



Encounter Report

First Name: hemangh

Last Name: aptrel

Location:

Date of Birth: 25/04/2006 00:00:00

Date of Request: 17/04/2024 12:05:02

Phone: 8849999677

Email: janvi2683@gmail.com

History of Present Illness or Injury: sdfs

Medical History: fdsfds

Medications: dffdfdsf

Allergies: dsfdfsdfds

Temp: sdfs

HR: dsfdsf

RR: dsfdsf

Blood Pressure Diastolic: fdsfds

Blood Pressure Systolic: fdsfds

O2: fsdf

Heent: dfdsf

Pain: sdfs

CV: sdfdsfs

Chest: dsfs

ABD: fsfs

Extremities: fdsfds

Skin: f

Neuro: fsdf

Other: fsd

Diagnosis: dsfds

Treatment Plan: f

Medical Dispensed: dfsdf

Procedures: sdfs

FollowUp: sdfdsfd