



Mail Order

PRESCRIPTIONS FOR HOME DELIVERY



Ordering New & Refill Prescriptions Online With Costco Mail Order

Register an Account

The screenshot shows the Costco Pharmacy website interface. At the top, there is a navigation bar with links for 'View Warehouse Savings', 'Find a Warehouse', 'Get Email Offers', and 'Customer Service'. Below this is a search bar for 'Search Medications' and a 'Sign In / Register' button, which is highlighted with a red box and a red arrow. To the right of the search bar is a 'Cart' icon. Below the navigation bar is a main menu with categories: 'Shop All Departments', 'Business Delivery', 'Optical', 'Pharmacy', 'Services', 'Photo', 'Travel', 'Membership', and 'Locations'. The main content area features a large banner for 'Home Delivery' with the text 'Fill your prescription online and have it delivered to your home' and a 'Get Started' link. To the right of the banner is a 'Manage Prescriptions' section with buttons for 'Fill New Prescriptions', 'Refill Prescriptions', 'Prescription Status', and 'Transfer from Warehouse'. Below these are several promotional tiles: 'Full Service Travel Immunization Program', 'Auto-Refill Program', 'The Path to a Healthy Heart', 'Medicare Plan Finder', 'Warehouse Pickup', and 'Customer Service'. The 'Customer Service' tile lists links for 'About Home Delivery', 'How to use the Home Delivery Pharmacy', 'Business Prescription Insurance', 'Frequently-Asked Questions', and 'Contact Us'.

Visit:

pharmacy.costco.com

Click 'Sign In/Register' and then 'Create Account' to get started on your pharmacy account or sign into your costco.com account.

Register an Account

Sign In

Sign in to access your Costco.com account.

Email Address

Password

Remember Me

[Sign In](#)

[Forgot Password?](#)

New to Costco.com?

[Create Account](#)

Create Account

Register a new Costco.com account.

Email Address

Password

Confirm Password

Membership Number (optional) [?](#)

[Register](#)

Yes, I would like to receive emails about special offers and new product information from Costco. Costco will not rent or sell your email address.

Executive Members need to enter their membership number above in order to earn a 2% Reward on qualified purchases.

Non-members may be assessed an additional surcharge for purchases (does not apply to prescription items).

By creating an account you agree to Costco.com terms and conditions of use.

Already have an account? [Sign In](#)

- The member will need to enter their own email address and create a password.
- A Costco membership number is not required to use the pharmacy.
- **Please note**: each family member will need to be registered under a separate email address for a patient profile to be completed.

Setting up a Patient Profile

To complete a profile for the Mail Order Pharmacy a member will need to place their cursor over “Pharmacy” for the drop down menu and click “Patient Profile”. Once in the profile member’s will need to complete the following sections:

- 1) Account & Patient Info
- 2) Insurance
- 3) Payment Method
- 4) Addresses
- 5) Privacy

The screenshot shows the Costco Pharmacy website interface. At the top, there is a search bar for medications and navigation links for warehouse savings, finding a warehouse, email offers, customer service, and a US flag. Below the search bar is a main navigation menu with options: Shop All Departments, Business Delivery, Optical, Pharmacy (highlighted with a red box), Services, Photo, Travel, Membership, and Locations. A dropdown menu is open under 'Pharmacy', listing: Shop Pharmacy, Refill Prescriptions, Transfer Prescriptions, New Prescriptions, Prescription Status, Patient Profile (highlighted with a red box and an arrow), and Immunizations. To the right of the dropdown is a 'Manage Prescriptions' section with buttons for: Fill New Prescriptions, Refill Prescriptions, Prescription Status, and Transfer from Warehouse. Below these buttons is a 'KIRKLAND Signature' logo and an image of various medications. On the left side of the page, there is a 'Home Delivery' banner with the text 'Fill your prescription have it delivered to you' and a 'Get Started' button.

Section 1 - Account & Patient Info:

Patient information: In this section a member will need to provide their name, date of birth, and gender.

Preferences: a member will need to provide if they want child resistant packaging, generic medications when applicable, and if they want refill reminders – which must be checked for auto refills (more detail provided in separate slide).

Preferences: Members will need to provide if they have any drug allergies, what their medical conditions are, and what medications they are currently taking.

Patient Profile Profile > Prescription Info > Confirm

New Patient: Please complete the Account & Patient Info, Insurance, Payment Method, Addresses, and Privacy tabs. Select "Complete Registration" when finished.

Account & Patient Info Insurance Payment Method Addresses Privacy Need Help?

Patient Information

Information on this account pertains to the patient listed below. Please review and make changes as needed.

Patient First Name M.I. Patient Last Name

Date of Birth
Month Day Year

Gender
 Male Female

Preferences

Yes, use child resistant packaging.
 Yes, substitute a generic equivalent when available.
 Yes, I request refill reminders and that [prescription details](#) be included in my emails for all prescriptions on this account.

Do you have any drug allergies?
 Yes No

Aspirin Codeine Erythromycin
 Penicillin Sulfa Drugs

List Other Allergies

Do you have any medical conditions?
 Yes No

Angina Arthritis Asthma
 Chronic Heartburn Congestive Heart Failure Diabetes Mellitus
 Epilepsy Glaucoma High Blood Pressure
 High Cholesterol/Lipid Hypothyroidism Kidney Stones
 Liver Disease Seasonal Allergies Ulcer

List Other Medical Conditions

Are you currently taking any medications?
 Yes No

List the name of all current medications, separated by commas. Strength and dosage information is NOT necessary.

Section 2 – Insurance:

This section is where a member will select their plan from the drop down menu and enter in their prescription insurance card details.

Account & Patient Info **Insurance** Payment Method Addresses Privacy Need Help?

Would you like us to bill a prescription insurance plan?

Yes No

Select plan name

Select 

Prescription Insurance Card

Member ID# Rx Group #

Policyholder Name Relationship to Cardholder

Policyholder Date Of Birth

Month Day Year

Plan Name Insurance Phone

Save Changes

Section 3 –Payment Method:

- Members may choose to *not* enter a payment method at this time, however once an order is placed members will need to add the payment method to their profile.
- If a payment method is not saved there may be problems, or delays, with an order not going through or a possible cancellation if the member does not provide a payment method.

Patient Profile

Profile > Prescription Info > Confirm

Existing Patient: Please review the Account & Patient Info, Insurance, Payment Method, Addresses, and Privacy tabs and make changes as needed. Select "Save Changes" when finished.

Account & Patient Info Insurance **Payment Method** Addresses Privacy [Need Help?](#)

Payment Method (optional)

Only one online payment method may be stored at a time.

Card Number 

Expiration Date
MM/YY

Cardholder Name

[Add Card](#)

Section 4 – Addresses:

- Members will need to provide their billing address as it appears on their payment method they choose to use.
- Members billing address and shipping address should match as this part of the verification process when filling the member's prescription.
- Email correspondence will go to the billing email address.

Account & Patient Info Insurance Payment Method **Addresses** Privacy Need Help?

My Address Book

Your Address Book is a list of frequently-used billing and shipping addresses. To add a new address, select "Add New Address". To edit, delete, or make one of the listed addresses your default billing or shipping address, select the appropriate link below. Your prescription will be shipped to your Default Shipping Address, which is identified with a check mark.

Shipping Billing

Sort By: Showing 1-1 of 1

Default Shipping

Mickey Mouse Test
999 Lake Dr
Issaquah, WA 98027-8990
425-427-7338
mickeytest@hotmail.com

Edit

Add New Address ✕

First Name Last Name

Company Name (optional)

Street Address

Zip Code

City State

Phone Email Address

Changes made here to your shipping or billing address will not update the address associated with your membership.

Section 5 – Privacy:

This section reviews the Costco Health Center Notice of Privacy Practices including the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), and protected health information ("PHI").

For the profile to be completed (registered) this section must be confirmed as being reviewed.

Once done a member may select "Complete Registration".

* Required fields

Account & Patient Info Insurance Payment Method Addresses **Privacy**

You authorize Costco to use and disclose personal health information as stated below and in Costco's Health Centers Notice of Privacy Practices.

WHAT IS PROTECTED?

[Back to top](#)

The federal Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), as modified by the Health Information Technology for Economic and Clinical Health Act ("HITECH"), requires that Costco Health Centers safeguard health information about you called "protected health information," or "PHI," created, received, maintained or transmitted in the course of providing services to you through the Costco Health Centers. PHI is health information that can be used to identify you and that relates to (1) your physical or mental health condition, (2) the provision of health care to you, or (3) payment for your health care. Your prescriptions, visit test results

I have reviewed the Costco Health Center Notice of Privacy Practices effective September 23, 2013 (the "Notice") and understand that all my medical information will be used by Costco in accordance with the Notice.

[Previous](#)

[Complete Registration](#)

Ordering a New Prescription

On the Home Delivery main page members need to click “Fill New Prescriptions”

In this section:

- Doctor’s info
- Prescription Info
- Shipping option
- Optional Additional or Special Comments

The screenshot displays the Costco Home Delivery website interface. At the top, a banner for 'Home Delivery' features a smiling delivery person and the text 'Fill your prescription online and have it delivered to your home'. Below this banner is a navigation menu with the following options: 'Manage Prescriptions', 'Fill New Prescriptions' (highlighted with a red circle and an arrow), 'Refill Prescriptions', 'Prescription Status', and 'Transfer from Warehouse'. The 'KIRKLAND' logo is visible in the bottom right of the banner area. Below the banner, there are several service tiles: 'Full Service Travel Immunization Program', 'Auto-Refill Program', 'The Path to a Healthy Heart', 'Medicare Plan Finder', 'Warehouse Pickup', 'Customer Service', 'CDIABETES.com', 'Health & Wellness Clinics', 'Pet Medications', and 'Patient Access Services'. Each tile includes a brief description and a 'Learn More' or 'Visit' link.

Step 1: Provide Prescription Info

Members will need to provide the details of their prescription when ordering:

- Physician information and how the prescription will be provided (mailed or faxed into the pharmacy).
- The Prescription drug name and if the member wants it filled with generic or brand.
- Choose their shipping method for their order.
- If any special requests are needed, the member may provide it in the comment box at the bottom of the page.

Fill New Prescriptions

1. Profile > 2. Prescription Info > 3. Confirm

Use this page to provide us with contact information for your physician, identify the prescription you would like filled, and choose a shipping option for your order.

*** Required Fields**

PHYSICIAN INFORMATION

PHYSICIAN'S NAME: *

PHYSICIAN PHONE: *

PHYSICIAN'S CITY: *

PHYSICIAN'S STATE: *
Select

YOUR ORIGINAL PRESCRIPTION

Do you have a written prescription? Select one of these options: *

I will mail a prescription to Costco. I have a written prescription.

My doctor will call or fax Costco. I do not have a written prescription.

PRESCRIPTION INFORMATION

Click Search for Drug to find out and fill in each prescription drug name. Using this search function will automate drug and formulation matching, and will speed the processing of your prescription request.

Select drug or Enter drug information

Prescription drug name Use generics if possible

Prescription drug name Use generics if possible

Prescription drug name Use generics if possible

SHIPPING OPTION

Shipping Option†	Cost	Processing Time	Shipping Time	Avg Time to Delivery
<input checked="" type="radio"/> Standard USPS	FREE	1 to 4 days	5 to 10 days	6 to 14 days
<input type="radio"/> Three Day Shipping	\$10.95 flat fee	1 to 4 days	3 days	3 to 6 days
<input type="radio"/> Two Day Shipping	\$13.95 flat fee	1 to 4 days	2 days	2 to 5 days

† Expedited services provided by UPS. Weekend delivery not included. PO Boxes are not accepted. Shipping to Alaska & Hawaii may require an additional 1-2 Days

ADDITIONAL COMMENTS
Please type any special instruction here (optional).

Step 2: Confirm Your Request

The member has the option of reviewing their order, and choosing the delivery preference, before completing their prescription order request.

If the information is accurate the member would click “Complete Prescription Request” to place their home delivery prescription order.

Confirm Refill Request

1. Profile > 2. Prescription Info > 3. Confirm 

Please verify your order details then select a delivery preference, below.

PRESCRIPTIONS IN THIS ORDER

RX#	Drug Name	Qty	Price	Remove
581-1234567	SINGULAIR 10 MG TABLET	30	\$0.00	<input type="checkbox"/>

[Update](#)

Subtotal: \$0.00
Shipping: \$0.00
Estimated Total: \$0.00

Your estimated price is calculated using your previous co-payment amount plus any additional shipping charges. Your actual price may vary, depending on quantity requested, current purchase price for the medication, and any applicable prescription insurance coverage.

DELIVERY PREFERENCE

When would you like us to ship your order?

- Ship my order as soon as my prescription is ready. My credit card will be charged automatically, as soon as my order is completed and shipped.
- Notify me by email when my prescription and insurance (if applicable) have been verified. I will return to the site to review the billing and shipping information and complete my order at a later date. I will not be charged until I complete my order.

PRESCRIPTION WILL BE SHIPPED TO

Add/Change Shipping Address

Home Address

Test Patient
123 Lane Rd
City name, ST 12345
Phone: (123) 456-7890
testpatient@email.com

PRESCRIPTION WILL BE BILLED TO

Add/Change Billing Address

Test Patient
123 Lane Rd
City name, ST 12345
Phone: (123) 456-7890
testpatient@email.com

SHIPPING OPTION

Standard USPS - \$0.00
6 to 14 days to delivery.

CREDIT CARD INFORMATION

Add/Change Credit Card

Costco Visa
*****1234



[Modify Prescription Request](#) [Complete Prescription Request](#)

Step 3: Receive Your Order

The Mail Order Pharmacy requests members allow 1-4 business days for processing once a prescription order has been received by the pharmacy.

Please be advised the processing time may vary if there are delays due to insurance approval or payment.

After your prescription is processed, and payment is confirmed, your order will be shipped via the shipping method selected.

Thank You for Your Order Print

Please see Next Steps for further action

Next Steps:

If you have a written prescription, please send to:

Costco Pharmacy (#581)
802 134th St Sw Ste 140
Everett, WA 98204-7314

If your doctor will fax your prescription, please call or fax to:

Call: (800) 607-6861 or

Fax: (800) 633-0334

All calls and faxes must originate from your doctor and will be verified.

Please include patient's name, date of birth and phone number on each prescription.

You will receive an email when your prescription has been shipped.

Additional Info:

For further assistance, please click on the helpful links below:

[Prescription Status](#) - Monitor the progress of your order.

[Fill Prescription](#) - Quickly and easily place another prescription request.

[Drug Information](#) - To view drug information.

[Contact Us](#) - Email or phone a customer service representative or pharmacist.

[Health Information](#) - Learn smart tips for managing various medical conditions.

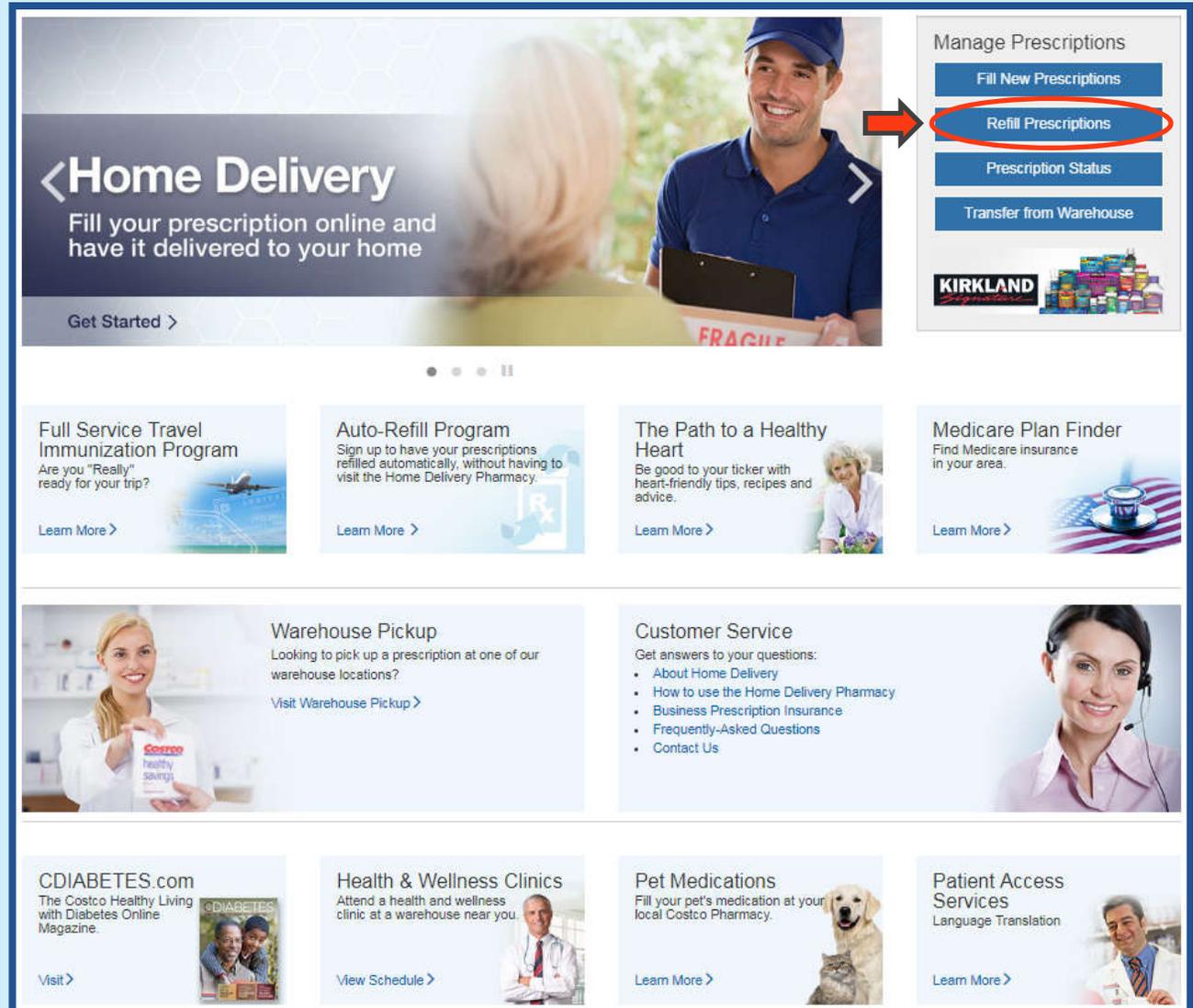
[NatureMade Vitamins](#) - #1 Pharmacist Recommended Supplement Brand in 9 Categories.

Reordering a Refill Online

On the Home Delivery main page members need to click “Refill Prescriptions”

In this section:

- Select Refills
- Review refill Order
- Confirmation Page



The screenshot shows the Costco Home Delivery website interface. At the top, there is a banner for 'Home Delivery' with the text 'Fill your prescription online and have it delivered to your home' and a 'Get Started >' link. To the right of the banner is a 'Manage Prescriptions' menu with four buttons: 'Fill New Prescriptions', 'Refill Prescriptions' (highlighted with a red circle), 'Prescription Status', and 'Transfer from Warehouse'. Below the banner are several promotional tiles: 'Full Service Travel Immunization Program', 'Auto-Refill Program', 'The Path to a Healthy Heart', and 'Medicare Plan Finder'. Further down are 'Warehouse Pickup' and 'Customer Service' sections. At the bottom, there are four more tiles: 'CDIABETES.com', 'Health & Wellness Clinics', 'Pet Medications', and 'Patient Access Services'. A red arrow points from the 'Refill Prescriptions' button to the 'Home Delivery' banner.

Step 1: Select Your Refills

A member may select a prescription (that has been shipped at least once) they would like refilled from their refill page once logged in.

Members have the option to add a prescription to our Auto-Refill Program per an email notification they will receive and need to consent to prior to shipping.

Again, please allow 1-4 business days for processing, and the processing time may vary if a refill authorization is required, delays due to insurance approval, or payment.

Refill Prescriptions

1. Profile > 2. Prescription Info > 3. Confirm

The following prescriptions are available for refill, subject to the approval of your physician. Use the [Manage Inactive Prescriptions](#) link to organize your prescriptions in groups under active or inactive status depending on how frequently they are used. Visit the [Prescription Auto Refill Program](#) help page for more information about setting up an auto refill.

If you wish to make changes to quantity, strength, or directions for any medication, please request a [New Prescription](#).

* Required Fields

ACTIVE PRESCRIPTIONS [Manage Inactive Prescriptions](#)

Select	RX #	Drug Name	Qty	Refills Left	Last Ordered	Auto Refill ON OFF
<input type="checkbox"/>	581-1234567	SINGULAIR 10 MG TABLET	30	3	10/16/2017	<input type="radio"/> <input checked="" type="radio"/>
<input type="checkbox"/>	581-1234568	SYNTHROID 100 MCG TABLET	30	3	10/16/2017	<input type="radio"/> <input checked="" type="radio"/>

Make Selected Items Inactive Items Per Page : 24 48 96 Page : 1

SHIPPING OPTION

Shipping Option†	Cost	Processing Time	Shipping Time	Avg Time to Delivery
<input checked="" type="radio"/> Standard USPS	FREE	1 to 4 days	5 to 10 days	6 to 14 days
<input type="radio"/> Three Day Shipping	\$10.95 flat fee	1 to 4 days	3 days	3 to 6 days
<input type="radio"/> Two Day Shipping	\$13.95 flat fee	1 to 4 days	2 days	2 to 5 days

† Expedited services provided by UPS. Weekend delivery not included. PO Boxes are not accepted. Shipping to Alaska & Hawaii may require an additional 1-2 Days

[Refill Selected Prescriptions](#)

Step 2: Review Refill Order

Same as when the member places an order for a new prescription, the member has the option of reviewing their order, choosing the delivery preference, and updating their payment method before completing their refill order request.

If the information is accurate the member would click “Complete Prescription Request” to place their home delivery prescription order.

Confirm Refill Request

[1. Profile](#) > [2. Prescription Info](#) > [3. Confirm](#) 

Please verify your order details then select a delivery preference, below.

PRESCRIPTIONS IN THIS ORDER

RX#	Drug Name	Qty	Price	Remove
581-1234567	SINGULAIR 10 MG TABLET	30	\$0.00	<input type="checkbox"/>

[Update](#)

Subtotal: \$0.00
Shipping: \$0.00
Estimated Total: \$0.00

Your estimated price is calculated using your previous co-payment amount plus any additional shipping charges. Your actual price may vary, depending on quantity requested, current purchase price for the medication, and any applicable prescription insurance coverage.

DELIVERY PREFERENCE

When would you like us to ship your order?

- Ship my order as soon as my prescription is ready. My credit card will be charged automatically, as soon as my order is completed and shipped.
- Notify me by email when my prescription and insurance (if applicable) have been verified. I will return to the site to review the billing and shipping information and complete my order at a later date. I will not be charged until I complete my order.

PRESCRIPTION WILL BE SHIPPED TO

Add/Change Shipping Address

Home Address

Test Patient
123 Lane Rd
City name, ST 12345
Phone: (123) 456-7890
testpatient@email.com

PRESCRIPTION WILL BE BILLED TO

Add/Change Billing Address

Test Patient
123 Lane Rd
City name, ST 12345
Phone: (123) 456-7890
testpatient@email.com

SHIPPING OPTION

Standard USPS - \$0.00
6 to 14 days to delivery.

CREDIT CARD INFORMATION

Add/Change Credit Card

Costco Visa
*****1234



[Modify Prescription Request](#) [Complete Prescription Request](#)

Step 3: Confirmation Page

An order confirmation email will be sent once the order has been submitted.

Members will also receive an order confirmation email, detailing the order (drug name, strength, quantity, cost) once it is being filled.

Lastly members will receive a shipping conformation email with the order tracking number.

Thank You for Your Order

You will receive an email when your order has been confirmed

Additional Info:

For further assistance, please click on the helpful links below:

Prescription Status - Monitor the progress of your order.

Fill Prescription - Quickly and easily place another prescription request.

Drug Information - To view drug details and information.

Contact Us - Email or phone a customer service representative or pharmacist.

Health Information - Learn smart tips for managing various medical conditions.

NatureMade Vitamins - #1 Pharmacist recommended supplement brand in 9 categories.

Auto Refill Program

- Before each auto-refill is processed an email is sent to the member for their consent.
- Members must click the “Yes, Refill Prescription” button (within 72 hours) to start the refill process. If they do not, the refill will not be placed and will be removed from auto-fill.
- Refill, and auto refill, email notifications are sent (approximately) 65 days into a 90 day supply fill.
- Members order(s) are charged to their saved payment type to reduce any delays.
- The auto-refill program assists members with being less likely to run out of their maintenance drugs and stay on track with their medications.

Prescription Auto Refill Program

To ensure you will never run out of your medication, Costco Online Pharmacy will regularly fill and ship your medications to you. You will never need to request a refill again.

To set up individual prescriptions for Auto Refill you click the on and off button in the Auto Refill column to turn Auto Refills on and off by prescription. This can be done while on [Refill Prescription page](#) or [Prescription Status page](#).

What to expect on Auto Refill?

Before each refill is processed in our system, an email will be sent to you for final confirmation. You will have 72 hours to check the consent, "Yes, Refill Prescription" button to start the refill process. If you do not respond with a consent via email or by phone within 72 hours, your auto refill prescription will be disenrolled from the auto refill program and will not ship. To reactivate the auto refill at a later date, please visit [Prescription Status page](#) or [Refill Prescription page](#). A valid credit card must be on file to use this service. Please note auto refills will not be available for controlled substance medications and non-maintenance medications.



Order Refill	Rx #	Drug Name	Qty	Refills Left	Last Ordered	Auto Refill
	581-2104064	ANDRODERM 2 MG/24HR PATCH	180	4	1/3/2013	ON OFF
	581-2104067	ANDROGEL 1.625(2.5G) GEL PCKT	3	3	1/3/2013	ON OFF
	581-2104068	DEPO-TESTOSTERONE 100 MG/ML VL	10	10	1/5/2012	ON OFF
	581-2104069	FORTESTA 10MG GEL PUMP	60	0	1/5/2013	ON OFF

Page: 1

Prescription Status

Members can track the status of their orders by logging onto their account and clicking on the corresponding tab.

For detailed information on their ordered prescription members need to click the prescription number.

If members have further questions regarding their order, they may call our [Costco Mail Order Pharmacy Member Service Center](#) for a live agent to address any questions, or concerns, a member has.

Prescription Status

Patient: Test Patient

In Process Available Refills Prescription History Need Help?

Select	Status	Rx #	Drug Name	Qty	Price	Order Date	Type
	In Process	581-1234567	ALENDRONATE SODIUM 70 MG	90	\$12.59	10/16/2017	Refill

Page: 1

Visit [Flexible Spending Account \(FSA\)](#) for order information specific to these areas. Visit the [Costco.com Order Status](#) page to view all other Costco.com orders.

Prescription Details

Patient:	Test Patient	Delivery Preference:	Self Checkout
Prescription #:	581-1234567	Shipping Option:	
Costco Order #:		Location to mail the original hardcopy of your prescription:	
Status:	In Process		Costco Pharmacy
Physician:	Who, Doctor MD, City name, WA (425) 123-4567		802 134th St Sw Ste 140 Everett, WA 98204-7314 Phone: (800) 607-6861 Fax: (800) 633-0334
Medication:	ALENDRONATE SODIUM 70 MG		
Quantity:	90		
Price:	\$12.59		
Refills Left:	0		
Auto Refill:	NO		

Prescription History

Members are able to view their Prescription history for up to 180 days and track their orders under the prescription details.

Home » Prescription status

HOME DELIVERY

- Home Delivery
- Refill Prescriptions
- Transfer Prescriptions
- New Prescriptions
- Prescription Status**
- Patient Profile

DRUG PRICING & INFORMATION

Prescription Status

Patient: Test Patient

In Process Available Refills **Prescription History** Need Help?

Ship Date	Order #	Rx #	Drug Name	Qty	Price	Order Date	Status
10/24/2017	669453229	581-3044272	SYNTHROID 100 MCG TABLET	30	\$9.00	10/16/2017	Shipped
10/24/2017	669453229	581-3044273	METFORMIN 500 MG TABLET	30	\$9.00	10/16/2017	Shipped
10/24/2017	669453229	581-3044274	LISINAPRIL 40 MG TABLET	30	\$9.00	10/16/2017	Shipped
10/24/2017	669453229	581-3044275	SINGULAIR 10 MG TABLET	30	\$3.00	10/16/2017	Shipped
10/24/2017	669453229	581-3044276	ATENOLOL 50 MG TABLET	30	\$12.59	10/16/2017	Shipped

Page: 1

Prescription Status

Patient: Test Patient

In Process Available Refills **Prescription History** Need Help?

Ship Date	Prescription Details
10/24/2017	<p>Patient: Test Patient Prescription #: 581-3044272 Costco Order #: 669453229 Status: Shipped</p> <p>Delivery Preference: Self Checkout Date Shipped: 10/24/2017 Shipping Option: Standard USPS Tracking #: 92748901970253553000083383</p> <p>Location to mail the original hardcopy of your prescription: Costco Pharmacy 802 134th St Sw Ste 140 Everett, WA 98204-7314 Phone: (800) 607-6861 Fax: (800) 633-0334</p>
10/24/2017	<p>Physician: Who, Doctor MD, City name, WA 425-123-4567</p>
10/24/2017	<p>Medication: SYNTHROID 100 MCG TABLET</p>
10/24/2017	<p>Quantity: 30 Price: \$9.00 Refills Left: 0 Auto Refill: NO</p>
10/24/2017	



Mail Order

PRESCRIPTIONS FOR HOME DELIVERY

If you have further questions, please email or call the Costco Mail Order Pharmacy Member Service Center at:

Phone: 1-800-607-6861

Email: webpharmacy@costco.com

Hours of Operation:

Monday-Friday, 5:00 a.m. to 7:00 p.m. PST.

Saturday, 9:30 a.m. to 2:00 p.m. PST.