

Online Claim Submission

Code: KDH
Employer: Kaweah Delta Healthcare
EmpID: 552617368
EmpName: Roeben, Debbie
Submitted: January 23, 2023
Batch: 29990765
Claim Total: \$35.31
Attachments: 5

Line	Service Date(s)	Type	Cost	Notes
1	10/7/2022	RX	\$35.31	Provider: CVS Pharmacy. For whom: Debbie Roeben.

Promised: 10/7/22, 4:46 PM

Scripts: 01

RO

85



27 0744101 000 002 00 0000963

Roeben, Debbie

Counsel New Drug

1708 South Church St. Visalia, CA

DOB: 6/64 TEL: (559) 303-6451

Prescription Information

	2 DROPS
	2 DROPS
	2 DROPS
	2 DROPS

POLYMYXIN B-TMP EYE DROPS
Generic for: Polytim

Apply 2 drops 4 times a day as directed for 5 days

Important Information

- This medication is for the eye only.
- If using other eye meds, wait at least 5 min. Before applying.
- Date opened _____

PHARMACY ADVICE
Note: Usually this type of medication should be started as soon as possible. Follow your Prescriber's instructions, or see your Pharmacist for more details.

Receipt & Refill Information

CVS Pharmacy 5090 Foothills Blvd Roseville, CA 95747	STORE#: 9958	POLYMYXIN B-TMP EYE DROPS
STORE TEL: (916) 783-1355 RX: 744101 00		NDC: 61314-0628-10 DAW: 0 QTY: 10 ML
INSURANCE INFORMATION: MEDIMPACT PCN ASPROD1 TP: 32495 GR: P401 AUTH: 8259985278		CAP: Safety MFR PKG: Yes
REFILL: 0 Refills MFR: SANDOZ PRSCBR: Kerrie North-Calderon DAYS SUPPLY: 5 DATE FILLED: 10/7/22		
RETAIL PRICE: \$22.99		AMOUNT DUE: \$9.63

Notes from the Pharmacy

PRIVACY: An important notice related to the privacy of your information is included with this label. Please acknowledge receipt of this notice by signing in store or sign/mail the back of this label to the address in the notice.

CVS pharmacy

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Promised: 10/7/22, 4:46 PM

Scripts: 01

RO

85



27 0744100 000 000 00 0000576

Roeben, Debbie

Counsel New Patient

1708 South Church St. Visalia, CA

DOB: 6/64 TEL: (559) 303-6451

Prescription Information

	1 TABLET

AZITHROMYCIN 500 MG TABLET
Generic for: Zithromax

Take 1 tablet by mouth every day for 3 days

Important Information

- If this drug upsets your stomach take with crackers, bread or small meal.
- Do not take aluminum or magnesium antacids within 2 hrs of taking this drug.
- May cause diarrhea. If persists or becomes severe, notify dr or rph.
- Diarrhea may occur weeks to months after taking drug. Call dr or rph.
- Do not take antacids within 2 hours of taking this medication.

PHARMACY ADVICE
Note: Usually this type of medication should be started as soon as possible. Follow your Prescriber's instructions, or see your Pharmacist for more details.

Receipt & Refill Information

CVS Pharmacy 5090 Foothills Blvd Roseville, CA 95747	STORE#: 9958	AZITHROMYCIN 500 MG TABLET
STORE TEL: (916) 783-1355 RX: 744100 00		NDC: 62332-0252-30 DAW: 0 QTY: 3 EA
INSURANCE INFORMATION: MEDIMPACT PCN ASPROD1 TP: 32495 GR: P401 AUTH: 8259977626		CAP: Safety MFR PKG: Yes
REFILL: 0 Refills MFR: ALEMBIC PHARMAC PRSCBR: Kerrie North-Calderon DAYS SUPPLY: 3 DATE FILLED: 10/7/22		
RETAIL PRICE: \$43.99		AMOUNT DUE: \$5.76

Notes from the Pharmacy

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27 0744101 000 002 00 0000963

Roeben, Debbie

Counsel New Drug

1708 South Church St. Visalia, CA

DOB: 6/64 TEL: (559) 303-6451

Prescription Information

	2 DROPS
	2 DROPS
	2 DROPS
	2 DROPS

POLYMYXIN B-TMP EYE DROPS
Generic for: Polytim

Apply 2 drops 4 times a day as directed for 5 days

Important Information

- This medication is for the eye only.
- If using other eye meds, wait at least 5 min. Before applying.
- Date opened _____

PHARMACY ADVICE
Note: Usually this type of medication should be started as soon as possible. Follow your Prescriber's instructions, or see your Pharmacist for more details.

Receipt & Refill Information

CVS Pharmacy 5090 Foothills Blvd Roseville, CA 95747	STORE#: 9958	POLYMYXIN B-TMP EYE DROPS
STORE TEL: (916) 783-1355 RX: 744101 00		NDC: 61314-0628-10 DAW: 0 QTY: 10 ML
INSURANCE INFORMATION: MEDIMPACT PCN ASPROD1 TP: 32495 GR: P401 AUTH: 8259985278		CAP: Safety MFR PKG: Yes
REFILL: 0 Refills MFR: SANDOZ PRSCBR: Kerrie North-Calderon DAYS SUPPLY: 5 DATE FILLED: 10/7/22		
RETAIL PRICE: \$22.99		AMOUNT DUE: \$9.63

Notes from the Pharmacy

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CVS pharmacy

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Promised: 10/7/22, 4:46 PM

Scripts: 01

RO

85



27 0744100 000 000 00 0000576

Roeben, Debbie

Counsel New Patient

1708 South Church St. Visalia, CA

DOB: 6/64 TEL: (559) 303-6451

Prescription Information

	1 TABLET

AZITHROMYCIN 500 MG TABLET
Generic for: Zithromax

Take 1 tablet by mouth every day for 3 days

Important Information

- If this drug upsets your stomach take with crackers, bread or small meal.
- Do not take aluminum or magnesium antacids within 2 hrs of taking this drug.
- May cause diarrhea. If persists or becomes severe, notify dr or rph.
- Diarrhea may occur weeks to months after taking drug. Call dr or rph.
- Do not take antacids within 2 hours of taking this medication.

PHARMACY ADVICE
Note: Usually this type of medication should be started as soon as possible. Follow your Prescriber's instructions, or see your Pharmacist for more details.

Receipt & Refill Information

CVS Pharmacy 5090 Foothills Blvd Roseville, CA 95747	STORE#: 9958	AZITHROMYCIN 500 MG TABLET
STORE TEL: (916) 783-1355 RX: 744100 00		NDC: 62332-0252-30 DAW: 0 QTY: 3 EA
INSURANCE INFORMATION: MEDIMPACT PCN ASPROD1 TP: 32495 GR: P401 AUTH: 8259977626		CAP: Safety MFR PKG: Yes
REFILL: 0 Refills MFR: ALEMBIC PHARMAC PRSCBR: Kerrie North-Calderon DAYS SUPPLY: 3 DATE FILLED: 10/7/22		
RETAIL PRICE: \$43.99		AMOUNT DUE: \$5.76

Notes from the Pharmacy

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Promised: 10/10/22, 12:36 PM

Scripts: 01

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24



27 0744447 000 001 00 0000490

Roeben, Debbie

1048 Treasure Lane, Roseville, CA 95678

DOB: 6/64

TEL: (559) 303-6451

Counsel New Drug

Prescription Information

		GUAIATUSSIN AC LIQUID Generic for: Cheracol Take 10 mL by mouth daily at bedtime for 5 days
	10 ML	
▲ PHARMACY ADVICE See back for more information		Important Information <ul style="list-style-type: none">- Caution: opioid. Risk of overdose and addiction.- Breastfeeding not recommended while using this drug. Consult dr or rph.- May cause drowsiness and dizziness. Careful using vehicle, vessel, machines.- If pregnant or of childbearing age, discuss risks/benefits with md or rph.- Using more than recommended may cause breathing problems.

Receipt & Refill Information

CVS Pharmacy 5090 Foothills Blvd Roseville, CA 95747	STORE#: 9958	GUAIATUSSIN AC LIQUID
STORE TEL: (916) 783-1355		NDC: 50383-0087-16 DAW: 0
RX: 744447 00	C	QTY: 50 ML
INSURANCE INFORMATION: MEDIMPACT PCN ASPROD1 TP: 32495 GR: PH01 AUTH#: 8262575930		CAP: Safety MFR PKG: Yes
RETAIL PRICE: \$11.99		REFILL: 0 Refills MFR: HI-TECH/AKORN C PRSCBR: Mandeep Singh DAYS SUPPLY: 5 DATE FILLED: 10/10/22
		AMOUNT DUE: \$4.90

Notes from the Pharmacy

	Get important updates to help you stay on track with your health. See back for details.
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Promised: 10/10/22, 12:38 PM

Scripts: 01

RO

24



27 0744450 000 000 00 0000576

Roeben, Debbie

1048 Treasure Lane, Roseville, CA 95678
DOB: 6/64 TEL: (559) 303-6451

Prescription Information

	1 TABLET	AZITHROMYCIN 500 MG TABLET Generic for: Zithromax Take 1 tablet by mouth every day for 3 days Important Information - If this drug upsets your stomach take with crackers, bread or small meal. - Do not take aluminum or magnesium antacids within 2 hrs of taking this drug. - May cause diarrhea. If persists or becomes severe, notify dr or rph. - Diarrhea may occur weeks to months after taking drug. Call dr or rph. - Do not take antacids within 2 hours of taking this medication.

PHARMACY ADVICE:
Note: Usually this type of medication should be started as soon as possible. Follow your Prescriber's instructions, or see your Pharmacist for more details.

Receipt & Refill Information

CVS Pharmacy 5090 Foothills Blvd Roseville, CA 95747	STORE#: 9958	AZITHROMYCIN 500 MG TABLET
STORE TEL: (916) 783-1355 RX: 744450 00		NDC: 62332-0252-30 DAW: 0 QTY: 3 EA
INSURANCE INFORMATION: MEDIMPACT PCN ASPROD1 TP: 32495 GR: PH01 AUTH: 8262575449		CAP: Safety MFR PKG: Yes
REFILL: 0 Refills MFR: ALEMBIC PHARMAC PRSCBR: Mandeep Singh DAYS SUPPLY: 3 DATE FILLED: 10/10/22		AMOUNT DUE: \$5.76
RETAIL PRICE: \$43.99		

Notes from the Pharmacy



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Promised: 10/7/22, 4:46 PM

Scripts: 01

RO

85



27 0744103 000 001 00 0000926

Roeben, Debbie

1708 South Church St, Visalia, CA
DOB: 6/64 TEL: (559) 303-6451

Counsel New Drug

Prescription Information

	1 CAPSULE	BENZONATATE 200 MG CAPSULE Generic for: Tessalon Perle Take 1 capsule by mouth every 8 hours for 7 days. Important Information - May cause drowsiness. Use care when operating a vehicle, vessel or machine. - Swallow whole. Do not chew or crush. - Drug may impair ability to operate a vehicle, vessel or machine. Use care. - For overdose, seek medical care immediately or call poison control center. - Warning: keep out of reach of children. Fatal poisoning possible if ingested.
	1 CAPSULE	
	1 CAPSULE	

PHARMACY ADVICE:
See back for more information

Receipt & Refill Information

CVS Pharmacy 5090 Foothills Blvd Roseville, CA 95747	STORE#: 9958	BENZONATATE 200 MG CAPSULE
STORE TEL: (916) 783-1355 RX: 744103 00		NDC: 42806-0715-01 DAW: 0 QTY: 21 EA
INSURANCE INFORMATION: MEDIMPACT PCN ASPROD1 TP: 32495 GR: PH01 AUTH: 8259986541		CAP: Safety MFR PKG: Yes
REFILL: 0 Refills MFR: EPIC PHARMA LLC PRSCBR: Kerrie North-Calderon DAYS SUPPLY: 7 DATE FILLED: 10/7/22		AMOUNT DUE: \$9.26
RETAIL PRICE: \$31.99		

Notes from the Pharmacy



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27 0744101 000 002 00 0000963

Roeben, Debbie

Counsel New Drug

1708 South Church St. Visalia, CA

DOB: 6/64 TEL: (559) 303-6451

Prescription Information

	2 DROPS
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POLYMYXIN B-TMP EYE DROPS
Generic for: Polytim

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INSURANCE INFORMATION: MEDIMPACT PCN ASPRO01 TP: 32495 GR: P401 AUTH: 8259985278		CAP: Safety MFR PKG: Yes
REFILL: 0 Refills MFR: SANDOZ PRSCBR: Kerrie North-Calderon DAYS SUPPLY: 5 DATE FILLED: 10/7/22		
RETAIL PRICE: \$22.99		AMOUNT DUE: \$9.63

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Roeben, Debbie

Counsel New Patient

1708 South Church St. Visalia, CA

DOB: 6/64 TEL: (559) 303-6451

Prescription Information

	1 TABLET

AZITHROMYCIN 500 MG TABLET
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INSURANCE INFORMATION: MEDIMPACT PCN ASPRO01 TP: 32495 GR: P401 AUTH: 8259977626		CAP: Safety MFR PKG: Yes
REFILL: 0 Refills MFR: ALEMBIC PHARMAC PRSCBR: Kerrie North-Calderon DAYS SUPPLY: 3 DATE FILLED: 10/7/22		
RETAIL PRICE: \$43.99		AMOUNT DUE: \$5.76

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