

If faxing prescriptions, the original **MUST** be mailed to the pharmacy and **NOT** given to the patient or any other party

# Canterbury

District Health Board

Te Poari Hauora o Waitaha

## CDHB Prescription Christchurch Hospital

2 Riccarton Avenue  
03 364 0640

Circle one from each line

Y J A O

1 3 4

Z (Circle if patient has High Use Health Card)

Item Count

Does the patient have Prescription Subsidy Card?

Andrew Butler (Haematologist)  
NZMC 18341  
03 364 0640

### Patient Name

**Address:** Address

**Consultant:** Butler, Haematology

**GP:** GP

Pharmacy Stamp

Pharmacist Initials

Rx	Medicine:	avobenzene + homosalate + octisalate + octocrilene + oxybenzone lotion (Marine Blue)	
	Instructions:	Apply thickly every 2 hours	
	Quantity:	200 g, 2 repeats	
Endorsed for use in severe photosensitivity after allogeneic transplant			

Certified Extended Supply  
Generic Substitution is permitted

\_\_\_\_\_  
Signature of Prescriber

\_\_\_\_\_  
Date

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