

E-Prescription MedxBay Your Trusted Health Partner

Heart Specialist hirushit8@gmail.com

Patient Name: Hirushit

Patient Age: 21

Consultation Date: 2024-07-15 Consultation Time: 11:30 - 11:45

Medicines

• Name: Medicine 1

- Dosage: 3 pills

- Before Food: Yes

- After Food: No

- Timing: Morning: Yes, Afternoon: No, Night: No

• Name: Medicine 2

- Dosage: 50 mg

- Before Food: Yes

- After Food: No

- Timing: Morning: Yes, Afternoon: No, Night: No

Name: Medicine 3

- Dosage: 20 ml

- Before Food: No

- After Food: Yes

- Timing: Morning: Yes, Afternoon: No, Night: Yes

Name: Medicine 4

- Dosage: 30 mg

- Before Food: Yes

- After Food: Yes

- Timing: Morning: Yes, Afternoon: Yes, Night: Yes



E-Prescription MedxBay Your Trusted Health Partner

Hirushit Heart Specialist hirushit8@gmail.com

• Name: Medicne 5

- Dosage: 1 pill

- Before Food: No

- After Food: Yes

- Timing: Morning: Yes, Afternoon: No, Night: Yes

Doctor's Signature

Hirushit

