

**PLEASE NOTE:** Only healthcare providers can e-prescribe/fax to Specialty Medical Drugstore

Patient Name:		<input type="checkbox"/> Male <input type="checkbox"/> Female		Drug/Food Allergies:	
Address:		City:		State: Zip:	
Phone# (Home):		Phone# (Mobile):			
Date of Birth:		<b>Email for tracking required:</b>			
Known Medical Conditions:		Other Medications:			
SMDrugstore does not share information, including email. Email will be used for order status and tracking only.					
<b>EnLyte® NDC: 64661-0711-30</b>  Quantity: 90 Capsules or _____  SIG: Take 1 Capsule by mouth daily or _____  *Refills: 0_1_2_3_ 1YR_ or _____					
Prescriber Signature:			Written Date:		
Phone #:			Fax #:		
Prescriber Address:		City:		State: Zip:	
Prescriber Name:			NPI/DEA Required:		
<p><b>MUST BE COMPLETED BY CUSTOMER</b> - Login at <a href="http://SMDrugstore.com">SMDrugstore.com</a>, create a profile, place your order and make payment, or include credit card for payment below. Have your physician ecribe or fax your prescription. Thank you.</p> <p> <input type="checkbox"/> 30 CAPSULES OF EnLyte® FOR <b>\$62.00</b> Insurance _____ RX BIN # _____ PCN _____         </p> <p> <input type="checkbox"/> 60 CAPSULES OF EnLyte® FOR <b>\$124.00</b> Cardholder ID _____         </p> <p> <input type="checkbox"/> 90 CAPSULES OF EnLyte® FOR <b>\$180.00</b> Group _____         </p> <p><b>**All orders are subject to a \$4.95 shipping fee (order online at <a href="http://smdrugstore.com">smdrugstore.com</a>) and a \$5.00 convenience fee if ordered over the phone</b></p> <p> <input type="checkbox"/> <b>FOR AUTOMATIC REFILLS</b> (Same card and address will be used each time) please sign below          _____ (You can opt out by calling 888-795-5826)       </p> <p>I authorize SPECIALTY MEDICAL DRUGSTORE to charge my credit card for the amount indicated.</p> <p>Credit Card Number: _____ Expiration Date: _____</p> <p>CVC Code: _____ (3 digit code on back of card. If Amex the 4 digit code on the front of the card)</p> <p>Customer Signature _____</p>					