



Oregon CAREAssist COMPOUNDED DRUG ATTACHMENT

Ramsell Corporation Phone: 888-311-7632 Fax: 800-848-4241

Patient ID: _____ Patient Name: _____ DOB: _____

Pharmacy Name: _____

NPI Number: _____ Date of Service: _____

COMPONENTS – Drugs, Supplies, Empty Container

NDC #	Qty	Cost	Description
Ingredients:			
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Supplies, Empty Container:			
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Total Qty, Cost _____

RAMSELL CORPORATION ONLY			
Compounding Fee	_____	_____	
Dispensing Fee	_____	_____	
TOTAL PAYMENT	_____	_____	