			Patient Pr	escription	1			
Prescription No		1		Prescription Date		3/10/2022 5:35:17 PM		
Doctor Information				_		•		
Doctor Name		Mr Roy		Dr Registration No		1088	1088	
Dr Qualification		Phd.		Dr Contact No		99889	9988998800	
Dr Email		kiran@gmail.com		Dr City		Andar	Andaman & Nicobar Islands	
Dr Address		Address						
Patient Information								
Corporate Name		Welnext						
Patient Name		Rajesh Kumar		Patient Age		32	32	
Patient Contact No		8899009988		Patient Email		rajesh@welnext.com		
Patient City		Bangalore		Patient Address		Bangalore Park, Bangalore		
Drug Information								
Medicine Name Medic		cine Type Medicine Ses		sion InTake Method			Remarks	
Testing Table		et Morning,After		noon,Evening After Meal			Testing	
Symptoms		Test Details		Prescription Details		Diet To Be Follow		
Symptoms update 2nd		Test update by Doctor		Prescription update		Test3	Test3	
Next Visit Date		3/22/2022 12:00:00 AN	Л			•		
					Doctor Signature			
						W	elleazŸ	