

# Patient Details

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## Basic Details

**Name:** Sneha Savla

**Password:** SnehaSavla

**Phone No:** 9876543212

**Email:** sneha.savla@example.com

**Date Of Birth:** July 22, 1968

**Sex:** Female

**Department:** Rehabilitation, Psychiatry, Audiology

**Age:** 56

**Qualifications:** M.B.B.S. (Bachelor of Medicine, Bachelor of Surgery), M.D. (Doctor of Medicine), Certification in Clinical Audiology

**Preferred Language1:** Hindi

**Preferred Language2:** English

**Preferred Language3:** Marathi

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