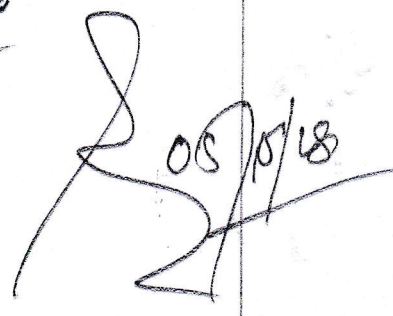


Name : Male		Age : 19 Yrs. 0 Months 0 Days		Day : RGM/ORG1800646609	
Sex :		Ref. From :		Reg. No. : 05-10-2018	
Visit No. : 1		Department :		Reg. Date : RGM/ORG1800646609	
Doctor/Unit Name (DOW) :		Room No. :		Card No. : 05-10-2018	
Visit Date :		Visit No. : 2		Time : 10:24AM	
Department :		Entry No. :		Visit Date :	
Doctor/Unit :		Visit No. : 3		Department :	
Entry No. :		Entry No. :		Doctor/Unit :	
Visit Date :		Visit No. : 4		Time :	
Department :		Entry No. :		Doctor/Unit :	
Doctor/Unit :		Entry No. :		Entry No. :	

Clinical Notes	ADVICE
<p>of (L) knee pain → 6 months.</p>	<p><u>Adv</u></p> <ul style="list-style-type: none"> ✓ MRI of (L) knee. ✓ Quadriceps ex. ✓ Tab. Ultracet 750c x 10 days ✓ Tab. Neprino - 20-40 x 10 days <p>Review in 2 weeks</p> <p style="text-align: right;">  05/10/18 </p>