## **Mock Medical Record (PDF)**

Prescription No.

0004

Prescription Date August 13, 2024

**Patient Information** 

Name

John Doe

Phone Number

(917) 811-1113

Email

johndoe@doesntexist.com

Address

917 Some Street View

Huntingtown, New York, 11222

Allergies

Allergy 1, Allergy 2, Allergy 3 (critical)

Thursday, August 1, 2002 Gender

Date of Birth

Male

Age

24

Physician Name

Dr. Florence Nightingale

Physician Signature

August 6, 2024

Physician Phone Number

(112) 244-4222

Physician Email

ladywithlamp@history.com