



# NOTIFICATION TO POLICE OF A PRESCRIPTION SUSPECTED OF BEING FORGED OR FRAUDULENTLY ALTERED

Section 30 of the Controlled Substances Act makes it an offence for a person to present forged or altered prescriptions to a pharmacist to obtain prescription drugs. Subsection (3) of the Section places a responsibility on a pharmacist to retain any prescription or other document that they have reasonable cause to believe has been forged or fraudulently altered and deliver it forthwith to the Commissioner of Police.

- PHARMACY MUST**
- **CONTACT POLICE CALL CENTRE ON 131 444 - RETAIN RF1661 FORM & SCRIPT FOR ATTENDING POLICE**
  - **FAX COPY OF RF 1661 FORM & SCRIPT TO – Drugs of Dependence Unit – 1300 658 447**
  - **RETAIN COPY FOR YOUR RECORDS.**

**COMPLETE AS MANY DETAILS AS POSSIBLE.** If insufficient space, please use ADDITIONAL INFORMATION on page 2.

## PHARMACY DETAILS

Is surveillance film available?  Yes /  No

Date: ...../...../..... Time: .....

Pharmacy Name: ..... Phone: .....

Address: ..... Fax: .....

Pharmacist / Staff member(s) who served suspect and received prescription: *(include details of any other witnesses on rear of form)*

1. Name: ..... A/H Phone: .....

Address: .....

2. Name: ..... A/H Phone: .....

Address: .....

## PRESCRIPTION DETAILS

Patients Name: .....

Address: .....

Drug Name(s): *(include Generic and Pharmacological names, dose and quantity)* .....

..... Was drug dispensed?  No /  Yes

Doctors Name: ..... WK Phone: .....

Address: .....

## PERSON PRESENTING SCRIPT

Name Used: *(if known)* .....

Address: *(if known)* .....

Concession Card No: *(if known)* ..... Other ID Shown: *(specify)* .....

Sex:  M /  F Age: ..... Height: .....cm Weight: .....kg Racial Appearance: .....

Build:  Thin  Medium  Muscular  Stocky  Heavy  Fat

Hair Colour:  Black  Blonde  Brown  Grey  Red  Auburn  Dyed

Hair Type:  Curly  Hair Piece / Wig / Toupee  Straight  Wavy

Hair Length:  Below Shoulder  Collar Length  Short  Crew Cut  To / On Shoulder

Complexion:  Sallow  Fair  Ruddy  Olive  Sun Tanned  Dark  Flushed

Tattoos: Type -  Initials  Names  Words  Pictures  Designs

Location -  Chest  Neck  Face  Fingers  Hands

Arm (left)  Upper  Lower Arm (right)  Upper  Lower

Leg (left)  Upper  Lower Leg (right)  Upper  Lower

Further Description .....

