

Carol Stewart, C.R.N.P.  
Lic. #1-045437  
Rx: 1178

AUBURN MONTGOMERY  
STUDENT HEALTH CENTER  
P. O. Box 244023  
Montgomery, AL 36124-4023  
(334) 244-3281

Ramona Lazenby, C.R.N.P.  
Lic. #1-039092  
Rx: 0703

Darlene Pierce, C.R.N.P.  
Lic. #1-134315  
RX: 3692

Maryluz Fuentes, M.D.  
(334) 286-3444  
DEA #BF 6451520  
AL #24127

Name Clyde Ellis Date 1/25/19  
Address \_\_\_\_\_

R

Malarone 250/100mg

Disp: 25

Sig: Take one pill a day. Begin 2 days before  
departure, continue through stay and  
for 7 days after return.

[Signature]

M.D. or C.R.N.P.

Label all prescriptions

Product Selection Permitted

Refill: 1 2 3 5 PRN NR

Dispense As Written \_\_\_\_\_, M.D. or C.R.N.P.

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