

## **Patient Information**

Name: Sarah Smith

Gender: Female

Date of Birth: January 1, 2001

Phone Number: (811)123-567

Email: tester@test.com

## **Doctor Details**

Doctor: Dr. Michael Brown

Medical License: 71645-2

Phone Number: (283)323-2794

Email: M.Brown@stayhealthy.com

Date 25/11/2024

## Prescription:

Medication: Amoxicillin

Dosage: 500mg

Directions: Take 1 capsule threetimes a say with meals

Quantity: 30 Capsules