

CONSENT TO OBTAIN EXTERNAL PRESCRIPTION HISTORY/E-PRESCRIBING CONSENT FORM

By authorizing Dr. Lawrence Katin and/or Dr. Charles Gawthrop, you allow us to view your external prescription history via the RxHub service. This will provide the physician with information about medications the patient is already taking to minimize the number of adverse drug events.

I understand that prescription history from multiple other unaffiliated medical providers, insurance companies, and pharmacy benefit managers may be viewable by my provider and staff here, and it may include prescriptions back in time for several years.

By signing this consent form you are agreeing that Dr. Lawrence Katin and Dr. Charles Gawthrop can request and use your prescription medication history from other healthcare providers and/or third party benefit payers for treatment purposes.

My signature certifies that I read and understand the scope of my consent and that I authorize access.

I Accept

I Refuse

Signature of Patient or Legal Guardian

Date

Print Patient's Name

Print Legal Guardian, if applicable