



## MooseMap Delivery Driver Script

“Hi! It is time for your monthly medication cycle, and the pharmacy has tried unsuccessfully to reach you for the last week. I have brought your monthly medications to you today and need to ask you a few questions to be sure we have the most current prescriptions and information.

- What is the best phone number for us to reach you?
- Are you having any problems with any medications?
  - If patient replies **YES** → Stop and call pharmacy
- Have you had any new medications added since the last cycle?
  - If patient replies **YES** → Stop and call pharmacy
- Have any medications been stopped by your doctor?
  - If patient replies **YES** → Stop and call pharmacy
- Did the doctor change the directions or dose of any medications?
  - If patient replies **YES** → Stop and call pharmacy
- Have you stopped or changed any medicines on your own?
  - If patient replies **YES** → Stop and call pharmacy
- Did you stop taking medications this month because of hospitalization or vacation?
  - If patient replies **YES** → Stop and call pharmacy
- How much medication do you have remaining?”
  - Record the amount remaining and leave packs as prepared

- Have the patient review each medication you have with you.
- Ensure that the patient would like to keep all medications.

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12925 Hwy 601 S., Ste 310  
Midland, NC 28107  
(704) 888-2114  
(704) 888-2125 fax

8374 West Franklin Street, PO Box 67  
Mount Pleasant, NC 28124  
(704) 436-9613  
(704) 436-6521 fax

270 Copperfield Blvd., NE Ste 101  
Concord, NC 28025  
(704) 784-9613  
(704) 789-9366 fax

1408 West Innes Street 1113 North Main Street  
Salisbury, NC 28144  
(704) 636-6340  
(704) 636-0917 fax

Kannapolis, NC 28081  
(704) 932-9111  
(704) 932-2270 fax

\*Compounding Lab Location\*

- Of the medications that you are delivering, bring any unneeded or unwanted medication back to the pharmacy.
- Be sure to advise patient medications will be charged to his or her account or CC on file, as usual.
- Delivery should be executed on iPad or with receipt signature, as usual.

***If any problems, questions or concerns are noted, please call the pharmacy for guidance.***

***If the patient or representative is not at home, please bring all medications back to the pharmacy. If medications are left with anyone other than the patient, please instruct the representative to have the patient call the pharmacy as his or her earliest convenience.***

***This sheet and any notes should be returned to the pharmacy with receipts.***

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