

Unable to Dispense Rx Due to:

Missing information

- | | | |
|---|---|--|
| <input type="checkbox"/> Date | <input type="checkbox"/> Patient name/identification | <input type="checkbox"/> Frequency of administration |
| <input type="checkbox"/> Veterinarian's Full Name | <input type="checkbox"/> Brand name/active ingredient | <input type="checkbox"/> Treatment duration/number of doses |
| <input type="checkbox"/> Veterinarian's Signature | <input type="checkbox"/> Drug strength | <input type="checkbox"/> Withdrawal time |
| <input type="checkbox"/> Veterinarian's address & telephone | <input type="checkbox"/> Quantity/Volume to dispense | <input type="checkbox"/> Species/production class, if applicable |
| <input type="checkbox"/> Veterinarian's license number | <input type="checkbox"/> Dose | |
| <input type="checkbox"/> Client name and address | <input type="checkbox"/> Route of administration | |

Rx Does Not Match Label

- | | | |
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| <input type="checkbox"/> Species/production class | <input type="checkbox"/> Route of administration | <input type="checkbox"/> Withdrawal time |
| <input type="checkbox"/> Dose | <input type="checkbox"/> Frequency of administration | <input type="checkbox"/> Quantity/ volume |
| <input type="checkbox"/> Drug Strength | <input type="checkbox"/> Treatment duration/number of doses | |

Other

- Unable to interpret handwriting (specify which Rx components)
- _____
- _____
- _____
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