

BACH, Rikke (id #1783, dob: 01/22/1981)

Approved Prescription

Date Ordered: 04/05/2024

Pharmacy	Prescriber
	Marie Merjanian REPRODUCTIVE ENDOCRINOLOGY & INFERTILITY GROUP 1800 Peachtree Road NW Suite 640 ATLANTA, GA 30309-2555 Phone: (404) 370-1817 Fax: (404) 591-8909

Prescription Information

Medication	Gonal-F RFF Redi-Ject 900 unit/1.5 mL subcutaneous pen injector
Quantity	1 (one) 1.5 mL cartridge
SIG	Inject 150 unit(s) every day by subcutaneous route in the evening.
Refills Allowed	No Refills
DAW?	N
Note to Pharmacy	

Patient Information

Patient Name	BACH, RIKKE
Sex - DOB - Age	F 01/22/1981 43yo
Address	5937 COBBLESTONE CREEK CIR MABLETON, GA 30126-2655
Phone	H: (908) 267-1556 M: (908) 267-1556
Primary Insurance	UMR ID: Y16021268 Group: 76411011 Policy Holder: BACH, RIKKE
Secondary Insurance	None recorded.

Electronically Signed by: CAROLYN KAPLAN, MD



04/05/2024

DEA # _____

Prescription is void if more than one (1) prescription is written per blank.

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Prescription Information

Medication	ganirelix 250 mcg/0.5 mL subcutaneous syringe
Quantity	3 (three) 0.5 mL syringe
SIG	Inject 0.5 mL every day by subcutaneous route in the evening.
Refills Allowed	No Refills
DAW?	N
Note to Pharmacy	

Patient Information

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Primary Insurance	UMR ID: Y16021268 Group: 76411011 Policy Holder: BACH, RIKKE
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