

CONTACTS

atributes

Contact Id

personal_Nr

phone_Nr

address Id

work_Place

ADDRESSES

street_Name

building_Nr appartment_Nr city/town country Zip_Code

address_Id

e-mail

MEDICINES	
atributes	item_ld
	name
	type
	dosage
	recipes_serial_Nr
	usage_method
	contrindications
	sales_Date/Time

RECIPES series_Nr Issue_Date

Expiry_Date

Recipe_Type

comment

status

Diagnosis_Code

patient_Personal_Nr

doctor_Personal_Nr

certificate_Nr
issue_date
expiry_date
doctor_Personal_Nr
specialty