



## Encounter Report

**First Name:** mnuihef

**Last Name:** lamsbnyug

**Location:** 123

**Date of Birth:** 28/08/2003 00:00:00

**Date of Request:** 11/04/2024 10:54:21

**Phone:** 8905735950

**Email:** bhanubabariya2683@gmail.com

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

**Medical History:** dasdasd

**Medications:** asdasd

**Allergies:** asd

**Temp:** asdasd

**HR:** asd

**RR:** ad

**Blood Pressure Diastolic:** asdasd

**Blood Pressure Systolic:** asdasd

**O2:** dsadsad

**Heent:** dsad

**Pain:** adsad

**CV:** asdasdad

**Chest:** dasdas

**ABD:** asdasdas

**Extremities:** asdsa

**Skin:** asd

**Neuro:** asdasdasd

**Other:** ad

**Diagnosis:** asdd

**Treatment Plan:** asd

**Medical Dispensed:** asdasd

**Procedures:** asdasd

**FollowUp:** asdasdasd