

# PRESCRIPTION

**PATIENT DETAILS:**

Patient Name: Vanshika

Age: 17

Sex:

Diagnosis: tooth whitneing

**ASSIGN DOCTOR:**

Name: dr-michael-smith

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**MEDICATION**

1) colgate

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**NEXT VISIT**

Date: 24/10/2025

www.dentocare+.com  
9607870553  
dentocareplus@gmail.com

# INVOICE

Invoice ID: INV-1760617448217

Date: 2025-10-16

**PATIENT DETAILS:**

Patient Name: Vanshika

Age: 17

Email: snehjondhalekar8@gmail.com

Mobile: 9607870553

Sex:

**ASSIGN DOCTOR:**

Name: dr-michael-smith

SERVICE	PRICE	TOTAL
tooth whitening	11500.00	11500.00
		SUB TOTAL: : 11500.00
		DISCOUNT(10%): : 1150.00
		<b>GRAND TOTAL: : 11350.00</b>

www.denlocarer.com  
9607870953  
dentocareplus@gmail.com