



Pediatric Associates, PC

Pediatric Associates of Johns Creek, PC

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ADD/ADHD Prescription Medication Policy

This policy pertains to parents of children who are treated with ADD/ADHD medications. We would like to take this opportunity to inform you of our office policies.

Children with ADD/ADHD need a physician evaluation every **THREE MONTHS** in order to refill their medication. A complete well child exam and blood work (if necessary) are done annually to monitor the child's progress and for possible side effects of the medications.

Our office requests that each patient choose one of our physicians to manage their ADD/ADHD in order to maintain continuity and to give your child the best possible medical care. These visits need to be scheduled in advance. Because visits are timely and require discussion about progress on medications and school performance, there are a limited number of ADD/ADHD evaluation appointments on our schedule and they do fill quickly. If your schedule is limited, we recommend scheduling the next follow up as you leave our office. Otherwise, calling two months in advance is strongly recommended.

In most cases, the physician will provide three months of prescriptions at each visit. In some cases, they do not, so planning ahead for prescription refills by calling a week in advance is recommended. **PRESCRIPTIONS CANNOT BE REFILLED WITHOUT A MINIMUM OF THREE DAYS NOTICE.** This allows your doctor and nurses time to review your child's file and verify updated evaluations and blood work. According to state and federal laws, ALL controlled ADD/ADHD prescriptions must be picked up from our office; it is NOT permissible to fax, mail, or call these prescriptions in to your pharmacy. When prescriptions are picked up, you may be asked to show a valid form of ID.

Our office staff strives to assist you in efficiently obtaining your prescriptions and scheduling your evaluation appointments. We appreciate your assistance in this matter.

-The Physicians and Staff of Pediatric Associates, PC and Pediatric Associates of Johns Creek, PC

Child's Name

Parent Signature

Date