REQUEST FOR COMPOUNDED VETERINARY MEDICINE

compoundlabs

Complete and email to vets@compoundlabs.co.nz
Call (09) 442 1727 to speak to a Compounding Pharmacist

Conditions of Supply

1. CompoundLabs is permitted to supply compounded veterinary medicines under Section 26 of the Medicines Act 1981.
2. The request for compounding must be signed by the Veterinarian.
3. CompoundLabs will supply a suggested expiry date.
4. Capsules will be supplied in white HDPE bottles, unless otherwise instructed.
5. Creams will be supplied in oral syringes, unless otherwise instructed.
6. The requesting Veterinarian is responsible for their own labelling, record keeping and reporting requirements.

Please note: Medications will be supplied to the clinic.

Date: _____

Clinic Name _____

Contact Name: _____ **Phone Number:** _____

Email: _____

Clinic Address: _____

I hereby request CompoundLabs to compound the medicine(s) listed for animals under my care.

One medication per page

Medication (Including strength, dose, frequency & dose form)	**Animal and Owner Names**	**Quantity Required**

Veterinarian Name: _____

Veterinary Registration #: _____

Signature: _____