

**Date: 27-Apr-2020, 04:37 PM****ID: 266 - DEMO PATIENT (M)**

Address: PUNE

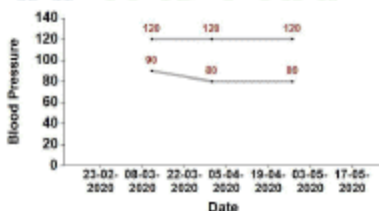
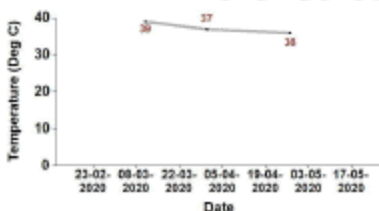
Temp (deg): 36, BP: 120/80 mmHg

R

| Medicine Name           | Dosage   | Duration                |
|-------------------------|--|-------------------------|
| 1) TAB. DEMO MEDICINE 1 | 1 Morning, 1 Night<br>(Before Food)              | 10 Days<br>(Tot:20 Tab) |
| 2) CAP. DEMO MEDICINE 2 | 1 Morning, 1 Night<br>(Before Food)              | 10 Days<br>(Tot:20 Cap) |
| 3) TAB. DEMO MEDICINE 3 | 1 Morning, 1 Aft, 1 Eve, 1 Night<br>(After Food) | 10 Days<br>(Tot:40 Tab) |
| 4) TAB. DEMO MEDICINE 4 | 1/2 Morning, 1/2 Night<br>(After Food)           | 10 Days<br>(Tot:10 Tab) |

**Advice Given:**

\* AVOID OILY AND SPICY FOOD

**Follow Up: 12-05-2020****Charts***Signature***Dr. Onkar Bhave**  
M.B.B.S., M.D., M.S.