

Transfer Request Form

Please complete this form and fax back to your selected OU Health Pharmacy.

Patient Demographics

Name: _____ Date of Birth: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Drug Allergies: _____

Please attach a copy of your driver's license and insurance card. If not attached, the pharmacy will contact you to collect this information and/or credit card information to put on file.

Request Refills Via APP! To Sign Up, Text RXLOCAL to 64890.

Transferring-from-Pharmacy Information

Pharmacy Name: _____ Pharmacy Number: _____

Medications to be Transferred (Circle the medications you would like filled now; the rest will go on hold):

If easier, you may request a complete profile transfer. The pharmacy will call you once complete.

OU Health Pharmacy Locations

Oklahoma Children's Hospital

1200 N. Childrens Ave., Suite 2A
Oklahoma City, OK 73104-4600

Phone: (405) 271-2156

Fax: (405) 271-2158

Hours: Monday - Friday, 8 a.m. - 6 p.m.
Saturday - Sunday, 9 a.m. - 4 p.m.

OU Health Family Medicine

900 NE 10th Street,, Suite 1101
Oklahoma City, OK 73104-54950

Phone: (405) 271-2333

Fax: (405) 271-2770

Hours: Monday - Friday, 8:30 a.m. - 5:30 p.m.

OU Health Stephenson Cancer Center

800 NE 10th Street, Suite 1044
Oklahoma City, OK 73104

Phone: (405) 271-1488

Fax: (405) 271-1633

Hours: Monday - Friday, 8:30 a.m. - 5 p.m.

OU Health Physicians Building

825 NE 10th Street, Suite 2A
Oklahoma City, OK 73104

Phone: (405) 271-6446

Fax: (405) 271-6447

Hours: Monday - Friday, 8:30 a.m. - 5:30 p.m.

OU Health Pharmacy - Nicholson Tower

1000 NE 13th Street, Suite 1880
Oklahoma City, OK 73104

Phone: (405) 271-5831

Fax: (405) 271-5837

Hours: Monday - Friday, 8:30 a.m. - 5:30 p.m.

