

Prescription Billing Mode

vaasu Hospital

test, test, kadapa, Madhya Pradesh, indiA, 516172 8500050944 vaasuhospital@gmail.com

			P	atient	t info						
Name: vasudevareddy		Мо	Mobile: 6768876867			Blood group: AB-			Marital status: Single		
DOB: 2018-0	6-01	Ago	e: 20		Address	s: 78, hyd	lerabad, t	ss, t6s, 500072			
		·	Prescription	Deta	ils						
Medicine Name	Dosage	Usage	Usage Instructions		bstitute lowed?	QTY	Amou	nt	Total Amount	Modify medicine Reason	
parasitmall	12 mg	4 hours		No		5	15		75		
like that	20 mg	6 hours	te	Yes	S	2	12		24		
crosin	300mg	4 hours		Yes	S	6	13		78		

Cash Payment

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