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Veterinary prescription for autogenous vaccine



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Veterinarian (capital letters or stamp)

date: _____ **Customer ID:**

Prescription: Preparation of an autogenous vaccine for the patient(s)

species: dog cattle horse cat

animal name/livestock/ID: _____

number of vaccinees:

Owner (for legal reasons complete addresses of veterinarian and owner are required – data will be forwarded to the responsible authorities)

name: _____

street, house number: _____

post code/city/country: _____

Anamnesis:

sarcoid

papilloma

lokalisierung: _____

signature/stamp of veterinarian: _____

Notes:

- vaccine for subcutaneous injection based on inactivated papillomavirus; the vaccine contains an adjuvant (aluminum hydroxide)
- production only on the basis of a veterinary prescription
- application only by a veterinarian on the intended animals (see information above)
- application in accordance with the instructions for use - two immunizations at an interval of 4 weeks are recommended
- the waiting period for food-producing animals is 0 days
- about 1g of material is required per vaccine / 2 doses are produced per vaccine
- immerse wart material in physiological saline solution (possibly with added antibiotics); no formalin!!
- detection of papilloma virus using PCR (sarcoids/papillomas) or EM (papillomas) is carried out on the processed material (if the result is negative, vaccine production is automatically canceled)
- production time: 2 – 3 weeks, followed by a check of the sterility of the vaccine
- please pack the material as UN 3373/Packing Instructions P650 in a break-proof and leak-proof manner

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