



MINISTRY for HEALTH and ACTIVE AGEING
15, PALAZZO CASTELLANIA, MERCHANTS STREET, VALLETTA, MALTA

CONFIDENTIAL

Notification of Urgent Prescription

In terms of article 9. (6) (a) (iv) of Subsidiary Legislation 31.18 and/or article 8. (6) (a) (iv) of Subsidiary Legislation 101.02 the Laws of Malta.

Name of patient	
Legally valid identification document number of patient	
Name, form and dose of drug	
Quantity prescribed	
Date of prescription	
Reason for urgency of prescription	
Name of medical practitioner	
Medical council registration number	
Signature of medical practitioner	

The completed form is to be sent to sph.health@gov.mt

Office of the Superintendent of Public Health
Out-Patients Dept. Level 1, St. Luke's Hospital Gwardamangia
t +356 25953302/3 e sph.mhec@gov.mt



MINISTRY for HEALTH and ACTIVE AGEING
15, PALAZZO CASTELLANIA, MERCHANTS STREET, VALLETTA, MALTA

CONFIDENTIAL

Notification of Urgent Prescription

In terms of article 9. (6) (a) (iv) of Subsidiary Legislation 31.18 and/or article 8. (6) (a) (iv) of Subsidiary Legislation 101.02 the Laws of Malta.

Name of patient	
Legally valid identification document number of patient	
Name, form and dose of drug	
Quantity prescribed	
Date of prescription	
Reason for urgency of prescription	
Name of medical practitioner	
Medical council registration number	
Signature of medical practitioner	

The completed form is to be sent to sph.health@gov.mt

Office of the Superintendent of Public Health
Out-Patients Dept. Level 1, St. Luke's Hospital Gwardamangia
t +356 25953302/3 e sph.mhec@gov.mt