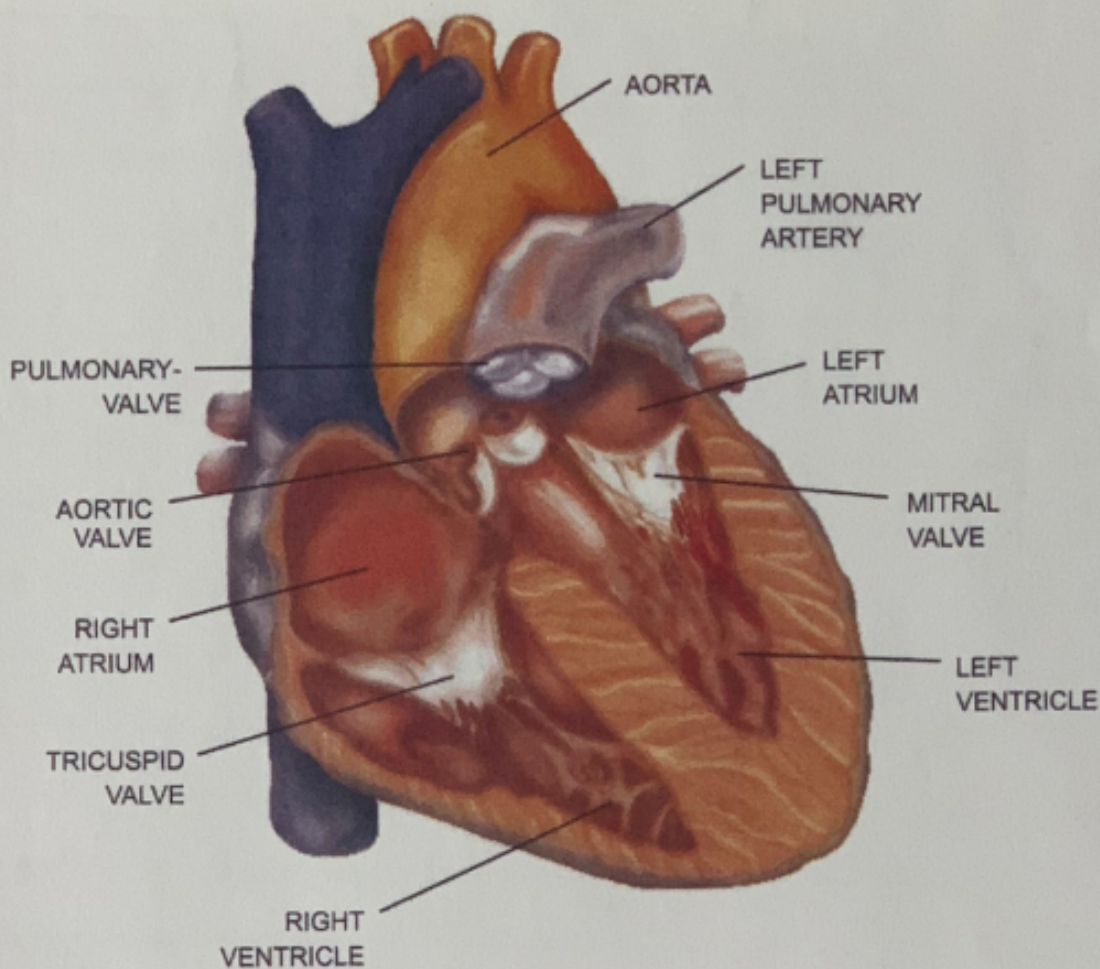


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PATIENT'S NAME: _____

DATE: _____



NOTES: _____
