

Nominate/Change your Pharmacy

This will allow GP Practices to send prescriptions directly to your Nominated Pharmacy.

In preparation the Practice asks that you request your prescription in the usual manner either via your chosen pharmacy or via My Health Online.

The Practice will then forward your prescription to your Nominated Pharmacy from where you will collect your medication after 72 hours.

Please use this form to nominate your Pharmacy for your repeat prescriptions. You will only need to complete the form once unless you want to change your nominated pharmacy.

SIGNED:		
NAME:		
ADDRESS:		
D.O.B:	DATE:	
Nominated Pharmacy:		

Office Use: Added to system _____ Date:___