

Physical Exam Form								
Patient Name	:	Aswathi Vipi	n			Emirates ID		784-2543-5254612-1
File No		1	DOB	:	1991-11-21	Nationality	:	Indian
Gender	:	Female	Doctor's Name		Gyenec Test	Date		2024-02-03

Ht.d	Wt.d	BPd			Pulse s		Thyroids		
Lungs s				Heart ss					
Abdomen s	Extremiti	es s			Other s				
Tatoos	s								
<u>Breasts</u>									
R: NI Abnl Fibrous Cystic ma	s								
L: NI Abnl Fibrous Cystic ma	S								
<u>Pelvic</u>	Pelvic								
External genitalia: NI AbnI Vulvitis Folliculitis ( Bartholins cyst Lice/nits Oth	s								
BUS: NI AbnI Vulvitis Folliculitis ( Bartholins cyst Lice/nits Oth	s								
Vagina: NI AbnI D/C Condyloma Oth	s								
Cervix:  NI Abnl Cervicitis Erosion E Herpes Condyloma Mucopu motion tenderness Other:	s								
Uterus: NI Abnl Enlarged Smoot Ant/post ML R L Other:	s								
Adnexal: R:N1 Abnl Tender mass Des	s								
L:NI AbnI Tender mass Desc	s								
Rectal: NI Abnl Blood Hemorrho Other:	s								

<u>Tests</u>											
Paps	Chlamydia s	GC s			Tzanck s		КОН s		Salines		
HCGs	U/A s	·	CBC s		Acetic Acid		(HPV) s Other		ther s		
ASSESMENT			s								
PLAN: Birth Control Method:			s								
Other Treatment:			s								
Follow Up:			S								
HEALTH EDUCATION:											
▼BSE instruction newstart/renewal/r			restart/BCP		<b>▼</b> BC complications		<b>▼</b> ECP		<b>☑</b> <u>Depo Provera</u>		
<b>▼</b> HIV risk factors	<b>✓</b> STD information	<u>I</u>	<b>✓</b> <u>Safer s</u>		ex c		▼Smoking cessation/alcohol		<b></b> ✓Osteoporosis prevention		
<b>▼</b> <u>Diaphragm instruction</u>	struction			Nutrition/exercise			Domestic Violence		<u>ner</u>		

Sign here, only if all of your questions have been answered to your satisfaction						
PATIENT	DOCTOR					
Patient Name Aswathi Vipin Date 2024-02-03 13:30	Doctor Name Gyenec Test - Gynaecology (S6) Date 2024-02-03 13:30					

