



Dr. Ash  
Traveling Periodontics

Dr Ashnagar has TSBDE **Waiver**  
**on file for e-prescription** of  
valid until 02/17/2024

Dr Sajjad Ashnagar, DDS, MS  
Periodontist, Implantologist

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Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_

Allergy: \_\_\_\_\_

Birthday: \_\_\_\_\_

Address: \_\_\_\_\_

<p><b>Rx</b></p> <p><b>Ibuprofen 800 mg</b> <i>Disp. #24 (Twenty four)</i> <i>Take 1 tablet every 6 hours, as needed for pain.</i></p> <p>Refills 1 time.</p> <p>_____ DDS,MS Product selection permitted</p>	<p><b>Amoxicillin 500 mg</b> <i>Disp #21 (Twenty one)</i> <i>Take 1 tablet every 8 hours, until all gone.</i></p> <p>No Refills.</p> <p>_____ DDS,MS Product selection permitted</p>
<p><b>Tylenol #3</b> <i>Disp. #10 (Ten)</i> <i>Take 1 tab every 6hr as needed for pain.</i></p> <p>No Refills.</p> <p>_____ DDS,MS Product selection permitted</p>	<p><b>Chlorhexidine Oral Rinse 0.12%</b> <i>Disp 1 bottle (one)</i> <i>Rinse with 1/2 fl. oz. for 30 seconds b.i.d and expectorate. Do not rinse with water afterwards. Use rinse for 1 week.</i></p> <p>Refill 1 time.</p> <p>_____ DDS,MS Product selection permitted</p>
<p><b>Medrol Dosepak</b> <i>Disp 1 pack (one)</i> <i>Follow directions on the package.</i></p> <p>No Refills.</p> <p>_____ DDS,MS Product selection permitted</p>	<p><b>Zofran ODT 4mg</b> <i>Disp. #2 (Two)</i> <i>Dissolve 1 tablet on tongue every 8 hours, as needed for nausea.</i></p> <p>Refill 1 time.</p> <p>_____ DDS,MS Product selection permitted</p>
<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>