

502-429-3300  
800-305-2042  
Fax: 502-429-1245



Andy Beshear  
Governor

## Prescription Medication Report

The Compliance Section, Consumer Protection Branch, of the Kentucky Board of Nursing, is currently monitoring this individual. As the treating practitioner, the Compliance Section, Consumer Protection Branch, requests that you please take a few moments to complete this form for any and all medications (including medication samples) prescribed for this patient. The completed form is to be mailed directly to the Compliance Section, Consumer Protection Branch. Thank you for your attention to this matter.

Name of Patient: \_\_\_\_\_

Date: \_\_\_\_\_

Date of Prescription	Name of Medication	Dosage	Quantity Dispensed	Number of Refills	Diagnosis

The substance(s) prescribed above will not impair this patient's ability to practice nursing in a safe and effective manner as long as the prescription(s) is used as directed.

\_\_\_\_\_  
Practitioner Name (Please Print)

\_\_\_\_\_  
Practitioner Signature

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

As a treating healthcare practitioner, you may wish to periodically access the KASPER system to request a report on this patient.

Please mail the completed form to: Kentucky Board of Nursing, Compliance Section/Consumer Protection Branch, 312 Whittington Parkway, Suite 300, Louisville, Kentucky 40222-5172; or fax to (502) 429-1245.

- KARE for Nurses Program
- Probation/Reprimand
- Reinstatement

3/18/2008; 2/10/2015; 12/9/2015  
jmc