

Pharmacy



View current medications



View comprehensive medications

Request prescription refills using the My VA Health patient portal, located at patientportal.myhealth.va.gov.

If you need help with the patient portal, support teams are available anytime by calling **888-444-MYVA (6982)**.



Scan this code to learn more about My VA Health patient portal.

My Providers and Health Care Teams:

Current Medications

Viewing health record for:



VETERAN'S NAME



atorvastatin 20 mg oral tablet

Refills Remaining	Dispensed Quantity	Last Refill Date
--	Pending	--

Refill

Details

atorvastatin 20 mg oral tablet

Refills Remaining	Dispensed Quantity	Last Refill Date	Refill Requested
3	30	May 31, 2024	May 31, 2024

Details

metoprolol succinate ER 100 mg/24 hour tablet

Refills Remaining	Dispensed Quantity	Last Refill Date
3	90	May 29, 2024

Refill

Details



6

Itivitamin oral tablet

Is Remainir Medication Refill Request

Please review and confirm the following medication to refill

metoprolol succinate ER 100 mg/24 hour tablet

Refills Remaining	Dispensed Quantity	Start Date
3	90	May 29, 2024



8



9

Close

Refill



10

Refill successful.

PHARMACY NAVIGATION

- 1. Pharmacy** – Access all pharmacy features.
- 2. View current medications** – All current medications prescribed by your VA providers at facilities using My VA Health.
- 3. View comprehensive medications** – Displays your completed, expired, and discontinued medications transferred to your VA health record.
- 4. Print** – Allows you to print the medication list shown (current or comprehensive).
- 5. Details** – Provides any additional information about a medication you are viewing.

PRESCRIPTION REFILL STEPS

- 6. Locate your medication.**
- 7. Select Refill.**
- 8. Review the pop-up details** – Make sure all information is correct. If not, contact your health care provider.
- 9. Select Refill.**
- 10. Refill successful** – This alert lets you know the refill request was sent to the pharmacy.

Contact your local My VA Health Patient Portal Coordinator:

NAME _____ PHONE _____ LOCATION _____