Phone Number: 1234567890

Dr. VYSHAKH PSM.B.B.S , M.D , M.S
GYNAECOLOGY

Reg No: 2058

Patient ID : KL100
Patient Name : Anu PR
Age : 23 Years

Blood Group:

MEDICAL HISTORY

Hypertension : Yes /

Current

Diabetes: No

Cancer: No

VITALS:













75 Kg 150 /120 mmHg

PRESCRIPTION:

DRUGS	DOSAGE	FREQUENCY	DURATION
1. test	120 mL	Morning:1, Noon:1, Night:1	1 Days
2. test2	150 mg	Morning:3, Noon:3, Night:3	3 Days
3. test3	250 mg	Morning:2, Noon:2, Night:2	1 Days
4. test4	250 i.u.	Morning:1, Noon:1, Night:1	1 Week

SYMPTOMS SYNDORMES

1) Abdominal Cramps (colic)

sfsd

2) Abdominal Pain Acute

DISEASES

ADDITIONAL COMMENTS

sdfsd

1 Miliary tuberculosis

TREATMENT FOLLOWUP DATE

