

PBS/RPBS authority prescription
Not valid unless authorised by delegate

DR PRIYANKA ARLAGADDA

MBBS
13CURE
SUITE 15
178 QUEEN STREET
ST MARYS NSW 2760
Phone: 132873
3160880

25080524

Patient's Medicare no. - - Patient's Ref no.

Patient's full name Julia Mosley
Patient's address Forest Hill
VIC Postcode 3131

Entitlement no.

PBS Safety Net entitlement cardholder Concessional or dependant, RPBS beneficiary or PBS Safety Net concession cardholder

Authorisation is requested for the following:

- (Tick appropriate boxes)*
PBS prescription from state manager, Medicare
RPBS prescription from the authorised delegate of the Repatriation Commission
Brand substitution not permitted

Only one item per form

Molnupiravir 200mg

Pharmacist/patient copy

Dosage directions 4 tabs bd x 5 days

Quantity 40 Prescriber's signature [Signature] Date 20/10/22

No. of repeats 0

Medicare/DVA use	Quantity	Repeats	Phone/Delegate approval
	<u>40</u>	<u>0</u>	<u>13201</u>

I declare that I have received this medicine and the information relating to any entitlement to a pharmaceutical benefit is correct.

Patient's or agent's signature [Signature] Date of supply / /

Agent's address

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Disease or purpose for which benefit required or clinical justification for use of item