





Patient: Kia Test (01/06/2026 - 0y), NoResponse  
 Address: Se Kleinsmith Rd Sandy, OR 97055  
 Phone: (301) 995-5111  
 Seen On: 01/28/2026

Seen At: DoseSpotClinic  
 Address: 123 N Main St str 2  
 Brooklyn, MI 49230  
 Phone: (956) 825-0925  
 Fax: (332) 241-0212  
 Provider:

### Chief Complaint

10 Panel Rapid Drug Test  
 Source: Self

### Vitals

Vitals:  
 Weight: 70 kg (154.3 lbs)  
 Height: 9' 9"  
 BMI: 7.90  
 Air Source: Room Air

Set 1:  
 BP: 140/80 mmHg  
 Pulse: 90 bpm  
 Respiratory Rate: 10 per minute  
 Temperature: 91.0 °F  
 Temperature Method: Axillary  
 Oxygen Saturation: 90%

### History of Present Illness

The patient presents today with 10 Panel Rapid Drug Test. Modifying Factors include: Activity makes symptoms better, Air Travel makes symptoms worse, Alcohol makes no change to symptoms. Patient reports Abdominal pain, symptoms started on 01/28/2026. The patient reports severity of 9/10.

### PAST MEDICAL HISTORY

Allergies	Medication
Skin Adhesive (external) - Anaphylaxis	Vitamin A-25000/D-400 - 01/01/2026 Notes for Medication Details text field
Notes: Note for Allergy :- 1	Notes: Note for Medication 2



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### Immunization

Flu  
 - 01/06/2026

Notes: Note for Immunization 3

### Surgical History

Ankle surgery - 01/01/2026

Notes: Note for Surgical History 4

### Medical Condition

Anxiety - Active  
 Acne - Historical

Notes: Note for Medical Conditions 5

### Preventative Med Notes

Last Mammogram - 01/01/2026  
 Last Dental Exam - 01/01/2026

### Social History

Vaping - hjhkjbtbjgtjgbt

Notes: Note for Social History 6

### Family History

Anxiety - Paternal Grandfather

Notes: Note for Family History 7

### Review of Systems

System: Gastrointestinal

Patient Reports: Abdominal pain

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All non-documented systems have been reviewed and are considered negative

### Exam

No examination data entered

### Orders & Procedures

Status: New  
 Procedure: 10 PANEL HAIR DRUG TEST  
 Category: Procedure  
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 Status: In Progress  
 Procedure: 16 Universal Basic Knee Splint  
 Category: Procedure



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Result: O&P Note

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Status: Completed

Procedure: 18 Universal Basic Knee Splint

Category: Procedure

Result: O&P Note

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Status: New

Procedure: IBUPROFEN (PROVIL)

Category: Med Dispense

Details: Details field

No lab requests found

No lab reports found

## **Assessment/Plan**

Diagnosis Name: Vitamin D deficiency, unspecified

Diagnosis Name: Vitamin D deficiency

Explanation: Explanation Text Field

Treatment: Treatment Plan Text Field

## **Prescription**

Written Date: 01/27/2026 07:00 PM

Name: IBUPROFEN (PROVIL) Tablet 200MG

Quantity: 1 - Refills: N/A

Route: - Dose Form: Tablet

Days Supply: 1

Directions: mn

## **Signature**

## **Addendums**

HII Addendum

- Testing Breeze UAT 01/28/2026 08:39 AM



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