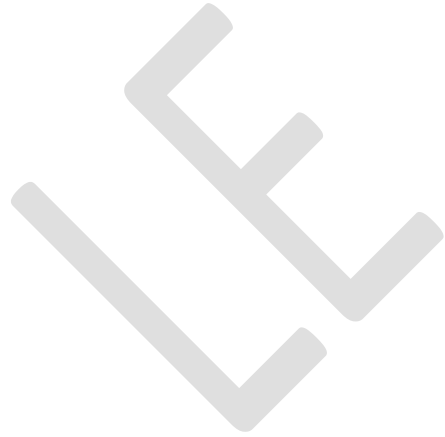


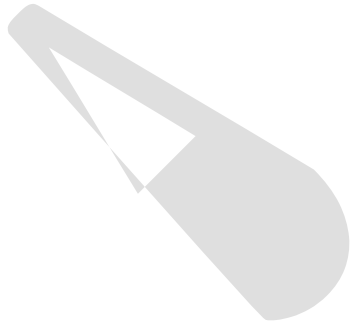
Patient name: _____

Date: _____

benzodiazepine receptor agonist



3. NOT consume other sedating medications or alcohol



4. NOT abruptly stop

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