

DOSE INSTRUCTIONS

FOR: _____ UR: _____

PHARMACIST: _____ DATE: _____

ISONIAZID:

Give _____ ONCE per day
on an empty stomach



PYRIDOXINE (VITAMIN B6)

Give _____ ONCE per day

RIFAMPICIN:

Give _____ ONCE per day
on an empty stomach



PYRAZINAMIDE:

Give _____ ONCE per day
on _____ days of the week

ETHAMBUTOL:

Give _____ ONCE per day
on _____ days of the week

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