

Prescription

Doctor's information			
Doctor's name: Anna Ludwig, MD		Medical license number: 00-9987-35	
Clinic/Hospital address: St Charles, Oak Street, CA			
Email address: annaludwig@stcharles.org		Phone number: 678-94299	
Patient's information			
Patient's name: Karlene Hizon			
Date of birth: March 5, 1953		Sex: Female	
Address: Allentown Ave cor Method St, CA			
Email address: karlene@email.com		Phone number: 789-244-12	
Insurance information: Altrust Insurance – Premium			
Prescription			
Medication	Dosage	Frequency and duration	Instructions
Ibuprofen 400mg tablets	1 tablet	Take orally, every 6 hours for 5 days	Take with food. Do not exceed 2400mg in 24 hours.
Remarks			
Patient advised to avoid other NSAIDs (Nonsteroidal Anti-Inflammatory Drugs) concurrently. Monitor for any signs of stomach discomfort or adverse reactions.			
Doctor's name and signature:		Date:	
<i>Anna Ludwig</i> Anna Ludwig, MD		October 29, 2024	