



1730-B Mt. Vernon Road
Dunwoody, GA 30338
(770) 353-2001 voice
(770) 353-2010 fax
contactus@dunwoodyurgentcare.com

CONSULTATION FORM

DATE: 02/23/2026

Patient: Kai TEST
Uibel Ave
Egg Harbor Township, NJ 08234
(301) 995-5119
01/01/2001

TO:

FROM: **DUNWOODY URGENT CARE**

DIAGNOSIS/ICD-10 code : D51.9

Reason for referral:

Please fax us a copy of your evaluation at the fax number above. Thank you!



Patient: Kai TEST (01/01/2001 - 25y),
NoResponse
Address: Uibel Ave Egg Harbor Township, NJ
08234
Phone: (301) 995-5119
Seen On: 02/23/2026

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:
Air Source: Room Air

Set 1:

History of Present Illness

No history of present illness data entered

PAST MEDICAL HISTORY

Allergies

No allergies entered

Medication

No medications entered

Immunization

No immunizations entered

Surgical History

No surgical history entered

Medical Condition

No past medical history entered

Preventative Med Notes

No preventativeMedNotes entered

Social History

No social history entered

Family History

No family history entered

Review of Systems

No review of systems data entered



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Exam

No examination data entered

Orders & Procedures

No procedures entered

Lab Requests:

Urine Culture, Routine

Lab reports:

Lab Result: Kai TEST Order to HGDX LabCorp 02/23/2026.pdf
02/23/2026 08:04 AM

Assessment/Plan

Diagnosis Name: Vitamin B12 deficiency anemia, unspecified

External Orders:

Order File: Kai TEST Order to HGDX LabCorp 02/23/2026.pdf
Result: Urine Culture, Routine

Prescription

Written Date: 02/23/2026 08:17 AM

Name: Vitamin A & D Oral Tablet 10000-400 UNIT

Quantity: 1 - Refills: 2

Route: - Dose Form:

Days Supply: 2

Directions: yuyu

Signature

Addendums

TTYTY - Testing Breeze UAT 02/23/2026 08:18 AM



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Orders & Procedures

Status: New

Procedure: ADDED SKIN LESIONS INJECTION

Category: Procedures

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