Gastro Pharma Prescription

South Melbourne Pharmacy
111 Cecil Street, South Melbourne, Victoria 3205
Phone: 03 9690 5240

GASTRO PHARMA

Doctor Details

Dr.: _____ Prescriber No.: _____

Address: _____

_____ Phone: _____

Patient Details

Name: _____

Address: _____

_____

Phone 1: _____

Phone 2: _____

If non-english speaking, please provide a phone number to contact: _____

Delivery: ☐ Express Post ☐ Pick-up

Payment Details

Credit Card

☐ MASTERCARD ☐ VISA Expiry Date: ____/____ (Month / Year)

Cardholder's name: _____

Signature: _____

VONOPRAZAN 20mg caps	**QTY:** 28 | $120
Directions: **1 bd for general hyperacidity.**	
Doctors Signature _____ Date_____ Gastropharma will phone your patient and confirm payment and delivery address following receipt of signed prescription.	

FURTHER POST-OP PAIN & SOOTHING TREATMENTS AVAILABLE	**QTY**	**PRICE TO PATIENT**
Glyceryl trinitrate 0.2% and lignocaine 2% ointment 15gm Directions for use: Apply 1.5cm via anal nozzle to affected area up to three times daily.		$45.95
Lignocaine 2.5% prilocaine 2.5% tetracaine 1% in Lipoderm ointment 30gm Apply 1.5cm via anal nozzle to afftected area up to three times daily.		$42.95
Doctors Signature _____ Date_____ Gastropharma will phone your patient and confirm payment and delivery address following receipt of signed prescription.		