

1 Fill 2 VAs

I could not request my medicines through the VA web site because the "0 Refills Remaining" status would not allow it and my direct requests to the Director and the Pharmacist did not get a response. Then, without explanation, two VA's sent me medicine for 1 fill.

VA 1, the Tucson VA, sent me medicine on May 9, 2013. The bottles read "Last Refill" and "Fill: 4 of 4", and the enclosed refill request forms read "No Refills Remaining" and "Fill: 4 of 4". This means the first fill is the last fill. Only 1 fill is sent but the "Refill: 4 of 4" makes it appear as if 4 fills were sent.

VA 2, the Prescott VA, started sending me medicine on May 1, 2013. It was sent in three parts: on May 1, June 17, and on June 28, 2013. The bottles read "Last Refill" and "Fill: 4 of 4" or "Fill: 5 of 5", and the enclosed refill request forms read "No Refills Remaining" and "Refill: 4 of 4" or "Refill: 5 of 5". This means the first fill is the last fill. Only 1 fill is sent but the "Refill: 4 of 4" or "Refill: 5 of 5" makes it appear as if 4 or 5 fills were sent.

What is the intent of sending 1 fill but making it appear as if 4 or 5 fills were sent? Is it a coincidence that two VA's did this? For the same period?

1 fill not 4 fills from 2 VAs

The only way to find out where medicine went is to follow the medicine trails. There is no other way. If the medicine trails can't be followed something is wrong. If something is used to divert attention from the medicine trails such as character assassinations something is wrong. It has been my experience that character assassinations prevail.

My medicine from the VA was stopped without explanation. Then, without explanation, two VA's sent me medicine:

VA 1 (SAVAHCS) sent me medicine on May 9, 2013.

VA 2 (NAVAHCS) started sending me medicine on May 1, 2013. It was sent in three parts: on May 1, June 17, and June 28, 2013.

All the bottles and all the enclosed refill requests forms from both VAs read "Refill 4 of 4" (except one which read "Refill 5 of 5").

But I did not receive a fill 1 of 4, 2 of 4, or 3 of 4 of any of these medicines. Why does it appear as if 4 fills were sent when only 1 fill was sent? Can we follow the medicine trails before any more judgments are made?

Timeline

June 3, 2013

Congressman Ron Barber writes Director Gardner of VA 1 about my medicine.

June 7, 2013

Director Gardner's assistant Bernadette Schaeffer calls my daughter Kate Simmons in California and tells her that she thought I was getting so much medicine from two VAs that she is concerned that I will bleed to death:

"Bernadette [Schaeffer] thought he may be getting too much medicine from 2 VAs that he could bleed out (To death) if this was the case"

(From Kate Simmons email of June 24, 2013, to Anthony OConnell. Kate is trying to remember what she was told in the June 7th telephone call)

June 13, 2013

Director Gardner writes Congressman Ron Barber:

"In reviewing Mr. O'Connell's records it was determined that he does not have a telephone. Ms Schaeffer did contact his daughter Ms. Kate Simmons on June 7, 2013. Ms. Schaeffer confirmed that, Mr. O'Connell is receiving medications from the Consolidated Medication Outpatient Pharmacy and/or the SAVAHCS. He is also receiving medication from the Northern VA Health Care System (NAVAHCS).

(From Director Gardner's letter of June 13, 2013, to Congressman Ron Barber)

1 Fill VA 1

Tucson VA (SAVAHCS)

VA 1, the Tucson VA, sent me medicine on May 9, 2013. All the bottles say "Provider: Schmeling R.". R. Schmeling is my current primary care provider.

The bottles also say "Last Refill" and "Fill: 4 of 4" and all the enclosed refill request forms say "No Refills Remaining" and "Fill: 4 of 4". This means the first fill is the last fill. Only 1 fill is sent but the "Refill: 4 of 4" makes it appear as if 4 fills were sent.

The VA web site shows there are 0 refills remaining on May 6 and 0 refills remaining on July 1. It is not possible for 4 refills of 90 days each to occur in the 56 days between May 6 and July 1.

What is the intent of sending 1 fill but making it appear as if 4 fills were sent?



**Refill Prescription Information
(Active Prescriptions of ANTHONY OCONNELL)**

It is not possible for 4 refills of 90 days each to occur in the 56 days between May 6 and July 1. Only 1 fill is sent but it is made to appear as if 4 fills were sent.

Last updated [05/06/2013 at 1633]

[Help](#)

Refill Status	Refill Submit Date	Fill Date	Refills Remaining	Prescription	Facility
Refill in Process	4/12/2013	7/14/2013	0	RX#1356424G FINASTERIDE 5MG TAB	NORTHERN ARIZONA HEALTH CARE SYSTEM - PRESCOTT DIVISION
Refill in Process	4/17/2013	7/5/2013	2	RX#2070495 WARFARIN NA 1MG TAB	NORTHERN ARIZONA HEALTH CARE SYSTEM - PRESCOTT DIVISION
Refill in Process	3/22/2013	6/21/2013	0	RX#4973800 DIGOXIN 0.25 MG TAB	SOUTHERN ARIZONA HEALTH CARE SYSTEM - TUCSON DIVISION
Refill in Process	3/22/2013	6/21/2013	0	RX#4973802 FINASTERIDE 5 MG TAB	SOUTHERN ARIZONA HEALTH CARE SYSTEM - TUCSON DIVISION
Refill in Process	3/22/2013	6/21/2013	0	RX#4973804 METOPROLOL 25 MG TAB	SOUTHERN ARIZONA HEALTH CARE SYSTEM - TUCSON DIVISION
Refill in Process	3/22/2013	6/21/2013	0	RX#4973808 TAMSULOSIN 0.4 MG CAP	SOUTHERN ARIZONA HEALTH CARE SYSTEM - TUCSON DIVISION
Refill in Process	3/22/2013	6/20/2013	0	RX#1590368D DIGOXIN 0.25MG TAB	NORTHERN ARIZONA HEALTH CARE SYSTEM - PRESCOTT DIVISION
Refill in Process	3/22/2013	6/20/2013	0	RX#1590369D SIMVASTATIN 80MG TAB	NORTHERN ARIZONA HEALTH CARE SYSTEM - PRESCOTT DIVISION
Active	3/13/2013	5/5/2013	0	RX#1458765E BUPROPION HCL 150MG 12HR SA TAB	NORTHERN ARIZONA HEALTH CARE SYSTEM - PRESCOTT DIVISION
Active	12/20/2012	2/20/2013	0	RX#1615979D LORATADINE 10MG TAB	NORTHERN ARIZONA HEALTH CARE SYSTEM - PRESCOTT DIVISION

SOUTHERN AZ VA HCS, AZ 85723-0001 Ph: (800) 470-6262
678
Provider: SCHMELING R.
RX# 4973802
ANTHONY MINER OCONNELL
TAKE ONE TABLET BY MOUTH EVERY DAY FOR
ENLARGED PROSTATE
NDC #: 00093-7355-56 Discard after 11/28/2013
Qty: 30 of 90 Last Refill
FINASTERIDE 5MG TAB
Blue Oblong tablet, 93 / 7355

SOUTHERN AZ VA HCS, AZ 85723-0001 Ph: (800) 470-6262
678
Provider: SCHMELING R.
RX# 4973802
ANTHONY MINER OCONNELL
TAKE ONE TABLET BY MOUTH EVERY DAY FOR
ENLARGED PROSTATE
NDC #: 00093-7355-56 Discard after 11/28/2013
Qty: 90 of 90 Last Refill
FINASTERIDE 5MG TAB
Blue Oblong tablet, 93 / 7355

SOUTHERN AZ VA HCS, AZ 85723-0001 Ph: (800) 470-6262
678
Provider: SCHMELING R.
RX# 4973802
ANTHONY MINER OCONNELL
TAKE ONE TABLET BY MOUTH EVERY DAY FOR
ENLARGED PROSTATE
NDC #: 00093-7355-56 Discard after 11/28/2013
Qty: 30 of 90 Last Refill
FINASTERIDE 5MG TAB
Blue Oblong tablet, 93 / 7355

Last Refill
Fill 4 of 4

SOUTHERN AZ VA HCS, TUCSON, AZ 85723-0001 Ph: (800) 470-6262
678
Provider: SCHMELING R.
RX# 4973800
ANTHONY MINER OCONNELL
TAKE ONE TABLET BY MOUTH EVERY DAY FOR
HEART AND BLOOD PRESSURE
NDC #: 00173-0249-75 Discard After 11/28/2013
Qty: 90 of 90 Last Refill
DIGOXIN (LANOXIN) TABLETS
SCORED ROUND WHITE

SOUTHERN AZ VA HCS, TUCSON, AZ 85723-0001 Ph: (800) 470-6262
678
Provider: SCHMELING R.
RX# 4973808
ANTHONY MINER OCONNELL
TAKE ONE CAPSULE BY MOUTH EVERY DAY
ONE-HALF HOUR AFTER THE SAME MEAL
FOR PROSTATE
NDC #: 00228-2996-50 Discard After 11/28/2013
Qty: 90 of 90 Last Refill
TAMSULOSIN HCL 0.4MG CAP
Green/ Orange Cap w/ black stripes, TSL04

SOUTHERN AZ VA HCS, AZ 85723-0001 Ph: (800) 470-6262
678
Provider: SCHMELING R.
RX# 4973804
ANTHONY MINER OCONNELL
TAKE ONE TABLET BY MOUTH EVERY DAY FOR
HEART AND BLOOD PRESSURE
NDC #: 67544-0567-80 Discard After 11/28/2013
Qty: 180 of 180 Last Refill
METOPROLOL TARTRATE
White Round Scored Tablet, M 180

Provider: Schmeling R.
[Bottles dated] 05/09/2013

NO REFILLS REMAINING.

*** Refill Request Form ***

ANTHONY MINER OCONNELL
DIGOXIN (LANOXIN) 0.25MG TAB

Rx# 4973800 Provider: SCHMELING R.
Date: 05/09/2013 **05/09/2013**
TAKE ONE TABLET BY MOUTH EVERY DAY FOR HEART RATE



SOUTHERN AZ VA HCS
3601 S. 6TH AVE (13-119)
TUCSON, AZ 85723-0001
(800) 470-8262

The first fill is the last fill. Only 1 fill is sent
but it is made to appear as if 4 fills were sent.

Qty: 90 **Fill: (4of4)**
NO COPAY Days Supply: 90
Last Fill Date: Oct 05, 2013



NO REFILLS REMAINING.

*** Refill Request Form ***

ANTHONY MINER OCONNELL
FINASTERIDE 5MG TAB

Rx# 4973802 Provider: SCHMELING R.
Date: 05/09/2013 **05/09/2013**
TAKE ONE TABLET BY MOUTH EVERY DAY FOR ENLARGED PROSTATE



SOUTHERN AZ VA HCS
3601 S. 6TH AVE (13-119)
TUCSON, AZ 85723-0001
(800) 470-8262

The first fill is the last fill. Only 1 fill is sent
but it is made to appear as if 4 fills were sent.

Qty: 90 **Fill: (4of4)**
NO COPAY Days Supply: 90
Last Fill Date: Oct 05, 2013



NO REFILLS REMAINING.

*** Refill Request Form ***

ANTHONY MINER OCONNELL
TAMSULOSIN HCL 0.4MG CAP

Rx# 4973808 Provider: SCHMELING R.
Date: 05/09/2013
TAKE ONE CAPSULE BY MOUTH EVERY DAY (TAKE ONE-HALF HOUR AFTER THE SAME
MEAL EACH DAY) - FOR PROSTATE



SOUTHERN AZ VA HCS
3601 S. 6TH AVE (13-119)
TUCSON, AZ 85723-0001
(800) 470-8262

The first fill is the last fill. Only 1 fill is sent
but it is made to appear as if 4 fills were sent.

Qty: 90 **Fill: (4of4)**
NO COPAY Days Supply: 90
Last Fill Date: Oct 05, 2013



NO REFILLS REMAINING.

Refill Request Form

ANTHONY MINER OCONNELL
TAMSULOSIN HCL 0.4MG CAP

Rx# 4973808

Provider: SCHMELING R.

Date: 05/09/2013

TAKE ONE CAPSULE BY MOUTH EVERY DAY (TAKE ONE HALF HOUR AFTER THE SAME MEAL EACH DAY) - FOR PROSTATE



SOUTHERN AZ VA HCS
3601 S. 6TH AVE (13-119)
TUCSON, AZ 85723-0001
(800) 470-8262

Qty: 90

Fill: (4of4)

NO COPAY

Days Supply: 90

Last Fill Date: Oct 05, 2013



NO REFILLS REMAINING.

Refill Request Form

ANTHONY MINER OCONNELL
METOPROLOL TARTRATE 25MG TAB

Rx# 4973804

Provider: SCHMELING R.

Date: 05/09/2013 **05/09/2013**

TAKE ONE TABLET BY MOUTH EVERY 12 HOURS FOR HEART AND BLOOD PRESSURE



SOUTHERN AZ VA HCS
3601 S. 6TH AVE (13-119)
TUCSON, AZ 85723-0001
(800) 470-8262

The first fill is the last fill. Only 1 fill is sent but it is made to appear as if 4 fills were sent.

Qty: 180

Fill: (4of4)

NO COPAY

Days Supply: 90

Last Fill Date: Oct 05, 2013



Change of Address Form

Fill out if address has changed.

ANTHONY MINER OCONNELL

Address On File:

439 S VISTA DEL RIO
GREEN VALLEY, AZ 85614

Signature is required to process address change.

Street Line 1 _____

Street Line 2 _____

Street Line 3 _____

Street Line 4 _____

City _____ State _____

Country _____

Zip code + 4 _____

Phone _____

() Permanent

() Temporary Until _____

Signature _____



Refill Prescription Information
(Active Prescriptions of ANTHONY OCONNELL)

It is not possible for 4 refills of 90 days each to occur in the 56 days between May 6 and July 1. Only 1 fill is sent but it is made to appear as if 4 fills were sent.

Last updated [07/01/2013 at 0616]

Help

Refill Status	Refill Submit Date	Fill Date	Refills Remaining	Prescription	Facility
Active	4/12/2013	7/14/2013	0	RX#1356424G FINASTERIDE 5MG TAB	NORTHERN ARIZONA HEALTH CARE SYSTEM - PRESCOTT DIVISION
Active	4/17/2013	7/5/2013	2	RX#2070495 WARFARIN NA 1MG TAB	NORTHERN ARIZONA HEALTH CARE SYSTEM - PRESCOTT DIVISION
Active	3/22/2013	6/20/2013	0	RX#1590368D DIGOXIN 0.25MG TAB	NORTHERN ARIZONA HEALTH CARE SYSTEM - PRESCOTT DIVISION
Active	3/22/2013	6/20/2013	0	RX#1590369D SIMVASTATIN 80MG TAB	NORTHERN ARIZONA HEALTH CARE SYSTEM - PRESCOTT DIVISION
Active	3/22/2013	5/8/2013	0	RX#4973800 DIGOXIN 0.25 MG TAB	SOUTHERN ARIZONA HEALTH CARE SYSTEM - TUCSON DIVISION
Active	3/22/2013	5/8/2013	0	RX#4973802 FINASTERIDE 5 MG TAB	SOUTHERN ARIZONA HEALTH CARE SYSTEM - TUCSON DIVISION
Active	3/22/2013	5/8/2013	0	RX#4973804 METOPROLOL 25 MG TAB	SOUTHERN ARIZONA HEALTH CARE SYSTEM - TUCSON DIVISION
Active	3/22/2013	5/8/2013	0	RX#4973808 TAMSULOSIN 0.4 MG CAP	SOUTHERN ARIZONA HEALTH CARE SYSTEM - TUCSON DIVISION
Active	3/13/2013	5/5/2013	0	RX#1458765E BUPROPION HCL 150MG 12HR SA TAB	NORTHERN ARIZONA HEALTH CARE SYSTEM - PRESCOTT DIVISION
Active	12/20/2012	2/20/2013	0	RX#1615979D LORATADINE 10MG TAB	NORTHERN ARIZONA HEALTH CARE SYSTEM - PRESCOTT DIVISION

Date on bottle

5/9/13

5/9/13

5/9/13

5/9/13

1 Fill VA 2

Prescott VA (NAVAHCS)

VA 2, the Prescott VA, sent me medicine on May 1, June 17, and June 28, 2013. All the bottles say "Provider: Nanson J.". Nanson J. was my previous primary care provider.

The bottles also say "Last Refill" and "Fill: 4 of 4" or "Fill: 5 of 5", and the enclosed refill request forms say "No Refills Remaining" and "Refill: 4 of 4" or "Refill: 5 of 5. This means the first fill is the last fill. Only 1 fill is sent but the "Refill: 4 of 4" or "Refill: 5 of 5" makes it appear as if 4 or 5 fills were sent.

The VA web site shows there are 0 refills remaining on May 6 and 0 refills remaining on July 1. It is not possible for 4 fills of 90 days each or 5 refills of 60 days each to occur in the 56 days between May 6 and July 1.

What is the intent of sending 1 fill but making it appear as if 4 or 5 fills were sent?

(Comment: I did not print out the refill status just before May 1 because the status can only be printed out the day it is given. I received the medicine dated May 1 after May 1: no notification or explanation was given.: and It took me some time to realize that I should try to protect myself from a frame up by printing out the refill status each day.)



It is not possible for 4 fills of 90 days each or 5 fills of 60 days each to occur in the 56 days between May 6 and July 1. Only 1 fill is sent but it is made to appear as if 4 or 5 fills were sent.

**Refill Prescription Information
(Active Prescriptions of ANTHONY OCONNELL)**

Last updated [05/06/2013 at 1633]

[Help](#)

Refill Status	Refill Submit Date	Fill Date	Refills Remaining	Prescription	Facility
Refill in Process	4/12/2013	7/14/2013	0	RX#1356424G FINASTERIDE 5MG TAB	NORTHERN ARIZONA HEALTH CARE SYSTEM - PRESCOTT DIVISION
Refill in Process	4/17/2013	7/5/2013	2	RX#2070495 WARFARIN NA 1MG TAB	NORTHERN ARIZONA HEALTH CARE SYSTEM - PRESCOTT DIVISION
Refill in Process	3/22/2013	6/21/2013	0	RX#4973800 DIGOXIN 0.25 MG TAB	SOUTHERN ARIZONA HEALTH CARE SYSTEM - TUCSON DIVISION
Refill in Process	3/22/2013	6/21/2013	0	RX#4973802 FINASTERIDE 5 MG TAB	SOUTHERN ARIZONA HEALTH CARE SYSTEM - TUCSON DIVISION
Refill in Process	3/22/2013	6/21/2013	0	RX#4973804 METOPROLOL 25 MG TAB	SOUTHERN ARIZONA HEALTH CARE SYSTEM - TUCSON DIVISION
Refill in Process	3/22/2013	6/21/2013	0	RX#4973808 TAMSULOSIN 0.4 MG CAP	SOUTHERN ARIZONA HEALTH CARE SYSTEM - TUCSON DIVISION
Refill in Process	3/22/2013	6/20/2013	0	RX#1590368D DIGOXIN 0.25MG TAB	NORTHERN ARIZONA HEALTH CARE SYSTEM - PRESCOTT DIVISION
Refill in Process	3/22/2013	6/20/2013	0	RX#1590369D SIMVASTATIN 80MG TAB	NORTHERN ARIZONA HEALTH CARE SYSTEM - PRESCOTT DIVISION
Active	3/13/2013	5/5/2013	0	RX#1458765E BUPROPION HCL 150MG 12HR SA TAB	NORTHERN ARIZONA HEALTH CARE SYSTEM - PRESCOTT DIVISION
Active	12/20/2012	2/20/2013	0	RX#1615979D LORATADINE 10MG TAB	NORTHERN ARIZONA HEALTH CARE SYSTEM - PRESCOTT DIVISION



Without explanation, I started to receive medicine from VA Prescott's Dr Nanson on May 1, 2013.

I don't remember receiving any medicine from Dr Nanson since he stopped being my primary care provider around September of 2012.

Last Refill
Fill 5 of 5

Provider: Nanson J.
[Bottle dated] 05/01/2013

NO REFILLS REMAINING.

*** Refill Request Form ***

ANTHONY MINER OCONNELL
BUPROPION HCL 150MG 12HR SA TAB

Rx# 1458765E

Provider: NANSON J.

Date: 05/01/2013

TAKE ONE TABLET BY MOUTH TWICE A DAY FOR DEPRESSION



PRESCOTT NAVAHCS(119
500 HIGHWAY 89 NORTH
PRESCOTT, AZ 86313-5001
(800) 949-1005 X 9

The first fill is the last fill. Only 1 fill is sent but it is made to appear as if 5 fills were sent.

Qty: 120

Fill: (5of5)

NO COPAY

Days Supply: 60

Last Fill Date: Aug 14, 2013



Change of Address Form

Fill out if address has changed.

ANTHONY MINER OCONNELL

Address On File:

**439 SOUTH VISTA DEL RIO
GREEN VALLEY, AZ 85614**

Signature is required to process address change.

Street Line 1 _____

Street Line 2 _____

Street Line 3 _____

Street Line 4 _____

City _____ State _____

Country _____

Zip code + 4 _____ - _____

Phone _____

() Permanent

() Temporary Until _____

Signature _____

PRESCOTT NAVAHCS(119
500 HIGHWAY 89 NORTH
PRESCOTT, AZ 86313-5001
(800) 949-1005 X 9

PRESCRIBED MEDICAL INFORMATION

Medication: BUPROPION HCL 150MG 12HR SA TAB

May cause drowsiness and dizziness. Alcohol may intensify this effect. Use care when operating a car or dangerous machines.

Swallow whole. Do not chew or crush.

IMPORTANT: HOW TO USE THIS INFORMATION: This is a summary and does NOT have all possible information about this product. This information does not assure that this product is safe, effective, or appropriate for you.

This information is not individual medical advice and does not substitute for the advice of your health care professional. Always ask your health care professional for complete information about this product and your specific health needs.

BUPROPION SUSTAINED-RELEASE (ANTIDEPRESSANT) - ORAL (bue-PROE-pee-on)

COMMON BRAND NAME(S): Wellbutrin SR

WARNING: Bupropion is an antidepressant used for smoking cessation and to treat a variety of conditions, including depression and other mental/mood disorders. Antidepressants can help prevent suicidal thoughts/attempts and provide other important benefits. However, a small number of people (especially people younger than 25) who take antidepressants for any condition may experience new or worsening depression, other mental/mood symptoms, or suicidal thoughts/attempts. Therefore, it is very important to talk with the doctor

PRESCOTT NAVAHCS(119, PRESCOTT, AZ 86313-5001 Ph: (800) 949-1005 X9
Provider: NANSON J.
1590368D 06/17/2013
ANTHONY MINER OCONNELL
TAKE ONE TABLET BY MOUTH EVERY DAY
00173-0249-75 Discard After: 06/17/2014
90 of 90 Last Refill
LANOXIN (LANOXIN) 0.25MG TAB
ROUNDED ROUND WHITE TAB, LANOXIN/UCB

PRESCOTT NAVAHCS(119, AZ 86313-5001 Ph: (800) 949-1005 X9
Provider: NANSON J.
1590369D 6/17/2013
ANTHONY MINER OCONNELL
TAKE ONE TABLET BY MOUTH AT BEDTIME FOR
ESTEROL *** DO NOT TAKE WITH GRAPEFRUIT
24458-0304-90 Discard after 06/17/2014
90 of 90 Last Refill Fill 4 of 4
ROASTATIN 80MG TAB
Rounded Tablet, B 304 / 80
211-409018

Last Refill
Fill 4 of 4

Provider: Nanson J.
[Bottles dated] 06/17/2013

NO REFILLS REMAINING.

Refill Request Form

ANTHONY MINER OCONNELL
DIGOXIN (LANOXIN) 0.25MG TAB

Rx# 1590368D Provider: NANSON J.
Date: 06/17/2013



TAKE ONE TABLET BY MOUTH EVERY DAY FOR HEART

The first fill is the last fill. Only 1 fill is sent
but it is made to appear as if 4 fills were sent.

PRESCOTT NAVAHCS(119
500 HIGHWAY 89 NORTH
PRESCOTT, AZ 86313-5001
(800) 949-1005 X 9

Qty: 90 **Fill: (4of4)**
NO COPAY Days Supply: 90
Last Fill Date: Aug 14, 2013



NO REFILLS REMAINING.

Refill Request Form

ANTHONY MINER OCONNELL
SIMVASTATIN 80MG TAB

Rx# 1590369D Provider: NANSON J.
Date: 06/17/2013



TAKE ONE TABLET BY MOUTH AT BEDTIME FOR CHOLESTEROL ** ** DO NOT TAKE
WITH GRAPEFRUIT JUICE **

The first fill is the last fill. Only 1 fill is sent
but it is made to appear as if 4 fills were sent.

PRESCOTT NAVAHCS(119
500 HIGHWAY 89 NORTH
PRESCOTT, AZ 86313-5001
(800) 949-1005 X 9

Qty: 90 **Fill: (4of4)**
NO COPAY Days Supply: 90
Last Fill Date: Aug 14, 2013



Change of Address Form

Fill out if address has changed.

ANTHONY MINER OCONNELL

Address On File:
439 SOUTH VISTA DEL RIO
GREEN VALLEY, AZ 85614

Signature is required to process address change.

Street Line 1 _____
Street Line 2 _____
Street Line 3 _____
Street Line 4 _____
City _____ State _____
Country _____
Zip code + 4 _____
Phone _____
() Permanent
() Temporary Until _____

Signature _____

PRESCOTT NAVAHCS(119



Last Refill
Fill 4 of 4

Provider: Nanson J.
[Bottle dated] 06/28/2013

NO REFILLS REMAINING.

*** Refill Request Form ***

ANTHONY MINER OCONNELL

FINASTERIDE 5MG TAB

Rx# 1356424G

Provider: NANSON J.

Date: 06/28/2013

TAKE ONE TABLET BY MOUTH EVERY DAY FOR PROSTATE



The first fill is the last fill. Only 1 fill is sent but it is made to appear as if 4 fills were sent.

PRESCOTT NAVAHCs(119
500 HIGHWAY 89 NORTH
PRESCOTT, AZ 86313-5001
(800) 949-1005 X 9

Qty: 90

Fill: (4of4)

NO COPAY

Days Supply: 90

Last Fill Date: Aug 14, 2013



Change of Address Form

Fill out if address has changed.

ANTHONY MINER OCONNELL

Address On File:

439 SOUTH VISTA DEL RIO
GREEN VALLEY, AZ 85614

Signature is required to process address change.

Street Line 1 _____

Street Line 2 _____

Street Line 3 _____

Street Line 4 _____

City _____ State _____

Country _____

Zip code + 4 _____ - _____

Phone _____

() Permanent

() Temporary Until _____

Signature _____

PRESCOTT NAVAHCs(119
500 HIGHWAY 89 NORTH
PRESCOTT, AZ 86313-5001
(800) 949-1005 X 9

PRESCRIBED MEDICAL INFORMATION
Medication: FINASTERIDE 5MG TAB

Warning: Do not use if you are pregnant, suspect that you are pregnant, or while breastfeeding. Consult your doctor or pharmacist.

If this medication is crushed prior to administration, it must not be handled by women who are pregnant or who may become pregnant.

Pregnant women should avoid contact with this medication.

This medicine may be taken with or without food.

IMPORTANT: HOW TO USE THIS INFORMATION: This is a summary and does NOT have all possible information about this product. This information does not assure that this product is safe, effective, or appropriate for you. This information is not individual medical advice and does not substitute for the advice of your health care professional. Always ask your health care professional for complete information about this product and your specific health needs.

FINASTERIDE - ORAL (fin-AS-ter-ide)
COMMON BRAND NAME(S): Proscar



It is not possible for 4 fills of 90 days each or 5 fills of 60 days each to occur in the 56 days between May 6 and July 1. Only 1 fill is sent but it is made to appear as if 4 or 5 fills were sent.

Refill Prescription Information
(Active Prescriptions of ANTHONY OCONNELL)

Last updated [07/01/2013 at 0616]

Help

Date on bottle

Refill Status	Refill Submit Date	Fill Date	Refills Remaining	Prescription	Facility	Date on bottle
Active	4/12/2013	7/14/2013	0	RX#1356424G FINASTERIDE 5MG TAB	NORTHERN ARIZONA HEALTH CARE SYSTEM - PRESCOTT DIVISION	6/28/13
Active	4/17/2013	7/5/2013	2	RX#2070495 WARFARIN NA 1MG TAB	NORTHERN ARIZONA HEALTH CARE SYSTEM - PRESCOTT DIVISION	
Active	3/22/2013	6/20/2013	0	RX#1590368D DIGOXIN 0.25MG TAB	NORTHERN ARIZONA HEALTH CARE SYSTEM - PRESCOTT DIVISION	6/17/13
Active	3/22/2013	6/20/2013	0	RX#1590369D SIMVASTATIN 80MG TAB	NORTHERN ARIZONA HEALTH CARE SYSTEM - PRESCOTT DIVISION	6/17/13
Active	3/22/2013	5/8/2013	0	RX#4973800 DIGOXIN 0.25 MG TAB	SOUTHERN ARIZONA HEALTH CARE SYSTEM - TUCSON DIVISION	
Active	3/22/2013	5/8/2013	0	RX#4973802 FINASTERIDE 5 MG TAB	SOUTHERN ARIZONA HEALTH CARE SYSTEM - TUCSON DIVISION	
Active	3/22/2013	5/8/2013	0	RX#4973804 METOPROLOL 25 MG TAB	SOUTHERN ARIZONA HEALTH CARE SYSTEM - TUCSON DIVISION	
Active	3/22/2013	5/8/2013	0	RX#4973808 TAMSULOSIN 0.4 MG CAP	SOUTHERN ARIZONA HEALTH CARE SYSTEM - TUCSON DIVISION	
Active	3/13/2013	5/5/2013	0	RX#1458765E BUPROPION HCL 150MG 12HR SA TAB	NORTHERN ARIZONA HEALTH CARE SYSTEM - PRESCOTT DIVISION	5/1/13
Active	12/20/2012	2/20/2013	0	RX#1615979D LORATADINE 10MG TAB	NORTHERN ARIZONA HEALTH CARE SYSTEM - PRESCOTT DIVISION	



DEPARTMENT OF VETERANS AFFAIRS
Southern Arizona VA Health Care System
Tucson, AZ 85723

In Reply Refer To: 678/13-119

JUN 13 2013

The Honorable Ron Barber
United States Congressman
3945 East Ft. Lowell, Suite 211
Tucson, AZ 85712
Attn: Patty Valera

Dear Congressman Barber:

This is in response to your inquiry dated June 3, 2013, on behalf of Mr. Anthony Miner O'Connell, who contacted your office regarding his medication renewals from the Southern Arizona VA Health Care System (SAVAHCS). I asked Ms. Bernadette Schaeffer, Outpatient Pharmacy Program Manager to review your request.

In reviewing Mr. O'Connell's records it was determined that he does not have a telephone. Ms Schaeffer did contact his daughter Ms. Kate Simmons on June 7, 2013. Ms. Schaeffer confirmed that, Mr. O'Connell is receiving medications from the Consolidated Medication Outpatient Pharmacy and/or the SAVAHCS. He is also receiving medication from the Northern VA Health Care System (NAVAHCS). Ms Simmons was surprised that her father was still concerned about his prescriptions, as he had recently told her that he had resolved the issue. Ms. Schaeffer provided Ms. Simmons with her contact information if any issues with his medication arise.

1 fill VA 1

1 fill VA 2

The SAVAHCS strives to provide quality and compassionate care to all of our Veterans. We are very concerned with patient care and the satisfaction of the Veterans we serve. If you have any questions or concerns regarding this letter, please contact Ms. Bernadette Schaeffer at (520) 792-1450, extension 5394.

Sincerely,

A handwritten signature in black ink, appearing to be "JHG", is written over the word "Sincerely,".

Jonathan H. Gardner, MPA, FACHE
Director
Southern Arizona
VA Health Care System