



D
ASD

Registration no: ASD
Email: SAD
Dr address:SDSAD

Patient Details

Hdhd
, Male
Address
Sdsad
Mob No.
+91 8995959599

Ref No: **0**
Date & Time: **20-Jul-2023 04:25**
Pm

Symtoms (Hopi)
Sad
Provisional Diagnosis
Ds

Labs Tests	Medicines	Dose	Duration
SDADSD	1- SDA	S DSA	SD
	2- TEST	SDSA	SDSA
	****Note - substitution allowed wherever applicable ****		
	General instruction -SA DSAD		
	Next appointment -21-Jul-2023 12:00 AM		



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ASD

Disclaimer:

1. The information and advice provided here is provisional in nature as it is based on the limited information made available by the patient.
2. The patient is advised to visit in person for thorough examination at the earliest.
3. The information is confidential in nature and for recipients use only.
4. The Prescription is generated on a Teleconsultation.
5. Not valid for medico-legal purpose.