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Client: Jabrayla Moses (5472)			Nov 22, 202
1. Appointment Details			
First Name: Jabrayla	Last Name: Moses	Gender: ☑ Female ☐ Male ☐ Non-Binary	Appointment Date: 11/22/2025
Appointment Time:		Appointment Type:	

Session Note

2. Stem Cell Treatment #2

Pt presented for stem cell scalp injections; Pt identifiers, GFE recommendation, allergies, and consent confirmed. Pt denied any changes to medical history or new medications since time of GFE. All questions answered and procedure explained prior to injections. Pt tolerated procedure well, denied any pain or discomfort post injection, no s/s of adverse reactions noted. Post care instructions reviewed, Pt verbalized understanding.

Amount used: 4 mL

Lot: 20B0148 Ref: PG45OH Exp: 3/20/28

T. LeBoeuf, DNP, MBA-HM, RN