

Hendricks Pharmacy Travel Health Information Service  
137 Harvard Ave. Claremont, CA 91711

Phone: 909-624-1611      Fax: 909-626-8963      Email: [travel@hendrickspharmacy.com](mailto:travel@hendrickspharmacy.com)

**\*\*Please fill out the information below and then fax or email back to Hendricks Pharmacy\*\***

Today's Date: \_\_\_\_\_

Name of person submitting form: \_\_\_\_\_

Hospital/clinic affiliation: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone/Fax numbers: \_\_\_\_\_

Email address: \_\_\_\_\_

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Patient name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Description of consult/information request (attach any supporting information on separate pages):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Consult requested by (please check one):

\_\_\_ **ASAP**

\_\_\_ **24 hours**

\_\_\_ **24 to 48 hours**

\_\_\_ **48 to 72 hours**

**CONFIDENTIALITY NOTICE**

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