



Pain Care
Physicians

Phone: (512) 326-5440
Fax: (512) 326-8660
www.paincarephysicians.com
Physical Medicine & Rehabilitation/Pain Medicine

Refill Request

Please take this form to your Pharmacy when refilling your medication:

Dear Patient:

1. Please be sure you have a contact on file with our office which has current and specific instructions on medication refill policy.
2. Regarding pain medication, we need to see you at least every other month to check on how the medicine is working. Ideally laboratory evaluations are performed a minimum once or twice per year, including blood and urine tests.
3. After your visit please ask the pharmacy to fax a refill request to our main office in Austin. We will check the computer and fax a response at the latest within 72 Hours (working days only). If your request is more urgent, please alert our staff and we may be able to expedite your request.
4. If your medication includes a triplicate form (example: Methadone, Duragesic, Oxycontin, Avenza) we need to see you monthly for a checkup visit and you must be present to receive the prescription. Also the pharmacy may ask for identification.

Important Information:

- Pain Care Physicians main phone: (512) 326-5440
- Pain Care Physicians prescription refill: (512) 326-5440 (option 6)
- Pain Care Physicians fax: (512) 326-8660
- Pharmacy Calls: ask for operator and request facility representative.

Pharmacist:

Please fax refill requests to: (512) 326-8660

Sincerely,
Pain Care Physicians