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|  |  |  | **GOBIERNO AUTÓNOMO DESCENTRALIZADO DE QUEVEDO** | | | | | | | | | | | | | | | | | | |  |  |
|  |  |  | **DEPARTAMENTO DE DESARROLLO** | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  | **FECHA:** | | | |  | 2021/09/21 | | | |  |
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|  |  |  |  | **DATOS GENERALES DEL MEDICO GENERAL** | | | | | | | | | | | | | | | | |  |  |  |
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|  | **Cédula:** | | | |  |  | 1206774604 | | | |  | **Nombres:** | | | |  | JEANS CARLOSS ALMEIDAS MURILLOS | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | **Teléfono:** | | | |  | 0989876781 | | | | |  | **Email:** | | | |  | jeans@gmail.com | | | | | |  |
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|  |  |  |  | **DATOS GENERALES DEL PACIENTE** | | | | | | | | | | | | | | | | |  |  |  |
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|  | **Cédula:** | | | |  |  | 1206774603 | | | |  | **Nombres:** | | | |  | LESLIE ALEXANDERS SINCHIGUANOS SALTOSS | | | | | |  |
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|  | **Teléfono:** | | | |  | 0989877887 | | | | |  | **Email:** | | | |  | leslies@gmail.com | | | | | |  |
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|  |  |  |  | **RECETA MEDICA** | | | | | | | | | | | | | | | | |  |  |  |
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|  |  |  |  | **MEDICAMENTOS** | | | |  |  |  |  |  |  |  | **INDICACIONES** | | | | | |  |  |  |
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|  |  | PARACETAMOL | | | | | | | |  |  |  |  | CADA 2 HORAS | | | | | | | | |  |
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|  |  | IBUPOFRENO | | | | | | | |  |  |  |  | CADA 5 HORAS | | | | | | | | |  |
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|  |  | JARABA | | | | | | | |  |  |  |  | DESPUES DE MERIENDA | | | | | | | | |  |
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