



aquoral[®]

artificial saliva

PROTECTIVE ORAL SPRAY

For patients suffering from Dry Mouth, Aquoral is the clinically proven prescription-strength treatment for lasting protection against the discomfort and long-term consequences of Dry Mouth

How to e-Prescribe Aquoral



Please use the following pharmacy information for processing e-prescription through your EMR system:

- | | |
|------------------------------------|------------------------------------|
| • Name: Transition Pharmacy | Pharmacy Type: Retail |
| • City: Trevoise | State: PA Zip: 19053 |
| • NPI #: 1336325265 | NCPDP #: 3989603 |



Prescribe Aquoral by phone by calling (833) 821-8187



Prescribe Aquoral by Fax - Complete and Fax the attached form to (866) 694-2555

For your convenience, Aquoral will be mailed to your patient's home

- As part of our commitment to helping patients, K Pharmaceuticals has engaged Transition Pharmacy Services to fill and deliver prescriptions for Aquoral to your patients.
- There is no additional cost to the patient or physician for this service.



Pharmaceuticals

For more information on the benefits of Aquoral
scan the QR code or go to aquoralspray.com





AQUORAL
Direct to Patient
Program

PHARMACY - ORDER FAX FORM
FAX TO: (866) 694-2555
CUSTOMER SERVICE #: (833) 235-7113

PATIENT INFORMATION

NAME: _____ DATE OF BIRTH: _____
PHONE #: _____ CELL PHONE #: _____ EMAIL: _____
ADDRESS: _____ APT/SUITE: _____
CITY _____ STATE: _____ ZIP CODE: _____
CURRENT MEDICATIONS TAKEN: _____
MEDICAL CONDITIONS: _____
ANY KNOWN ALLERGIES: _____

PRESCRIBER INFORMATION

NAME: _____
DEA #: _____ NPI #: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP CODE: _____
PHONE #: _____ FAX #: _____
OFFICE CONTACT: _____ CONTACT PHONE #: _____
PHYSICIAN EMAIL: _____

PRESCRIPTION INFORMATION

AQUORAL (Artificial Saliva) Protective Spray 1 Box (2 x 10 ML Spray Bottles)

Directions: _____

Quantity _____ Refills _____

Prescriber Signature: _____ Date: _____

For **e-PRESCRIBING**, please use the following information for processing requests through your system:

Name: Transition Pharmacy

Pharmacy type: Retail

City: Trevoise

State: PA **Zip:** 19053

NPI #: 1336325265

NCPDP #: 3989603

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