Australian Menopause Centre DOB: 25/06/1953 Patient No: 21139

| DELIVERY ADDRESS: | Use on |
|-------------------------------|--------|
| Suite 705, 2 Queen Street C/- | ——— |
| JM Financial Planning | only |
| Melbourne VIC 3000 | |

Beryl Dawbin 39 Coastside Drive ARMSTONG CREEK VIC 3217

| Script Date | 26/04/2017 | Dispensing # 151635 |
|-------------|---|--|
| Order Date | 23/06/2017 | Dispatch Method: STARTRACK |
| Doctor | Dr David Woodhouse 244080 | Authority to Leave: |
| | Dissolve 1/2 troche in cheek at Night (E) | Leave at RECEPTION |
| Sigs | | |
| | | REMAKE (please specify reason) |
| | | ☐ Change of Address ☐ Change of medication |
| Supp Meds | Yes / No | □ Inferior Product □ Other |
| | | |

Pharmacy Use Only

| | | HORMONE | DOSE | Powder | HORMONE | DOSE | Powder |
|------------------|-----|-----------------------|--------|--------|---------|------|--------|
| Tro | che | E2 (Oestrogen)- S4 | 0.5 mg | | | | |
| AMT: | 1 | | | | | | |
| QTY: | 30 | | | | | | |
| FLAVO | UR: | | | | | | |
| NUGer Special | | | | | | | |
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| PHARMACY DISPENSING Strip | | | |
|---------------------------|------------|------------|--|
| 1 st | Production | Pharmacist | |
| Disp | Label | Signature | |

| PHARMACY DISPENSING Strip | | |
|---------------------------|---------------------|-------------------------|
| 2 ND Disp | Production Label | Pharmacist Signature |

Australian Menopause Centre DOB: 25/06/1953 Patient No: 21139

| DELIVERY ADDRESS: | Use on |
|-------------------------------|--------|
| Suite 705, 2 Queen Street C/- | only |
| JM Financial Planning | Only |
| Melbourne VIC 3000 | |

Beryl Dawbin 39 Coastside Drive ARMSTONG CREEK VIC 3217

| Script Date | 26/04/2017 | Dispensing # 454430 | |
|-------------|---|--|--|
| Order Date | 23/06/2017 | Dispatch Method: STARTRACK | |
| Doctor | Dr David Woodhouse 244080 | Authority to Leave: | |
| | Apply 2 clicks, i.e. 1/2 ml cream daily in the Morning. | Leave at RECEPTION | |
| Sigs | | | |
| | | REMAKE (please specify reason) | |
| | | ☐ Change of Address ☐ Change of medication | |
| Supp Meds | Yes / No | □ Inferior Product □ Other | |
| | | | |

Pharmacy Use Only

| | | HORMONE | DOSE | Powder | HORMONE | DOSE | Powder |
|-------|----------|-----------------|-------|--------|---------|------|--------|
| Cre | am | | | | | | |
| | V | Testosterone S4 | 10 mg | | | | |
| AMT: | 1 | | | | | | |
| QTY: | 30 | | | | | | |
| FLAVO | UR: | | | | | | |
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| PHARMACY DISPENSING Strip | | | |
|---------------------------|------------|------------|--|
| 1 st | Production | Pharmacist | |
| Disp | Label | Signature | |

| PHARMACY DISPENSING Strip | | |
|---------------------------|------------|------------|
| 2 ND | Production | Pharmacist |
| Disp | Label | Signature |

Australian Menopause Centre DOB: 28/04/1952 Patient No: 284

| DELIVERY ADDRESS: | Use on |
|---------------------------|--------|
| Unit 5/18 Yarranabbe Road | |
| Darling Point NSW 2027 | only |
| | |

Bronwyn Jennaway 5/18 Yarranabe Road Darling Point NSW 2027

| Script Date | 01/04/2016 | Dispensing # 621212 |
|-------------|-------------------------------------|--|
| Order Date | 23/06/2017 | Dispatch Method: AUST POST |
| Doctor | Dr David Woodhouse 244080 | Authority to Leave: |
| Sigs | Dissolve 1/2 troche in cheek 2x/day | If no-one at home leave in LETTER BOX |
| _ | | REMAKE (please specify reason) □ Change of Address □ Change of medication |
| Supp Meds | Yes / No | □ Inferior Product □ Other |
| | | |

Pharmacy Use Only

| | | HORMONE | DOSE | Powder | | HORMONE | DOSE | Powder |
|-----------------|-------|--------------------------|-----------|--------|---|---------|------|--------|
| Tro | che | Triest (Oestrogen)-S4 | 1.5 mg | | - | | | |
| AMT: | 1 | Progesterone- S4 | 200 mg | | | | | |
| QTY: | 30 | Testosterone S4 | 1 mg | | | | | |
| FLAVO | UR: | | | | | | | |
| NUGer Specia | า | | | | | | | |
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| PHARMA | PHARMACY DISPENSING Strip | | | | | | | |
|-----------------|---------------------------|------------|--|--|--|--|--|--|
| 1 st | Production | Pharmacist | | | | | | |
| Disp | Label | Signature | | | | | | |

| PHARM | PHARMACY DISPENSING Strip | | | | | | |
|-----------------|---------------------------|------------|--|--|--|--|--|
| 2 ND | Production | Pharmacist | | | | | |
| Disp | Label | Signature | | | | | |

Australian Menopause Centre DOB: 23/06/1964 Patient No: 707800

| DELIVERY ADDRESS: | Use on |
|-------------------|--------|
| 7 Delta Court | |
| Kirwan QLD 4817 | only |
| | |

Bronwyn McGowan 7 Delta Court Kirwan QLD 4817

| Script Date | 26/04/2017 | Dispensing # 266048 |
|-------------|---|--|
| Order Date | 23/06/2017 | Dispatch Method: STARTRACK |
| Doctor | Dr David Woodhouse 244080 | Authority to Leave: |
| Sigs | Dissolve 1/2 troche in cheek at Night (P) | If nobody home leave in LETTER BOX |
| 0.90 | | REMAKE (please specify reason) □ Change of Address □ Change of medication |
| Supp Meds | Yes / No | ☐ Inferior Product ☐ Other |
| | | |

Pharmacy Use Only

| | | HORMONE | DOSE | Powder | HORMONE | DOSE | Powder |
|-----------------|-------|------------------|-----------|--------|---------|------|--------|
| Tro | che | Progesterone- S4 | 150 mg | | | | |
| AMT: | 1 | | | | | | |
| QTY: | 30 | | | | | | |
| FLAVO | UR: | | | | | | |
| NUGer Specia | 1 | | | | | | |
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| PHARMA | PHARMACY DISPENSING Strip | | | | | | | |
|-----------------|---------------------------|------------|--|--|--|--|--|--|
| 1 st | Production | Pharmacist | | | | | | |
| Disp | Label | Signature | | | | | | |

| PHARMACY DISPENSING Strip | | | | | | |
|---------------------------|------------|------------|--|--|--|--|
| 2 ND | Production | Pharmacist | | | | |
| Disp | Label | Signature | | | | |

Australian Menopause Centre DOB: 23/06/1964 Patient No: 707800

| DELIVERY ADDRESS: | Use on |
|----------------------------------|--------|
| 7 Delta Court Kirwan QLD 4817 | only |

Bronwyn McGowan 7 Delta Court Kirwan QLD 4817

| Script Date | 15/05/2017 | Dispensing # 68040 |
|-------------|--|--|
| Order Date | 23/06/2017 | Dispatch Method: STARTRACK |
| Doctor | Dr David Woodhouse 244080 | Authority to Leave: |
| Sigs | Dissolve 1/4 troche in cheek twice daily | If nobody home leave in LETTER BOX |
| _ | | REMAKE (please specify reason) □ Change of Address □ Change of medication |
| Supp Meds | Yes / No | ☐ Inferior Product ☐ Other |

Pharmacy Use Only

| | | HORMONE | DOSE | Powder | | HORMONE | DOSE | Powder |
|---------|-----|-----------------------|--------|--------|---|---------|------|--------|
| Tro | che | E2 (Oestrogen)- S4 | 0.5 mg | | - | | | |
| AMT: | 1 | | | | | | | |
| QTY: | 30 | | | | | | | |
| FLAVO | UR: | | | | | | | |
| NUGer | 1 | | | | | | | |
| Special | | | | | | | | |
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| PHARMA | PHARMACY DISPENSING Strip | | | | | | | |
|-----------------|---------------------------|------------|--|--|--|--|--|--|
| 1 st | Production | Pharmacist | | | | | | |
| Disp | Label | Signature | | | | | | |

| PHARMACY DISPENSING Strip | | | | |
|---------------------------|------------|------------|--|--|
| 2 ND | Production | Pharmacist | | |
| Disp | Label | Signature | | |

Australian Menopause Centre DOB: 11/05/1956 Patient No: 86756

| DELIVERY ADDRESS: | Use on |
|----------------------|--------|
| 24/14 Mawarra Street | |
| Palm Beach QLD 4221 | only |
| | |

Carmel Taylor 24/14 Mawarra Street Palm Beach QLD 4221

| Script Date | 16/08/2016 | Dispensing # 712975 |
|-------------|---|--|
| Order Date | 23/06/2017 | Dispatch Method: Express Post |
| Doctor | Dr Gary Aaron 839318 | Authority to Leave: |
| Siao | Dissolve 1/2 troche in cheek at Night (P) | If nobody home leave in LETTER BOX |
| Sigs | | REMAKE (please specify reason) |
| | | ☐ Change of Address ☐ Change of medication |
| Supp Meds | Yes / No | ☐ Inferior Product ☐ Other |
| | | |

Pharmacy Use Only

| | HORMONE | DOSE | Powder | | HORMONE | DOSE | Powder |
|-----|------------------|---------|--------|----------|---------|---------|--------|
| he | D | 450 | | _ | | | |
| | Progesterone- S4 | | | | | | |
| | | mg | | <u> </u> | | | |
| 1 | | | | | | | |
| 30 | | | | | | | |
| JR: | | | | | | | |
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| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | 1 30 | 1 30 | 1 | 1 30 mg | 1 30 | 1 30 mg | 1 |

| PHARMACY DISPENSING Strip | | | | |
|---------------------------|------------|------------|--|--|
| 1 st | Production | Pharmacist | | |
| Disp | Label | Signature | | |

| PHARMACY DISPENSING Strip | | | | |
|---------------------------|------------|------------|--|--|
| 2 ND | Production | Pharmacist | | |
| Disp | Label | Signature | | |