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## **PRESCRIPTION AGREEMENT**

I understand that the providers of Odibo Medical Group do not prescribe:

Xanax

Lunesta

Ambien

Restoril

Temazepam

or other benzodiazepines.

### **I UNDERSTAND THAT PAIN MEDICATIONS WILL NOT BE PRESCRIBED AT THE FIRST OFFICE VISIT.**

Once medical records have been received and reviewed by Odibo Medical Group providers, and all requested imaging (X-ray, CT, MRI) has been completed, pain medication may or may not be prescribed, at the discretion of the provider.

Patient Name (Printed): \_\_\_\_\_

Patient Signature: \_\_\_\_\_

Date: \_\_\_\_\_