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| **PATIENT INFORMATION** |  |
| PATIENT ID: 216344 |
| FIRST NAME: indervir | LAST NAME: singh |
| DATE OF BIRTH: 20/9/2005 |
| PHONE: 9342342334 |
| ADDRESS: indervir@gmail.com |
| CITY: khanna | STATE: punjab | ZIP: 141401 |
| ALLERGIES: |

|  |  |
| --- | --- |
| **PRESCRIPTION INFORMATION** |  |
| DRUG: CHOLESTEROL 2%/LOVASTATIN 2% OINTMENT TOP MOVER |
| QUANTITY: 30GM |
| REFILLS: PRN |
| INSTRUCTIONS/SIG: Indervir ksoose |
| COMMENTS: |

|  |  |
| --- | --- |
| **PRESCRIBER** |  |
| NAME: Utkarsh Singh | TEL: 6283599912 | NPI: Utkarsh783 |
| ADDRESS: Utkarsh7837 Utkarsh7837 |
| SIGNATURE: Utkarsh Singh | DATE: 2023-10-31 06:30:17 |

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