



VISIT SUMMARY

Provider Name:

Address: 123 N Main St str 2 Brooklyn, MI 49230

Fax: +13322410212

Clinic Phone +19568250925

Number:

Date of Service 01/20/2026

Patient Name: Eliza Patient

Sex: Female

Age: 26

Reason For Visit: Cough
Source: Self

Allergies:	No allergies entered
Current Medications:	No medications entered
Diagnosis:	Acute upper respiratory infection, unspecified
Procedures:	No procedures entered
Prescriptions:	
Discharge Recommendations:	
Drink water and rest - TESTING TREATMENT	