

**Phoenix Pharmacy:**

925 E Covey Lane

Phoenix, AZ 85024

ALF Phone: (623) 815-8965 - ALF Fax: (623) 815-1222

SNF Phone: (623) 587-5425 - SNF Fax: (623) 587-5715

Tucson Pharmacy:

10900 N Stallard Place, Suite 120

Oro Valley, AZ 85737

Main Phone: (520) 818-2883

Main Fax: (520) 818-6546

Telephone New Order/Refill

Patient Name: _____ DOB: _____ Allergies: _____

Facility Name: _____ Facility Phone: _____

Dr. Name: _____ Dr. DEA: _____

Dr. Phone: _____ Dr. Fax: _____

Dr. Address: _____

Caller: _____ Pharmacist: _____

All medications listed below are QS for a 30-day supply. Twelve refills will be given unless otherwise noted. This form is for Saliba's Pharmacy Use Only and NOT VALID to be filled by any other pharmacy

Rx Number/medication	Strength	Qty	Directions	Refills
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Physicians Signature_____
Date