



*Date	
*Account Number	
*Contact Name	
*Contact Telephone	
*Contact Email	
*Delivery Address	
*Postcode	
*Your Order Ref (if required)	

Quantity	Pack Size	Product Formula/Description/Strength Please transcribe details exactly as prescribed	Dosage Instructions	
Special Instructions:				

For Controlled Drugs please complete the information below:

Ordered by: (Print name)	Signature:	Date:	Registration No:

When ordering this item please ensure that the prescriber is aware that an unlicensed medicinal product is being supplied and that they are reminded of their obligations in this regard.

All unlicensed medicinal products are ordered in response to a bona fide unsolicited order; formulated in accordance with the specification of a person who is a doctor, dentist, nurse independent prescriber, pharmacists independent prescriber, supplementary prescriber, or veterinary practitioner; for use by an individual patient for whose treatment that person is directly responsible for, in order to fulfil the special clinical needs of that patient.

**Note:** All orders for the sale of goods by PCCA Limited are strictly subject to our standard terms and conditions of sale, available upon request or at www.pccarx.co.uk. By placing your order, you acknowledge and agree to be bound by these terms and conditions.



<sup>\*</sup>Information must be supplied