

Fraudulent Prescriptions - Guidance for Pharmacists

This resource supports pharmacists in NSW to identify, assess and respond to potentially fraudulent prescriptions for high-risk medicines including Schedule 8 and Schedule 4D medicines (such as tramadol and paracetamol / codeine combinations).

Fraudulent prescriptions may be handwritten, computer generated and hand signed, or electronic (eScripts), and may appear to be issued by a legitimate prescriber.

All prescriptions for high risk medicines should be carefully reviewed and validated before dispensing to reduce the risk of patient harm, diversion, and unlawful supply.



— Check for red flags

While there may be valid reasons for some prescriptions to present with the indicators listed below, the presence of one or more of the following are commonly seen with forged prescriptions and should prompt the pharmacist to apply further scrutiny before dispensing.

- The patient, prescriber, or another pharmacy phones ahead to confirm stock availability.
- The prescription is provided verbally or via fax/email, and inclusion of specialist reports or letters may appear to legitimise the request.
- The prescription is on a non-standard form not consistent with a prescription, such as plain A4 paper, or the layout and formatting of the prescription are inconsistent.
- There is no eRx barcode is present, or the barcode does not scan correctly.
- There is no corresponding prescribing record for this prescription visible under the patient record in SafeScript NSW (non-hand-written prescriptions).
- Large quantities or multiple PBS pack sizes, or pack sizes that exceed PBS listings are requested.
- The patient or prescriber is located outside the local area.
- The patient presents after usual business hours and indicates there is an urgent need for the medication to be supplied.

Notes:

- Sophisticated forgeries may include valid PBS authorities (streamlined and phone approval).
- Take extra care with hospital prescriptions where the prescriber may be hard to reach.



— Verify before dispensing

If you have concerns about the appropriateness of a prescription or suspect it may be forged, consider the following actions before dispensing:

- Contact the prescriber using contact details obtained from an independent source (not the prescription itself). Be aware that sophisticated forgeries may include false contact information, and not all online or listed medical centres are legitimate.
- Check the prescriber's information on Ahpra.
- Check for published lists of [lost, stolen or forged prescriptions](#), noting that absence from this list does not guarantee prescription authenticity.
- Check [SafeScript NSW](#) as it may provide valuable information in detecting fraudulent scripts. In addition to the dispensing history, computer-generated and electronic prescriptions will generally appear in the patient profile.
- Speak to the patient to clarify clinical context and presentation.
- If appropriate, confirm the identity of the person collecting the medicine. If a third party is collecting, consider requesting identification and/or evidence of the patient's consent.
- Document all verification steps taken, particularly where concerns remain unresolved.



— Report suspected forged prescriptions

If you identify or confirm a suspected forged prescription it is recommended that you:

- Make a copy of the prescription before interacting with the individual.
- Retain the original prescription only if it is safe to do so.
- Report forged prescriptions via the [Online notification form](#).
- Notify [NSW Police](#), noting that this is a legislative requirement.

S8: Verifying a prescription is mandatory if it's for a new patient and a prescriber you don't know, but it's good practice to do so even if they are known to you. If verification is not possible and there is no reason to suspect the prescription's validity, up to 2 days supply of the medicine may be dispensed where clinically appropriate to support continuity of patient care.

Always prioritise personal safety and escalate concerns in accordance with local procedures.

Further information

For more information, refer to [Lost, stolen or forged prescriptions](#).

Pharmacists play a critical role in preventing harm associated with fraudulent prescriptions. When in doubt, pause dispensing, verify the prescription, and escalate concerns through established reporting pathways.

Example Only:

INCONSISTENT PRACTICE NAME	Dr John Smith Telemedicine Doctors 180 Military Road Norwest NSW 2153 Ph: 029999 9999 Fax: 029999 9998	Dr John Smith National Telemedicine Doctors Level-I 180 Military Road Norwest NSW 2153 Ph: 029999 9999 Fax: 2182517
INCONSISTENT ADDRESS DETAILS	Prescriber no. 2182517	Prescriber no. 2182517
	Patient's Medicare no.	Patient's Medicare no.
	Pharmaceutical benefits entitlement no.	Pharmaceutical benefits entitlement no.
	☐ PBS Safety Net entitlement cardholder (from relevant box) ☐ Concessionary or dependent RPS beneficiary or PBS Safety Net concession cardholder	☐ PBS Safety Net entitlement cardholder (from relevant box) ☐ Concessionary or dependent RPS beneficiary or PBS Safety Net concession cardholder
	Patient's name Black, Elizabeth (01/01/1981)	Patient's name Black, Elizabeth (01/01/1981)
	Address 13 Bickle St Cremorne NSW 2090	Address 13 Bickle St Cremorne NSW 2090
	Date 30/05/2026 Script Id: 001111	Date 30/05/2026 Script Id: 001111
	PBS ☐ RPBS ☐ Brand substitution not permitted ☐	PBS ☐ RPBS ☐ Brand substitution not permitted ☐
INCONSISTENT FORMATTING/ MISSPELLING	Paracetamol-Codeine Phosphate Tablet 500mg-30mg 2 Twice a day PRN Quantity: 80, repeats: 0 1 item printed	Paracetamol-Codeine Phosphate Tablet 500mg-30mg 2 Twice a day PRN Quantity: 80, repeats: 0 1 item printed
MONITORED MEDICINE NOT ON SAFESCRIP NSW	1 item printed	1 item printed
INCREASED QUANTITY	Dr John Smith MBS, FRACGP	Dr John Smith MBB, FRACGP
MISSING SIGNATURE	☐ If not a Medical Practitioner, tick your prescriber type: Dentist ☐ Nurse Practitioner ☐ Midwife ☐ Optometrist ☐	☐ If not a Medical Practitioner, tick your prescriber type: Dentist ☐ Nurse Practitioner ☐ Midwife ☐ Optometrist ☐
NO ERX BARCODES	Prescriber to sign original and duplicate	Turn over for privacy notice
NOT ON PBS STATIONERY		Turn over for privacy notice

Your Checklist

Fraudulent prescriptions – Pharmacist checklist

1. Pause and screen

- ☐ Is the medicine high-risk (S8 or S4D)?
- ☐ Does the prescription present one or more red flags?
- ☐ Does anything about the request feel unusual, urgent or inconsistent?

2. Check for red flags

- ☐ Request made in advance for stock availability by patient, prescriber or another pharmacy
- ☐ Prescription provided verbally or via fax/email
- ☐ Non-standard prescription form (e.g. plain A4 paper,)
- ☐ Inconsistent or unusual layout, formatting, spelling errors, inconsistent text
- ☐ Missing or non-scanning eRx barcode
- ☐ No corresponding prescribing event in [SafeScript NSW](#)
- ☐ Large quantities or pack sizes exceeding PBS listings requested
- ☐ Patient or prescriber located outside the local area
- ☐ Presentation after hours with an urgent request

3. Verify before dispensing

- ☐ Contact the prescriber using **independently sourced contact details**
 - ☐ Confirm prescriber registration via **Ahpra**
 - ☐ Check [here](#) for published alerts for lost, stolen or forged prescriptions
 - ☐ Review patient's profile in [SafeScript NSW](#) for dispensing history and prescription event
 - ☐ Speak to patient to clarify clinical context
 - ☐ Confirm identity of the person collecting the medicine. If collected by a third party, request evidence of patient consent.
- Note: All S8 prescriptions where the patient and prescriber are unknown to you must be verified. If this is not possible and you have no reason to suspect the prescription you may provide a maximum of 2 days supply.**

4. If forgery is suspected

- ☐ Make a **copy** of the prescription
- ☐ Retain the **original** only if safe to do so
- ☐ Report via the [Online notification form](#)
- ☐ Notify [NSW Police](#) (legislative requirement)

5. Remember

Pharmacists play a critical role in preventing harm associated with fraudulent prescriptions. When in doubt: pause dispensing, verify the prescription, and escalate concerns through established reporting pathways.