



ONE SOURCE MEDICAL SOLUTIONS, INC.

ONE COMPANY. MULTIPLE SOLUTIONS.™

NPI NO.: 1144311531

DURABLE MEDICAL EQUIPMENT PRESCRIPTION/ORDER

Patient's First Name **Last Name**

Street Address **City, State, Zip**

Patient's HIC No.: **DOB:**

Date Prescribed **Estimated Length**

Patient's Diagnosis/ICD-10

Physician's Signature **Signature Date**

Print Physician's Name **NPI**

Physician's Address **City, State, Zip**

1555 W. MOCKINGBIRD LANE, STE. 210 ♦ DALLAS, TX 75235 ♦ TEL: (214) 421-7000 ♦ FAX: (214) 421-7001

WWW.ONESOURCEMEDICAL.COM

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