Consent to Receipt of Medications in Non-Child Resistant Containers

I, _______________________________________, request and agree that all medications provided to me shall be delivered and received in a non-child-resistant container.

Patient __________________________________________________________

Patient’s Representative _____________________________________________

Dated: ________________________________

Note: WAC 246-869-230 states that all legend drugs intended for oral use shall be dispensed in a child resistant container (CRC) as required by federal law or regulation, unless authorization to use a non-CRC is obtained from the prescriber, patient or patient's representative.