

Pharmacy Stamp	Age <b>02/03/1942</b> Date of Birth	Patient Name and address <b>Mr J.I. TIME</b> <b>123 Anywhere</b> <b>POSTCODE</b>
Pack and Quantity	<ol style="list-style-type: none"> <li>1. Morphine sulphate injection 10mg/ml – 2.5mg to be used subcutaneously as directed. Supply 10(ten) ampoules</li> <li>2. Midazolam injection 10mg/2ml – 2.5mg to be used subcutaneously as directed. Supply 10(ten) ampoules</li> <li>3. Hyoscine Hydrobromide Injection 400mcg/ml – to be used as directed. Supply 5 ampoules</li> <li>4. Levomepromazine injection 25mg/ml - - to be used as directed. Supply 5 ampoules</li> <li>5. Haloperidol injection 5mg/mL– to be used as directed. Supply 5 ampoules</li> <li>6. Water for Injection – to be used as directed. Supply 5 ampoules</li> </ol>	
Signature of Prescriber  <i>Dr A Prescriber</i>		Date:  <b>09/04/20</b>
	Dr A. Prescriber 123 GP SURGERY ANY TOWN ANYWHERE <p style="text-align: center;"><b>THIS IS NOT A REAL PRESCRIPTION</b></p>	