

Prescription Writing Work Sheet.

StudentName: _____ Date: _____

Please fill out prescriptions on a blank prescription pad using the information on this page. You will need to write the prescription using the appropriate abbreviations. You may need to do a little math to figure out how many the pharmacist should dispense. ie... if it says 1 tablet three times daily; for 14 days that would be 3 pills a day for 14 days. The total will end up #42. (one blank form attached, ask instructor for additional.)

Patient: Evelyn Eager
Address: 211 S. 321 E. Petunia Town Anywhere, USA
Physician: James Ho
Medication: Amoxicillin 500 mg.
Instructions: Patient needs to take one tablet by mouth. She should take it 4 times a day for 10 days. No refills and Generic is Ok.

Patient: Troy Traten
Address: 32 E. Main St. Anywhere, USA
Physician: James Ho
Medication: Diazepam 2 mg.
Instructions: Patient needs to take one tablet by mouth. He should take it twice a day #28. No refills and Generic is Ok.

Patient: Jesse Ivans
Address: 211 S. 204 W. Anywhere, USA
Physician: James Ho
Medication: Motrin 800 mg.
Instructions: Patient needs to take one tablet by mouth. He should take it three times a day with food or milk. 30 day supply with 2 refills and Generic is Ok.

Patient: John Olds
Address: Reason Retirement Anywhere, USA
Physician: James Ho
Medication: Lasix 20 mg.
Instructions: Patient needs to take one tablet by mouth, twice a day. 30 day supply with 3 refills and Generic is Ok.

Patient: Missy Asthmatica
Address: 21 Lovely Lane Petunia Town, USA
Physician: James Ho
Medication: Proventil HFA inhaler
Instructions: Patient needs to take two puffs every 4 to 6 hours. Dispense 1. 2 refills and Generic is not authorized.

Salt Lake City School District Career & Technical Education Center
1560 South 200 East
Salt Lake City, Utah 84115
(801) 481-7311
Prescription Practice Form

Name _____ Date _____

Address _____ City _____ State _____

Rx

_____ M.D.
Label Only

Refill 0

_____ M.D.
Substitution Permitted

BNDD: H835190

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