Documentation for creating filling PDF

Step 1:

Create a word document file to make an initial design for the PDF template as shown in the screenshot 1.

| L ghtho Pedi | ouse atrics | |
|--|----------------|--|
| Parental Consent | | |
| Patient's Name | | |
| First Name: | Middle Name: | Last Name: |
| DOB: | | |
| Parent's Name | | |
| First Name: | Middle Name: | Last Name: |
| I authorize the following issues with the doctor of First Name | | fice and to discuss medical treatments and Relationship |

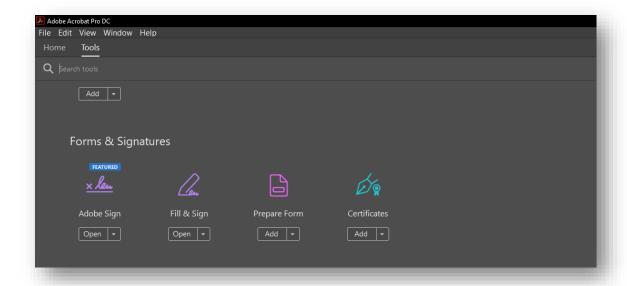
Screenshot 1

Step 2:

Save the document as PDF to be prepared for editing it as a filling PDF files.

Step 3:

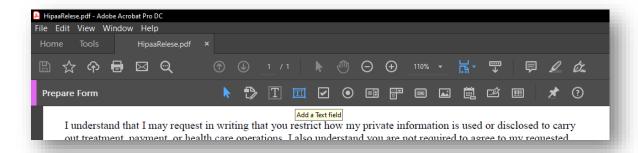
By using Adobe Acrobat DC. There is "Prepare Form" from tools as shown in screenshot.



Screenshot 2

Step 4:

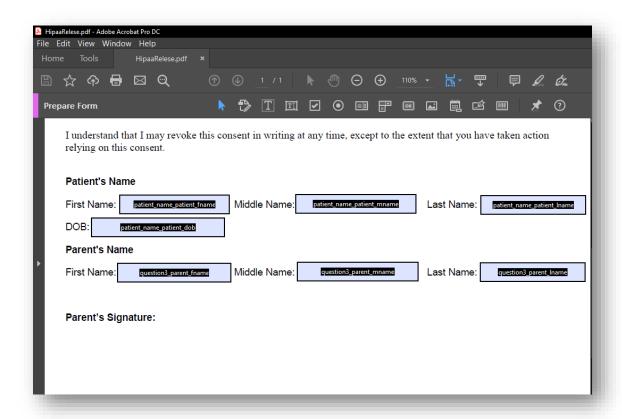
Open the PDF that created in step 2. Start to put text fields in the PDF.



Screenshot 3

Step 5:

Name the text fields in the PDF the same as the returned name from the JSON object as shown in screenshot 4.



Screenshot 4

Step 6:

Save the file.