



**ST HELENS: PHARMACY NEEDLE & SYRINGE PROGRAMME MONITORING (form v6 2016)**

Syringe and needle orders – leave your order/message on: 01495 235 800, or 01495 235 838, OR email - [nsanderson@frontier-group-co.uk](mailto:nsanderson@frontier-group-co.uk)

Monitoring Form/Envelope Orders: 0151 231 4309

General Enquiries: 01744 675 300

**PHI**



St. Helens Council

Note: submit this form using the (brown Pre-paid envelope) to:

IAD, Centre for Public Health, Faculty of Education, Health & Community, Liverpool John Moores University, 2nd Floor Henry Cotton, 15-21 Webster Street, Liverpool L3 2ET

PHARMACY CODE / STAMP \_\_\_\_\_ PHARMACY NAME \_\_\_\_\_ MONTH \_\_\_\_\_ YEAR \_\_\_\_\_

If the client is new, please tick the box in the "New" column

Initials	Date of Birth	Sex	New	Post code	Date of Visit	Drug of Use	Age first injected	5 Packs			Returns	
								1ml	2ml	5ml	Loose In	Bins In
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Sheet Number\* ..... of ..... (\*Please fill in cumulative numbers if more than one sheet being submitted)

Pharmacy signature: .....