



Exchange Program Packing Slip

Step 1 - Complete prescriber information below, acknowledge and sign

Required Veterinarian Information

Prescriber (please print) ↓↓

Veterinary License # and State

Practice Name

Address

City, State, Zip

Phone

E-mail

☐ I am not returning any controlled, listed drugs or chemotherapeutic medications.
(For the list of controlled and listed substances, please refer to www.dea.gov)

☐ I authorize Wedgewood Pharmacy to dispose of and exchange the enclosed, expired unopened medications on my behalf.

☐ I acknowledge I am returning unopened, compounded preparations that have expired on or within 30 days prior to this date.

Veterinarian Signature

Date

Step 2 - Complete preparation information

Please be sure to complete as much information as possible regarding the preparations you are returning to ensure your exchange can be handled promptly.

Preparation Name ↓↓	Strength	Dosage Form	Flavor	Expiration
Pharmacy of Origin	Lot#		Quantity	
Preparation Name	Strength	Dosage Form	Flavor	Expiration
Pharmacy of Origin	Lot#		Quantity	
Preparation Name	Strength	Dosage Form	Flavor	Expiration
Pharmacy of Origin	Lot#		Quantity	

Step 3 - Ship completed form and preparations to Wedgewood Pharmacy

YES, IT'S THAT EASY

Wedgewood Pharmacy
Attn: Refresh
405 Heron Drive, Suite 200 Swedesboro, NJ 08085-1749
Phone: 800.331.8272

*Not available in patient specific states. Visit WedgewoodPetRx.com/www/Refresh for details.