

Prescription

Reg TRN No : 12345678998754
 Facility Name : VISION MEDICAL & DENTAL CENTER (Abu Dhabi)
 Address : Rolla
 065634883/971505961569

Doctor	: dermatology (DHA # -0)	Department	: Dermatology
Patient Name	: Alston Rebello	MRN/File No.	: 17
Age / Gender	: 27Y - 8M - 11D/Male	Type	: ADNIC
Visit Date	: 02-Mar-2024 11:45 - 12:00	Made By	:
Principal Diagnosis	: T38.1X5D - Adverse effect of thyroid hormones and substitutes, subs		
Secondary Diagnosis	: NA		

	Generic	Dosage	Strength	Instructions	Quantity	Route of Admin
01	(CALCIUM GLUCONATE : 95MG/ML) SOLUTION FOR INJECTION	SOLUTION FOR INJECTION (100 X 10ML, PLASTIC AMPOULE)	IV	Take 1 Tablets 1 Time(s) per Day For 1 Day(s) after meal	1	NP - Nasal Prongs



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

Doctor Name License Number Date Signature & Stamp

dermatology 0 02-Mar-2024
 11:45 - 12:00




 (Dr. J. S. Bhawalkar)
 Dean