

## Paper Order Report

**Order #:** 21

**Order Date:** 2023-Mar-07 02:16:29

**Form:** Medisystem Pharmacy Prescription Form

**No. of Residents:** 1

**Home:** CareFirst Pharmacy

**User Name:** steven

**Unit:** Buckingham

**Login:** admin

| Resident Name | Qty | Page address                |
|---------------|-----|-----------------------------|
| Yockley Pate  | 5   | 326.1525.0.35-326.1525.0.39 |