

Community Pharmacy Discharge Medicines Service (CP DMS) Communication Template

<b>Community Pharmacy Discharge Medicines Service (CP DMS) Communication Template</b>					Ref No:
<b>General Practice ↔ Community Pharmacy</b>					Today's Date:
Patient's name:		Patient's H&C No:		Patient's DOB:	
Patient's address:		Pharmacy:			
		GP Practice:			
Date on Discharge letter:					
Direction of Communication: <i>Tick as appropriate</i>					
<input type="checkbox"/> From Community Pharmacy to GP/GPP Sent by: [ insert CP contact name here ] Please send response(s) to: [ insert CP contact no. or email here ]			<input type="checkbox"/> From GP/GPP to Community Pharmacy Sent by: [ insert GP contact name here ] Please send response(s) to: [ insert GP contact no. or email here ]		
Following medicines reconciliation and review of this patient's discharge summary the following queries were identified:					
Action(s) Required:					
Direction of Response: <i>Tick as appropriate</i>					
<input type="checkbox"/> From GP to Community Pharmacy Sent by: [ insert GP contact name here ] Please send response(s) to: [ insert GP contact no. or email here ]			<input type="checkbox"/> From Community Pharmacy to GP/GPP Sent by: [ insert CP contact name here ] Please send response(s) to: [ insert CP contact no. or email here ]		
Date: <i>Date of Response here</i>					
Notes:					