



**PSYCHIATRIC
CONSULTANTS
OF FLORIDA, LLC**

3595 SHERIDAN STREET, SUITE 109
HOLLYWOOD, FLORIDA 33021

(954) 967-6776 TELEPHONE
(954) 272-7848 FAX

*SPECIALIZING IN ADULT, CHILD AND ADOLESCENT,
FORENSIC PSYCHIATRY AND ADDICTION MEDICINE*

MEDICATION/PHARMACY POLICY

*Any patient requesting a refill must call their pharmacy and request a "refill request" to be faxed to this office. **There is a 24 hour turnaround time. DO NOT RUN OUT OF MEDICATION** – it is not guaranteed that the refill will be renewed the same day as requested.

*For those medications that require a prior authorization, it is the **PATIENTS RESPONSIBILITY** to call their insurance company and have the proper forms faxed to this office. **WE WILL NO LONGER BE CALLING** for these forms.

***This office does electronic prescribing. The following information is needed:**

Pharmacy Complete Name: _____

Pharmacy Complete Address (including zip code):

Pharmacy Telephone Number: _____

***Any medication changes that are needed require an appointment**

LAB/BLOOD WORK POLICY

*If using a laboratory **OTHER** than Memorial Hospital Outpatient, it is the **PATIENTS** responsibility to have the lab results sent to this office. **WE DO NOT CALL LABORATORIES** for results.

Patient Signature

Date

BOARD CERTIFIED BY THE
AMERICAN BOARD OF PSYCHIATRY AND NEUROLOGY
DIPLOMATE OF THE
AMERICAN BOARD OF ADDICTION MEDICINE