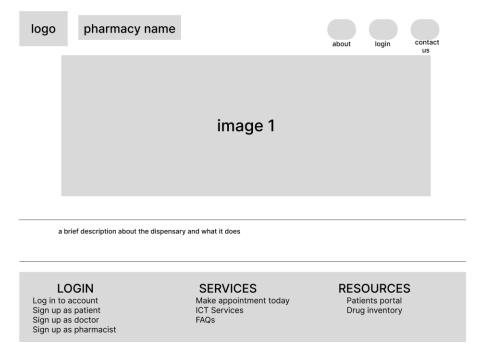
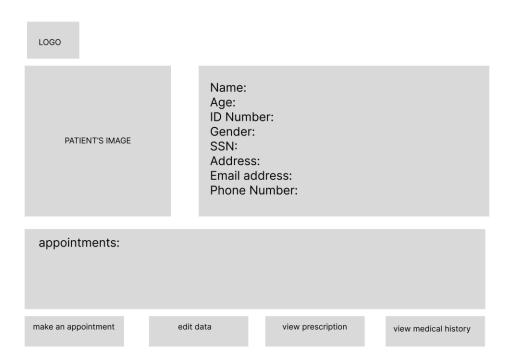
HOMEPAGE



PATIENT INTERFACE



DOCTOR INTERFACE

LOGO

doctor image

Name: Age:

Years of experience: Specialty:

Appointments:						
date	time	patient	patient info			
			view			
			view			
			view			

make new prescription

update medical history

PATIENTS INFO

LOGO view medical history Name: Age: ID Number: Gender: PATIENT'S IMAGE SSN: Address: Email address: Phone Number:

prescription							
date	name	formula	quantity	frequency			

MEDICAL HISTORY

LC	OGO						reque	est update	
PAT	IENT'S	S IMAGE		Name: Age: ID Number: Gender: SSN: Address: Email address: Phone Number:					
РНА	RM.	acist in	IFO						
	LOG	0				go to pha	rmacy info		
				Name:					
IMAGE		Age:							
				ID Number	er:				
	upo	date info		SSN:					
	•			Address:					
		Email add	Email address:						
		Job title:	Job title:						

Years of experience:

PHARMACY INFO

view new prescriptions

view pharmacy inventory

request medication information

dispense medication

SUPERVISOR INFO

LOGO	see contracts info		see drug info
	Name:		
IMAGE	Age:		
	ID Number:		
	Gender:		
	SSN:		
update info	Address:		
	Email address:		
	Job title:		
	Years of experienc	e:	

CONTRACT INFO

LOGO

pharmaceutical company	date	duration	text
			view

request contract update

DRUG INFO

request drug info update

name	formula	manufacturer	date of manufacture	expiry date	quantity	price