

## NHSGGC Specials Authorisation Form

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The Specials authorisation telephone line remains unmanned. The authorisation process is resuming via email as outlined below.

Authorisation is **not** required when:

- The product is a UK licensed medicine
- Products are:
  - i) Listed in Scottish Drug tariff part 7s, part 7u
  - ii) Listed on the pre-approved price list
  - iii) Available from the NHS manufacturing unit, Pharmaceutical Specials Service (PSS) – formerly Tayside Pharmaceuticals
- The product is not a medicine e.g. stocking, dressing
- Authorisation has been obtained within last 12 months with less than 10% price variation from original authorisation

Where authorisation is required please complete all sections of this form and email to: [prescribing@ggc.scot.nhs.uk](mailto:prescribing@ggc.scot.nhs.uk)

All communications must come from the Pharmacy Clinical mailbox (NHS Net), not a personal email due to GDPR.

**Please ensure your email is correctly addressed.** It is recommended that a statement regarding confidentiality is included in your email, suggested wording is noted below.

***Information to wrong recipient***

*The information contained within this file is confidential and may be privileged. If you are not the intended recipient, please destroy this file, delete any copies held on your systems and notify the sender immediately; you should not retain, copy or use this file for any purpose, nor disclose all or any part of its content to any other person.*

Specials authorisations will operate between 08:30 and 16:30 Monday to Friday, any requests out with this time will be responded to on the next working day.

# Pharmacy Services – Specials Authorisation Form

<b>Pharmacy contractor code</b>	
<b>Contractor phone number</b>	
<b>Pharmacy contact name</b>	
<b>Patient name</b>	
<b>Patient CHI</b>	
<b>Item requested</b> (including strength, preparation and volume/quantity)	
<b>Dose</b>	
<b>Patient's GP practice code</b> (5 digit number beginning with 4, 5, 8)	
<b>Quote from wholesaler</b> (include quantity, pack size and name of wholesaler)	

## Re-authorisations

<b>Current or previous authorisation number</b>	S-
<b>Has the prescriber been advised it has been 12 months since last review?</b>	
<b>If the quantity /volume has changed, please supply details</b>	
<b>Current cost</b>	
<b>Any additional information</b>	

*Dispensing pharmacists have a responsibility to ensure that where Specials are prescribed they are the most appropriate choice and patients are supported to use them effectively. Please ensure all Specials have been clinically screened by a responsible pharmacist*

Email to: [prescribing@ggc.scot.nhs.uk](mailto:prescribing@ggc.scot.nhs.uk)