Prescription

Subtitle

| Key | Value |
|-----------------------|----------------|
| name | ravikant |
| age | 26 |
| gender | female |
| complaints | Test complaint |
| allergiesAndDiagnosis | test alergies |

Title

Subtitle

| Name | Dosage | Duration | Quantity | ConsumptionTime |
|-------------|--------|----------|----------|-----------------|
| dolo 500 | 4 | 3 | 1 | Evening |
| SOfraMicine | 5 | 2 | 1 | Morning & Night |