



#### 40 Mitchell Ave, Binghamton, NY 13903 Phone:(607) 723-1676

Patient Name: TESTFIRST TESTLASTMRN #: 1111Birth Year:Height:Weight:Hypertension: S1

#### **Blood Pressure Averages**

**Blood Pressure Averages::Weekly** 

	Week	Systolic	Diastolic	Pulse	Systolic(n)	Diastolic(n)	Pulse(n)
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**Blood Pressure Averages:: Monthly** 

Month-Year Sys	ystolic Diastolic	Pulse	Systolic(n)	Diastolic(n)	Pulse(n)
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**Blood Pressure Averages:: Quaterly** 

Quarter-Year	Systolic	Diastolic	Pulse	Systolic(n)	Diastolic(n)	Pulse(n)

**Blood Pressure Averages:: Yearly** 

	Year	Systolic	Diastolic	Pulse	Systolic(n)	Diastolic(n)	Pulse(n)
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# **Blood Sugar Averages**

Week	Before breakfast	2 hours before breakfast	Before lunch	2 hours after lunch	Before dinner	2 hours after dinner	Bedtime
2022-06- 02	0(0)	0(0)	97(1)	0(0)	0(0)	0(0)	0(0)

Month- Year	Before breakfast	2 hours before breakfast	Before lunch	2 hours after lunch	Before dinner	2 hours after dinner	Bedtime
06-2022	0(0)	0(0)	97(1)	0(0)	0(0)	0(0)	0(0)

Quarter- Year	Before breakfast	2 hours before breakfast	Before lunch	2 hours after lunch	Before dinner	2 hours after dinner	Bedtime
06-2022	0(0)	0(0)	97(1)	0(0)	0(0)	0(0)	0(0)

Year	Before breakfast	2 hours before breakfast	Before lunch	2 hours after lunch	Before dinner	2 hours after dinner	Bedtime
2022	0(0)	0(0)	97(1)	0(0)	0(0)	0(0)	0(0)

### **Problem List**

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## **All Time Spent**

Month	Time
1	0
2	0
3	0
4	0
5	0
6	0

#### **Chat**

Sender Receiver	Messege	Date&Time
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# **Terms & Conditions Accepted: YES**

### Attention:

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