

Repeat Prescription Collection

Patient Consent Form

The purpose of this consent form is to allow a Pharmacy of your choice to collect your prescription on your behalf from your GP surgery.

The intention is that following you ordering your repeat medication in the usual way – the prescription will then automatically be collected by your chosen pharmacy. It will then be dispensed, ready for you to collect.

There are several points to note

- Sufficient time will be need to be given between ordering your repeat & collecting Your dispensed prescription – this should be 3 working days
- The usual method for ordering your repeat at the surgery still applies
- If you change the pharmacy where you get your prescription dispensed you will need to update the surgeries record otherwise the prescription will continue to be collected by the original pharmacy

We hope this provides an easy to use system which combines prescription ordering and dispensing.

Please complete the tear off below

I am happy for my GP surgery to make my repeat prescription available for collection by the pharmacy nominated below.

Pharmacy.....

Patient Name.....

Date of Birth.....

Address.....

.....

Patient Signature..... Date.....

Other family members this applies to:

..... Signature.....

..... Signature.....

..... Signature.....

..... Signature.....

