

McLaren Print System Order

Order No: 48686 Reprint Previous Order No: 7180
Order Date: 2019-09-17
User: Dawn Ward
Phone: 989-345-9970

Ship Location: Primary Care West Branch (Attn:Cheryl McFarland)
2331 Progress, Suite D
West Branch, MI 48661,

Forms

Quantity: 16
Paragon Dept No: 69200
Dept Name: Primary Care West Branch
Company Number: 811

Order Total Price: 25.60

Item Number: MM-150
Item Description: Sample Medication Prescription MMG Provider Office
Revision Date: 1/2014

Print:
Paper:
Size:
Fold:
Finish:
Drill:

Misc Info: 3 Part (White, Yellow, Pink); Padded in 25 sets per pad; 2 hole drill at top; Quantity must be ordered in increments of 4.

Sample Medication Prescription
MMG PROVIDER OFFICE

Dr. _____

Date: ____/____/____ Patient: _____

Drug Dose: _____ Qty Disp: _____

Lot #: _____ Exp Date: ____/____/____

Balance: _____

Directions: _____

Sub Effects Discard: [] Yes [] No Billis

Provider Signature: _____

***** 1610 patient 030001 sample 1910 patient.doc

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***** 1610 patient 030001 sample 1910 patient.doc