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ID		NAME		AGE		SEX		HEIGHT		WEIGHT		HAIR		EYES		SKIN		BLOOD		HEALTH		DISEASE		TREATMENT		MEDICATION		SURGERY		DIAGNOSIS		PROGNOSIS		FOLLOWUP		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DATE		TIME		LOCATION		HOSPITAL		DOCTOR		NURSE		PHYSICIAN		SPECIALIST		CONSULTANT		REFERRAL		ADMISSION		DISCHARGE		STATUS		REMARKS		DA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