Steps to Submit Your File for Review

1. **PATIENT PROFILE**
   A current list of all medications prescribed for an individual, any allergies the individual has, and any information relevant to an individual's ability to safely take medications.

2. **LABEL**
   Information to include:
   - Name/address of dispensing pharmacy.
   - Serial number of the prescription.
   - Date of the prescription.
   - Name of the prescriber.
   - Name of the patient.
   - Name and strength of the drug.

3. **ADVERTISING**
   Strategies for reach new customers: From advertising branded over-the-counter medicines, flu shots, new medication review, pharmacy services, etc.

4. **PHARMACY LAYOUT**
   Diagram of pharmacy interior, including entry, windows, gondolas, display areas, shelving, prescription department, counseling area, pharmacist's office, fitting room, storage area, etc.

5. **PHOTOS OF PHARMACY**
   Photos of the pharmacy (front lobby, outside of building, lab area, customer waiting area, consultation area, etc).

6. **PHOTO OF YOURSELF**
   Picture of yourself in your work attire.

To learn more and to apply contact Linda Cathy
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