

401 E Jackson St. Tampa, FL 33602

 877-772-0242

 407-264-8686

info@medscapegfe.com

medscapegfe.com

Client: vijay manohar Makamalla (5687)

Nov 15, 2025

1. Appointment Details

First Name:
[vijay manohar](#)

Last Name:
[Makamalla](#)

Gender:
☐ Female ☒ [Male](#)
☐ Non-Binary

Appointment Date:
[11/15/2025](#)

Appointment Time:
[1 pm](#)

Appointment Type:
[Stem Cell Treatment](#)

Session Note

2. [Pt presented for stem cell scalp injections, treatment #2. Verified pt name and DOB. GFE and informed consent reviewed. Pt denied any medical changes or new medications since time of GFE. All questions answered prior to injections. Scalp cleansed with witch hazel prior to injections. Pt denied any pain or discomfort post injection. Post care instructions reviewed.](#)

[Amount used: 4 mL](#)
[Lot: 20B0148](#)
[Ref: PG45OH](#)
[Exp: 3/20/28](#)

[L. Pyrtle, RN](#)