McLAREN MEDICAL GROUP COLPOSCOPY REPORT

Date:	Pate: LMP:			Allergies:		
Patient Referred By:			Meds:			
VITALS	ıT.	DD:		D. D.		
HISTORY □ STD □ Chlamydia	☐ Gonorrhea ☐ HPV	_ BP:	1:	P: R:	_	
☐ Periods Days of flow	_	□ Irregular	BIOPSY SITI	<u>=:</u>		
-			COLPOSCO	PY		
Cycle length Medium ☐ Light			□ Normal			
			☐ Abnormal			
□ Plooding				Location		
Bleeding			• 🗆 Biopsy Site			
☐ Intermenstrual						
☐ Postcoital			• 🗆 Mosaicism			
				Punctuation		
☐ Current oral contraceptive use				• 🗆 A W change		
(Number of) sexual partners			• ☐ Irregular vessel			
(Number of) coxual partitors			• ☐ Squamocolumnar site			
IMPRESSION:			☐ Endocervical curettage			
				sformation zone seen		
			 -	sformation zone not seen		
FOLLOW-UP:			Bloo	d Loss: ☐ Yes, estimated blood loss of ☐ No	mL	
Chaperone						
				Patient Name:		
Physician		Date/Time				
MM-164 (2/16)	'		COPY REPORT	Date of Birth:		