



ADVICE NOTE

For use when dispensing, or treating stock animals with, 54 poison, unregistered veterinary chemical products, registered veterinary chemical products sold without an approved label or with registered veterinary chemical products sold for use other than in accordance with the label instructions.

Client name \_\_\_\_\_

Address \_\_\_\_\_

Name of chemical product \_\_\_\_\_

(Include name and concentration of active constituent(s) if unregistered)

Batch No. of product \_\_\_\_\_

Expiry date of product \_\_\_\_\_

Particulars of animals to be treated –

Location \_\_\_\_\_

(If animals located somewhere other than the address of the client)

Description \_\_\_\_\_

(Species, breed, age, and sex)

Any other identification \_\_\_\_\_

(e.g. Ear tag numbers or names, if more than one animal)

Number \_\_\_\_\_

Dose rate \_\_\_\_\_

(Amount of chemical product to be administered to each animal)

Method of administration \_\_\_\_\_

(e.g. Drench, intra muscular injection, topical)

No. of treatments \_\_\_\_\_

Date of first treatment \_\_\_\_\_

Re-treatment interval (if more than one treatment) \_\_\_\_\_

\* The WITHHOLDING PERIOD is \_\_\_\_\_ Days after the last treatment or

NIL WITHHOLDING PERIOD REQUIRED

\* Prescribed/\*Dispensed by \_\_\_\_\_

Signature of Owner/Agent of Owner \_\_\_\_\_

Date \_\_\_\_\_

\*Strike out which ever alternative is not applicable

Name of veterinary practice \_\_\_\_\_

Address \_\_\_\_\_

Phone number \_\_\_\_\_