

McLaren Print System Order

Order No: 51089 Reprint Previous Order No: 36427

Order Date: 2019-12-17 User: Shantell Moore Phone: 231-679-3915

Ship Location: Primary Care - RIfle River

5170 Rifle River Trail Alger, MI 48610

Forms

Quantity: 500

Paragon Dept No: 58508

Dept Name: Primary Care- Rifle River

Company Number: 810

Order Total Price: 30.00

Item Number: 17362

Item Description: MCLA_OPIOID START TALKING

Revision Date: 5/30/2018 Print: 1 sided black and white Paper: 2 Part (White, Yellow)

Size: 8.5 x 11 Fold: Finish: None Drill: None

Misc Info: black; ss; 2 part

	OPIOID STA	RT TALKE		nen.
Patient Name		PATER DE	Date of St	
Name of Controls	ed Substance containing an Opinio		_	
Dronge	Sparity Prescribed For a retro. If signature is not if	a cared in accordi	or the promotion of	nation by send to sends. These
	Herry			
Number of Flat	le:	2 Aoute pe	in < 3 days (N	u MAPS)
		C Acute pain 4-7 days		
() MAPS sheek, date:		Conne	Chronic pain > 7 days	
	substance is a drug or other substance the saving a potential for abuse. Wy provider o			forcement Administration has
	f substance use disorder and overdose asso-			tance containing an optoid.
	with mental threes and substance use disord (Required only for minors.)	tern may have	an increased ris	A of addiction to a controlled
	oots with benoodsoepines, absolut, muscle re n cause serious health risks, including death o			
	els who is pregnant or is of reproductive age, t sat not limited to reconstal abstimence symmon		nex of short an	d'iong-term effects of opioids,
ethematio	information necessary for petients to use the exection of the labeling for the controlled sub-	stance.		
unwanted enforceme	ear of opicide has shown to reduce tryuny and controlled substances may be done through a crit agencies. Information or where to return y management profiles to obtain our pro-	community take	back programs	s, boal pharmacies, or local lew
	ry to illegally deliver, distribute or share a cort ealth care provider.	trolled substant	ox without a pre	scription properly leaved by a
	e the potential benefits and risks of an opi of properly managing my medication as s		n an described	by my provider along with the
Signature of Prescriber (when prescribing to a record)				Date
Signature of Patient, Fix more, patient's parentipuestion				Ties
Signature of Patient's Representative or other authorized sold				See
Printed Name of Pe	eerificanter, Paleris Representative er autorised al	м		
Sparrer and restriction resigns assigns make	trant of that and thomas factions. MOVED, than not begin or a place between if their things. Age, related angle, onto a relate, persons fortunated, with securit committee, greater the artisects in their things.	-COMMAND	ON Required	PT MO: 200-700b average, 500-700b; below denied from expension, reconstru-
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