

Follow up Treatments

Date..... Time..... Treatment number.....

Results/Progress.....
.....
.....

Examination.....

Tongue..... Pulse.....

Diagnosis.....

Treatment Principle.....

Treatment.....

Practitioner signature..... Patient signature.....

Date..... Time..... Treatment number.....

Results/Progress.....
.....
.....

Examination.....

Tongue..... Pulse.....

Diagnosis.....

Treatment Principle.....

Treatment.....

Practitioner signature..... Patient signature.....

Date..... Time..... Treatment number.....

Results/Progress.....
.....
.....

Examination.....

Tongue..... Pulse.....

Diagnosis.....

Treatment Principle.....

Treatment.....

Practitioner signature..... Patient signature.....
