
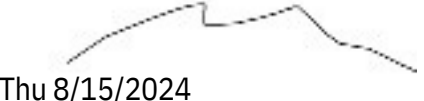

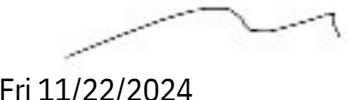


													Date of Birth xx/xx/1 966	
ELONGATE PRP Therapy					Add Ons						PIF		Finance	
Package Type ELONGATE		6			6		6: 2 pills/day; box = 60, 1 month supply		1		1		1	
		Beginning Balance			Numbing Cream		EO40		Pump		Cylinder		RESTORE X	
Date	Type	DP	BAL	Dr. Int	DP	BAL	DP	BAL	DP	BAL	DP	BAL	Yes No	Patient Sign
07/18/2024	#1	1	5	Electronical ly signed on 7/18/2024 at 1:27 PM	1	5	1	5	1	-	1	-	 Thu 7/18/2024	
08/15/2024	#2	1	4	Electronical ly signed 8/15/2024 at 4:18 PM	1	4	OUT	5	-	-	1	4	 Thu 8/15/2024	
09/10/2024	#3	1	3	Electronical ly signed on 9/10/2024 at 3:03 PM	1	3	1	4	-	-	-	-	 Tue 9/10/2024	
10/11/2024	#4	1	2	Electronical ly signed on 10/11/2024 at 4:04 PM										
11/22/2024	#5	1	1	Electronical ly signed 11/22/2024 at 3:51 PM	1	2	1	3	-	-	-	-	 Fri 11/22/2024	

12/23/2024	#6	1	0	Electronically signed on 12/23/2024 at 2:59 PM	1	1	-	3	-	-	-	-	Mon 12/23/2024
Date:	Dr. Notes											Dr. Int	