

MEDICATION REQUEST FORM FOR CO-MANAGED VA PATIENTS

Beaver Dam Clinic
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(920) 356-9415
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THE VA DOES NOT PROVIDE A PHARMACY SERVICE FOR NON VA PRESCRIPTIONS. However, we will review non-VA provider (NVAP) prescriptions as a courtesy to our veterans as long as the procedures below are followed. The prescription(s) must be reviewed and rewritten by the patient's VA provider, so please allow **30 days** for processing.

1. All prescriptions must be accompanied by this completed form
2. Include supporting progress notes, discharge summary (if hospitalized), and/or labs specific to the requested medication
3. The VA formulary must be adhered to (please see www.madison.va.gov/dualcare)
4. Copy of prescription

To be completed by the PATIENT:

Patient Last Name _____ First Name _____

Patient Last Four of Social Security # _____ Date of Birth _____

Patient Daytime Telephone # _____

Name of VA Provider and Team _____

To be completed by the NON-VA PROVIDER:

Provider Name _____

Provider Telephone # _____ FAX # _____

Please circle: NEW RX CHANGE IN EXISTING RX RENEWAL

Please attach a copy of all requested prescriptions

Office Use Only
