**Barcode:** Date: 17/08/2025

Patient's Name: patientOneDependent DependentOne

Age: 64 Gender: Male

**OPD Registration:** 

Chief Complaints: 1. Test (10 days)

Vital Signs: Pulse (per min): 200

Respiratory rate (per min): 100 Blood pressure (mm Hg): 100

Temperature: 100

Local examination: gfhgfh

Physical Examination1. Central Nervous System (CNS): 100, 2. Gastro-intestitinal system (GI): 200

## Prescription (Rx):

| Sr. | Form | Drug    | Strength | Freq          | Dur   | Instr |
|-----|------|---------|----------|---------------|-------|-------|
| 1   |      | Quinine |          | Every morning | 1 day |       |

Other Instructions: jhkjhk

**Next Follow-up:** 20/08/2025

**Physician's Signature and Stamp**