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 25080570

Patient's Medicare no. | Patient's Ref no.

Patient's full name: Judith Powers

Patient's address: 17 Little Pear st

Tick for return to patient ☐

Haymarket NSW Postcode 2000

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 tab bd x 5 days

Quantity: 40

Prescriber's signature: AP

Date: 1/11/22

No. of repeats: 0

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

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

Date of supply / /

Agent's address

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