Medication Report

| Patient Name | DOB | Medication | Status | Prescribed | Start Taking | End Taking |
|---------------|------------|-------------|-------------------|---------------------|--------------|------------|
| Mr. test test | 05-07-2021 | Drug name 4 | Faxed to Pharmacy | 14-07-2021 04:37:01 | 14-07-2021 | 14-07-2021 |