

Common Patient Education Interactions Fill History Profile Claim Overrides Documents Rx Audit

Patient: [Redacted] Phone: [Redacted] DOB: [Redacted]

Written By: [Redacted]

Supervisor: Search for a Prescriber

Written: [Redacted]

Type: Specific Drug Origin: Electronic

Prescribed: Zonisamide Cap 100mg

Quantity: 30 EA Refills: 1

DAW: Auto PRN For Pain

ICD10: Search for an ICD10

Directions (Sig Codes or Text or [Literal Text]):

TAKE ONE CAPSULE BY MOUTH AT BEDTIME

Dispense Image eScript Other/DUR Workflow Claims Facility Fill Audit

Primary: (P) Advantage Health Care - 610494

Secondary: <None>

Dispensed: Zonisamide Cap 100mg (00378572701) (Active)

BOH: 228.000000 order EOH: 228.000000 AWP: \$65.76

NDC: 00378-5727-01 Package Size: 100 EA MAC: \$0.00

Unit: EA Quantity: 30 Days Supply: 30

Remaining: 0 0 EA Labels: 1

DAW: 0 - No Product Selection Ind Lot Exp: 3/10/2017

Rph: Christie Soileau Filed: 3/10/2016

Priority: <Choose> Alert: <None>

Pricing: Use Pricing Rules DEFAULT TP

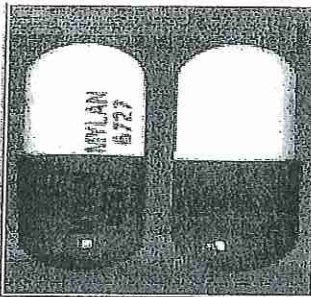
Apply Discounts/Markups

Comments

Patient: [Redacted]

Prescriber: [Redacted]

Primary: [Redacted]



Submitted	Paid
Base: \$105.22	\$4.64
Fee: \$10.00	\$0.90
Subtotal: \$115.22	\$5.54
Tax: \$5.28	\$0.35
Total: \$120.50	\$5.89
Last Price: \$120.50 @ 30 use	
Cost: \$3.32	\$3.32
GP: \$111.90	\$2.22
UKC: \$87.71	\$0.00
Copy: \$12.38	
Remit: (\$6.49)	

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Patient: [Redacted] Phone: [Redacted] DOB: [Redacted]

Written By: [Redacted] Supervisor: Search for a Prescriber

Written: [Redacted] Expiry: [Redacted]

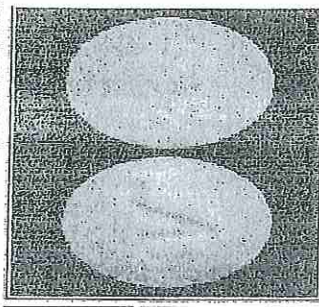
Type: Specific Drug Origin: Walk-In Prescribed: Cyclobenzaprine 5 Mg Tablet

Quantity: 30 EA Refills: 5 DAW: Auto PRN For Pain

ICD10: Search for an ICD10 Directions (Sig Codes or Text or [Literal Text]):

it po hs f muscles TAKE ONE TABLET BY MOUTH AT BEDTIME FOR MUSCLES

Original Refilled 2 times



Dispensed: Cyclobenzaprine 5 Mg Tabl (00603307821) (Active) BOH: 247.000000 order EOH: 247.000000 AWP: \$49.22 NDC: 00603-3078-21 Package Size: 100 EA MAC: \$0.00 Unit: EA Quantity: 30 Days Supply: 30 Remaining: 3 90 EA DAW: 0 - No Product Selection Ind Labels: 1 Lot Exp: 2/7/2017

Rph: Mark Chasson Filed: 2/8/2016 Priority: <Choose> Alert: <None> Pricing: Use Pricing Rules Apply Discounts/Markups

Submitted	Paid
Base: \$53.15	\$0.91
Fee: \$8.50	\$0.90
Subtotal: \$61.65	\$1.81
Tax: \$2.87	\$0.18
Total: \$64.52	\$1.99
Last Price: \$72.36 @ 30	Use
Cost: \$0.62	\$0.62
GP: \$61.04	\$1.20
U&C: \$61.65	\$0.00
Co-pay:	\$5.00
Remit:	(\$3.01)

Comments: Fill: [Redacted] Patient: [Redacted] Prescriber: [Redacted]

Common | Patient Education | Interactions | Fill History | Profile | Claim Overrides | Documents | Rx Audit

Patient: [Redacted]
Phone: [Redacted]

Written By: [Redacted]
Supervisor: Search for a Prescriber [Icon]

Written: [Redacted] Expire: [Redacted]

Type: Specific Drug > Origin: Electronic >
Prescribed: Vit D 50,000 Iu Sftgels [Icon]
Quantity: 4 EA > Refills: 6 [Icon] For Pain [Icon]
DAW: [] Auto [] PRN []

ICD10: Search for an ICD10 [Icon]
Directions (Sig Codes or Text or [Literal Text]):
1 to once weekly [Icon]
TAKE ONE CAPSULE BY MOUTH once weekly [Icon]

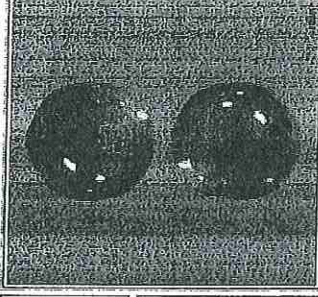
Dispense Image eScript Other/DUR Workflow Claims Facility Rx Audit

Primary: Sigma (great-West) - 600428 - [Redacted]
Secondary: <None>

Dispensed: Vit D 50,000 Iu Sftgels (51991060401) (Active) [Icon]
BOH: 258.0000000 order EOH: 258.0000000 ANP: \$7.89
NDC: 51991-0604-01 Package Size: 100 EA MAC: \$0.00

Unit: EA > Quantity: 4 > 4 EA
Remaining: 3 12 EA Days Supply: 30
DAW: 0 - No Product Selection Ind > Labels: 1 [Icon]

Lot Exp: 9/14/2016 [Icon]
Rpt: Mark Chasson > Filled: 9/15/2015 [Icon]
Priority: <Choose> > Alert: <None> >
Pricing: Use Pricing Rules > [Icon] 01 DEFAULT BRAND
 Apply Discounts/Markups



Base:	\$9.07	Submitted	Paid
Fee:	\$9.50		\$0.96
Subtotal:	\$18.57		\$1.40
Tax:	\$0.94		\$2.36
Total:	\$19.51		\$0.21
Last Price:	\$25.25 @ 4		\$2.57
Cost:	\$0.60		Use
GP:	\$17.97		\$0.60
UKC:	\$18.57		\$1.76
Copy:			\$0.00
Remit:			\$7.68
			(\$5.11)

Comments:

Fill: [Redacted]