

MEDICAL CENTER & HEALTHCARE CLINIC

123 Healthcare Avenue, Medical District
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MEDICAL PRESCRIPTION

Prescription ID: #40
Date: May 22, 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.