

Agreement

- I have answered all the questions honestly, and provided complete and accurate information that reflects my up to date medical history and information. I understand that the Pharma Health clinical team takes my answers in good faith and base their prescribing decisions accordingly; and that incorrect information can potentially harm my health.
- I have read the key facts about this medication & condition, including the medication effectiveness and the alternative treatment options available.
- I will read the Patient Information Leaflet (PIL) supplied with the medicine including the dosage instructions, side effects and contra-indications prior to starting the treatment
- I understand that I should have my blood pressure regularly checked
- I understand that the most common side effects of Priligy are nausea, dizziness, headache, light headed, fainting and diarrhoea. If I feel dizzy or faint after taking Priligy then I will not drive, operate heavy machinery or undertake hazardous activities.
- I understand that if I experience any changes in mood including thoughts of harm or suicide or any seizures, I will discontinue treatment immediately and seek urgent medical attention from my GP.
- I understand that whilst decisions relating to my treatment are made jointly between the prescriber and I, the final decision to issue a prescription will always be with the pharmacist prescriber understand that if the selected treatment is not suitable, I will be refunded and signposted to another point of care.
- I take responsibility to inform my GP of the medication/treatment I receive from this service.
- I will also immediately notify the Pharma Healthc linical team and my GP if I experience any side effects, or I start any new medication, or my medical conditions change during the course of this treatment.

	ave read a	nd understood	the above	points,	and I agree	to act	on
them							

We are legally required to inform your GP about the treatment/medication we are providing under this service, so they can update your medical record on their system and continue to provide safe medical care. Please provide your GP's contact details.

Generated on: 04-24-2024 04:26:42 am