

PRESCRIPTION TEMPLATE

Prescription No.

IN

Prescription Date

May 24, 1966

Patient Information

Name

Cara Labbet

Age

9

Phone Number

(123) 123-4567

Date of Birth

Tuesday, May 24, 1966

Email

khoulson2@webs.com

Gender

Female

Address

73 McCormick Pass
Portland, Or, 97255

Allergies

Cum soc

Notable Health Condition

Maec

List of Prescribed Medications

Medication Name	Purpose	Dosage	Route	Frequency
Expectorant	Removes phlegm	1 tablet	Oral	Every 4 hours
Paracetamol	For fever	1 tablet	Oral	Every 4 hours
Anti-biotic	Bacterial infection	500mg	Oral	Every 8 hours
Vitamin C	Immune system	500mg	Oral	Once a day
Vitamin D	Immune System	1 tablet	Oral	Once a day

Physician Name

Paxon Brosnan

Physician Phone Number

(112) 312-3456

Physician Signature



Physician Email

zjodrelle0@google.com.hk

July 5, 1995