

-----BC CONTROLLED PRESCRIPTION FORM-----

<b>PERSONAL HEALTH NO.</b> 9123 456 789				<b>PRESCRIBING DATE</b> <div style="display: flex; justify-content: space-around;"> <div>05 <small>DAY</small></div> <div>06 <small>MONTH</small></div> <div>25 <small>YEAR</small></div> </div>		
<b>PATIENT NAME</b> FIRST (GIVEN) <span style="margin-left: 100px;">MIDDLE INITIAL</span> <span style="margin-left: 100px;">LAST (SURNAME)</span> Mei <span style="margin-left: 100px;"></span> <span style="margin-left: 100px;">Sato</span>						
<b>PATIENT ADDRESS</b> STREET <span style="margin-left: 20px;">123 Main Street</span> CITY <span style="margin-left: 100px;">Victoria</span> <span style="margin-left: 100px;">PROVINCE BC</span>						
<b>Rx DRUG NAME AND STRENGTH</b> Buprenorphine/naloxone 8mg/2mg				<b>DATE OF BIRTH</b> <div style="display: flex; justify-content: space-around;"> <div>10 <small>DAY</small></div> <div>11 <small>MONTH</small></div> <div>75 <small>YEAR</small></div> </div>		
<b>ONLY ONE DRUG PER FORM</b> <span style="float: right;"><b>VOID IF ALTERED</b></span> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <b>QUANTIT (IN UNITS)</b>  <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;">           120mg <small>NUMERIC</small> </div> <div style="width: 70%;">           One-hundred and twenty milligrams <small>ALPHA</small> </div> </div> </div>						
<b>THIS AREA MUST BE COMPLETED IN FULL FOR OPIOID AGONIST TREATMENT (OAT)</b>						
<b>START DATE:</b> 05 / 06 / 2025 <span style="margin-left: 20px;"><b>END DATE:</b> 09 / 06 / 2025</span> <small>DAY MONTH YEAR DAY MONTH YEAR</small>						
<b>TOTAL DAILY DOSE</b> <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;">           24 <small>NUMERIC</small> </div> <div style="width: 70%;">           Twenty-four <small>ALPHA mg/day</small> </div> </div>			<b>NUMBER OF DAYS PER WEEK OF DAILY WITNESSED INGESTION</b> <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;">           Nil <small>NUMERIC</small> </div> <div style="width: 70%;">           Nil <small>ALPHA</small> </div> </div>			
<input type="checkbox"/> <b>NOT AUTHORIZED FOR DELIVERY</b>						
<b>DIRECTION FOR USE, INDICATION FOR THERAPY, OR SPECIAL INSTRUCTIONS</b> Buprenorphine/naloxone 24mg/6mg sublingual tablets  Dispense all doses June 5 as take-home doses, no witness  <div style="height: 100px; border-top: 1px solid black; position: relative;"> <span style="position: absolute; bottom: 10px; left: 10px; font-family: cursive;">h</span> </div>						
<b>NO REFILLS PERMITTED</b>			<b>PRESCRIBER SIGNATURE</b> 			
<b>VOID AFTER 5 DAYS</b> <small>UNLESS PRESCRIPTION IS FOR OAT</small>						
<b>PRESCRIBER'S CONTACT INFORMATION</b> Generic Prescriber 123 Health Street Victoria, BC V8Z 4H4 Tel: 250-999-9911 Fax: 250-999-9119				91-09898 <b>PRESCRIBER ID</b>  5555555 <b>FOLIO</b>		
<b>PHARMACIST USE ONLY</b>						
RECEIVED BY: PATIENT OR AGENT SIGNATURE			SIGNATURE OF DISPENSING PHARMACIST			