



a CVS Health company
Omnicare of Atlanta

FAX Number
800-959-0287

NEW ADMISSION / RE-ADMISSION INFORMATION

Please fill out the form completely and fax with the admission paperwork/orders for each new admission or re-admission

Facility Name: _____

Resident's Name	
SSN	
Date of Birth	
Room Number	
Wing/Floor/Unit	
Allergies	
Primary Care Physician	
Drug Benefit Plan	<input type="checkbox"/> Yes (Please fax copy of the front and back of insurance card)
	<input type="checkbox"/> No (Private Pay)

RE-ADMISSION

<input type="checkbox"/>	Send all medications today
<input type="checkbox"/>	Send only medications that are new or changed

NEW ADMISSION^(a)

<input type="checkbox"/>	Send all medications today
<input type="checkbox"/>	Send No Medications – Profile Only
<input type="checkbox"/>	Self-Medicator
<input type="checkbox"/>	Send in bingo cards
<input type="checkbox"/>	Send in vials
<input type="checkbox"/>	Send No Medications – Profile Only
Repack Medications	
This service only applies to VA Residents and a Courtesy One Time Repack for new Move-Ins. The Medications must be received by Friday morning to repack and please complete Repack Request Form and send to pharmacy. The pharmacy will send a pick-up slip for the medications. We do not offer repacking services on the weekend.	
Repack Medications For:	
<input type="checkbox"/>	VA Resident
<input type="checkbox"/>	Courtesy One-Time Repack

(a) Pharmacy will send POS/MAR the next business day
We also recommend printing a MAR from Omnview upon delivery of the medications

Our staff will call you if we have any questions with your request(s). Thank you for this information