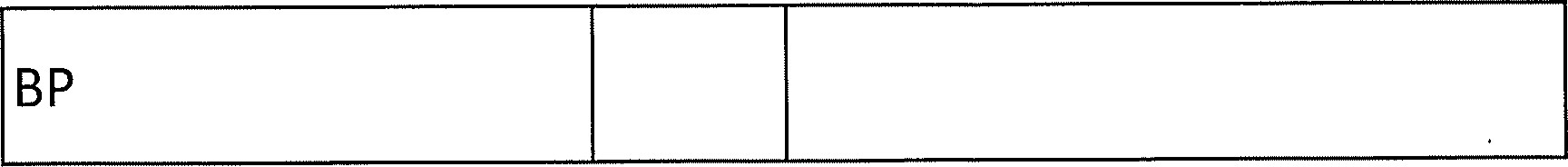
Patient:



|  |  |  |
| --- | --- | --- |
| Height |  |  |
| Weight |  |  |
| Smoking Status |  |  |
| Alcohol consumption |  |  |

Comments