PRESCRIPTION TEMPLATE

Prescription No. Prescription Date 0001 November 8, 2021

Patient Information

Name Age Anne Burton 30

Phone Number Date of Birth

(123) 123-4567 Wednesday, November 8, 1989

Email Gender anne.burton@noemailtest.com Female

Address

1372 Payne Street Richlands, VA. 24641

Allergies Notable Health Condition

Seafood None

List of Prescribed Medications

Medication Name	Purpose	Dosage	Route	Frequency
Expectorant	Removes phlegm	1 tablet	Oral	Every 4 hours
Paracetamol	For fever	1 tablet	Oral	Every 4 hours
Anti-biotic	Bacterial Infection	500mg	Oral	Every 8 hours
Vitamin C	Immune system	500mg	Oral	Once a day

Physician Name Physician Phone Number

Leslie Holden (112) 312-3456 Physician Signature Physician Email

leslie.h@noemail.com

November 9, 2021