

HISTORY AND PHYSICAL EXAMINATION OF PATIENT [NAME]

Date: [Insert Date]

Time: [Insert Time]

Nowhere to See Your Face!

Patient Information:

- **Name:** Pat [Last Name], [First Name]
- **Weight:** 60 kg (132 lbs) – Currently on a weight loss program.
- **Height:** 1.75 m (5'9") – Standing at 180 cm.
- **Blood Pressure:** Diastolic 120/80 mmHg, Systolic 130/85 mmHg; Diabetic with Type 2 Diabetes.
- **Cardiovascular Health:** High blood pressure, normal heart rate, normal vital signs.
- **** eye examination:**** No significant problems or changes in the eye.

Diagnosis:

- Blood Pressure Control
- Cardiovascular Health
- Eye Examination Conducted and No Issues Identified

Conclusion:

This visit is focused on monitoring patient care as they work to improve their cardiovascular health, maintain a healthy weight, and assess their overall condition for potential further treatment or guidance from your team.