

Process for Pharmaceutical Representatives

If you wish to discuss a product with the Medicines Management Team please complete this form and email it back to the Medicines Management Team at bedccg.bedsmeds@nhs.net

****Please note no appointments will be considered until we have received this information****

This form can also be filled out online at

<https://medicines.blmkccg.nhs.uk/categories/formulary/pharmaceutical-reps/>

Your name:	
Job title	
Company name:	
Email address:	
Telephone number:	
What products does the pharmaceutical sales representative wish to discuss? (Please be specific)	
Is this product in our local formulary? Yes No (please circle/delete) Bedfordshire and Luton Formulary Wound Care Formulary (Beds & Luton) Milton Keynes formulary	
How is this product more effective than the current product in use? Include the clinical and quality benefits to the patients of Bedfordshire, Luton and Milton Keynes.	
How does the price compare with similar products?	
What addition information do you have to enable the team to make an informed decision? You may attach further information.	