

FINALIZE

RESET



Chronological



CardioRisk Laboratories

At the Heart of Good Health

Date Friday, February 7, 2025

Office Paramount Care Physicians

2:05p EST

Sonographer Ebony Lewis, RVT

Check box if unable to apply initials of the office representative due to limited access to WiFi signal.

Appt Slots

hh:mm

0:15

Enter Start Time Here

8:30

Full Name		Representative of Paramount Care Physicians		2/7/2025 Date Signed		Ebony Lewis, RVT CardioRisk Laboratories Vascular Sonographer, Certified in CIMT										
Initial Here		Donna Reed		Total number of exams performed		15										
# of Patients 18		18		Totals		0% of AAA patients NPO										
#	Scheduled Appointment	Patient ID (LAST, FIRST, MM-DD-YYM/F)	Ordered Exam (s)	Provider	PRIOR	CIMT	DOPPLER	AAA	? NPO	FIMT	ABI	Comments	CX	Comp	TDS	
1	8:30 AM	SWEITZER, KARL_07-15-61M	AAA	Scott I. Bell, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NPO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2	8:45 AM	MILEWSKY, GREGORY_08-30-65M	ABI	Elizabeth Anderson Halabuk, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3	9:00 AM	FRIEDL, BETTY_10-08-42F	AAA	Nishant S. Magar, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NPO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4	9:15 AM	GREENOUGH, SUSAN_06-12-57M	ABI	Nishant S. Magar, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5	9:30 AM	FUCHS, STEVEN_12-29-69M	AAA	Nishant S. Magar, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NPO LIMITED EXAM	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
6	9:45 AM	GOODWINSLATER, ANGELA_05-13-67F	AAA	Elizabeth Anderson Halabuk, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NPO LIMITED EXAM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7	10:00 AM	LAGANA, DIANE_09-14-69	ABI		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8	10:15 AM	HARRAS, EDGAR_04-18-44M	ABI	Nishant S. Magar, MD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9	10:30 AM	NEYLAND, JOY_07-10-50F	ABI	Elizabeth Anderson Halabuk, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10	10:45 AM	MARTIN, PETER_11-23-51M	ABI	Nishant S. Magar, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11	11:00 AM	CARMAN, JAMES_09-30-52M	ABI	Nishant S. Magar, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12	11:15 AM	RECTOR, CHARLES_07-19-61M	CIMT	Scott I. Bell, MD	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	POSSIBLE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13	11:30 AM	BURMEISTER, STEVEN_12-13-59M	CIMT	Scott I. Bell, MD	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14	11:45 AM	BEFFEL, SUSAN_02-27-48F	CIMT	Elizabeth Anderson Halabuk, MD	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15	12:00 PM	CARRIERE, MEGAN_07-22-77F	CIMT	Elizabeth Anderson Halabuk, MD	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16	12:15 PM	OUTTARAC, MALICA_10-21-72F	CIMT	Scott I. Bell, MD	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17	12:30 PM	BERGER, LAURA_03-21-67F	ABI	Elizabeth Anderson Halabuk, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18	12:45 PM	HEWITT, AMOS_12-25-52M	CIMT	Nishant S. Magar, MD	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
19	1:00 PM				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20	1:15 PM				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21	1:30 PM				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22	1:45 PM				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23	2:00 PM				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24	2:15 PM				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25	2:30 PM				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26	2:45 PM				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27	3:00 PM				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28	3:15 PM				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29	3:30 PM				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
30	3:45 PM				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31	4:00 PM				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32	4:15 PM				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33	4:30 PM				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
34	4:45 PM				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
35	5:00 PM				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
36	5:15 PM				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
37	5:30 PM				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Friday, February 7, 2025**  
**Paramount Care Physicians**  
**Ebony Lewis, RVT**

This page is for sonographers to have a way to share any issues that impact the day that should be addressed by CardioRisk. Please make any comments or suggestions here when issues arise so they can be addressed by the appropriate team member.

This page is an internal communication and WILL NOT be shared with the providers office.

**SCANS PERFORMED 15**

[Back To Log Sheet](#)

SCHEDULING	
TRAVEL	
EQUIPMENT	
SUGGESTIONS	
OTHER	



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RESET



Alphabetical



CardioRisk Laboratories  
At the Heart of Good Health

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Office Paramount Care Physicians

Sonographer Ebony Lewis, RVT

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Enter Start Time Here

8:30

Representative of Paramount Care Physicians				2/7/2025 Date Signed		<i> Ebony Lewis, RVT </i> CardioRisk Laboratories Vascular Sonographer, Certified in CIMT										
Full Name <b> Donna Reed </b>				Total number of exams performed 15		0% of AAA patients NPO										
# of Patients 18				Totals		3	6	0	4	3	0	5				
#	Scheduled Appointment	Patient ID (LAST, FIRST __MM-DD-YYM/F)	Ordered Exam (s)	Provider	PRIOR	CIMT	DOPPLER	AAA	? NPO	FIMT	ABI	Comments	CX	Comp	TDS	
14		BEFFEL,SUSAN__02-27-48F	CIMT	Elizabeth Anderson Halabuk, MD	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17		BERGER,LAURA__03-21-67F	ABI	Elizabeth Anderson Halabuk, MD	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>		<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13		BURMEISTER,STEVEN__12-13-59M	CIMT	Scott I. Bell,MD	<input type="checkbox"/>	<input checked="" type="checkbox"/>							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11		CARMAN,JAMES__09-30-52M	ABI	Nishant S. Magar,MD	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>		<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15		CARRIERE,MEGAN__07-22-77F	CIMT	Elizabeth Anderson Halabuk, MD	<input type="checkbox"/>	<input checked="" type="checkbox"/>							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3		FRIEDL,BETTY__10-08-42F	AAA	Nishant S. Magar,MD	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>			NPO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5		FUCHS,STEVEN__12-29-69M	AAA	Nishant S. Magar,MD	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>			NPO LIMITED EXAM	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
6		GOODWINSLATER,ANGELA__05-13-67F	AAA	Elizabeth Anderson Halabuk, MD	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>			NPO LIMITED EXAM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4		<del>GREENOUGH,SUSAN__06-12-57M</del>	<del>ABI</del>	<del>Nishant S. Magar,MD</del>									<input checked="" type="checkbox"/>			
8		HARRAS,EDGAR__04-18-44M	ABI	Nishant S. Magar,MD	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>		<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18		HEWITT,AMOS__12-25-52M	CIMT	Nishant S. Magar,MD	<input type="checkbox"/>	<input checked="" type="checkbox"/>							<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
7		<del>LAGANA,DIANE__09-14-69</del>	<del>ABI</del>										<input checked="" type="checkbox"/>			
10		MARTIN,PETER__11-23-51M	ABI	Nishant S. Magar,MD	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>		<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2		<del>MILEWSKY,GREGORY__08-30-65M</del>	<del>ABI</del>	<del>Elizabeth Anderson Halabuk, MD</del>									<input checked="" type="checkbox"/>			
9		NEYLAND,JOY__07-10-50F	ABI	Elizabeth Anderson Halabuk, MD	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>		<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16		OUTTARAC,MALICA__10-21-72F	CIMT	Scott I. Bell,MD	<input type="checkbox"/>	<input checked="" type="checkbox"/>							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12		RECTOR,CHARLES__07-19-61M	CIMT	Scott I. Bell,MD	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>						POSSIBLE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
1		SWEITZER,KARL__07-15-61M	AAA	Scott I. Bell,MD	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>			NPO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
30					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
34					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
35					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
36					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
37					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	