

PRESCRIPTION BLANK

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NPI # 1609870245

LIC # 25MA06639500

SERIAL # 000268

DEA # BF5667742

BATCH # PAT0911240241890

IF PRESCRIPTION IS WRITTEN AT ALTERNATE PRACTICE SITE, CHECK HERE
AND PRINT ALTERNATE ADDRESS AND TELEPHONE NUMBER ON REVERSE SIDE

PATIENT _____ D.O.B. _____

ADDRESS _____ DATE _____



Quest # 19402
Labcorp: # 29116000

CBC w/d & pl

glucose

lipid panel

Vitamin D 250H

V82.9

82.9

SUBSTITUTION PERMISSIBLE _____ DO NOT SUBSTITUTE _____

DO NOT REFILL _____

REFILL _____ TIMES

SIGNATURE OF PRESCRIBER

Use separate form for each controlled substance prescription