

FRAUDSNIFFR

Medical Records Cover Page

Client:	COMPREHENSIVE RISK SERVICES
Requester:	KELLIE HANNA
Claim #:	565519
Case #:	111962OT-02
Patient's Name:	Brittney McClung
Date of Birth:	10/7/1996

Our office was contacted and requested to secure records for the above-referenced patient from the following facility:

Dr./Facility:	Walgreens Pharmacy
Dr./Facility:	
Address:	
City/State/Zip:	
Telephone:	
Request Date:	10/24/2024
Date Cleared:	12/09/2024

Special Instructions:

Obtain medical records based on canvass result.

CUSTODIAN OF RECORDS
1901 EAST VOORHEES STREET
DANVILLE, IL 61834

DATE PRINTED: 01/05/2025

INSURANCE PROFILE

10/07/1996 through 01/05/2025

BRITTNEY MCCLUNG
4745 MARTIN ROAD
BEAVERTON, MI 48612
Patient Phone: (231) 679-0250
Date of Birth: 10/07/1996 Gender: FAllergy Conditions: None on file
Health: None on file

Rx-Store	Medication	Instructions	Drug Mfr	NDC	Class	Days Supply	Entered Date	Fill Qty	Fill Nbr	RPH	Pbr Name	DEA#	Pbr Phone	Plan	Cust Amt
781860-10489	FREESTYLE LIBRE 2 SENSOR	USE ONE SENSOR EVERY 14 DAYS	ABBOTT	57599- 0800-00	RX	28	10/27/2022	2		YYB	BOOMS, ERIN	MB5731434	(989)422- 5122	CASH	149.99
Total											1	Subtotal:		2	\$ 149.99
886729-11689	FREESTYLE PRECISION NEO STRIPS 25S	TEST EVERY DAY FOR BLOOD SUGAR	ABBOTT	57599- 1577-01	OT	25	02/17/2022	25		TDP	BOOMS, ERIN	MB5731434	(989)366- 2061	CASH	14.99
886729-11689	FREESTYLE PRECISION NEO STRIPS 25S	TEST EVERY DAY FOR BLOOD SUGAR	ABBOTT	57599- 1577-01	OT	25	03/12/2022	25		TDP	BOOMS, ERIN	MB5731434	(989)366- 2061	CASH	14.99
Total											2	Subtotal:		50	\$ 29.98
904058-11689	FREESTYLE LIBRE 2 SENSOR	USE DAILY	ABBOTT	57599- 0800-00	RX	28	04/17/2022	2		REM	BOOMS, ERIN	MB5731434	(989)422- 5122	SXCIRX	74.99
904058-11689	FREESTYLE LIBRE 2 SENSOR	USE DAILY	ABBOTT	57599- 0800-00	RX	28	07/21/2022	2		TDP	BOOMS, ERIN	MB5731434	(989)422- 5122	SXCIRX	74.99
Total											2	Subtotal:		4	\$ 149.98
1838937-9079	FREESTYLE LIBRE 2 SENSOR	USE ONE SENSOR EVERY 14 DAYS	ABBOTT	57599- 0800-00	RX	28	02/22/2023	2		JIW	BOOMS, ERIN	MB5731434	(989)422- 5122	GOODR X	87.71
Total											1	Subtotal:		2	\$ 87.71

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2025/01/10 04:09:46 4 /32

2025/01/10 04:09:46 5 /32

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Allergy Conditions: None on file
Health: None on file

Rx-Store	Medication	Instructions	Drug Mfr	NDC	Class	Days Supply	Entered Date	Fill Qty	Fill Nbr	RPH	Pbr Name	DEA#	Pbr Phone	Plan	Cust Amt
1840248-9079	DOXYCYCLINE MONOHYDRATE 100MG CAPS	TAKE 2 CAPSULES BY MOUTH EVERY DAY	ZYDUS	68382-0707-18	RX	30	03/08/2023	60		RPC	STOCKMAN, DAVID		(989)341-5078	MIDPA	1.00
Total											1	Subtotal:		60	\$ 1.00
1840251-9079	BENZOYL PEROXIDE 10% WASH 237GM	CLEANSE WITH A PEA SIZED AMOUNT TO AFFECTED AREAS ONCE DAILY FOLLOW WITH CLINDAMYCIN	RUGBY	00536-1351-42	OT	20	03/08/2023	237		RPC	STOCKMAN, DAVID		(989)341-5078	CASH	13.49
Total											1	Subtotal:		237	\$ 13.49
1840253-9079	CLINDAMYCIN 1% TOPICAL SOLN 60ML	AFTER BENZOYL PEROXIDE WASH, APPLY TO AFFECTED AREAS ONCE DAILY WITH COTTON SWAB	PERRIGO	45802-0562-02	RX	15	03/08/2023	60		RPC	STOCKMAN, DAVID		(989)341-5078	MIDPA	1.00
Total											1	Subtotal:		60	\$ 1.00
1840254-9079	SPIRONOLACTONE 25MG TABLETS	TAKE 1 TABLET BY MOUTH EVERY DAY	AMNEAL	53746-0511-05	RX	30	03/08/2023	30		TAG	HUNTER, ABBY MH5854131	(989)422-5122		MIDPA	0.00
Total											1	Subtotal:		30	\$ 0.00

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1840256-9079	SPIRONOLACTONE 100MG	TAKE 1 TABLET BY MOUTH EVERY DAY, TAKE PROBIOTIC AT OPPOSITE TIME	AMNEAL	53746-0515-01	RX	30	03/08/2023	30		RPC	STOCKMAN, DAVID		(989)341-5078	MIDPA	0.00
Total											1	Subtotal:		30	\$ 0.00
1841776-5841	HUMIRA PEN-CD/UC/HS STPKCIT FR 29G	INJECT 160 MG(2 PENS) ON DAY 1. THEN INJECT 80 MG(1 PEN) ON DAY 15. BEGIN MAINTENANCE DOSE ON DAY 29	ABBVIE	00074-0124-03	RX	28	07/24/2023	3		BHL	PITTEL, DANA		(989)401-3747	MCAIDA DV	0.00
Total											1	Subtotal:		3	\$ 0.00
1841778-5841	FREESTYLE LIBRE 2 SENSOR	USE ONE SENSOR EVERY 14 DAYS	ABBOTT	57599-0800-00	RX	28	07/21/2023	2		BHL	BOOMS, ERIN	MB5731434	(989)422-5122	GOODR X	87.71
Total											1	Subtotal:		2	\$ 87.71
1848220-9079	SPIRONOLACTONE 100MG	TAKE 1 TABLET BY MOUTH EVERY DAY IN THE MORNING	AMNEAL	53746-0515-01	RX	30	03/24/2023	30		RPC	STOCKMAN, DAVID		(989)341-5078	GOODR X	18.99
Total											1	Subtotal:		30	\$ 18.99

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1848221-9079	SPIRONOLACTONE 25MG TABLETS	TAKE 1 TABLET BY MOUTH EVERY DAY IN THE MORNING	AMNEAL	53746-0511-05	RX	30	03/24/2023	30		RPC	STOCKMAN, DAVID		(989)341-5078	GOODR X	7.19
Total											1	Subtotal:		30	\$ 7.19
1848306-9079	HUMIRA PEN-CD/UC/HS STPKCIT FR 29G	INJECT 160 MG(2 PENS) SUBCUTANEOUS ON DAY 1. THE INJECT 80 MG(1 PEN) ON DAY 15. MAINTAINENCE DOSING STARTS ON	ABBVIE	00074-0124-03	RX	29	03/24/2023	3		RPC	STOCKMAN, DAVID		(989)341-5078	MIDPA	0.00
Total											1	Subtotal:		3	\$ 0.00
1856246-9079	SPIRONOLACTONE 25MG TABLETS	TAKE 1 TABLET BY MOUTH EVERY DAY IN THE MORNING	AMNEAL	53746-0511-05	RX	30	04/18/2023	30		RPC	PITTEL, DANA		(989)401-3747	GOODR X	7.19
Total											1	Subtotal:		30	\$ 7.19
1856249-9079	HUMIRA PEN-CD/UC/HS STPKCIT FR 29G	INJECT 160MG(2 PENS) UNDER THE SKIN ON DAY 1, THEN 80MG(1 PEN) ON DAY 15. BEGIN	ABBVIE	00074-0124-03	RX	28	04/18/2023	3		RPC	PITTEL, DANA		(989)401-3747	MCAIDA DV	0.00

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Health: None on file

Rx-Store	Medication	Instructions	Drug Mfr	NDC	Class	Days Supply	Entered Date	Fill Qty	Fill Nbr	RPH	Pbr Name	DEA#	Pbr Phone	Plan	Cust Amt
DOSING ON DAY 29															
										Total	1	Subtotal:	3	\$ 0.00	
1856250-9079	SPIRONOLACTON E 100MG	TAKE 1 TABLET BY MOUTH ONCE DAILY, TAKE PROBIOTIC AT THE OPPOSITE TIME	AMNEAL	53746-0515-01	RX	30	04/18/2023	30		RPC	PITTEL, DANA		(989)401-3747	GOODR X	18.99
										Total	1	Subtotal:	30	\$ 18.99	
1856259-9079	BENZOYL PEROXIDE 10% WASH 237GM	CLEANSE WITH A PEA SIZE AMOUNT TO AFFECTED AREAS ONCE DAILY. FOLLOW WITH CLINDAMYCIN SOLUTION	RUGBY	00536-1351-42	OT	20	04/17/2023	237		RPC	PITTEL, DANA		(989)401-3747	GOODR X	11.32
										Total	1	Subtotal:	237	\$ 11.32	
1856710-9079	FREESTYLE LIBRE 2 SENSOR	USE ONE SENSOR EVERY 14 DAYS	ABBOTT	57599-0800-00	RX	28	04/18/2023	2		RPC	BOOMS, ERIN	MB5731434	(989)422-5122	GOODR X	87.71
										Total	1	Subtotal:	2	\$ 87.71	

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Date of Birth: 10/07/1996 Gender: F

Allergy Conditions: None on file
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Rx-Store	Medication	Instructions	Drug Mfr	NDC	Class	Days Supply	Entered Date	Fill Qty	Fill Nbr	RPH	Pbr Name	DEA#	Pbr Phone	Plan	Cust Amt
1864253-9079	SPIRONOLACTONE 25MG TABLETS	TAKE 1 TABLET BY MOUTH EVERY DAY IN THE MORNING	AMNEAL	53746-0511-05	RX	90	05/12/2023	90		RPC	PITTEL, DANA		(989)401-3747	MCAIDA DV	0.00
										Total	1	Subtotal:	90		\$ 0.00
1864319-9079	BENZOYL PEROXIDE 10% WASH 227GM	CLEANSE WITH A PEANUT SIZE AMOUNT TO AFFECTED AREAS ONCE DAILY. FOLLOW WITH CLINDAMYCIN SOLUTION	PERRIGO	45802-0318-34	OT	20	05/12/2023	227		TAG	PITTEL, DANA		(989)401-3747	MCAIDA DV	0.00
										Total	1	Subtotal:	227		\$ 0.00
1864320-9079	SPIRONOLACTONE 100MG	TAKE 1 TABLET BY MOUTH EVERY DAY. TAKE PROBIOTIC AT OPPOSITE TIME	AMNEAL	53746-0515-01	RX	90	05/12/2023	90		RPC	PITTEL, DANA		(989)401-3747	MCAIDA DV	0.00
										Total	1	Subtotal:	90		\$ 0.00
1864321-9079	CLINDAMYCIN 1% PLEDGETS 60S	APPLY TO AFFECTED AREAS ONCE DAILY AFTER BENZOYL PEROXIDE WASH	PERRIGO	45802-0263-37	RX	30	05/12/2023	60		RPC	PITTEL, DANA		(989)401-3747	MCAIDA DV	0.00

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Rx-Store	Medication	Instructions	Drug Mfr	NDC	Class	Days Supply	Entered Date	Fill Qty	Fill Nbr	RPH	Pbr Name	DEA#	Pbr Phone	Plan	Cust Amt
Total											1	Subtotal:	60		\$ 0.00
1864505-9079	HUMIRA PEN-CD/UC/HS STPKCIT FR 29G	INJECT 160MG UNDER THE SKIN ON DAY 1. THEN INJECT 80MG ON DAY 15. BEING MAINTENANCE DOSING ON DAY 29	ABBVIE	00074-0124-03	RX	28	05/12/2023	3		TAG	PITTEL, DANA		(989)401-3747	MCAIDA DV	0.00
Total											1	Subtotal:	3		\$ 0.00
1919363-9079	ALBUTEROL HFA INH (200 PUFFS) 8.7GM	INHALE 2 PUFFS BY MOUTH EVERY 4 HOURS AS NEEDED FOR WHEEZING	CIPLA	69097-0142-80	RX	16	11/07/2023	6		RPC	TAUGHER, THOMAS		(989)839-3100	PAID	10.00
Total											1	Subtotal:	6		\$ 10.00
1919364-9079	PREDNISONE 10MG** TABLETS	TAKE 4 TABLETS(40 MG) BY MOUTH DAILY FOR 4 DAYS	ACTAVIS	00591-5442-10	RX	4	11/07/2023	16		RPC	TAUGHER, THOMAS		(989)839-3100	PAID	2.50
Total											1	Subtotal:	16		\$ 2.50
1919365-9079	BENZONATATE 100MG	TAKE 1 CAPSULE(100 MG) BY MOUTH THREE	EPIC	42806-0714-01	RX	6	11/07/2023	20		RPC	TAUGHER, THOMAS		(989)839-3100	PAID	3.66

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Rx-Store	Medication	Instructions	Drug Mfr	NDC	Class	Days Supply	Entered Date	Fill Qty	Fill Nbr	RPH	Pbr Name	DEA#	Pbr Phone	Plan	Cust Amt
		TIMES DAILY FOR UP TO 7 DAYS AS NEEDED FOR COUGH													
1953920-9079	NAPROXEN 500MG TABLETS	TAKE 1 TABLET(500 MG) BY MOUTH TWICE DAILY WITH MEALS FOR 10 DAYS	GLENMARK	68462-0190-05	RX	10	02/24/2024	20		RPC	FILTER, JEFFERY	MF2470348	(989)633-1350	MIDME	0.00
										Total		1	Subtotal:	20	\$ 3.66
1953926-9079	CYCLOBENZAPRINE 10MG	TAKE 1 TABLET BY MOUTH THREE TIMES DAILY AS NEEDED MUSCLE SPASMS. IF TOO DROWSY MAY TAKE 1/2 TABLET DURING DAYTIME HOURS	UNICHEM	29300-0415-10	RX	7	02/24/2024	21		RPC	FILTER, JEFFERY	MF2470348	(989)633-1350	MIDME	0.00
										Total		1	Subtotal:	20	\$ 0.00
1955895-9079	PREDNISONE 10MG** TABLETS	TAKE 1 TO 2 TABLETS BY MOUTH TWICE DAILY. DO NOT TAKE	ACTAVIS	00591-5442-10	RX	5	03/01/2024	20		AAB	BORTEL, KIRK	BB2891390	(989)633-1350	MIDME	0.00
										Total		1	Subtotal:	21	\$ 0.00

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WITH IBUPROFEN OR OTHER NSAIDS															
										Total	1	Subtotal:	20	\$ 0.00	
1955898-9079	HYDROCODONE/ACETAMINOPHEN 5-325 TB	TAKE 1 TO 2 TABLETS BY MOUTH NIGHTLY AS NEEDED FOR MODERATE PAIN	MALLINCKR ODT	00406-0123-05	C2	3	03/01/2024	12		AAB	BORTEL, KIRK	BB2891390	(989)633-1350	MIDME	0.00
										Total	1	Subtotal:	12	\$ 0.00	
1957128-9079	CYCLOBENZAPRINE 10MG	TAKE 1/2 TO 1 TABLET BY MOUTH TWICE DAILY AS NEEDED	UNICHEM	29300-0415-10	RX	10	03/06/2024	20		RPC	POLISKEY, JAMIE	BP1857258	(989)633-1350	MIDME	0.00
										Total	1	Subtotal:	20	\$ 0.00	
1957397-9079	HYDROCODONE/ACETAMINOPHEN 5-325 TB	TAKE 1 TABLET BY MOUTH EVERY 6 HOURS AS NEEDED FOR SEVERE PAIN FOR UP TO 12 DOSES.	MALLINCKR ODT	00406-0123-05	C2	3	03/06/2024	12		JIW	POLISKEY, JAMIE	BP1857258	(989)633-1350	MIDME	0.00
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Rx-Store	Medication	Instructions	Drug Mfr	NDC	Class	Days Supply	Entered Date	Fill Qty	Fill Nbr	RPH	Pbr Name	DEA#	Pbr Phone	Plan	Cust Amt
1958909-9079	HYDROCODONE/ ACETAMINOPHEN 5-325 TB	TAKE 1 TO 2 TABLETS BY MOUTH NIGHTLY AS NEEDED FOR MODERATE PAIN FOR UP TO 6 DAYS. DO NOT TAKE WITH TYLENOL	MALLINCKR ODT	00406- 0123-05	C2	6	03/13/2024	12		AAB	BORTEL, KIRK	BB2891390	(989)633- 1350	MIDME	0.00
										Total	1	Subtotal:	12		\$ 0.00
1962352-9079	GABAPENTIN 300MG	TAKE 1 CAPSULE AT BEDTIME X 3 NIGHTS, THEN 1 CAPSULE TWICE DAILY X 3 DAYS, THEN 1 THREE TIMES DAILY THEREAFTER	TEVA	45963- 0556-50	C5	30	03/25/2024	81		BMD	SZAJENKO, JOHN	BS6735534	(989)631- 9267	MIDME	0.00
										Total	1	Subtotal:	81		\$ 0.00
1976293-9079	CYCLOBENZAPRI NE 10MG	TAKE 1 TABLET BY MOUTH DAILY AS NEEDED	UNICHEM	29300- 0415-10	RX	30	05/14/2024	30		RPC	SZAJENKO, JOHN	BS6735534	(989)631- 9267	PERX	2.92
										Total	1	Subtotal:	30		\$ 2.92

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THIS INFORMATION MUST BE USED AND STORED IN ACCORDANCE WITH HIPAA POLICIES

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CUSTODIAN OF RECORDS
1901 EAST VOORHEES STREET DANVILLE, IL 61834

2025/01/10 04:09:46 13 /32

2025/01/10 04:09:46 14 /32



CUSTODIAN OF RECORDS
1901 EAST VOORHEES STREET
DANVILLE, IL 61834

INSURANCE PROFILE

DATE PRINTED: 01/05/2025

10/07/1996 through 01/05/2025

BRITTNEY MCCLUNG
4745 MARTIN ROAD
BEAVERTON, MI 48612
Patient Phone: (231) 679-0250
Date of Birth: 10/07/1996 Gender: F

Allergy Conditions: None on file
Health: None on file

Rx-Store	Medication	Instructions	Drug Mfr	NDC	Class	Days Supply	Entered Date	Fill Qty	Fill Nbr	RPH	Pbr Name	DEA#	Pbr Phone	Plan	Cust Amt
1976311-9079	HYDROCODONE/ ACETAMINOPHEN 5-325 TB	TAKE 1 TABLET BY MOUTH EVERY NIGHT	MALLINCKR ODT	00406- 0123-05	C2	10	05/14/2024	10		RPC	SZAJENKO, JOHN	BS6735534	(989)631- 9267	PERX	2.30
Total											1	Subtotal:	10		\$ 2.30
1984591-9079	CYCLOBENZAPRI NE 10MG	TAKE 1 TABLET BY MOUTH DAILY AS NEEDED	UNICHEM	29300- 0415-10	RX	30	06/05/2024	30		AAB	SZAJENKO, JOHN	BS6735534	(989)631- 9267	PERX	2.92
Total											1	Subtotal:	30		\$ 2.92
1987452-9079	METOPROLOL TARTRATE 25MG TABLETS	TAKE 1 TABLET(25 MG) MYLAN BY MOUTH TWICE DAILY		00378- 0018-05	RX	30	06/14/2024	60		MEB	MCAULEY, DANIELLE	MM6574582	(989)246- 3500	PERX	7.71
1987452-9079	METOPROLOL TARTRATE 25MG TABLETS	TAKE 1 TABLET(25 MG) MYLAN BY MOUTH TWICE DAILY		00378- 0018-05	RX	30	07/11/2024	60		SKT	MCAULEY, DANIELLE	MM6574582	(989)246- 3500	PERX	7.71
1987452-9079	METOPROLOL TARTRATE 25MG TABLETS	TAKE 1 TABLET(25 MG) MYLAN BY MOUTH TWICE DAILY		00378- 0018-05	RX	30	10/23/2024	60		SKT	MCAULEY, DANIELLE	MM6574582	(989)246- 3500	PERX	7.71
Total											3	Subtotal:	180		\$ 23.13
1992584-9079	CYCLOBENZAPRI NE 10MG	TAKE 1 TABLET BY MOUTH DAILY AS NEEDED	UNICHEM	29300- 0415-10	RX	30	07/02/2024	30		RPC	SZAJENKO, JOHN	BS6735534	(989)631- 9267	PERX	2.92

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CUSTODIAN OF RECORDS
1901 EAST VOORHEES STREET DANVILLE, IL 61834

CUSTODIAN OF RECORDS
1901 EAST VOORHEES STREET
DANVILLE, IL 61834

INSURANCE PROFILE

DATE PRINTED: 01/05/2025

10/07/1996 through 01/05/2025

BRITTNEY MCCLUNG
4745 MARTIN ROAD
BEAVERTON, MI 48612
Patient Phone: (231) 679-0250
Date of Birth: 10/07/1996 Gender: F

Allergy Conditions: None on file
Health: None on file

Rx-Store	Medication	Instructions	Drug Mfr	NDC	Class	Days Supply	Entered Date	Fill Qty	Fill Nbr	RPH	Pbr Name	DEA#	Pbr Phone	Plan	Cust Amt
										Total	1	Subtotal:	30		\$ 2.92
2036714-9079	CYCLOBENZAPRINE 10MG	TAKE 1 TABLET BY MOUTH DAILY AS NEEDED	UNICHEM	29300-0415-10	RX	30	10/22/2024	30		RPC	SZAJENKO, JOHN	BS6735534	(989)631-9267	PERX	2.92
										Total	1	Subtotal:	30		\$ 2.92
2415639-8559	FREESTYLE LIBRE 2 SENSOR	USE ONE SENSOR EVERY 14 DAYS	ABBOTT	57599-0800-00	RX	28	03/27/2023	2		JMF	BOOMS, ERIN	MB5731434	(989)422-5122	GOODRX	87.71
										Total	1	Subtotal:	2		\$ 87.71
							Total Scripts:	46			Total Price:				\$ 813.23
							Using generics you saved a total of:								\$ 0.00
							Using more generics you could have saved a total								\$ 0.00
							Your insurance saved you a total of:								\$ 101,178.91
							Your cash quantity discount saved you a total								\$ 0.00

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CUSTODIAN OF RECORDS
1901 EAST VOORHEES STREET DANVILLE, IL 61834

PAT LAST NAMEFIRSTPAT ADDRESSPAT PHONE# BIRTH DATE

RX NUMBERDRUG NAMEDRUG MFRCTLPLANRX IMAGE ID
DOC NAMEDOC ADDRESSDOC PHONE#DEA#
ORIG DATEQTYREFILLS DAYS SUPPLYRX COMMENTS
ENTER DATECIND ENT/VERFILL QTYREFILLCUST AMTTOT AMTFILL SOLD DATECLAIM #PARTIAL CODEPLAN
AUTH NBRAUTH BY

MCCLUNG	,	BRITTNEY	4745 MARTIN ROAD BEAVERTON, MI 48612					(231)679-0250	10/07/1996
RX 1779873	FREESTYLE LIBRE 2 SENSOR			ABBOTT		RX	0907944166212481110		
BOOMS, E 9249 W LAKE CITY RD HOUGHTON LAKE, MI 48612							(989)422-5122 MB5731434		
SIG: USE TO TEST D									
09/24/2021	2	4	14						
09/02/2022	KSG/JIM	1	ORIG	74.99	0.00	09/02/2022			

PAT LAST NAMEFIRSTPAT ADDRESSPAT PHONE# BIRTH DATE

RX NUMBERDRUG NAMEDRUG MFRCTLPLANRX IMAGE ID
DOC NAMEDOC ADDRESSDOC PHONE#DEA#
ORIG DATEQTYREFILLS DAYS SUPPLYRX COMMENTS
ENTER DATECIND ENT/VERFILL QTYREFILLCUST AMTTOT AMTFILL SOLD DATECLAIM #PARTIAL CODEPLAN
AUTH NBRAUTH BY

MCCLUNG, BRITTNEY4745 MARTIN ROAD BEAVERTON, MI 48612(231)679-025010/07/1996
RX 0778788FREESTYLE LIBRE 2 SENSORABBOTTRX1168917163770792515
MOLINARI, P 1100 E MICHIGAN AVE GRAYLING, MI 48612(989)348-0313MM1893381
SIG: APPLY BY TOPICAL ROUTE AND USE AS DIRECTED
11/23/20211014
10/14/2022PMS/YAA1ORIG74.990.0010/14/2022

2025/01/10 04:09:46 18 /32

PAT LAST NAMEFIRSTPAT ADDRESSPAT PHONE# BIRTH DATE

RX NUMBERDRUG NAMEDRUG MFRCTLPLANRX IMAGE ID
DOC NAMEDOC ADDRESSDOC PHONE#DEA#
ORIG DATEQTYREFILLS DAYS SUPPLYRX COMMENTS
ENTER DATECINDENT/VERFILL QTYREFILLCUST AMTTOT AMTFILL SOLD DATECLAIM #PARTIAL CODEPLAN
AUTH NBRAUTH BY

MCCLUNG, BRITTNEY4745 MARTIN ROAD BEAVERTON, MI 48612(231)679-025010/07/1996

RX 0836211FREESTYLE LIBRE 2 SENSORABBOTTRX1168956163155943310
BOOMS, E 9249 W LAKE CITY RD HOUGHTON LAKE, MI 48612(989)422-5122MB5731434
SIG: USE TO TEST QD
XFER TO STORE: 0RX#: 0000000RPH INIT:ENT INIT: TDP09/01/2022XFER FROM STORE DEA:RPH INIT: TDP
CLOSE CMMTS: RX IS CLOSED BY TRANSFERRX APP.XFER COMPETITOR AMAZON PHARMACY(855)745-5725
09/13/20212PRN0

RX 0839808FREESTYLE LIBRE 2 SENSORABBOTTRXSXCIRX1168948163249841113
BOOMS, E 9249 W LAKE CITY RD HOUGHTON LAKE, MI 48612(989)422-5122MB5731434
SIG: USE TO TEST D
XFER TO STORE: 11887RX#: 1284065RPH INIT: KAKENT INIT: JPD08/15/2022XFER FROM STORE DEA: FW0998736RPH INIT: TDP
09/24/202121128

09/26/2021PMS/TDP2ORIG74.9951.5709/26/2021T1210926C6EBXSXCIRX
10/22/2021PRB/REM2RFL00174.9951.5710/22/2021D82110228G4PDSXCIRX
11/12/2021MLR/TDP2RFL00274.9951.5711/12/2021DG21111256Q2QSXCIRX
12/19/2021MLR/TDP2RFL00330.0085.9512/19/2021213533446467021999SXCIRX
01/21/2022EMP/LAW2RFL00474.9951.5701/21/2022DH2201217VOEPSXCIRX
02/18/2022EMP/REM2RFL00574.9959.0002/18/2022D6220218CA8D5SXCIRX

PAT LAST NAMEFIRSTPAT ADDRESSPAT PHONE# BIRTH DATE

RX NUMBER	DRUG NAME	DRUG MFR	CTL	PLAN	RX IMAGE ID	ID
DOC NAME	DOC ADDRESS				DOC PHONE#	DEA#
ORIG DATE	QTY	REFILLS	DAYS SUPPLY	RX COMMENTS		
ENTER DATE	CIND	ENT/VER	FILL QTY	REFILL	CUST AMT	TOT AMT
AUTH NBR	AUTH BY				FILL SOLD DATE	CLAIM #
					PARTIAL CODE	PLAN
RX 0860093	FREESTYLE LIBRE 2 SENSOR	ABBOTT				
MOLINARI, P	1100 E MICHIGAN AVE GRAYLING, MI 48612		RX		1168917163770792515	
SIG: APPLY BY TOPICAL ROUTE AND USE AS DIRECTED					(989)348-0313	MM1893381
11/23/2021	1	0				
RX 0938520	DEXCOM G6 SENSOR (3 PACK)	DEXCOM				
BOOMS, E	9249 W LAKE CITY RD HOUGHTON LAKE, MI 48612		RX		1168934165970001818	
SIG: USE TO MONITOR BS FOR 10 DAYS WITH EACH SENSOR					(989)422-5122	MB5731434
08/05/2022	9	3				
08/05/2022	SBG/REM	0				
0						
RX 0941529	FREESTYLE LIBRE 2 SENSOR	ABBOTT				
BOOMS, E	9249 W LAKE CITY RD HOUGHTON LAKE, MI 48612		RX	SXCIRX	1188747166058221814	
SIG: USE TO TEST D					(989)422-5122	MB5731434
09/24/2021	2	5				
RX 0962289	FREESTYLE LIBRE 2 SENSOR	ABBOTT				
BOOMS, E	9249 W LAKE CITY RD HOUGHTON LAKE, MI 48612		RX		1168981166601066014	
SIG: USE ONE SENSOR Q 14 DAYS					(989)422-5122	MB5731434
10/17/2022	2	11				
10/17/2022	MLR/REM	0				
0						

19 /322025/01/10 04:09:46

PAT LAST NAMEFIRSTPAT ADDRESSPAT PHONE# BIRTH DATE

RX NUMBERDRUG NAMEDRUG MFRCTLPLANRX IMAGE ID
DOC NAMEDOC ADDRESSDOC PHONE#DEA#
ORIG DATEQTYREFILLS DAYS SUPPLYRX COMMENTS
ENTER DATECIND ENT/VER FILL QTYREFILLCUST AMTTOT AMTFILL SOLD DATECLAIM #PARTIAL CODEPLAN
AUTH NBRAUTH BY

MCCLUNG, BRITTNEY4745 MARTIN ROAD BEAVERTON, MI 48612(231)679-025010/07/1996

RX 1284065FREESTYLE LIBRE 2 SENSORABBOTT RX1188747166058221814
BOOMS, E 9249 W LAKE CITY RD HOUGHTON LAKE, MI 48612(989)422-5122MB5731434
SIG: USE TO TEST D
09/24/20212514

RX 1284079FREESTYLE LIBRE 2 SENSORABBOTT RX1188758166058362315
BOOMS, E 9249 W LAKE CITY RD HOUGHTON LAKE, MI 48612(989)422-5122MB5731434
SIG: USE TO TEST D
XFER TO STORE: 9079 RX#: 1779873 RPH INIT: JIM ENT INIT: KSG 09/02/2022XFER FROM STORE DEA: FW1044267 RPH INIT: AWJ
09/24/20212514
08/15/2022AJS/KAK1ORIG74.990.0008/15/2022

2025/01/10 04:09:4620 / 32

PAT LAST NAMEFIRSTPAT ADDRESSPAT PHONE# BIRTH DATE

RX NUMBERDRUG NAMEDRUG MFRCTLPLANRX IMAGE ID
DOC NAMEDOC ADDRESSDOC PHONE#DEA#
ORIG DATEQTYREFILLSDAYS SUPPLYRX COMMENTS
ENTER DATECINDENT/VERFILL QTYREFILLCUST AMTTOT AMTFILL SOLD DATECLAIM #PARTIAL CODEPLAN
AUTH NBRAUTH BY

MCCLUNG, BRITTNEY601 WASHINGTON AVE ROSCOMMON, MI 48653-8776(231)679-025010/07/1996

RX 0829272FREESTYLE LIBRE 2 READER DEVICEABBOTT
BOOMS, E 9249 W LAKE CITY RD HOUGHTON LAKE, MI 48653-8776RXSXCIRX1168910162948348518
SIG: USE TO MONITOR BS(989)422-5122MB5731434
08/20/20211190

08/23/2021STO/KAK1ORIG64.9912.7608/24/2021DE2108238F9Z7SXCIRX
08/20/2021SBG/REM0
0

RX 0829297HYDROXYZINE PAMOATE 25MG CAPSULESIMPAX
BOOMS, E 9249 W LAKE CITY RD HOUGHTON LAKE, MI 48653-8776RXSXCIRX1168940162948619115
SIG: TK 1 C PO TID PRF ITCHING(989)422-5122MB5731434
08/13/202130010

2025/01/10 04:09:4621/32

PAT LAST NAMEFIRSTPAT ADDRESSPAT PHONE# BIRTH DATE

RX NUMBER	DRUG NAME	DRUG MFR	CTL	PLAN	RX IMAGE ID	ID
DOC NAME	DOC ADDRESS				DOC PHONE#	DEA#
ORIG DATE	QTY	REFILLS	DAYS	SUPPLY	RX COMMENTS	
ENTER DATE	CIND	ENT/VER	FILL QTY	REFILL	CUST AMT	TOT AMT
AUTH NBR	AUTH BY				FILL SOLD DATE	CLAIM #
					PARTIAL CODE	PLAN
08/20/2021	SBG/REM	30	ORIG		4.83	0.00
RX 0830197	TRUE PLUS LANCETS 33G 100S		TRIVIDIA		08/24/2021	212325412101026999
	BOOMS, E 9249 W LAKE CITY RD HOUGHTON LAKE, MI 48653-8776				OT	1168922162983139615
	SIG: TEST EVERY FOR BS					(989)422-5122 MB5731434
08/24/2021	100	1		0		
RX 0836014	FREESTYLE LIBRE 2 SENSOR		ABBOTT		RX	1168970163154402714
	BOOMS, E 9249 W LAKE CITY RD HOUGHTON LAKE, MI 48653-8776					(989)422-5122 MB5731434
	SIG: TEST EVERY DAY FOR BS					
09/13/2021	2	0	28			
09/13/2021	LLT/TDP	0	ADDRFL			
0						

PAT LAST NAMEFIRSTPAT ADDRESSPAT PHONE# BIRTH DATE

RX NUMBERDRUG NAMEDRUG MFRCTLPLANRX IMAGE ID
DOC NAMEDOC ADDRESSDOC PHONE#DEA#
ORIG DATEQTYREFILLSDAYS SUPPLYRX COMMENTS
ENTER DATECINDENT/VERFILL QTYREFILLCUST AMTTOT AMTFILL SOLD DATECLAIM #PARTIAL CODEPLAN
AUTH NBRAUTH BY

MCCLUNG, BRITTNEY709 W BEECH ST GLADWIN, MI 48624(231)679-025010/07/1996

RX 0817292TRI-SPRINTEC TABLETS 28STEVA
LAGATTUTA, D 1250 E MICHIGAN AVE GRAYLING, MI 48624
SIG: TK 1 T PO D
07/13/2021281128

07/13/2021XXX/TDP28ORIG0.0014.3207/18/2021211943210422037999SXCIRX
07/13/2021XXX/TDP0
08/24/2021MLR/TDP28RFL0010.0017.6508/24/2021212364918534024999SXCIRX
09/18/2021YYY/REM28RFL0020.0019.7909/24/2021212611025919028999SXCIRX
10/19/2021YYY/REM28RFL0030.0019.7910/22/2021212921047235029999SXCIRX
RX 0860040PANTOPRAZOLE 40MG TABLETSMYLAN
MOLINARI, P 1100 E MICHIGAN AVE GRAYLING, MI 48624
SIG: TK 1 T PO D FOR 10 DAYS
11/23/20211000

23 /32
2025/01/10 04:09:46

PAT LAST NAME

FIRST

PAT ADDRESS

PAT PHONE# BIRTH DATE

RX NUMBER	DRUG NAME	DRUG MFR	CTL	PLAN	RX IMAGE ID	ID
DOC NAME	DOC ADDRESS				DOC PHONE#	DEA#
ORIG DATE	QTY	REFILLS	DAYS SUPPLY	RX COMMENTS		
ENTER DATE	CIND	ENT/VER	FILL QTY	REFILL	CUST AMT	TOT AMT
AUTH NBR	AUTH BY				FILL SOLD DATE	CLAIM #
					PARTIAL CODE	PLAN
11/23/2021	XXX/LAW	0				
0						
RX 0860050	HYOSCYAMINE SULFATE 0.125MG TABLETS	ACELLA				
MOLINARI, P	1100 E MICHIGAN AVE GRAYLING, MI 48624				1168970163770480212	
SIG: TK 1 T PO QID PRN					(989)348-0313	MM1893381
11/23/2021	20	0	0			
11/23/2021	MLR/LAW	0				
0	GRAYLING HOSPITAL					
RX 0861516	PANTOPRAZOLE 40MG TABLETS	MYLAN				
MOLINARI, P	1100 E MICHIGAN AVE GRAYLING, MI 48624				1168971163770480413	
SIG: TK 1 T PO D FOR 10 DAYS					(989)348-0313	MM1893381
11/30/2021	10	0	10			
11/30/2021	YYY/TDP	0		ADDRFL		
0						
RX 0862023	HYOSCYAMINE SULFATE 0.125MG TABLETS	ACELLA				
MOLINARI, P	1100 E MICHIGAN AVE GRAYLING, MI 48624				1168970163770480212	
SIG: TK 1 T PO QID PRN					(989)348-0313	MM1893381
12/01/2021	20	0	5			
12/01/2021	YYY/TDP	0		ADDRFL		
0						
RX 0862843	HYOSCYAMINE SULFATE 0.125MG TABLETS	ACELLA				
MOLINARI, P	1100 E MICHIGAN AVE GRAYLING, MI 48624				1168970163770480212	
SIG: TK 1 T PO QID PRN					(989)348-0313	MM1893381
12/03/2021	20	0	5			
12/03/2021	YYY/REM	0		ADDRFL		
0						
RX 0870925	ALBUTEROL HFA INH (200 PUFFS) 8.5GM	TEVA				
CLARK, D	1100 E MICHIGAN AVE GRAYLING, MI 48624				1168968164078168510	
SIG: INL 2 PFS PO Q 4 H PRF BRONCHOSPASM					(989)348-0313	FC2954243
XFER TO STORE: 11689	RX#: 0875632	RPH INIT: TDP	ENT INIT: YYY	01/12/2022	XFER FROM STORE	DEA: FW0998736
12/29/2021	8.500	0	16			
12/29/2021	XXX/TDP	8.500	ORIG	10.00	34.89	12/30/2021
12/29/2021	XXX/TDP	0				213632408653005998
0						SXCIRX
RX 0870926	PREDNISONE 20MG TABLETS	ACTAVIS				
CLARK, D	1100 E MICHIGAN AVE GRAYLING, MI 48624				1168969164078168619	
SIG: TK 1 T PO BID					(989)348-0313	FC2954243
12/29/2021	10	0	5			
12/29/2021	XXX/TDP	10	ORIG	2.29	0.00	12/30/2021
12/29/2021	XXX/TDP	0				213632409076042999
0						SXCIRX

2025/01/10 04:09:46 24 /32

PAT LAST NAMEFIRSTPAT ADDRESSPAT PHONE# BIRTH DATE

RX NUMBER

DOC NAME

ORIG DATE

ENTER DATE

AUTH NBR

DRUG NAME

DOC ADDRESS

QTY

CIND

ENT/VER

AUTH BY

REFILLS

FILL QTY

REFILL

DAYS SUPPLY

FILL

RX COMMENTS

CUST AMT

TEVA

8.5GM

0

16

0

ADDRFL

CTL

PLAN

RX IMAGE ID

DOC PHONE#

DEA#

FILL SOLD DATE

CLAIM #

PARTIAL CODE

PLAN

RX 0875632

ALBUTEROL HFA INH (200 PUFFS)

8.5GM

TEVA

RX

1168968164078168510

(989)348-0313

FC2954243

CLARK, D

1100 E MICHIGAN AVE GRAYLING, MI 48624

SIG: INL 2 PFS PO Q 4 H PRF BRONCHOSPASM

01/12/2022

8.500

0

16

01/12/2022

YYY/TDP

0

ADDRFL

2025/01/10 04:09:4625 /32

PAT LAST NAME

FIRST

PAT ADDRESS

PAT PHONE# BIRTH DATE

RX NUMBER	DRUG NAME	DRUG MFR	CTL	PLAN	RX IMAGE ID	DOC PHONE#	DEA#
DOC NAME	DOC ADDRESS						
ORIG DATE	QTY	REFILLS	DAYS SUPPLY	RX COMMENTS			
ENTER DATE	CIND	ENT/VER	FILL QTY	REFILL	CUST AMT	TOT AMT	FILL SOLD DATE
AUTH NBR	AUTH BY						CLAIM #
							PARTIAL CODE
							PLAN

MCCLUNG, BRITTNEY 709 W BEECH ST GLADWIN, MI 48624 (231)679-0250 10/07/1996

RX 0817291 SPIRONOLACTONE 100MG TABLETS AMNEAL RX SXCIRX 1168976162618449818
LAGATTUTA, D 1250 E MICHIGAN AVE GRAYLING, MI 48624 (989)348-5461 BL4898334
SIG: TK 1 T PO D
07/13/2021 30 11 30

07/13/2021 XXX/TDP 30 ORIG 10.00 10.85 07/18/2021 211943210000022999 SXCIRX
07/13/2021 XXX/TDP 0
0 0
01/21/2022 EMP/LAW 30 RFL001 10.00 10.64 01/21/2022 220213290533014999 SXCIRX
02/17/2022 YYY/REM 30 RFL002 10.00 10.64 02/18/2022 220481038167010999 SXCIRX

RX 0830194 FREESTYLE LIBRE 2 SENSOR ABBOTT RX PDMI 1168922162983139615
BOOMS, E 9249 W LAKE CITY RD HOUGHTON LAKE, MI 48624 (989)422-5122 MB5731434
SIG: TEST EVERY DAY FOR BS
XFER TO STORE: 0 RX#: 0000000 RPH INIT: ENT INIT: XXX 03/08/2022 XFER FROM STORE DEA: RPH INIT:
CLOSE CMMTS: E BOOMS (989)4225122 NPI:1518599307 VIA ERX XFER COMPETITOR

08/24/2021 2 1 14
08/24/2021 SSB/TDP 2 ORIG 74.99 44.53 08/24/2021 TE2108248Y5L2 SXCIRX
09/13/2021 LLT/TDP 1 RFL001 0.00 62.65 09/13/2021 VI13V001011435 PDMI

RX 0830195 FREESTYLE PRECISION NEO STRIPS 25S ABBOTT OT 1168922162983139615
BOOMS, E 9249 W LAKE CITY RD HOUGHTON LAKE, MI 48624 (989)422-5122 MB5731434
SIG: TEST EVERY DAY FOR BS
XFER TO STORE: 11689 RX#: 0886701 RPH INIT: TDP ENT INIT: YYY 02/17/2022 XFER FROM STORE DEA: FW0998736 RPH INIT: REM

08/24/2021 25 1 30
08/24/2021 SSB/TDP 25 ORIG 14.99 0.00 08/24/2021
01/21/2022 PMS/LAW 25 RFL001 14.99 0.00 01/21/2022

RX 0836154 FREESTYLE LIBRE 2 SENSOR ABBOTT RX 1168917163155614513
BOOMS, E 9249 W LAKE CITY RD HOUGHTON LAKE, MI 48624 (989)422-5122 MB5731434

SIG: TEST QD
XFER TO STORE: 0 RX#: 0000000 RPH INIT: ENT INIT: XXX 03/08/2022 XFER FROM STORE DEA: RPH INIT:
CLOSE CMMTS: E BOOMS (989)4225122 NPI:1518599307 VIA ERX XFER COMPETITOR
09/13/2021 1 0 0
09/13/2021 MLR/REM 0

RX 0839766 FREESTYLE LIBRE 2 SENSOR ABBOTT RX 1168917163155614513
BOOMS, E 9249 W LAKE CITY RD HOUGHTON LAKE, MI 48624 (989)422-5122 MB5731434

SIG: TEST QD
XFER TO STORE: 0 RX#: 0000000 RPH INIT: ENT INIT: XXX 03/08/2022 XFER FROM STORE DEA: RPH INIT:
CLOSE CMMTS: E BOOMS (989)4225122 NPI:1518599307 VIA ERX XFER COMPETITOR
09/13/2021 1 0 0

2025/01/10 04:09:46 26 /32

PAT LAST NAME	FIRST	PAT ADDRESS	PAT PHONE#	BIRTH DATE
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RX NUMBER	DRUG NAME	DRUG MFR	CTL	PLAN	RX IMAGE ID	ID
DOC NAME	DOC ADDRESS				DOC PHONE#	DEA#
ORIG DATE	QTY	REFILLS	DAYS	SUPPLY	RX COMMENTS	
ENTER DATE	CIND	ENT/VER	FILL QTY	REFILL	CUST AMT	TOT AMT
AUTH NBR	AUTH BY					
RX 0876110	MEDROXYPROGESTERONE 10MG TABLETS	GREENSTONE				
LAGATTUTA, D	1250 E MICHIGAN AVE GRAYLING, MI 48624					
SIG: TK 1 T PO D FOR 5 DAYS						
XFER TO STORE: 11689	RX#: 0882375	RPH INIT: REM	ENT INIT: LLT	02/02/2022		
01/13/2022	5	4	0			
01/13/2022	XXX/REM	0				
0						
RX 0876111	LETROZOLE 2.5MG TABLETS	ACCORD				
LAGATTUTA, D	1250 E MICHIGAN AVE GRAYLING, MI 48624					
SIG: TK 1 T PO D FOR 5 DAYS	TK QD 3 THROUGH 7 OF CYCLE					
XFER TO STORE: 11689	RX#: 0882374	RPH INIT: REM	ENT INIT: LLT	02/02/2022		
01/13/2022	5	6	0			
01/13/2022	XXX/REM	0				
0						
RX 0882374	LETROZOLE 2.5MG TABLETS	ACCORD				
LAGATTUTA, D	1250 E MICHIGAN AVE GRAYLING, MI 48624					
SIG: TK 1 T PO D FOR 5 DAYS	TK QD 3 THROUGH 7 OF CYCLE					
01/13/2022	5	6	28			
02/02/2022	LLT/TDP	5				
ORIG		2.57	0.00			
RX 0882375	MEDROXYPROGESTERONE 10MG TABLETS	GREENSTONE				
LAGATTUTA, D	1250 E MICHIGAN AVE GRAYLING, MI 48624					
SIG: TK 1 T PO D FOR 5 DAYS						
01/13/2022	5	4	5			
02/02/2022	LLT/TDP	5				
ORIG		1.47	0.00			
RX 0886701	FREESTYLE PRECISION NEO STRIPS 25S	ABBOTT				
BOOMS, E	9249 W LAKE CITY RD HOUGHTON LAKE, MI 48624					
SIG: TEST EVERY DAY FOR BS						
02/17/2022	25	0	25			
02/17/2022	YYY/TDP	0				
0						
RX 0891977	FREESTYLE LIBRE 2 SENSOR	ABBOTT				
BOOMS, E	9249 W LAKE CITY RD HOUGHTON LAKE, MI 48624					
SIG: USE DAILY						
03/08/2022	2	1	0			
03/08/2022	RLM/TDP	0				
0						
RX 0895820	FREESTYLE PRECISION NEO STRIPS 25S	ABBOTT				
BOOMS, E	4433 W HOUGHTON LAKE DR HOUGHTON LAKE, MI 48624					
SIG: TEST QD FOR BLOOD SUGAR						
03/21/2022	25	0	25			
03/21/2022	ADV/REM	0				
0						
RX 0895850	FREESTYLE PRECISION NEO STRIPS 25S	ABBOTT				
BOOMS, E	4433 W HOUGHTON LAKE DR HOUGHTON LAKE, MI 48624					
SIG: USE TO TEST BS QD						
03/21/2022	25	1	25			

2025/01/10 04:09:46 27 /32

PAT LAST NAMEFIRSTPAT ADDRESSPAT PHONE# BIRTH DATE

RX NUMBERDRUG NAMEDRUG MFRCTLPLANRX IMAGE ID
DOC NAMEDOC ADDRESSDOC PHONE#DEA#
ORIG DATEQTYREFILLS DAYS SUPPLYRX COMMENTS
ENTER DATECIND ENT/VERFILL QTYREFILLCUST AMTTOT AMTFILL SOLD DATECLAIM #PARTIAL CODEPLAN
AUTH NBRAUTH BY

03/21/2022SBG/REM0

PAT LAST NAMEFIRSTPAT ADDRESSPAT PHONE# BIRTH DATE

RX NUMBERDRUG NAMEDRUG MFRCTLPLANRX IMAGE ID
DOC NAMEDOC ADDRESSDOC PHONE#DEA#
ORIG DATEQTYREFILLSDAYS SUPPLYRX COMMENTS
ENTER DATECINDENT/VERFILL QTYREFILLCUST AMTTOT AMTFILL SOLD DATECLAIM #PARTIAL CODEPLAN
AUTH NBRAUTH BY

MCCLUNG		, BRITTNEY		4745 MARTIN ROAD BEAVERTON, MI 48612							(231)679-0250		10/07/1996

RX 0916115		FREESTYLE PRECISION NEO STRIPS 25S					ABBOTT		OT		1168908165350315419		
BOOMS, E 4433 W HOUGHTON LAKE DR		HOUGHTON LAKE, MI 48612							(989)366-2061		MB5731434		

SIG: TEST QD FOR BLOOD SUGAR													
05/25/2022		25	0	25									

05/25/2022		ADV/REM		0	ADDRFL								
0													

PAT LAST NAMEFIRSTPAT ADDRESSPAT PHONE# BIRTH DATE

RX NUMBERDRUG NAMEDRUG MFRCTLPLANRX IMAGE ID
DOC NAMEDOC ADDRESSDOC PHONE#DEA#
ORIG DATEQTYREFILLSDAYS SUPPLYRX COMMENTS
ENTER DATECINDENT/VERFILL QTYREFILLCUST AMTTOT AMTFILL SOLD DATECLAIM #PARTIAL CODEPLAN
AUTH NBRAUTH BY

MCCLUNG, BRITTNEY601 WASHINGTON AVE ROSCOMMON, MI 48653-8776(231) 679-025010/07/1996

RX 0757193CLOMIPHENE* CITRATE 50MG TABLETSPARRXSXCIRX1168922160813304718
LAGATTUTA, D 1250 E MICHIGAN AVE GRAYLING, MI 48653-8776(989) 348-5461BL4898334
SIG: TK 1 T PO D FOR 5 DAYS
12/16/2020555

12/16/2020REM/REM5ORIG10.005.9212/16/2020203515962051045999SXCIRX
12/16/2020XXX/TDP0
0

RX 0759051METRONIDAZOLE 500MG TABLETSTEVARXSXCIRX1168971160867353015
LAGATTUTA, D 1250 E MICHIGAN AVE GRAYLING, MI 48653-8776(989) 348-5461BL4898334
SIG: TK 1 T PO BID FOR 7 DAYS
12/22/20201407
12/22/2020XXX/SXZ14ORIG7.380.0012/22/2020203575673162013999SXCIRX
12/22/2020XXX/SXZ0
0

RX 0764445CLOMIPHENE* CITRATE 50MG TABLETSPARRXSXCIRX1168998161047265417
LAGATTUTA, D 1250 E MICHIGAN AVE GRAYLING, MI 48653-8776(989) 348-5461BL4898334
SIG: TK 2 TS PO D FOR 5 DAYS
01/12/20211055
01/12/2021XXX/TDP10ORIG10.0021.2401/19/2021210124145713001999SXCIRX
01/12/2021XXX/TDP0
0

2025/01/10 04:09:4630 / 32

PAT LAST NAMEFIRSTPAT ADDRESSPAT PHONE# BIRTH DATE

RX NUMBERDRUG NAMEDRUG MFRCTLPLANRX IMAGE ID
DOC NAMEDOC ADDRESSDOC PHONE#DEA#
ORIG DATEQTYREFILLSDAYS SUPPLYRX COMMENTS
ENTER DATECINDENT/VERFILL QTYREFILLCUST AMTTOT AMTFILL SOLD DATECLAIM #PARTIAL CODEPLAN
AUTH NBRAUTH BY

MCCLUNG, BRITTNEY601 WASHINGTON AVE ROSCOMMON, MI 48653-8776(231)679-025010/07/1996
RX 0653596METRONIDAZOLE 500MG TABLETSTEVARX1168985157261466213
LAGATTUTA, D 1250 E MICHIGAN AVE GRAYLING, MI 48653-8776(989)348-0550BL4898334
SIG: TK 1 T PO BID FOR 7 DAYS
11/01/20191400

PAT LAST NAMEFIRSTPAT ADDRESSPAT PHONE# BIRTH DATE

RX NUMBERDRUG NAMEDRUG MFRCTLPLANRX IMAGE ID
DOC NAMEDOC ADDRESSDOC PHONE#DEA#
ORIG DATEQTYREFILLS DAYS SUPPLYRX COMMENTS
ENTER DATECIND ENT/VERFILL QTYREFILLCUST AMTTOT AMTFILL SOLD DATECLAIM #PARTIAL CODEPLAN
AUTH NBRAUTH BY

11/01/2019SBG/TDP0