Rights and Responsibilities

For Patients



Rights and Responsibilities

To ensure the best care possible, as a Patient receiving our Pharmacy services, you should understand your role and rights and responsibilities involved in your own plan of care.

Patient Rights

- To receive the appropriate or prescribed services in a professional manner without discrimination relative to your age, sex, race, religion, ethnic origin, sexual preference or physical or mental handicap and while being fully informed as to our pharmacy's policies, procedures and charges
- To be treated with friendliness and respect by every individual representing our Pharmacy, who provided treatment or services for you and be free from neglect or abuse
- To assist in the development and preparation of your plan of care that is designed to satisfy, as best as possible, your current needs
- To be provided with adequate information from which you can give your informed consent for commencement of services, the continuation of services, the transfer of services to another health care provider, or the termination of services
- To request and receive complete and up-to-date information relative to your condition, treatment, alternative treatments, risk of treatment or care plans
- To request and receive data regarding treatment, services, or costs thereof, privately and with confidentiality
- To be given information as it relates to the uses and disclosure of your plan of care
- To have your plan of care remain private and confidential, except as required and permitted by law
- To receive instructions on handling drug recall
- To receive pharmacy health and safety information to include consumers rights and responsibilities
- The right to speak to a health professional
- To decline participation, revoke consent/enrollment at any point in time

Patient Responsibilities

- To agree to a schedule of services and report any cancellation of scheduled appointments and/or treatments
- To participate in the development and updating of a plan of care
- To communicate whether you clearly comprehend the course of treatment and plan of care
- To comply with the plan of care and clinical instructions
- To accept responsibility for your actions, if refusing treatment or not complying with the prescribed treatment
- To respect the rights of Pharmacy personnel
- To notify your physician and the pharmacy with any potential side effects and/or complications
- To notify the pharmacy via telephone when medication supply is running low so a refill may be shipped to you
 promptly
- To notify your prescriber if you need more refills on a prescription and have it sent to CRx Specialty Solution Pharmacy
- To submit any forms that are necessary to participate in the program to the extent required by law
- To give accurate clinical and contact information and to notify the patient management program of any changes
- To follow up with your insurance in the case your medication requires a prior authorization

Contact Us: (877) 646-1716 www.crxspecialty.com