



1800 Volunteer Boulevard, Knoxville, Tn. 37996
Phone: 865.974.5932 / Fax: 865.974.5935

If you would like to have your prescriptions transferred to UT Student Health Center Pharmacy, please fill in the information below.

Patient Name: _____

Patient Address: _____

Patient Phone Number (Work/Cell) _____

Date of Birth: _____ Drug Allergies (If any): _____

Insurance Information:

Plan Name: _____ ID#: _____

Group#: _____ BIN#: _____

PCN#: _____

Pharmacy Name: _____ Pharmacy Phone#: _____

List of Current Medications and Doses: (use back of form if needed to list additional medicines)

1. _____ 2. _____

3. _____ 4. _____