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# EXAMPLE: METHADONE HANDWRITTEN M3P FORM

## For Facsimile Transmission of M3P Prescriptions During COVID-19

Prescriber Name  
**Dr. Good Example**

Registration # **12-345**

Clinic Name  
**GOOD HEALTH CLINIC**

Prescriber Address  
**123 Good Street  
Winnipeg MB, R3M 0V9**

Prescriber Telephone #  
**204-232-1991 (private cell)  
204-788-8686 (Good Health Clinic)**

Prescriber Facsimile #  
**204-788-8685**

Prevents treatment delay if clarification needed.

Confidential Facsimile to:

Pharmacy Name  
Example Pharmacy

Pharmacy Fax # 204 588 8687

Pharmacy PH # 204 588 8689

Date April 5, 2021

Time 1330

PATIENT NAME:  
SMITH, Jane

ADDRESS:  
456 Main St WPG MB R3M 0T8

PHIN: 123 456 789 DOB: 15 May 1991

DATE: April 5, 2021

NAME OF DRUG & STRENGTH  
Methadone 20mg

TOTAL QUANTITY TO BE DISPENSED  
100 (One Hundred) mg

TO BE DISPENSED } Daily Witnessed ingestion

INTERVAL (# DAYS)

INDICATION Opioid Use Disorder

DIRECTIONS FOR USE  
Methadone 20 (Twenty) mg po OD  
Starting April 5, 2021.  
Last day April 9, 2021.

PRESCRIBER SIGNATURE [Signature]

Strong recommendation to write dose in milligrams (20 mg) NOT milliliters (mL) to prevent dosing errors. Write "methadone" to give pharmacist option to use available formulations.

Prescriber must complete Total Quantity in mg, alphabetically and numerically, for accuracy, even if start and end date noted.

Total daily dose, written numerically and alphabetically, for accuracy. Start and End calendar dates necessary for OAT. If patient missed dose on day 3 of 5-day Rx, they cannot take it day 6 (Rx ends on day 5). Prescriber to be informed of any missed doses.

If a M3P prescription is being faxed, the daily dosage **must** be clearly indicated below (in addition to being noted on the M3P form itself): Methadone 20 (Twenty) mg po OD

Could be an example of an induction or early treatment prescription for a patient without clinical stability or carries doses.

### Practitioner Certification

- This prescription represents the original of the prescription drug order.
- The pharmacy addressee noted above is the only intended recipient and there are no others.
- The original prescription has been invalidated and securely filed, and will not be transmitted elsewhere at another time.
- Quantity is stated in words and numerals.

This telecopy is confidential and is intended to be received by the addressee only. If the reader is not the intended recipient thereof, you are advised that any dissemination, distribution or copying of this facsimile is strictly prohibited.

Daily dose written numerically and alphabetically, in this second area to ensure accuracy, in case fax artifacts cover the primary daily dose notation.