

# RX REFILL REQUEST

RX refills are done M-F during business hours 9am-2pm.  
Please Complete the form to request a prescription refill.

After you submit your request, our office will review your  
Information and contact you within 48 hours or less.  
Some requests may need a Telehealth from Dr.Melnick

\*Weekend/Holiday requests will be received the  
following business day.

If you have not been seen by Dr.Melnick in 3 months,  
You may be required to make an appointment per  
Regulation requirements.

Last Name, First

Date of Birth (required)

Phone \*SMS Text for confirmation

Email

**SMS Disclaimer.** By providing a telephone  
number and submitting the form you are  
consenting to be contacted by SMS text message  
(our message frequency may vary).Message & data rates may apply.

**Privacy Policy:** No mobile information will be shared With third parties/affiliates for marketing/promotional purposes. All the above categories exclude messaging Originator opt-in date and information, this information Will not be shared with any third parties.

Medication/Dose/Quantity

Pharmacy/Zip Code