



Compounded Prescription Form

Veterinarian

Veterinarian: _____ **Practice:** _____
Last Name First Name
Address: _____ **City:** _____ **State:** _____ **Zip:** _____
Phone: _____ **Fax:** _____ **Email*:** _____

Owner

Owner: _____ **Phone:** _____
Last Name First Name
Address: _____ **City:** _____ **State:** _____ **Zip:** _____
License #/ Passport #/ SS #: _____ **Email*:** _____
Controlled Rx must include one of the above.

Animal

Species: This patient is not a food-producing animal. **Diagnosis:** _____
 Canine **Name:** _____ **Age:** _____ **Restrictions:** _____
 Feline Exotic **DOB:** _____ **Weight:** _____ kg **Case Notes:** _____

Medication • Medication

Drug: _____
Directions: _____
Clinical justification on using the above compounded drug versus manipulating from available FDA-approved drug:
Approved drug/form results in dose that is: too large too small non-palatable non-compliant a human hazard
Approved drug cannot be manipulated into required: large dose small dose compliant dose safe dose
Manipulation notes: _____
Dose: _____ mg or _____ mg / ml or _____ % **OR Doseage:** _____ mg / kg **Volume (if applicable):** _____ ml / dose
Frequency: 8hr 12hr 24hr as needed **OR** _____ Other
Route: PO IM SC IV Transdermal Topical Buccal Ophthalmic Rectal _____ Other
Form: Capsule Suspension Treat Suppository Injection Drops Gel
Flavoring: Chicken Beef Fish _____ Other **OR** EPC Concierge Pick Flavor With Owner
Supply: _____ Days **OR Quantity:** _____ **Refills:** _____
Pick up: EPC 114th & Dodge Satellite Kohll's (specify location) _____ **OR Ship:** 2nd Day Overnight
Start same day Rx must be confirmed & rate determined over phone before 2pm. Pick-up at 114th & Dodge location by 6:45pm.
Ship to: Veterinarian Client **Bill to:** Veterinarian Client
Credit Card: VISA MasterCard American Express Discover **CC#:** _____ **Exp:** _____

Veterinarian Printed Name **Veterinarian Signature** **State & License # / DEA #** **Date**

EPC performs third party verification of sterility, pyrogen testing & stability. Data provided upon request.
There are no FDA-approved animal or human drugs that can be used as labeled or in an extralabel manner under section 512(a)(4) or (5) and 21 CFR part 530 to appropriately treat the disease, symptom, or condition for which this drug is being prescribed.

***Emails are strictly utilized for shipment tracking, re-fill reminders, prescriber newsletter, and updates.**
• All information kept confidential and used only for medical record keeping and clinic research, if applicable
• In compliance with USP, PCAB standards

Consultations and Comments to:
Drew Olson, DVM
National Director of Veterinary Compounding
402.290.0036 Dr.Olson@EPCvet.com



A Division of Kohll's Pharmacy Since 1948

NEW PRESCRIPTION

1. EPC will receive the prescription from your veterinarian.
 - VERIFY your contact information is correct with your veterinarian. EPC needs the single best phone number to reach you.
2. EPC will call you within the next business day of receiving the prescription.
 - Confirm your contact information
 - Determine your preferred receiving method
 - Discuss medication flavoring if applicable
 - Provide prescription cost estimate
 - CALL EPC if you have NOT spoken with EPC within the next business day.
3. EPC will create your animal's customized prescription within the next 2 business days.
 - UNDERSTAND this medication is specially made for your pet. Adequate time is needed to ensure each prescription meets EPC's strict quality standards.
 - You are ENCOURAGED to call EPC with questions between 8am-5pm Monday-Friday.
4. When the prescription is ready, EPC will call you at the phone number that was provided from your veterinarian.
 - EPC will leave a voicemail and depend on you to check your voicemail if you do not answer the phone call.

REFILL POLICY

1. CALL EPC 7-10 days prior to your animal's medication running out.
 - IF refills are available EPC will create your animal's medication exactly as it was previously.
 - IF refills are NOT available you must contact your veterinarian immediately to authorize a refill.
 - VERIFY that your contact phone number is correct.
2. Once the refill is authorized the process is the same as a new prescription process.

SPECIAL NOTE:

EPC IS CLOSED WEEKDAYS FROM 5PM-8AM & ON SATURDAY & SUNDAY.

REGULATION DOES NOT PERMIT COMPOUNDED PRESCRIPTIONS TO BE PROCESSED AFTER HOURS.

Your veterinarian has recommended and prescribed a compounded medication that will be made to treat your animal's specific needs. Every prescription from EPC is mixed specifically for your animal's condition and what your veterinarian has requested. If you have questions that are not addressed on this sheet, please call EPC before your veterinarian. EPC will call your veterinarian if there are any questions.

KNOW EPC is the national leader in customized medication for animals. EPC is the highest accredited pharmacy in the state of Nebraska and one of the very few pharmacies in the nation that can deliver any medication to any patient anywhere. Your veterinarian has chosen to entrust EPC with the opportunity to provide your animal with the nation's highest quality medication.

Signature & Date _____



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