

DOC PAM MEDICATION POLICY:

PATIENTS ON CONTROLLED OR PSYCHOACTIVE MEDICATIONS

This agreement shall be signed by a parent for each child that is on one of the medications above.

NAME : _____ DOB: _____

As the patient, or the parent of a minor who is on a controlled medication or a psychoactive medication, I agree to the following:

- “Med Check” appointments are required at a minimum of every 90 days. This is Florida Law and there will be no exceptions. If the patient has not had a “Med Check” in over 90 days, refill requests will not be completed.
- “Med Check” appointments may be required more often than every 90 days and will be at the discretion of Dr. Trout.
- “Med Check” appointment scheduling is the responsibility of the patient/parent. We suggest that the NEXT appointment be made at the time of your current appointment. It will not be the office’s responsibility to remind you when your next “Med Check” is due.
- Once stable on the same medication for a minimum of 6 months, AND weight gain and growth are normal, “Med Check” appointments may be completed via Telemedicine.
- Telemedicine appointments must be attended by the parent AND the patient, in an environment conducive to an appointment and with reliable WIFI access. Parents should have a current weight and height available to report.
- Telemedicine appointments for “Med Checks” may take place for every OTHER “Med Check” appointment. Therefore, 2 out of 4 “Med Checks” for the year must be in person, and 2 may be via Telemedicine.
- Well Visits may not “double” as “Med Checks” unless there are no changes to be made on medication, and this is approved by Dr. Trout.
- Medication refill requests will only be accepted through the patient portal. There is a 72-hour turnaround for these requests. Please start a “new case” for each request instead of just adding on to the last message from 90 days prior. Please do not put multiple refill requests under a single patient’s portal message (ie: requests for siblings)
- Medication refills will be sent electronically to the pharmacy you have on file, or the pharmacy you request via portal message at the time of the refill request.
- If you change your pharmacy after a prescription has been sent electronically, a written prescription will be provided for pick-up in person to be taken to the pharmacy of your choice.

Dr. Trout may prescribe these medications for your child but also has the right to refer to a Psychiatrist for further evaluation or medication management.

Signed: _____

Printed Name: _____ DATE: _____