PLATINUM HEALTH CHRONIC MEDICATION ORDER FORM PHARMACY

For all chronic medicine orders and queries call 087 463 0408/09 on Mondays to Fridays from 8:30 until 17:00.

Tel: 087 463 0408/09 Fax: 086 577 0274

Email: zzgplatinum health chronic medication@platinum health.co.za

The ordering of chronic medication is necessary. Order medication five working days in advance, no chronic medication will be dispensed or be supplied on weekends.



CHRONIC MEDICATION ORDER FORM

| MAIN MEMBER SURNAME | | | | | | | | |
|---------------------------------|---|-------------------------|--|----------|---|--|--|--|
| MAIN MEMBER INITIALS | | | | | | | | |
| MEDICAL AID NUMBER | | | | | | | | |
| ADDRESS | | | | | | | | |
| | | | | | | | | |
| PATIENT INITIALS | | | | | | | | |
| | 3 | | | | 4 | | | |
| DURATION THAT | | Please mark with an "X" | | | | | | |
| MEDICATION MUST BE DISPENSED | | 1 month | | 3 months | | | | |
| TELEPHONE NUMBER | | | | | | | | |
| DATE OF ORDER | | | | | | | | |

Chronic medicine can be collected on Mondays to Fridays from 8:00 until 18:00.

Amended January 2021