PRESCRIBOMETER

CITY HOSPITAL

Dr. Dr. Aayushi Sutaria

Dietitian

Email: aayushisutaria017@gmail.com

Contact: 9012345786

Patient Name :Hum sab patient hai

Diagnosed with:

DRUG	DURATION	STRENGTH	ROUTE	FORM	DOSAGE	FREQUENCY
aspirin	for week	200mg	NA	NA	1	times
aspirin	3 weeks	400mg	NA	NA	NA	NA

Drk