

Prescription Information Sheet

➤ This information may be used for tax purpose and/or submission to your insurance company.



Women's International Pharmacy

2 Marsh Court, Madison, WI 53718

Phone: (800) 279-5708 Fax: (800) 279-8011

Web: www.womensinternational.com Email: info@womensinternational.com

Pharmacists are available for consultation during hours of 8am-6pm M-F, 9am-12pm Sat.

Prescription Information Sheet (This is not an Invoice)

Please retain for tax purposes
and/or submission to your
insurance company.

In the description of your medication, prefix
'letter(s)' designating the medication form
and abbreviations of the ingredients are
used. Please see the Medication Forms
and Ingredient Abbreviations.

MEDICATION FORMS EXPLAINED

C or CB=Cream
CS=Misc. Topical
D,DB or DS=Drops
G or GB=Gel
I=Injectable
L or LB=Lozenge
N or NB=Non-Alcohol Gel
O=Non-Prescription
P,PB or PS=Capsule
R=Insert
S=Suspension
V,VB or VS=Suppository

INGREDIENT ABBREVIATIONS

E1=Estrone
E2=Estradiol
E3=Estriol
P=Progesterone
D=DHEA
H=Hydrocortisone
PR=Pregnenolone
TE=Testosterone
T3=Liothyronine
T4=Levothyroxine
F=Folic Acid
CoQ=CoEnzyme Q-10
M=Melatonin
Chrys = Chrysin

Rx 10302018 Brad Smith 3/15/2010

John Thunders

Qty	PS-THYROID 1.5 GRAIN CAPSULES CLEAR	<u>Amount</u>
60		29.83

Days Supply: 30.00 WIP

NABP 5117773

NPI 1811043870

***Total: 29.83**

* Does NOT include shipping

INGREDIENT(S)/AMOUNT PER STANDARD UNIT / NDC

THYROID	1.5	GRAIN
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See enclosed Reimbursement Guidelines for information on insurance submission.

DIRECTIONS

As directed

Wallace L. Simons, R.Ph.
Owner/President