



UNC Health Care
101 Manning Drive
Chapel Hill, NC 27514
(919) 966-4131

Patient Name: _____ Date: ____ / ____ / ____

MRN :

Date of Birth: ____ / ____ / _____ Printed By: General Internal Medicine Enhanced Care

Rx:

Drug Name /Strength: NICOTINE 14MG/24HR PATCH	Dosage: 1 PATCH	Route: TRANSDERM.	Frequency ONCE DAILY
	Quantity 28 PATCHES		Refills 0

Signature: _____

Printed Name : _____
UNC General Internal Medicine Clinic
Phone : (919) 966-6989 Fax : (919) 843-9355