ARBURY MEDICAL CENTRE

Dr R Akhtar
Dr A Ahmad

Practice Code M84003

Cambridge Drive
Nuneaton
CV10 8LW
Tel: 024 7638 8555
Email: cwicb.arburyadmin@nhs.net

PRIVATE & CONFIDENTIAL
Patient Name:
Patient Date of Birth:

PRESCRIPTION ALIGNMENT FORM

Please note, this will only work on daily medication, not PRN/As and when required items

Date Medication Counted:		
Name of Medication	Dose	Quantity at home
e.g. Metformin	2 daily	47

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