Duraniutian Farm	
Prescription Form	Veterinarian (Print)
Date:	Veterinarian (Sign)
	Veterinarian License #
Client	
Address	Address
Address City County State Zip Phone Fax Fax County State Zip Fax County State Zip Fax	Address
CityCountyStateZip	CityZip
Fax	Phone
Email	Fax
	Email
Product	Product
Yes, generic substitution is acceptable.	Yes, generic substitution is acceptable.
Strength Size	StrengthSize
Quantity# of Refills	Quantity# of Refills
Species & Animal ID or Group	Species & Animal ID or Group
Directions for Use*	Directions for Use*
☐ Milk Withhold ☐ Hours ☐ Meat Withhold ☐ Days	Milk WithholdHours
☐ Test Milk Before Marketing ☐ Test Urine Before Marketing Animal	Test Milk Before Marketing Test Urine Before Marketing Animal
Product	Product
Yes, generic substitution is acceptable.	Yes, generic substitution is acceptable.
Strength Size	Strength Size
Quantity# of Refills	Quantity# of Refills
Species & Animal ID or Group	Species & Animal ID or Group
Directions for Use*	Directions for Use*
☐ Milk Withhold Hours ☐ Meat Withhold Days ☐ Test Milk Before Marketing ☐ Test Urine Before Marketing Animal	☐ Milk WithholdHours ☐ Meat WithholdDays ☐ Test Milk Before Marketing ☐ Test Urine Before Marketing Animal
1est Milk Before Marketing 1est Office Before Marketing Animal	☐ Test Milk Before Marketing ☐ Test Urine Before Marketing Animal
Product	Product
Yes, generic substitution is acceptable.	Yes, generic substitution is acceptable.
	Strength Size
Quantity # of Refills	Quantity# of Refills
Species & Animal ID or Group	Species & Animal ID or Group
Directions for Use*	Directions for Use*
Directions for ose	bilections for use
Mills Withhold House Most Withhold Davie	Milk Withhold Hours Most Withhold Down
☐ Milk Withhold Hours ☐ Meat Withhold Days ☐ Test Milk Before Marketing ☐ Test Urine Before Marketing Animal	Milk Withhold Hours Meat Withhold Days □ Test Milk Before Marketing □ Test Urine Before Marketing Animal
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