

ANNOVERA RX

Patient Name: _____ DOB: _____

Address: _____

City: _____ State: ____ Zip _____

Annovera 24 hour Vaginal Ring

Sig: Insert ring vaginally for 21 days, remove for 7 days, wash with soapy water and repeat for 13 cycles.

Other: _____

Prescriber Name: _____

Address: _____

City: _____ State: ____ Zip: _____

Prescriber Signature: _____