

Prescription

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

Doctor	: Alan(DHA # -GD10001)	Department	: Dental
Patient Name	: Alston Rebello	MRN/File No.	: 17
Age / Gender	: 27Y - 8M - 10D/Male	Type	: Al Buhaira
Visit Date	: 01-Mar-2024 08:45 - 09:00	Made By	:
Principal Diagnosis	: S30.813A - Abrasion of scrotum and testes, initial encounter		
Secondary Diagnosis	: NA		

	Generic	Dosage	Strength	Instructions	Quantity	Route of Admin
01	Flurbiprofen	Capsules	200 mg	Take 2 Syrup, 2 Time(s) per Day For 2 Day(s) morning empty stomach!	1	DT - Dental



Kindly note that this is automated For Pharmacy.

Doctor Name	License Number	Date	Signature & Stamp
Alan	GD10001	01-Mar-2024 08:45 - 09:00	□