

## Dossier Médical

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  "patientInfo": {
    "sexe": "",
    "dateNaissance": "",
    "lieuNaissance": "",
    "adresse": "",
    "telephone": "",
    "email": "",
    "groupeSanguin": "",
    "couvertureSociale": "",
    "numeroSecuriteSociale": "",
    "profession": "",
    "etatCivil": ""
  },
  "antecedentsMedicaux": {
    "personnels": {
      "diabete": false,
      "hta": false,
      "maladiesCardiaques": false,
      "asthme": false,
      "allergies": "",
      "chirurgies": "",
      "medicaments": "",
      "psychiatriques": "",
      "maladiesChronique": ""
    },
    "familiaux": {
      "maladiesHereditaires": ""
    }
  },
  "modeDeVie": {
    "tabac": {
      "actif": false,
      "quantite": ""
    },
    "alcool": {
      "actif": false,
      "frequence": ""
    },
    "activitePhysique": {
      "actif": false,
      "frequence": ""
    },
    "alimentation": ""
  }
}
```