

Patient info											
Name: vasudevareddy			Mobile: 8500050944		Blood group: O-			M	Marital status: Single		
DOB: 2018-06-13			Age: 20		Address: test, hyd, ts, india, 516172						
Prescription Details											
Medicine Name	Dosage	Usage	Usage Instructions	Substitute allowed?		QTY	Amou	ınt	Total Amount	Modify medicine Reason	
crosine	100ml	6 hours	s fg	Yes		20	20		400		
crosine	100ml	4 hours	s opiop	Yes		10	15		150		
Prescription Billing Mode					Cash Payment						

localhost	1	Jun-13-2018