

Internet Pharmacy Release Form

Pet Name:

Client Name:

Medication:

Internet Pharmacy:

"I have asked Cascade Summit Animal Hospital (CSAH) to write a prescription for my pet's medication to be filled at the pharmacy named above. My pet is up to date on all required care (annual exam, vaccines, any necessary bloodwork or other diagnostics). I understand that medications purchased at CSAH have been directly acquired from pharmaceutical companies or their authorized distributors, have been shipped and stored according to the manufacturer's specifications, and are backed by the manufacturer's warranty; such guarantees are not available through internet pharmacies, some of which have been punished by federal and state authorities for selling foreign product as domestic, selling medications without a prescription, committing fraud, selling expired medications, and other transgressions. I further understand that CSAH cannot be held liable for any problems involving medications from an internet pharmacy, including mistakes in filling the medication, errors in prescription labelling or instructions, product failure, or hospital care resulting from product failure or adverse effects."

Date:

Client Name (printed):

Client Signature:



To help minimize errors in filling prescriptions CSAH will not communicate with internet pharmacies (by phone or fax), providing instead a written prescription directly to our clients.

We are happy to write prescriptions on request, but we encourage clients to compare the cost of internet medications and mailing fees with the comparable cost and convenience, and the incomparable safety and peace of mind, of using our own pharmacy. Purchasing medications from CSAH also helps support our excellent hospital staff and equipment.

Thank you!