

Question 1 – 10. Write NO MORE THAN THREE WORDS for each answer.

Temporary Patient Record Form

Name: Peter Smith

Address: 1

County: 2

Phone: 3

Injury Details

Cause: Sport - Tennis

Type: Sprained 4

Date: 5

Description of Previous Record and Current Situation

The private doctor of the patient suggested treatment with 6.....

But the patient is still unable to 7..... and also getting some pain in his
8..... at night.

Advice from the Doctor

Not use the 9.....

Do regular 10.....at home.