

New Account Setup Packet

Packet Checklist:

- Facility Information
- Credit Card Authorization
- Agreement for Purchase of Compounded Office Use Medication
 - Practitioner Statement Regarding Office Visit Requirements
 - Acceptance of Return Policy
 - Essential Copies of Approved Drug Products
(for Testosterone Cypionate in Grapeseed Oil orders only)
 - Acceptance of Shipping Policy
 - Copy of Active Practitioner State License
- Copy of Active Practitioner DEA License (if ordering controlled substances)

To electronically fill out account setup packet:

1. Open PDF in Adobe Acrobat Reader.
2. Click Fill & Sign on the right windowpane.
3. To sign, click on the Sign icon to create a digital image of your signature.

Fax completed form to 1.888.413.1021 or email to orders503b@aspcares.com.

Marketing Sales Representative Name/Company: _____



2414 Babcock Road Suite 106
 San Antonio, TX 78229
 Phone 888.412.5929 | Fax 888.413.1021
 e-mail: 503b@aspcares.com

Facility Information

Facility Name					
Facility Address					
City		State		Zip	
Phone Number		Office Hours			
Point of Contact Name					
E-mail Address					

Credit Card Authorization

I hereby authorize ASP Cares to make charges to the credit card listed below, and, if necessary, initiate adjustments for any transactions credited or debited in error. This authorization will remain in effect until ASP Cares is notified in writing to cancel it. ASP Cares will bill on the date of shipment unless other terms have been agreed upon.

Name on Card					
<input type="checkbox"/> Billing Address is the same as the Facility Address					
Billing Address					
City		State		Zip	
Card Type	<input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Discover <input type="checkbox"/> Amex				
Card Number		Exp Date			
Cardholder Signature		Date			

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Agreement for Purchase of Compounded Medication

The practitioner agrees to purchase compounded medications for office use from ASP Cares under the following guidelines:

1. The compounded medication may only be administered to the patient and may not be sold to the patient or any other person or entity unless dispensed pursuant to a prescription.
2. The practitioner shall record the lot number and expiration date of any compounded medication administered/dispensed to the patient on the patient chart, medication order, or medication administration record in order to facilitate any recalls associated with the compounded medication.
3. The practitioner shall provide the patient instructions on reporting any adverse events or complaints associated with the compounded medication.

Practitioner Statement Regarding Office Visit Requirements

In order to ensure that all orders received by ASP Cares are pursuant to a valid practitioner/patient relationship, we require that practitioners agree that the following elements are satisfied prior to sending and order. The existence of these elements is an indication that a legitimate practitioner/patient relationship has been established:

1. The patient has a medical need; and/or a medical history has been taken; and/or a physical examination has been performed.
2. A logical connection exists between the medical need, the medical history, the physical examination, and the medication ordered.
3. These medications are provided for administration to the patient unless dispensed pursuant to a prescription. Prescription labeling requirements apply. All medications ordered for office use will come clearly marked "Office Use Only. Not For Resale."

Facility Name					
Practitioner Name and Title					
License No		State		Exp	
If ordering controlled substances		DEA		Exp	
Practitioner Signature				Date	
Supervising Physician Name (if applicable)					
License No		State		Exp	
If ordering controlled substances		DEA		Exp	

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Return Policy

1. All packages shall be inspected for damage and for missing and/or shorted items against the Packing Slip.
 - a. Any discrepancies from the Packing Slip shall be reported to ASP Cares within 2 business days, no exceptions.
 - b. No exchanges or refunds will be honored unless ASP Cares is notified within 2 business days, no exceptions.
2. ASP Cares cannot accept any returns for credit or refund as we cannot guarantee that the product was stored and handled according to recommended storage temperatures.
3. ASP Cares will not accept returns for expired and/or unused product. Only order what will be used through the product's expiration date. If you have any questions about the expiration date, please call ASP Cares at 1-888-412-5929 for more information.

Acknowledgement

I acknowledge that I have read, understand, and agree to the policies and procedures outlined above.

Name			
Title			
Signature		Date	

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Essential Copies of Approved Drug Products

As an FDA registered outsourcing facility, ASP Cares must comply with FDA policies concerning the “essential copy” provision of Section 503B of the FD&C Act. The guidance, *Compounded Drug Products That Are Essentially Copies of Approved Drug Products Under Section 503B of the Federal Food, Drug, and Cosmetic Act*, requires that the drug must produce a clinical difference in a patient, compared to the approved drug, as determined by the practitioner.

Commercially available Testosterone Cypionate is formulated in Cottonseed Oil. ASP Cares compounds Testosterone Cypionate in Grapeseed Oil. Orders for Testosterone Cypionate in Grapeseed Oil shall be for the purpose of providing a clinical difference for patients, as determined by the prescribing practitioner.

Please provide all reasons for which your facility intends on ordering compounded Testosterone Cypionate in Grapeseed Oil from ASP Cares that provide a clinical difference for patients.

Facility Name					
Facility Address					
City		State		Zip	
Select all that apply. <input type="checkbox"/> Decreased injection site pain <input type="checkbox"/> Difference in pharmacokinetic profile (i.e. time to peak, duration of action, etc.) <input type="checkbox"/> Allergy to excipient(s) <input type="checkbox"/> Other (please explain):					
Practitioner Name					
Practitioner Signature					

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Shipping Policy

Most orders are processed and shipped within 1-2 business days. Orders received by 2 p.m. Central Time are typically processed the same day.

All shipments, with a few exceptions, are shipped overnight. Exceptions include the following:

- Cases of IV fluids utilize ground shipment unless otherwise requested by the customer.
- Shipments of devices that do not consist of drug products are shipped as requested by the customer.

Orders are shipped Monday – Thursday. Orders shipped on Friday for Saturday delivery will incur a surcharge and are limited to areas that have Saturday delivery available with our courier.

Shipping Rates

Due to the variability of weights and distances per shipment, ASP Cares does not have a standard shipping rate. Instead, ASP Cares passes on our negotiated courier rates to our customers. Rates are based on shipment weights and distances from our facility.

Missed Deliveries

If your facility is unable to accept a scheduled delivery and the product is compromised, ASP Cares will not replace the product nor refund any charges associated with the order.

Acknowledgement

I acknowledge that I have read, understand, and agree to the policies and procedures outlined above.

Name			
Title			
Signature		Date	

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