

WARM TEST RESULTS



MEDICAL CENTER:

DATE: **09/05/2022 17:14** PATIENT ID:

PHYSICIAN:

AREA OF EVALUATION: **LEFT FOOT**

AGE: **0**

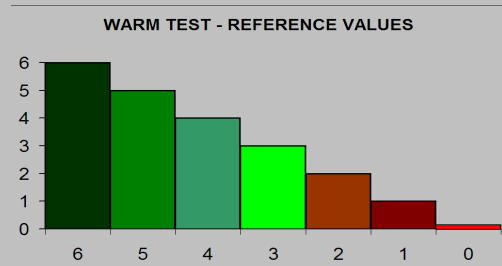
GENDER:

HEIGHT: **0 cm**

WEIGHT: **0**

REFERENCE VALUES (Method of Levels)

- | | |
|--|--|
|  6: Normal High ++ |  2: Abnormal Low |
|  5: Normal High + |  1: Abnormal Moderately |
|  4: Normal Low |  0: Abnormal Severely |
|  3: Normal Borderline | |



PATIENT RESULTS

6: Normal High ++

POINTS

