

English Standalone ENAU - GP Letter

To:
Peter Pan
NH Care
New Street

Patient: **Test Automation**
Address: **No 1 Narrow Street**
VIC
3000
MELBOURNE

Gender: **Female**
DOB: **--(47y)**

Work tel.: **68671237**

Assessed by: **USER, clinician(Clinician)**

Assessment Start Time: **05-Jan-2023 18:08**

Assessment End Time:

Presenting Complaint

Asthma symptom:

Assessment Outcome

Selected Urgency: face to face assessment within 6 hours

Selected Service: Urgent care practitioner assessment

Significant History

Asthma symptom

Chest Pain Character?	As previous angina
Throat/chest sounds?	Unable to assess

Chest pain/problem

Chest Pain Character?	As previous angina
Chest Injury?	Unsure
PMH3-Chest pain?	Diabetes
	Acid reflux (GORD)
	Anxiety

Notes

Consultation Notes

Patient declined the treatment/advice offered, and was requested to make contact again if condition failed to resolve [by USER, clinician at 05-Jan-2023 18:09]

Odyssey version: 3.26.0.3 : Clinical version 7.480.