

# APOLLO BASED HEALTH LLC

200 Frandorson Cir Ste 203 Apollo Beach FL 33572

Phone: 813.213.3336

Date: 11/18/2025

State Lic.: ME117105

NPI: 1861622060

DEA: FC4080127

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## PRESCRIBER INFORMATION:

**NAME:** VICTOR CRUZ

**NPI:** 1861622060

**DEA:** FC4080127

**LICENSE#:** ME117105

**ADDRESS:** 200 Frandorson Cir Ste 203 Apollo Beach FL 33572

**PHONE:** 813.213.3336

**FAX:** —

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## ELECTRONIC PRESCRIPTION ORDER

**FIRST NAME:** John

**LAST NAME:** Smith

**DOB:** 1985-06-15

**PHONE:** (555) 123-4567

**EMAIL:** john.smith@example.com

**ADDRESS:** 123 Main Street, Apt 4B

**CITY:** Tampa

**STATE:** FL

**ZIP:** 33601

**GENDER:** Male

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## #1 Semaglutide 2.4mg/3mL Pen

**STRENGTH:** 2.4mg/3mL **QUANTITY:** 1

**REFILLS:** 3

**DAYS SUPPLY:** 30

**DIRECTIONS (SIG):** Inject 0.25mg subcutaneously once weekly for 4 weeks, then increase to 0.5mg weekly

**SHIP TO:** 123 Main Street, Apt 4B, Tampa, FL 33601

**DELIVERY TYPE:** STANDARD

**DATE WRITTEN:** 11/18/2025

Special Instructions: PLEASE INCLUDE SUPPLIES.

Submitted electronically by prescriber: VICTOR CRUZ

Practice: APOLLO BASED HEALTH LLC

Address: 200 Frandorson Cir Ste 203 Apollo Beach FL 33572

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**Order #:** rx-MULTI-1763514412059

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### #2 Metformin HCl 500mg Tablets

**STRENGTH:** 500mg

**QUANTITY:** 60

**REFILLS:** 5

**DAYS SUPPLY:** 30

**DIRECTIONS (SIG):** Take 1 tablet by mouth twice daily with meals

**SHIP TO:** 123 Main Street, Apt 4B, Tampa, FL 33601

**DELIVERY TYPE:** STANDARD

**DATE WRITTEN:** 11/18/2025

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### #3 Vitamin B12 1000mcg Injection

**STRENGTH:** 1000mcg/mL

**QUANTITY:** 1

**REFILLS:** 11

**DAYS SUPPLY:** 30

**DIRECTIONS (SIG):** Inject 1mL intramuscularly once monthly

**SHIP TO:** 123 Main Street, Apt 4B, Tampa, FL 33601

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