



**THE  
ROTUNDA  
HOSPITAL**  
DUBLIN

Patient Name SHARON ZZZTEST

Birthdate: 10/10/1987

Age: 34 years

Sex: Female

Hospital Number/MRN: H04077171

Weight:

Date of Weight:

Patient Address:

2 THE BANKS, MARTINS AVENUE, CRUMLIN,DUBLIN 8, 3K YH12

Consultant:

Ward/Department:

Known Allergies: Codeine: vomiting. Vomiting. Rash. Fish.

Prescription Details:

Date Written/Issued: 17/02/2022

Rx: Aspirin tablet

Order ID: 264210975

75 mg oral ONCE a day for 1 month