

User

SSN	FirstName	LastName	Address	ZipCode	City	Country
123-45-6789	John	Doe	123 Elm St	10001	New York	USA
987-65-4321	Emily	Johnson	456 Maple St	10002	New York	USA
456-78-9012	Sarah	Davis	789 Oak St	10003	Los Angeles	USA
321-54-9876	Michael	Brown	321 Pine St	10004	Chicago	USA

654-32-1098	Jessica	Smith	654 Cedar St	10005	Miami	USA
-------------	---------	-------	--------------	-------	-------	-----

Prescription

PrescriptionNumber	Date	Name	Description	BySSN	ForSSN	RequestID
PSN001	01/10/2024	Amoxicillin	Antibiotic for infection. 2 tablets daily	123-45-6789	987-65-4321	RQID101
PSN002	02/10/2024	Ibuprofen	Pain relief medication. 1 tablet daily	321-54-9876	654-32-1098	RQID102
PSN003	03/10/2024	Metformin	Diabetes management. 5 tablets after 8 hours	123-45-6789	456-78-9012	RQID103
PSN004	04/10/2024	Lisinopril	Blood pressure medication. 2 tablets in the morning	321-54-9876	654-32-1098	RQID104
PSN005	05/10/2024	Atorvastatin	Cholesterol management. 3 tablets at night	123-45-6789	987-65-4321	RQID105

Request

RequestID	Name	Date	TestID
RQID101	Blood Test	01/10/2024	TID001
RQID102	Urinalysis	02/10/2024	TID002
RQID103	Glucose Test	03/10/2024	TID003

RQID104	Cholesterol Screening	04/10/2024	TID004
RQID105	Blood Pressure Check	05/10/2024	TID005

Test

TestID	Label	Result	Date
TID001	Complete Blood	Normal	02/10/2024
TID002	Urinalysis	Clear	03/10/2024
TID003	Fasting Glucose	90 mg/dL	04/10/2024
TID004	Cholesterol Lev	180 mg/dL	05/10/2024
TID005	Systolic/Diastol	120/80 mmHg	06/10/2024

Identity
Doctor
Patient
Patient
Doctor

Patient

