

Australian Menopause Centre
DOB: [f: 6] Patient No: [f: 5]

[f: 4]
[f: 14]
[f: 15] [f: 17] [f: 16]

DELIVERY ADDRESS: [f: 77] [f: 78] [f: 79] [f: 80]	Use on <hr/> only
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Script Date	15/07 /2015
Order Date	03/11 /2015
Doctor	Dr Davi d Woo dhou se 2440 80
Sigs	Apply 1/2 gram, i.e. 1/2 ml twice daily Apply 2 clicks, i.e. 1/2 ml of cream daily at Night.
Supp Meds	Yes / No

Dispensing # [f: 76]
Dispatch Method: [f: 81]
Authority to Leave: [f: 82]
REMAKE (please specify reason) <input type="checkbox"/> Change of Address <input type="checkbox"/> Change of medication <input type="checkbox"/> Inferior Product <input type="checkbox"/> Other _____

Pharmacy Use Only

Formula Type: [f: 71] **Prescription:** [f: 72]

«xfP1Applicat ion»		HORMONE	DOSE	Powder	HORMONE	DOSE	Powder
		Phen tolam ine 4mg/ ml	0.6		Phentolamine 4mg/ml	40	
		Phen tolam ine 4mg/ ml	0.3		Atropine 0.24mg/ml	1250	
		Phen tolam ine 4mg/ ml	0.6		Atropine 0.24mg/ml	0.6	
AMT:	5	Phen tolam ine 4mg/ ml	0.3				
QTY:	4	Phen tolam ine 4mg/ ml	0.6				
FLAVOUR: Stra wbe rry		Phen tolam ine 4mg/ ml	0.3				
		Phen tolam ine 4mg/ ml					

PHARMACY DISPENSING Strip		
1 st Disp	Production Label	Pharmacist Signature

PHARMACY DISPENSING Strip		
2 ND Disp	Production Label	Pharmacist Signature