

PRESCRIPTION

PATIENT DETAILS

Patient Name: Mahi Singh

Date: 19/4/2025

PRESCRIBED MEDICINES

Medicine	Dosage	Frequency	Duration
Paracetamol	500mg	Twice daily	7 days

Instructions: After Meals

Doctor's Signature: _____

This is a digital prescription generated by SEHAT Healthcare System.

For any queries, please contact your healthcare provider.