

130016
MBBS
178 Queen Street
ST MARYS NSW 2760
Phone: 02 9053 7400

Dr Syed Mohd Sharib Yusuf
MBBS
13Cure
Suite 15
178 Queen Street
ST MARYS NSW 2760
Phone: 02 9053 7400
2683162

AC21564441

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

Patient's full name

Cayden Grbic

Patient's address

103 Cowper St,
Wallsend, NSW 2287

Entitlement no.

PBS Safety Net entitlement cardholder

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

(Tick appropriate boxes)

PBS

RPBS

Brand substitution not permitted

Pharmacist/patient copy

Cephalexin - 250mg/5ml

7ml x BID x 5 days

Privacy notice on reverse

Doctor's signature



Date

25/11/22

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

Patient's or agent's signature



Agent's address

Date of supply

/ /

13Cure
MBBS
13Cure
Suite 15
178 Queen Street
ST MARYS NSW 2760
Phone: 02 9053 7400

Dr Syed Mohd Sharib Yusuf
MBBS
13Cure
Suite 15
178 Queen Street
ST MARYS NSW 2760
Phone: 02 9053 7400
2683162

AC21564440

Patient's Medicare no.

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

Patient's full name

Cayden Gorbic

Patient's address

103 Cowper St,
Wallsend, NSW Postcode 2287

Entitlement no.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

PBS Safety Net entitlement cardholder

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

(Tick appropriate boxes)

PBS

RPBS

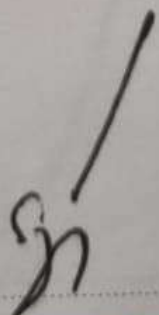
Brand substitution not permitted

Pharmacist/patient copy

On dawsatron - 4mg
1 tab x PRN (wifes)
(4) tablets only

Privacy notice on reverse

Doctor's signature



Date 25/11/22

I declare that I have received this/these medicine(s) 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