


<div style="border: 1px solid black; padding: 5px; width: fit-content;">  </div>	<h2 style="margin: 0;">Hemoglobin Electrophoresis</h2>	<p>{visit.label}</p>
<p>Date of Collection: <input type="text" value="HEEL:COLLDA"/> / <input type="text" value="HEEL:COLLMO"/> / <input type="text" value="HEEL:COLLYR"/></p> <p style="text-align: center;">Day Month Year</p>		<p>ID: {ID}</p>

1. Was a historical hemoglobin electrophoresis used? (HEEL:HIST) No (HEEL:HIST) Yes

2. A (%):

3. A2 (%):

4. C (%):


5. F (%):

6. S (%):

7. Other (%): **If Other, specify:**

Comments for page:

HEEL:COMM

<input type="button" value="Submit Query"/>	<input type="button" value="Cancel"/>	Form Completion Help	<input type="button" value="Print"/>	<div style="border: 1px solid black; padding: 2px; display: inline-block;">  </div>
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