



Encounter Report

First Name: jidkertg

Last Name: jiikdhey

Location: road ways nearazsd

Date of Birth: 28/05/2002 00:00:00

Date of Request: 10/04/2024 10:46:34

Phone: 4566544545

Email: himaidbnn@gmail.com

History of Present Illness or Injury: fdgdfgdf

Medical History: gdfgdf

Medications: dfgdg

Allergies: gfdg

Temp: fdgdfg

HR: gfdgdf

RR: dfgdfg

Blood Pressure Diastolic: dfgfd

Blood Pressure Systolic: dfgfd

O2: gdfgfd

Heent: fgdfgdfg

Pain: gdg

CV: dfgd

Chest: dfgfdg

ABD: dfgdfg

Extremities: gdfgdf

Skin: dfgfd

Neuro: gdfg

Other: dfgdf

Diagnosis: dfgdfg

Treatment Plan: gdfg

Medical Dispensed: gfd

Procedures: dfgdf

FollowUp: dgdfgdfg