



MEDICAL PRESCRIPTION

Patient Details

Name:	Mihir Sharma	Email:	mihirdhami745@gmail.com
Age:	21	Contact:	9726462089
Gender:	Male	Address:	AM Naik Hostel, VV Nagar, Anand yyienerr, Gujarat, 388120
Date of Birth:	6/13/2003		

Vital Signs

temperature:	39	blood Pressure:	140	weight:	74
heart Rate:	80	oxygen Level:	20	respiratory Rate:	16

Diagnostic Reports

Department:	Generic
Report Type:	Outside

Prescribed Medications

Medication	Frequency	Duration
Dolo-650	3 times/day	5 days



Doctor Recommendations

Get adequate rest, 7-8 hours of sleep
Take medications as prescribed

OFFICIAL STAMP

Zydus

Verified 4/11/2025

Doctor's Signature

Darshan