

PATIENT FEEDBACK FORM

We want to provide your therapy to your complete satisfaction. If you are not happy with the care you get from us, we want to know about it. If you have any concerns or problems with your medications, services, etc., you have the right to call our toll free number at 1-855-RxPublix (1-855-797-8254), or to file a complaint with the Florida Department of Health by calling 1-850-245-4339. If you wish to file a written complaint, you may do so by completing this form and returning it to Publix Specialty Pharmacy, 1950 Sand Lake Rd., Bldg. #5, Orlando, FL 32809. Our Quality Management department will contact you within five business days upon its receipt.

Patient Name Date of Birth

Prescription Number

Description: _____

Employee Name (if applicable) _____

For Publix Specialty Pharmacy internal use only

QM Action taken: _____

Date acknowledged: _____ Date of response: _____

Phone Mail

P U B L I X

P H A R M A C Y

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