MEDICAL CENTER & HEALTHCARE CLINIC

123 Healthcare Avenue, Medical District
Phone: (555) 123-4567 | Email: care@medicalcenter.com

MEDICAL PRESCRIPTION

Prescription ID: #32
Date: May 21, 2025
Patient Name:
Patient ID: #33
Doctor: Dr.

PRESCRIBED MEDICATIONS

Dr.
Physician Signature

This prescription is valid for 30 days from the date of issue. Please present this document to your pharmacist. Contact your doctor for any clarifications.