

Encounter Form Details

First Name: Harsh

Last Name: Patel

Location: www www

Date of Birth: 08-02-2024 00:00:00

Date of Request: 15-03-2024 14:41:03

Email:

History of Present Illness or Injury: backpain

Medical History: kneepain

Medications: Goli

Allergies: Cucumber

Temp: 98

HR: 67

RR: 67

Blood Pressure Diastolic: 56

Blood Pressure Systolic: 56

O2: 67

Heent:

Pain: **no**

CV:

Chest:

ABD:

Extremities:

Skin:

Neuro:

Other:

Diagnosis:

Treatment Plan:

Medical Dispensed:

Procedures:

FOLLOWUP: