

Schedule 8 Rural Prescription Example PHC Remote

This is a sample of an UnRestricted Schedule 8 Medicine Rural Prescription that meets legislative requirements.

RURAL PRESCRIPTION DEPARTMENT OF HEALTH AND COMMUNITY SERVICES										
PATIENT NAME: Demo, Fred			UP TO 12 MONTHS SUPPLY MAY BE ORDERED. FOR PRN ITEMS PLEASE STATE QUANTITY				HRN : 2003389			MEDICARE NO:
DOB: 23-Feb-1976	AGE: 35 years	Weight: 95Kg (05-Sep-2006)	COMMUNITY: Engawala Community Health Centre			ALLERGIES: Penicillins				
ITEM Full Description - form		DIRECTIONS		VALID DATES	DATE QTY	DATE QTY	DATE QTY	DATE QTY	DATE QTY	DATE QTY
Morphine (30mg) - Modified Release Tablet		1 Modified Release Tablet Oral Twice Daily		18-Aug-2011 to 17-Oct-2011	/	/	/	/	/	/
					/	/	/	/	/	/
					/	/	/	/	/	/
					/	/	/	/	/	/
					/	/	/	/	/	/
					/	/	/	/	/	/
					/	/	/	/	/	/
					/	/	/	/	/	/
PRESCRIBING DMO (PRESCRIBER NO) Douglas, John (5769782) - Engawala Community Health Centre		Script Created On: 18-Aug-2011 <i>J Douglas</i> SIGNATURE		Supply sixty (60) tablets immediately and a further sixty (60) after a minimum of 20 days						
NAME Pharmacy Copy - Page 1 of 1										

Prescribing Medical Practitioner **must** sign the prescription

The quantity of each supply and duration to lapse between each supply (where applicable) **must** be manually entered (either typed or handwritten) in words and numbers

References: [Requirements for Prescriptions for Schedule 8 Substances \(S8s\)](#), [Schedule 8 Medicines, Information Sheet - UnRestricted Schedule 8 Medicine Prescriptions](#) and [Prescriptions](#).