

COMPREHENSIVE PAIN MANAGEMENT PARTNERS
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12780 RACE TRACK ROAD
SUITE 425
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Name CARL ERICSON Age _____

Address _____

SECURITY FEATURES ON BACK Date Sept 2, 2010

Rx

PT eval & treat
spasticity, weakness
gait training +
McKenzie exercises

NRX100062357102-89

Refill NR 1 2 3 4 5

[Signature]

MD/PA/ARNP

To ensure that a brand name product be dispensed, the prescriber must
handwrite "Brand Medically Necessary" on the prescription form.