



Veterinary Clinic Order Form

Office Name:

Address:

Phone:

Fax:

Order Date:

☐ **Gabapentin 100mg/ml Chicken Flavor Suspension**

Qty: _____ ml

Number of patients dispensed from amount ordered: _____ X amount (in grams) per patient:
_____ (grams) must equal quantity order.

☐ **Metronidazole 60 mg/ml Chicken Suspension**

Qty _____ ml

Number of patients dispensed from amount ordered: _____ X amount (in grams) per patient:
_____ (grams) must equal quantity order.

☐ **Doxycycline 50mg/ml Chicken Oil Suspension**

Qty: _____ ml

Number of patients dispensed from amount ordered: _____ X amount (in grams) per patient:
_____ (grams) must equal quantity order.

☐ **Prednisolone 10mg/ml Chicken Suspension**

Qty _____ ml

Number of patients dispensed from amount ordered: _____ X amount (in grams) per patient:
_____ (grams) must equal quantity order.

Provider Signature: _____ Date: _____

California Board of Pharmacy Dispensing Regulations regarding compounded topical preparations for Office Use: Products are for IN-OFFICE USE ONLY. Products may not be relabeled for home use. This purchase order must be completed and faxed for each order. The new law requires that the prescriber office include an accurate estimate of the total number of clients who will be serviced from each bottle. The law further requires that prescribers must include an approximate estimate of the amount of drug (grams) dispensed per client for each bottle.