

PRESCRIPTION COLLECTION SERVICES

We are now able to collect repeat prescriptions from Doctor's surgeries at Thorpewood, Rider Haggard Road and Thorpe Health Centre. For all other Surgeries in Norwich please ask for details. This will hopefully save you time and some journeys to and from the surgery.

We can offer you the following choices to get your repeat prescription:

1. Hand in your repeat request to us. We will send the request to, and collect the completed prescription from, the surgery. We will dispense it here at our Pharmacy to await collection at your convenience.
2. Telephone your repeat request to us. We will keep your repeat request here at the Pharmacy. You will then ring us, on telephone number 434890 or 439917, with your request. We will then send the request to, and collect the completed prescription from, the surgery. We will dispense it here at our Pharmacy to await collection at your convenience.
3. Hand your repeat request in at your surgery. Hand your repeat request into the surgery. They will send the completed prescription to us. We will dispense it here at our Pharmacy to await collection at your convenience.
4. E-Mail. E-mail your repeat request to: hamblinspharma29@gmail.com

Please allow **FOUR WORKING DAYS** between arrival of your request at the surgery and collection from our pharmacy.

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Hamblin's Pharmacy Ltd
29 Noble Close, Heartsease,
Norwich NR7 9RJ
Tel: 01603 434890/439917
Fax: 01603 709056
E-mail: hamblinspharma29@gmail.com

NAME: PHONE NO:
ADDRESS: MOBILE NO:
..... E-MAIL:

I, authorise HAMBLIN'S PHARMACY to COLLECT on my behalf, any prescriptions ordered by myself from my doctor's surgery, either in person or by means of electronic transfer.

I understand that I am free to withdraw from this service at any time I choose. (Please be good enough to let **US** know if you do.)

If you wish to be contacted by text when prescription is ready please circle YES / NO

SIGNED: DATED:

Please PRINT name and address below if signing on behalf of a patient.

MEDICAL PRACTICE:

COPY TO PATIENT – DATE:		FORM GIVEN BY :	
LOGGED ON COMPUTER-DATE		LOGGED ON BY:	
PATIENT INFO. SLIP SENT TO G.P			

