Order Reports Sign Off



General Hospital Abuja

DOCUMENT TYPE: CONSULTATION NOTE/CLINICAL NOTE

Con	sultant	Dr Troy Larson	Specialty	Dental	Date:	24 April 2016
		-	-			·



Jim Lee

Patient ID 4 Age 5 year Gender Female Marital Status Divorced

Date of Birth 2010-12-28

Complaints

Headache and sore troat

History of Present Complaints

test

Drug History

Test

Past Medical History

Test

Family History

Test

Social History

Test

Diagnosis

Other parasitologically confirmed malaria

Typhoid fever

Order ID:	lab	Ordered By
1	Haematology	Dr James
14	Microbiology	Dr James
15	Microbiology	Dr James
20	Blood Lab	Dr James
30	Microbiology	Dr James