Noorun M. Khan, M.D
Baasma M. Khan D.O
13011 S. 104th Ave., Suite 203.
Palos Park, IL 60464
Phone: 708-671-1800
Fax: 708-671-1803

Blood Pressure Log

Month: _____ Year:_____

DATE	TIME	READING	HEARTRATE	NOTES
		/	BPM	
		/	BPM	
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Please Email ALL readings to: Nurse@nmkhanmdsc.org