Patient's Examination Record Chart

	27 e Address	Sex MAL NONE	E_1	Marital S	Status .	SINGLE	00	cupation	_NONE	lephone	Mobil	e No.	0926522 Date 01-	23244 13-2025	
18	17	16	15	14	13	12	11	21	22	23	24	25	26	27	28
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Chief Complaint	
Other Findings	

Date	To	oth	Surface	Treatment Rendered	Fee	Paid	Balance
2025-01-	13	17		postiso	1100	1100	
2025-01-	13	18		postiso	1100	1100	
2025-01-	13	18		hingo	1100	1100	
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