



DocOrigin
Healthcare

Eclipse Corporation
100 Concourse Pkwy - Suite 120,
Hoover, AL 35244
Phone +1 678-408-1245



Prescription Forms

Customer Service Phone #: 1-800-562-6223
Physician's Line: 1-800-791-7658

PATIENT'S INFORMATION

Patient's Name:	Sex (circle):	Date of Birth:	Insurance ID #:
Shipping Address:			Phone Number:
City:	State:	Zip:	Alternate Phone Number:
Drug Allergies: ☐ Penicillin ☐ Cephalosporins ☐ Ampicillin ☐ Sulfa ☐ Erythromycin ☐ Aspirin ☐ Codeine ☐ Tetracycline ☐ Quinolones ☐ None Known ☐ Others:		Health Conditions: ☐ Diabetes ☐ Arthritis ☐ High Cholesterol ☐ Glaucoma ☐ Asthma ☐ Thyroid Disorder ☐ Osteoporosis ☐ Cancer ☐ Heart Condition	

Medication & Strength:	
Directions:	Qty
Refills: ☐ 0 ☐ 1 ☐ 2 ☐ 3 Other:	
Brand Only: ☐ Yes	

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Refills: ☐ 0 ☐ 1 ☐ 2 ☐ 3 Other:	
Brand Only: ☐ Yes	

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Brand Only: ☐ Yes	

PHYSICIAN'S INFORMATION

Physician's Name:	NPI:	DEA:
Street:		
City:	State:	Zip:
Phone:	Fax:	
Signature:	Date:	