

# **MEDICAL PLANNER**



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# Family History

## Mother's Side

Name	Relationship	Condition/illness	Age of Onset	Cause of Death	Age of Death

## Father's Side

Name	Relationship	Condition/illness	Age of Onset	Cause of Death	Age of Death

## Siblings

Name	Relationship	Condition/illness	Age of Onset	Cause of Death	Age of Death

