

## Encounter Report

**First Name:** himanshu

**Last Name:** babariya

**Location:**

**Date of Birth:** 27/01/0001 00:00:00

**Date of Request:** 11/04/2024 14:44:47

**Phone:** 08849999677

**Email:** himanshubabariya2683@gmail.com

**History of Present Illness or Injury:** 123

**Medical History:** 123

**Medications:** 3213

**Allergies:** 21

**Temp:** 123

**HR:** 123

**RR:** 123

**Blood Pressure Diastolic:** 123

**Blood Pressure Systolic:** 123

**O2:** 213

**Heent:** 123

**Pain:** 123

**CV:** 123

**Chest:** 123

**ABD:** 123

**Extremities:** 123

**Skin:** 123

**Neuro:** 123

**Other:** 123

**Diagnosis:** 123123

**Treatment Plan:** 3123123

**Medical Dispensed:** 21312312

**Procedures:** 123123123

**FollowUp:** 123213213213