

## **Patient Detail Form!**

## **Basic details**

Reason for visitation - Respiratory Disease Firstname - tani Lastname - gupta Age - 21 Gender - Female Email id- vaishnavigupta292@gmail.com Contact detail - 9926202207

# Symptoms patient is facing

Cough - Yes
Expectoration - Yes
Throat Pain - No
Swallowing - No
Fever- No
Chest Pain - No
Wheeze - No
Breathlessness - Yes

## **Rating**

Rating on the scale of 10 - 7

#### How is the condition

Condition - Gomes and Goes

## **Suffering since when**

since - 10-15\_days

## **Medical History**

High blood pressure - yes Diabetes - yes Cholestrol - undefined

## **Allergy**

Any food/drugs allergy - No,

## **Surgerical History**

Had any surgery in past - no

## **Social History**

Smoke consumption- undefined Alcohol consumptiom - yes Tobacco consumption - undefined

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