

Patient Name: _____

Prescription Refill Policy

Patient Initials

_____ Prescription refills are handled Monday thru Wednesday from 9am to 4pm. Prescriptions will not be refilled after hours or on the weekends.

_____ Refills will not be approved on Fridays or when Dr. Hemler is out of the office.

_____ Requests for prescription refills require an appointment with the clinical assistant. Please be aware of when you are coming to the end of the supply of your medications, emergent appointments can not always be accommodated.

_____ No walk-in appointments for prescription refills will be accommodated.

_____ Prescription refills will only be approved for 3 months or 1 month for controlled substances, after which an appointment with Dr. Hemler is required.

_____ If you need to change the type of medication, an appointment with Dr. Hemler is required. The clinical assistant can not change medications. In emergent situations you may go to Immediacare, after contacting our office.

_____ If you lose or misuse a prescription, we will not authorize a refill without an appointment.

_____ No refills authorizations will be called in or faxed to the pharmacy.

_____ We are not responsible for getting your mail in prescriptions to your mail in pharmacy. This is the patient's responsibility.

Patient Signature

Date

Witness Signature