

MEDICATION REFILL POLICY

Please contact your pharmacy for medication refills. Your pharmacy will fax us a medication refill request which the physician will review. Refill authorizations require 72 hours. Narcotics will not be refilled.

Signature: _____ Date: _____

Family Medical Leave and Disability Paperwork

Forms directly from your employer require time for the staff to complete. We are happy to complete these forms for you, however, there is a 7-10 business day turnaround and a fee for this service payable at the time of service.

Signature: _____ Date: _____

Lab Charges

If you receive lab services you will get a separate charge from the lab that performs the service. Please contact them directly with any questions.

Signature: _____ Date: _____

I understand and give consent that my medical information may be shared between Linzi L. Stewart D.O. PLLC DBA: Harmony Women's healthcare. I also hereby consent using or disclosing my protected health information for the purpose of providing treatment to me, obtaining payment for healthcare services rendered to me or to carry out the practice's healthcare operations.

Signature: _____ Date: _____

[Small illegible stamp]