

Request for supply for the purpose of dispensing by Community Pharmacy to NHS Scotland patients



Fax to: 0800 169 5432 or email to: welwyn.orders@roche.com

All sections must be fully completed – please telephone Roche if you do not already have an active account for ordering

1. To be able to process your orders please provide the following information:

Pharmacy Name: Account Ref:

Address:.....

Postcode:..... Associated Health Board

Telephone Number:.....

Email Address:.....

2. Prescription details

Products are only supplied to community pharmacies in Scotland in response to the receipt of valid NHS Scotland hospital prescriptions specifying these medicines. The unique prescription number must be referenced to place an order for this product and volumes will be audited against prescriptions issued.

Prescription number	Prescription date	Product	No. Packs required
		Copegus (ribavirin) 200mg 112 Tablets	
		Copegus (ribavirin) 200mg 168 Tablets	
		Copegus (ribavirin) 400mg 56 Tablets	
		Esbriet (pirfenidone) 267mg 63 Caps 2 week initiation pack	
		Esbriet (pirfenidone) 267mg 252 Caps	
		Esbriet (pirfenidone) 267mg 270 Caps	
		Esbriet (pirfenidone) 267mg 63 Tablets	
		Esbriet (pirfenidone) 267mg 252 Tablets	
		Esbriet (pirfenidone) 801mg 84 Tablets	
		Herceptin Subcutaneous(trastuzumab) Vial 600mg/5ml – TAYSIDE BOARD ONLY!	
		Pegasys (pegylated interferon) Prefilled syringe 90mcg 0.5ml (1)	
		Pegasys (pegylated interferon) Prefilled syringe 135mcg 0.5ml (1)	
		Pegasys (pegylated interferon) Prefilled syringe 180mcg 0.5ml (4)	
		Pegasys (pegylated interferon) Prefilled PEN 135mcg 0.5ml (1)	
		Pegasys (pegylated interferon) Prefilled PEN 180mcg 0.5ml (4)	
		RoActemra (tocilizumab) Subcutaneous Prefilled syringe 162mg 0.9ml (4)	
		Tarceva (erlotinib) 25mg Tablets	
		Tarceva (erlotinib) 100mg Tablets	
		Tarceva (erlotinib) 150mg Tablets	
		Zelboraf (vemurafenib) 240mg Tablets	

I declare that the information I have given on this form is correct and complete. I understand that, if it is not, appropriate legal action may be taken. To enable the Common Services Agency to confirm the amount of products supplied to patients and for the purposes of prevention, detection, and investigation of crime, I consent to the disclosure of relevant information from this form including to and by the NHS Scotland Practitioner & Counter Fraud Services. This declaration is made on behalf of the responsible pharmacist detailed below and the Community Pharmacy NHS Contractor.

3. Signed and confirmed by the responsible pharmacist

Roche Products Limited

Hexagon Place
6 Falcon Way, Shire Park
Welwyn Garden City
Herts AL7 1TW

Supply Chain
Team

Tel. 0800 731 5711
Fax 0800 169 5432

welwyn.rx_custserv@roche.com

Reg in England No 100674

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Full name (block capitals)

Signature:..... Date:.....

GPhC Pharmacist registration no: NHS Pharmacy contractor no:

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