

Date

26/08/2018

Consulting Physician

Dr. Guru Brahma

Consultation Id

9

Issue

das

Patient Name

hemachandsai
saddasgdiasgdiasgdias
iads Atluri

Symptoms

NA

Age

30

Sex

M

ID	Medicine Name	Timings	Food
1	NA	NA	NA

ID	Diagonistic Test Name
1	NA

Instructions to patient	NA
-------------------------	----

Authorised Signature