FERNANDEZ DE LA VAR, Rosalie (id #3446, dob: 02/15/2023)

Approved Prescription

Date Ordered: 02/20/2023

Pharmacy	Prescriber
GIANT PHARMACY #232	MONICA KHARBANDA, MD FRANCONIA PEDIATRICS
5870 KINGSTOWNE BOULEVARD	6090 FRANCONIA RD STE A
ALEXANDRIA, VA 22315	ALEXANDRIA, VA 22310-4431 Phone: (703) 922-0021
Phone: (703) 313-8092	Fax: (703) 922-0035
Fax: (844) 411-6272	

Prescription Information

Medication	cholecalciferol (vitamin D3) 10 mcg/drop (400 unit/drop) oral drops
Quantity	1 (one) 2.5 mL dropper bottle
SIG	Take 400 unit(s) every day by oral route for 30 days.
Refills Allowed	3 Refills
DAW?	N
Note to Pharmacy	

Patient Information

Patient Name	FERNANDEZ DE LA VAR, ROSALIE
Sex - DOB - Age	F 02/15/2023 5do
Address	6029 HEATHERWOOD DR ALEXANDRIA, VA 22310
Phone	H: (814) 336-9829 M: (305) 281-6028
Primary Insurance	BCBS-VA (PPO) ID: EOC911305133 Policy Holder: FERNANDEZ DE LA VAR, LUIS
Secondary Insurance	None recorded.

Electronically Signed by: MONICA KHARBANDA, MD

02/20/2023 DEA # FK2252904

Prescription is void if more than one (1) prescription is written per blank.

FERNANDEZ DE LA VAR, Rosalie (id #3446, dob: 02/15/2023)

Lab Order

02/20/2023

Order To	Ordering Provider
INOVA HEALTHPLEX	MONICA KHARBANDA, MD FRANCONIA PEDIATRICS
6355 WALKER LN	6090 FRANCONIA RD STE A
ALEXANDRIA, VA 22310	ALEXANDRIA, VA 22310-4431
	Phone: (703) 922-0021
Phone: (703) 797-6863	Fax: (703) 922-0035
Fax: (703) 797-6839	

Order	
Orders included: 1	
BILIRUBIN, TOTAL + D	0: P59.9: Neonatal jaundice, unspecified IRECT, SERUM OR PLASMA BILL: Third Party N OR AROUND: 02/21/2023 ORDERED: 02/20/2023
Patient Name	FERNANDEZ DE LA VAR, ROSALIE
Sex - DOB - Age	F 02/15/2023 5do
Address	6029 HEATHERWOOD DR ALEXANDRIA, VA 22310
Phone	h: (814) 336-9829 w:
Primary Insurance	BCBS-VA (PPO) ID: EOC911305133 Policy Holder: FERNANDEZ DE LA VAR, LUIS
Secondary Insurance	None recorded.
Drawn by:	
Date/Time Drawn:	
Fasting?:	- None Needed - 8 HR - 12 HR
Other/Notes:	
CC:	

Electronically Signed by: MONICA KHARBANDA, MD

MONICA KHARBANDA, MD