

SPRINGFIELD MAIN STREET APOTHECARY

102 MAIN ST

SPRINGFIELD, MA 01103

(555) 216-3643

DATE: 03/29/2025 14:18

RX#: 6855105

PATIENT: LINDGREN, XOCHITL

DOB: 05/06/1959

METFORMIN HCL 500MG TAB

NDC: 00093-1048-01

QTY: 60 DAYS SUPPLY: 30

PRESCRIBER: DR MELVIN NIKOLAUS

PLAN: WATERTOWN HEALTH PLAN

RETAIL PRICE	\$75.81
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INSURANCE PAID	\$65.81
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COPAY	\$10.00
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TOTAL	\$0.00
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VISA ****7308

AUTH 0

THANK YOU FOR CHOOSING US

KEEP FOR YOUR RECORDS

