

Notification of Provider Med Order Entry

Please complete this form and send to the Avel Pharmacy Routine Fax Line: 866-371-7310

Patient Label		

Date: Please review new orders from "Provider Order Entry". Notes: Please review new orders from "Provider Order Entry". Notes: Please review new orders from "Provider Order Entry". Notes: Please review new orders from "Provider Order Entry". Notes: Please review new orders from "Provider Order Entry". Notes: Please review new orders from "Provider Order Entry". Notes: Please review new orders from "Provider Order Entry".		
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