

McLaren Print System Order

Order No: 53203 Reprint Previous Order No: 7180
Order Date: 2020-03-09
User: Lee Owen
Phone: 989-269-8933 ext: 4400

Ship Location: McLaren Thumb Region Attn: Lee Owen
1054 S. Van Dyke Rd.
Bad Axe, MI 48413

Forms
Quantity: 4
Paragon Dept No: 55250
Dept Name: MTR Physician Services
Company Number: 810

Order Total Price: 6.40

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/Effic/Disc: _____ (Thru: _____) No Refills

Provider Signature: _____

***** 1815 patient 030917 sample/1500 patient.doc

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MMG PROVIDER OFFICE

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Date: ____/____/____ Patient: _____

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Provider Signature: _____

***** 1815 patient 030917 sample/1500 patient.doc