NORTHWIND

info@nwpharma.com

phone 317-288-9762
toll-free 888-334-0052
fax 317-653-1113

Monday–Friday,
8am–5pm EST

Thank you for choosing Northwind Pharmacy!

Our pharmacy staff are available during regular business hours to answer any questions or concerns you have regarding your medication(s). Please don't hesitate to get in touch.
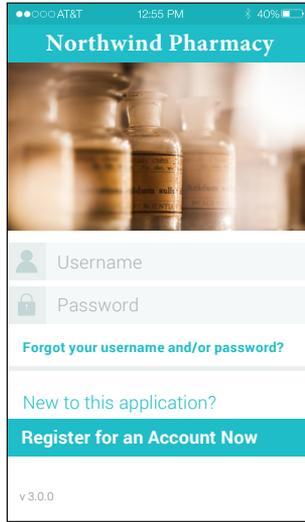
Things to know

See reverse side to learn how to set up the Northwind Pharmacy app!

- Included is a Patient Education Summary and/or Medguide, providing you information on how to properly use your prescription.

- **If you have any drug allergies that we need to be aware of, please call us immediately!**

- You will receive communication via email/text/phone when your prescription has been shipped.

- If you are out of refills, please see a health provider before your prescription expires.

- If your prescription includes temperature-sensitive drug products, your package will arrive in a Styrofoam cooler with cold packs. These packs are safe to dispose in your own waste receptacle.

- For Regular Service, the primary shipping method will be USPS First Class with tracking, with 3-5 day mailing times.

- If you have a change of address or phone number, please notify your clinic and/or Northwind Pharmacy immediately.

For optimal service and convenience, download our free Northwind Pharmacy app for ref lls and reminders!

1 Go to your app store, download the "RxLocal" app and register for an account.

Northwind Pharmacy

●●○○○ AT&T   12:55 PM   ⚡ 40%▭

👤 Username

🔒 Password

Forgot your username and/or password?

New to this application?

Register for an Account Now

v 3.0.0

2 Find Northwind Pharmacy within the app.

1) After you click "Register" navigate to Indiana

2) After you click Indiana, navigate to Indianapolis

3) After you click Indianapolis you should see Northwind Pharmacy in the list.

R✕Local

3 Fill in your last name, Rx number, and date of birth. All fields much match our database.

App Store   19:20   ⚡
Cancel   **Patient Info**

Primary user's information:

Patient's Last Name
Enter Your Last Name Here

Rx Number
Enter Your Rx Number

Patient's Date of Birth
Enter Your Birthday (MM/DD/YYYY)

Prev   Continue   Next

Q W E R T Y U I O P
A S D F G H J K L
⇧ Z X C V B N M ⌫
123 😊 🎤 space Next

4 Choose a username and fill in your email address.

●●○○○ AT&T   12:55 PM   ⚡ 40%▭
‹   **Create a Username**   Cancel

Username
Create a Username

Email Address
Enter Your Email Address

Continue

Q W E R T Y U I O P
A S D F G H J K L
⇧ Z X C V B N M ⌫
123 😊 🎤 space Next

5 Set a PIN that you'll remember, and you're ready to go!

●●○○○ AT&T   12:55 PM   ⚡ 40%▭
‹   **Create a PIN Number**   Cancel

Create a 4 to 6 digit PIN to access your account from your mobile device. You will be asked for this PIN number every time you open the app.

✶ ✶ ✶ ✶

1   2 ABC   3 DEF
4 GHI   5 JKL   6 MNO
7 PQRS   8 TUV   9 WXYZ
         0   ⌫

Save