

REQUEST FOR ITEM/MEDICATION NOT ON REPEAT REQUEST LIST

You have requested an item/medication that is not listed as a repeat item/medication on your surgery records. This item cannot be issued without further information. In most circumstances it will be necessary for you to make an appointment to see the doctor who initially prescribed the medication or item for you.

Please supply the information requested below. We will contact you to let you know the outcome of this request.

INFORMATION ABOUT YOU:

Name

Date of birth

Date

Daytime contact number

INFORMATION ABOUT THE ITEM/MEDICATION:

What is the name, strength and dosage of the item/medication you are requesting?

When was the item/medication last prescribed?

Which GP prescribed it for you?

What instructions were you given by the doctor regarding further supplies of the item/medication?

How often do you use or take the item/medication?

Has the item/medication been effective in treating the condition for which it was prescribed?

Have you experienced any side effects on the medication?

Have you bought the same or similar item from the chemist, if so, when?

For surgery use only – please initial and date

Issued

Appt needed

Outcome informed