PRESCRIBING AND DISPENSING COMPLAINT FORM

The American Veterinary Medical Association developed this form to facilitate the reporting of complaints in response to veterinarians’ concerns with some pharmacies whose practices appear to be contrary to FDA and other regulations and inconsistent with best patient care.

Today’s Date: ___________  Name of Veterinarian: ______________________________________________________
(veterinarian caring for animal who has a veterinarian-client-patient relationship)

Clinic Name and Address: _____________________________________________________________________________
Telephone: __________________ Fax: ___________________ E-mail: ___________________________________________

Date of Occurrence: _______________ (Provide copy of drug packaging, label, and prescription request if possible)

Nature of Complaint: (check those that apply)

___ Pharmacy dispensed prescription drug to client in the absence of my authorization

___ I had no knowledge of the transaction until after the fact

___ I specifically declined authorization for medical reasons

___ Pharmacy dispensed prescription drug bearing my name without my authorization

___ Pharmacy Dispensed prescription drug bearing the name of a “pharmacy staff veterinarian” or otherwise retained veterinarian, despite the lack of a veterinarian-client-patient relationship

___ Pharmacy dispensed a foreign version of a U.S.-approved product

___ Pharmacy requested authorization to dispense an excessive quantity/number of refills of a drug

___ Concerns with compounded drugs (explain below)

___ Other (please describe) ____________________________________________________________

Pharmacy Name, Location, and Personnel: _______________________________________________________________________

Prescription drugs are regulated by federal and state agencies, including the state where the pharmacy is located and the state to which prescription drugs are sent. Pharmacists are required to have a valid prescription before dispensing prescription drugs. Veterinarians must have a veterinarian-client-patient relationship to prescribe prescription drugs.

Suspect unlawful dispensing practices? Submit a copy of this complaint to the following and indicate those you have contacted.

☐ FDA Center for Veterinary Medicine, Division of Compliance (HFV-230), FDA/Center for Veterinary Medicine, 7519 Standish Place, Rockville, MD 20855-2733 FAX 240-276-9241, E-mail CVMCompliance@fda.hhs.gov

☐ Boards of Pharmacy of your state and the state in which the pharmacy resides. Locate addresses at www.nabp.net (under “Boards of Pharmacy”)

☐ If a “pharmacy staff veterinarian” or otherwise retained veterinarian prescribed prescription drugs without a veterinarian-client-patient relationship, send form to the Boards of Veterinary Medicine of each state. Locate addresses at www.aavsb.org/dlr.asp

☐ Copy the AVMA, Division of Animal and Public Health, 1931 N. Meacham Road, Schaumburg, IL 60173, FAX 847-925-9329. If you need assistance, call the Division of Animal and Public Health at 800-248-2862.

☐ Check if AVMA may use your name and contact information in future correspondence with regulatory agencies.

For AVMA Use: Complaint # _______________  Form created 3/1/2001; Rev. 11/15/12; 12/7/15; 3/11/16; 5/5/16