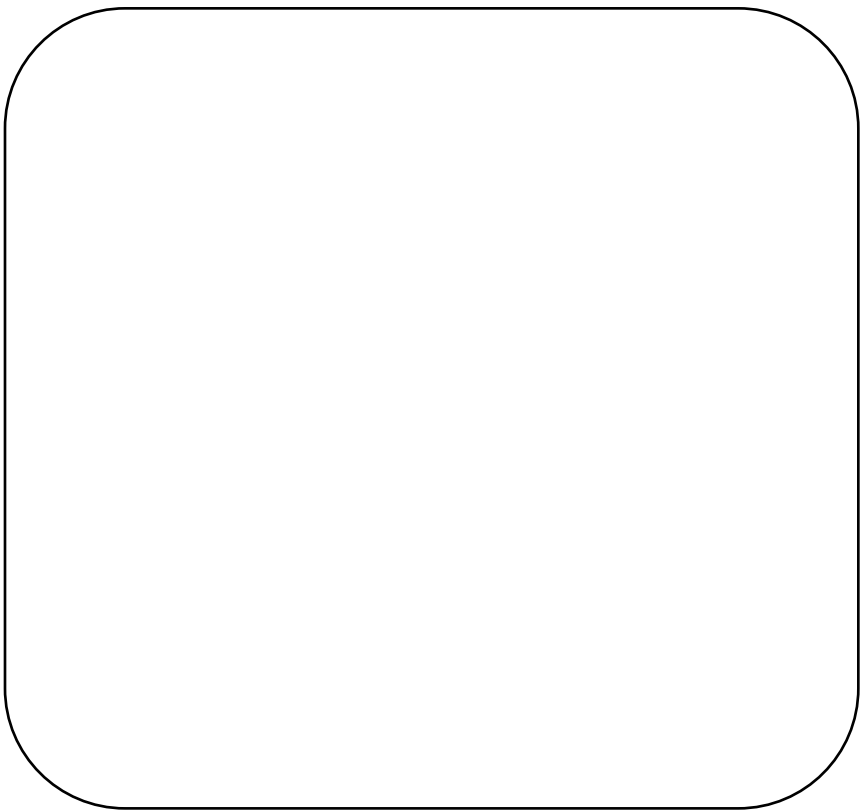


Patient Registration



View Patient Details



Patient Information > Fingerprint Registration

First Name

Last Name

NRIC

Gender


Height (m)

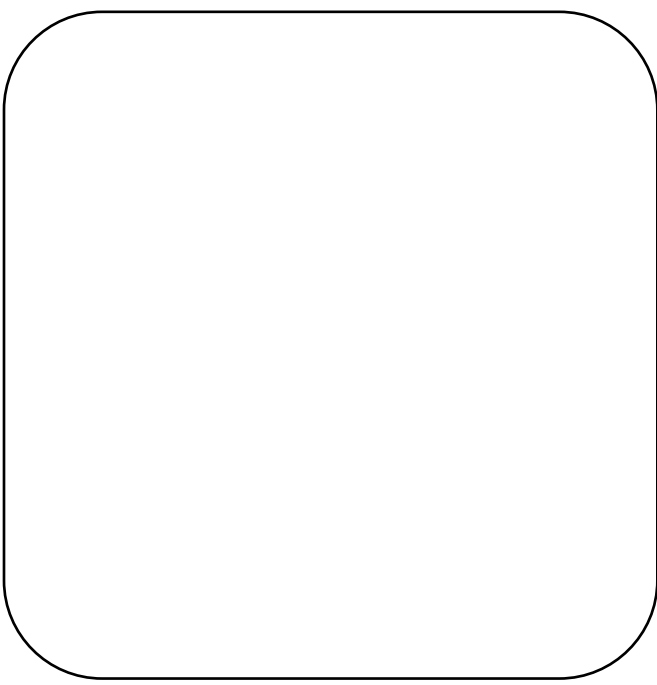
Weight (kg)

Clear

Register



Patient Information  > Fingerprint Registration



Place your finger at the scanner



Patient Information  > Fingerprint Registration  Registration Complete

Patient Registered

Patient ID

First Name

Last Name

NRIC

Gender

Height (m)

Weight (kg)

Back to home