

Dr. Raha Rath

ENT

MBBS MD

Reg. No.: RAHA/AMZ/123

Phone: 7847861621, Email: support@myrx.in

Address: Cokarma, Gandipet Main Rd, Kokapet,
Hyderabad, Telangana 500075



Confirm on call, 25Yrs, Male

Prescription Date - 22-Sep-2025

Presenting Complaints

- wqeqwewqe

Provisional Diagnosis

- qwqwwqew

Medication Advised

S.no	Medicine	No of Days	Dosage	Intake-Frequency-Remark
1	AMITRIP 10 MG - STRIP OF 10 TABLETS	10	1-0-0	After Meal - Weekly

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Substitution instruction: Apply the generic equivalent wherever applicable.

Disclaimer

- The Prescription is issued as a result of the RMP's medical assessment based on the inputs of the patients/authorized representative/care-giver of the patient during the tele-consultation. It is valid from the date of issue until the specific period/dosage of each medicine as advised.
- The patient is advised to visit in-person for thorough examination at the earliest. Please visit a RMP/Hospital for further management if your conditions do not improve.
- Not valid for medico-legal purpose