

This section PHARMACY USE ONLY:

Approved _____

Not Approved _____ (sent to HIM for verification)

Pharm/Date _____

Kickapoo Tribal Health Center Pharmacy

WinRx Connect/Rx2Go App

REQUEST TO ADD FAMILY MEMBER(S)

WinRx/Rx2Go has the capabilities to add your children to your account, so that you may request refills through the online/app tool.

Please complete the following to add family member(s) to your KTHC Pharmacy WinRx/Rx2Go app account:

I, _____, am requesting to add the following family member(s) to my WinRx/Rx2Go account:
Print Name

Name/Relationship

Date of Birth

Requestor Signature

Date

Once Right to Access and Consent for Release of PHI to Authorized Representative has been verified, the family member(s) will added to your account.

Please return completed form to the pharmacy department or submit by the following:

Pharmacy Fax: (405) 964-5968

Pharmacy Email: refills@okkthc.com

Pharmacy Mailing Address: PO Box 1059, McLoud Ok 74851