



Prescription

Emr No:

Patient Name: Priyanka Patel

Age :

Diagnosis :

Date :

No	Medicine	Dosage	Unit	Route	Frequency	Duration
1	Tuser	mcg		orql	- -	week
2	aaa	1		oral	- -	1 week
3	aaa	3		iv	- -	3 days
4	aaa	1		oral	- -	1 week
5	aaa	3		iv	- -	3 days
6	aaa	1		oral	- -	1 week
7	aaa	3		iv	- -	3 days
8	ALGAPHAN,ABILIFY	Mg		oral	- -	week
9	Tuser,ALGAPHAN	Mg		oral	- -	week

No	Medicine	Dosage	Unit	Route	Frequency	Duration
10	Tuser,ALGAPHAN	Mg		oral	- -	week
11	Tuser,ALGAPHAN	Mg		oral	- -	week
12	Tuser,ALGAPHAN	Mg		oral	- -	week
13	Tuser	Mg		oral	- -	week
14	Tuser	Mg		oral	- -	week
15	Tuser	Mg		oral	- -	week
16	Tuser	Mg		oral	- -	week
17	Tuser	Mg		oral	- -	week
18	Tuser	Mg		oral	- -	week
19	Tuser	Mg		oral	- -	week
20	Tuser	Mg		oral	- -	week

Note to Pharmacy :

Dr. Name :

Doctor's Sign : _____