Dr Name: Name Dr Depart: Department Date: 02/04/24		Prescription ID: Per Number Patient Name: Enter patient name Patient Age: Enter patient age				
Medicine Name Count		Medicine Usage		Price		
a1 cream 100 gm		soothing agent		45.00	count	(II)
abilaxine 10mg 5 adult supp.		laxative		4.00	count	(I)
abilaxine 5mg 5 infantile supp.		laxative		3.20	count	(B)
abilify 10 mg 10 discmelt orally dis.tabs.		psychiatric.antipsychotics		190.00	count	(B)