

**MARGARET GRADZKA, M.D., F.A.C.R  
RHEUMATOLOGY**

FAIR OAKS MEDICAL PLAZA  
3620 JOSEPH SIEWICK DRIVE  
SUITE 401  
FAIRFAX, VA 22033  
(703) 648-9800 FAX (703) 648-9808

**PRESCRIPTION POLICY**

There will be a \$25.00 fee for each requested prescription refill that is not written at your appointment. Please do not forget to get all of your prescriptions at the time of each visit.

Please make sure you have a list of all needed prescriptions to be written at the time of your visit. Please be sure to get enough refills until your next scheduled appointment.

Any prescription that was not requested at your normal appointment can be called in or faxed for a charge of \$25.00 each. This policy has gone into effect due to the overwhelming demands for forgotten prescriptions.

Thank you so much for your attention to this policy.

Patient Signature: \_\_\_\_\_ Date: \_\_\_\_\_