☐ **Plaza Medical Centre**
700 N Pearl St, Suite N208
Dallas, TX 75201
Tel: (214) 999-9355

**Griego Family Medical Centre** ☐
2701 S Hampton Rd, Suite 101
Dallas, TX 75224
Tel: (214) 330-9221

# REGISTRO DE PRESIÓN SANGUÍNEA

**Nombre de Paciente:** _____ **Fecha:** _____

| Fecha | AM | | PM | | Notas |
|---|---|---|---|---|---|
| | Presión Sanguínea | Pulso | Presión Sanguínea | Pulso | |
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