

Patient Name: Hirushit

Patient Age: 34

Consultation Date: 2024-08-03

Consultation Time: 20:40 - 20:45

Medicines

• Name: test.no : 6

- Dosage: 3
- Before Food: No
- After Food: Yes
- Timing: Morning: Yes, Afternoon: Yes, Night: Yes

Doctor's Signature

Hirus

MedxBay