

Children's Mercy Hospitals and Clinics 2401 Gillham Road Kansas City, MO 64108 Phone: (816) 915-5253 Fax: (816) 855-1929

Pt. Name:	
Pt. DOB:	
14 mg/day Nicotine Par per day)	tch (if smokes < 10 cigarettes
Week 1-6: apply 1	4 mg patch daily
 7mg/day Nicotine Patc 	h
Week 7-9: apply 7	mg patch daily
Dispense: Quantity covered	by insurance up to 12 weeks
FOR NICOTINE REPLACEMENT THERAPY PRESCRIPTION ONLY	
Prescriber's Signature	Prescriber's NPI #
Prescribers' Printed Name	

Date: _____