

Patient :

<u>AadharID</u>	Name	Address	Age	Primary Physician
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Doctor :

<u>AadharID</u>	Name	Specialty	YearsOfExperience
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Pharma_Company:

<u>Name</u>	Phone_No.
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Pharmacy:

<u>Name</u>	Phone	Address
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Treatment:

<u>Patient</u>	<u>Doctor</u>
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Drug:

<u>Company</u>	<u>TradeName</u>	Formula
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Contract :

<u>PharmaCompany</u>	<u>Pharmacy</u>	StartDate	EndDate	Content	Supervisor
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Pharmacy_Sales :

<u>Company</u>	<u>Tradenname</u>	<u>Pharmacy</u>	Price
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Prescription :

<u>Patient</u>	<u>Date</u>	Doctor
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Prescription_Drugs:

<u>Patient</u>	<u>Date</u>	<u>Company</u>	<u>TradeName</u>	City
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