## Attach patient label or fill in below:

Patient Name:

**Patient PHN:** 

Patient DOB:

## **INSTRUCTIONS TO PHARMACIST:**

.....

This patient has chronic kidney disease (CKD). Please place this exact alert in the Clinical Condition field in Pharmanet: "Chronic Kidney Disease consider renal dosing."

Name (print) and discipline			Phone		
Signature			Date		
	Provincial Health sectors fraserheal	lh 🏷 Interior Health	northern health	Providence	Vancouver