procedure. I understand that while every effort is made to ensure my safety, unforeseen events can still occur.

Ethan Brooks