


1 PATIENT INFORMATION — to be completed by patient			
Patient Last Name		Patient First Name	
Patient MI			Date
Delivery Address			Apt#
City		State	ZIP
Phone (Home)		Phone (Cell)	
Gender <input type="checkbox"/> M <input type="checkbox"/> F	Last 4 Digits of SSN (to verify insurance info)	Date of Birth (mm/dd/yyyy)	E-mail
Prescription Drug Insurer		Member ID#	Group ID#
Rx BIN#		Rx PCN#	
<p>By providing your e-mail address and telephone number(s), you are authorizing ProCare PharmacyCare to contact you by e-mail, phone call, or SMS text message at the address/ phone number(s) you provide to convey information relating to fulfillment of your prescription. If you wish to alter or update the personal contact information you have provided above, if you wish to cancel your authorization for receiving communications from ProCare PharmacyCare, or if you wish to cancel your participation in the Nutrition Direct[™] program, please contact ProCare PharmacyCare at any time at 855-828-1488. You may opt out of receiving SMS text messages by texting STOP to 85336 from your mobile device. This authorization will expire one year from the date of this form.</p>			

2 PRESCRIBER AND PRESCRIPTION INFORMATION — to be completed by prescriber, -or- attach your office prescription to the lower half of this form, -or- ePrescribe to ProCare PharmacyCare Miramar, FL 33025

Healthcare information is personal and sensitive information. This communication and any attachments contain confidential information and are intended for use by ProCare PharmacyCare only. If you are not the intended recipient, any dissemination, distribution, or copying is strictly prohibited. If you received this communication in error, please notify ProCare PharmacyCare by FAX or phone immediately.

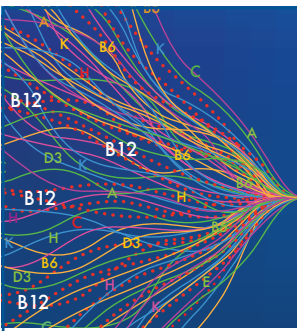
	NASCOBAL[®] NASAL SPRAY 500 mcg/spray 1 spray, 1 nostril, 1x a week Disp #1 pack containing 4 single-use nasal spray devices		
	BariActiv[®] SUPPLEMENTS* (Multivitamin; Calcium + D ₃ and Magnesium; Iron + Vitamin C) <input type="checkbox"/> Chewables <input type="checkbox"/> Tablets/Capsules Refills: 12		
Notes to Pharmacy			
Prescriber Name			
NPI#		Office Contact Name	
Prescriber Phone		Prescriber FAX	
Prescriber Address			
City		State	ZIP
PRESCRIBER SIGNATURE			DATE

*If changes are necessary, please clarify in 'Notes to Pharmacy' section.

3 PRESCRIBER — FAX completed form to 855-828-1492

Patients may redeem this offer ONLY when accompanied by a valid prescription. Offer is valid up to a maximum benefit of \$130. Offer is not valid for patients whose prescriptions are reimbursed in whole or in part under Medicaid, Medicare, Medigap, VA, DoD, TRICARE, or any other federal or state programs (such as medical assistance programs) or where otherwise prohibited by law. Offer is not valid in VT or where prohibited in whole or in part. This offer may be amended or ended at any time without notice.

Please see Important Safety Information for NASCOBAL[®] on next page.
Please [click here](#) for full Prescribing Information.



After bariatric surgery...

INTEGRATED NUTRITIONAL SUPPORT

Nutrition Direct™ is designed to help make lifelong nutritional support as simple as possible

- ▶ **Integrated package of vitamins and minerals** that meet ASMBS Nutritional Guidelines^{1†}
- ▶ **Patient savings and support** including specialty pharmacy services, patient education, and more
- ▶ **Home delivery and auto-refills** for as little as \$0 per month[‡]



INDICATION

NASCOBAL® is indicated as a supplement for vitamin B₁₂ deficiency.

IMPORTANT SAFETY INFORMATION for NASCOBAL® Nasal Spray

NASCOBAL® is contraindicated in patients with sensitivity to cobalt, vitamin B₁₂, or any component of the medication. Anaphylactic shock and death have been reported with parenteral forms of vitamin B₁₂, but not in clinical trials with NASCOBAL®.

Patients with Leber's disease who were treated with vitamin B₁₂ suffered severe and swift optic atrophy.

Hypokalemia, thrombocytosis and sudden death may occur in severe megaloblastic anemia which is treated intensely with vitamin B₁₂. Serum potassium levels and platelet count should be monitored.

Treatment with vitamin B₁₂ may unmask signs of polycythemia vera.

Treatment with NASCOBAL® should be deferred in patients with nasal congestion, allergic rhinitis and upper respiratory infections until symptoms have subsided.

Hematocrit, reticulocyte count, vitamin B₁₂, folate and iron levels should be obtained prior to treatment. All hematologic parameters should be normal when beginning treatment with NASCOBAL®. Vitamin B₁₂ and peripheral blood counts must be monitored initially at one month after the start of treatment, and then at intervals of 3 to 6 months. If a patient is not properly maintained with NASCOBAL®, intramuscular vitamin B₁₂ is necessary.

Most antibiotics, methotrexate or pyrimethamine invalidate folic acid and vitamin B₁₂ diagnostic blood assays. Conditions such as infection, uremia, concurrent iron or folic acid deficiency or drugs having bone marrow suppressant properties such as chloramphenicol, may blunt or impede therapeutic response to vitamin B₁₂.

It is not known whether Vitamin B₁₂ can cause fetal harm when administered to a pregnant woman or can affect reproduction capacity.

Adverse experiences reported in a clinical trial were asthenia, headache, sore throat, common cold, glossitis, nausea, paresthesia and rhinitis.

Please [click here](#) for full Prescribing Information.

[†]ASMBS Integrated Health Nutritional Guidelines for the Surgical Weight Loss Patient — 2016 Update: Micronutrients

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Reference: 1. Parrott J, Frank L, Rabena R, et al. ASMBS Integrated Health Nutritional Guidelines For The Surgical Weight Loss Patient—2016 Update: Micronutrients. *Surg Obes Relat Dis.* 2017: 1-15.

The Nutrition Direct™ Enrollment Form is not for use where prohibited.

Learn more at www.nascobal.com.