



### Stock Medication Order Form

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|---|--|----------|
| <input type="checkbox"/> Central County | 1950 Alameda de las Pulgas, SM, 94403      | 573-3571 |
| <input type="checkbox"/> Coastside      | 225 Cabrillo Hwy, HMB, 94019               | 726-6369 |
| <input type="checkbox"/> East Palo Alto | 2415 University Ave., EPA, 94303           | 363-4030 |
| <input type="checkbox"/> North County   | 375 89 <sup>th</sup> St., Daly City, 94015 | 301-8650 |
| <input type="checkbox"/> South County   | 802 Brewster Ave., Redwood City, 94063     | 363-4111 |

Drug	Qty Ordered	Qty Received	Cost
Benzotropine 1mg oral			
Diphenhydramine 25mg oral			
Diphenhydramine 50mg/ml inj			
<b>Epinephrine 0.3mg auto-inject*</b>			
Fluphenazine Decanoate 25mg/ml, 5ml vial			
Haloperidol 2mg oral			
<b>Haloperidol Decanoate 50mg/ml, 5ml vial*</b>			
<b>Haloperidol Decanoate 100mg/ml, 5ml vial*</b>			
<i>Lorazepam 1mg oral**</i>			
Naltrexone 50mg oral			
<b>Naloxone 4mg nasal spray*</b>			
PPD skin test			
Trihexyphenidyl 2mg oral			

**\*Notify BHRS pharmacy of client name upon dispensing**

*\*\*Limited to central county only per P&T committee approval on 11/2019*

Select one	Pharmacy	Phone	Fax
	Ted's Pharmacy	650-349-1373	650-349-1745
	Half Moon Bay Pharmacy	650-726-5542	650-726-0513

Ordered by:	_____	MD	Date _____
Filled by:	_____	R.PH	Date _____
Received by:	_____	RN/MD	Date _____

**Ordering Procedure:**

- 1) Select clinic location
- 2) Order needed quantity of floor stock medications
- 3) Needs to have MD name on order
- 4) Select one pharmacy and fax stock order form to pharmacy
- 5) Ask pharmacy to fill and deliver order within 24 hours to the clinic
- 6) Fax or send the completed order form to Barbara Liang at: 650-366-5292, MLH 118