



## **PRESCRIPTION PAD**

Patient Name: **Patient**

Patient MRN: **DMS00203**

Date of Birth: **2021-10-23**

Diagnosis: \_\_\_\_\_

Sex: **Female**

Allergies: **No**

# R<sub>x</sub>

	Medication Name	Medication Dose	Symtoms	Duration
1	Medication 1	Medication 2	Fevr	1

Physician Name: **Mr.doctor**

MDCN: **!\$ecret!**

Date: **10/22/2021**