

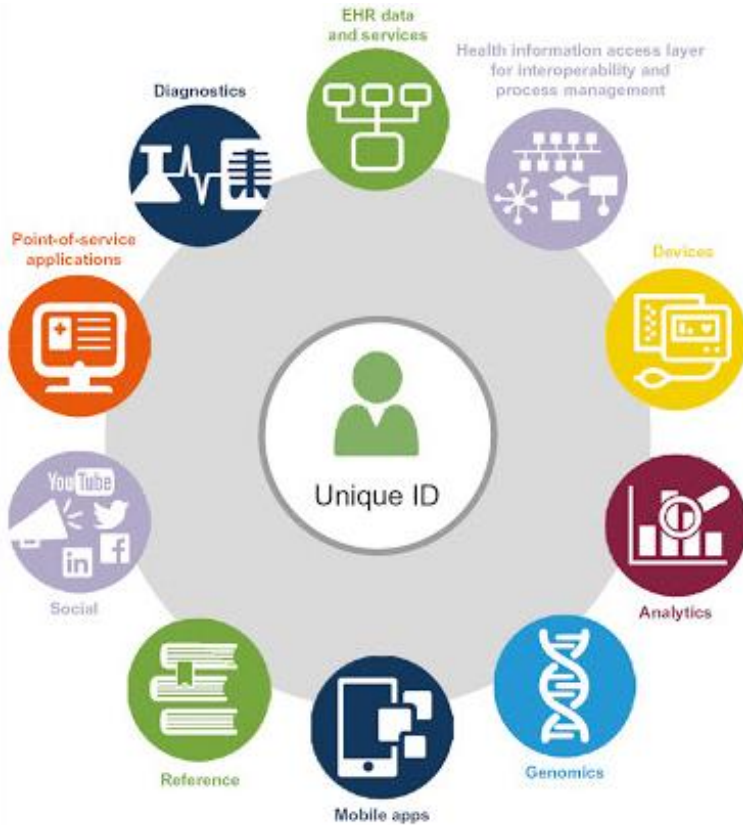
Select Your Role



Patient



Doctor



Sign in using



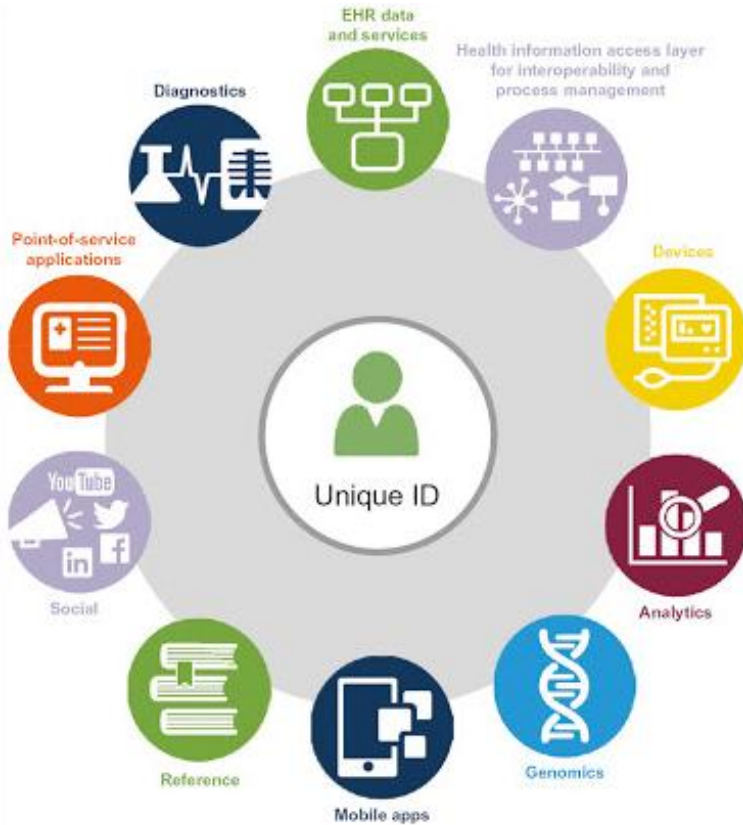
OR

User ID /Email ID

Password

Sign in

[Forget password](#)



Sign up using



OR

Email ID *

Mobile No *

Password *

Retype
Password *

Sign Up



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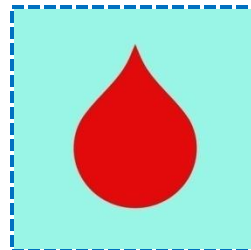
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Dr. Ajinkya 28th Feb

Dr. Nilesh 30 Jan

Dr. Omkar 1 Jan

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State



District



City



Locality



Specialty



Rating



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Doctor Login



**Enter Patient's
ID**

Go



Enter
OTP

Go

Important Instructions

1. OTP sent on patient's registered mobile number.
2. OTP Expire in 60 Seconds.
3. Patients account automatically logout after 10 Minutes.



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Sr.	Date	Disease	Doctor	Remark By Doctor	Prescription
					<u>VIEW</u>
					<u>VIEW</u>
					<u>VIEW</u>
					<u>VIEW</u>
					<u>VIEW</u>

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Letter Head Content

Rx

Disease

Remark

Blood Pressure

Fever

Sugar

Sr.	Medicine	Dose	When	Additional
		M <input type="radio"/> A <input type="radio"/> N <input type="radio"/>	Before <input type="radio"/> After <input type="radio"/>	

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