Prescription

Reg TRN No : 12345678998754

Facility Name : VISION MEDICAL & DENTAL CENTER (Abu Dhabi)

Address : Rolla

065634883/971505961569

Doctor : William (DHA # -15245565544445) Department : General Patient Name : Alston Rebello MRN/File No. : 17

Age / Gender : 27Y - 10M - 10D/Male Type : Al Buhaira

Visit Date : 30-Apr-2024 08:00 - 08:15 Made By

Principal Diagnosis : NA Secondary Diagnosis : NA

	Generic	Dosage	Strength	Instructions	Quantity	Route of Admin
01	(FOLIC ACID: N/A) (THIAMINE (VITAMIN B1): N/A) (PYRIDOXINE (VITAMIN B6): N/A) (VITAMIN B12: N/A) (BIFIDOBACTERIUM LONGUM: N/A) (INULIN: N/A) (COLOSTRUM CONCENTRATE: N/A) (NATURAL ZINC YEAST (ZINC) : N/A) (YEAST CONCENTRATE: N/A) (ACEROLA JUICE (VITAMIN C) : N/A) POWDER	POWDER (35G, BOTTLE)	ORAL	Take 1 Tablets 1 Time(s) per Day For 1 Day(s) after meal	1	B - Buccal



P.S.: Kindly note that this is automated For Pharmacy.

Doctor Name License Number Date Signature & Stamp

William 15245565544445 30-Apr-2024 08:00 - 08:15