

Carebridge

123 Medical Street, Healthcare City
Phone: (123) 456-7890 | Email: info@healthcareclinic.com
License No: MED-2024-001

MEDICAL PRESCRIPTION

Prescription ID: RX-9RH240QH

Patient Information

Name: Jhon

Date of Birth: N/A

Patient ID: 4

Date: December 28, 2025

Prescribing Doctor

Name: Dr. Stephen

License No: MED-12345

Specialty: General Medicine

Diagnosis

paining

Prescribed Medications

Medication	Dosage	Frequency	Duration
Panadol 500mg	As directed	Daily	7 days

Instructions & Notes

htrtrtnjy

Additional Notes:

jytynjyd

Follow-up

Follow-up Date: December 31, 2025

Purpose: Review progress and adjust treatment if necessary

?? Important: This prescription is valid for 30 days from issue date. Take medications as prescribed. Do not share medications with others. Contact your doctor immediately if you experience any adverse reactions.

Dr. Stephen

Medical License: MED-12345

Date: December 28, 2025

This is an electronically generated prescription. No physical signature required.

For verification: Scan QR code or visit our website with Prescription ID: RX-9RH240QH

