VETERINARY PRESCRIPTION

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Owner Surname	
Address Line 1	
Address Line 2	
Town/City	
Postcode	
Animal Name	
Animal Species	
Medication Name	
Medication Strength, Formulation, Dosage Form	
Quantity To Be Supplied	
Amount To Be Administered On Each Occasion	
Route Of Administration	
Frequency Of Administration	
Duration Of Treatment	
Default Labelling	FOR ANIMAL TREATMENT ONLY
	KEEP OUT OF THE REACH AND SIGHT OF CHILDREN
SPECIAL INSTRUCTIONS AND WARNINGS	

VETERINARY PRACTICE NAME	
VETERINARY PRACTICE LANDLINE TELEPHONE NUMBER	
PRESCRIBING VETERINARY SURGEON NAME	MRCVS
PRESCRIBING VETERINARY SURGEON RCVS NUMBER	
PRESCRIBING VETERINARY SURGEON SIGNATURE	

DATE COMPLETED	
DATE OF EXPIRY	TICK IF SIX MONTHS AFTER DATE COMPLETED
THIS PRESCRIPTION MAY BE REPEATED THIS MANY TIMES	
ZERO OR NUMBER IN WORDS	
THIS PRESCRIPTION IS FOR AN ANIMAL UNDER MY CARE	TICK THIS BOX IF THE STATEMENT APPLIES
THIS MEDICINAL PRODUCT HAS BEEN PRESCRIBED	TICK THIS BOX IF THE STATEMENT APPLIES
UNDER THE CASCADE	

The current Veterinary Medicines Regulations, specifically schedule 3 & 4, must be followed in all aspects of prescription and supply. The pharmacist / authorised supplier should retain this script for at least five years against future audit. This practice accepts no responsibility for the safety, withdrawal periods or efficacy of any substituted medications or liability for any losses however sustained. All such liabilities rest exclusively with the pharmacist / authorised dispenser. Veterinary Surgeons will use their knowledge to decide on the best medication for the patient. They will consider the patient's condition, drug interactions, other existing disease, and the veterinary medicines cascade. They will also make detailed notes in the patient's clinical records. Finally, they will write the prescription. This prescription for a controlled drug is valid for 28 days from the signed date or for any other drug for six months from the signed date or until the date of expiry whichever takes precedent.