

# Customer Instructions for Completing 222 Forms

Required for all items indicated by CII

**BEFORE YOU ORDER: CII** The comprehensive Drug Abuse Prevention and Control Act requires that DEA form 222C accompany all orders for Schedule II pharmaceuticals. All items in our catalog indicated by CII require this form. When placing an order for Schedule II drugs, please adhere to the following:

1. To: Henry Schein, Inc.
2. Street Address: 5315 W. 74th Street, City and State: Indianapolis, IN, Zip: 46268.
3. Date: Date you are filling out the form.
4. Order Details: MUST be filled in. If any part is left blank, the form will be returned to you for completion.
  - No. of Packages: The quantity of the drug being ordered (e.g., 1 x 10, 1 x 5).
  - Size of Package: The size of the drug being ordered (e.g., 20 mL, 10 x 5 mL).
  - Name of Item: The name and strength of the drug being ordered (e.g., Meperidine 25 mg./mL vial). List either brand or generic name—you CANNOT use *both* names on the form.
  - ONLY Schedule II or II-N items may be on the form; please enter all other items separately.
5. Last Line Completed: The line number that contains the LAST drug you are ordering. Do NOT skip any lines when completing form and use only one line per order. This field MUST be filled in. If this is left blank or incorrect, the form will be returned to you for completion (if blank) or replacement (if incorrect).
6. Signature of Purchaser or Attorney or Agent: You MUST sign this form. If the form is not signed, it will be returned for your signature. If it is signed by anyone other than the registrant, we must have a copy of the Power of Attorney form.
7. Name and Address of Registrant: Your preprinted address must match your currently registered address on your DEA Registration Certificate. NO alterations are permitted. Shipments of controlled substances must be sent to your current registered address only.
8. Sending Form: You must submit Supplier's Copy 1 (*brown*) **and** DEA Copy 2 (*green*) and the carbon between them to Henry Schein, Inc. at the above-noted address. If either of these copies is missing, the form will be returned for replacement. Please retain Copy 3 (*blue*) for your records.
9. Alterations or corrections to the form are NOT permitted: Absolutely **NO** part of the form may be altered or crossed out. If any part of the form is altered or crossed out, the form will be returned. A new, unaltered form must be submitted.
10. Please leave the National Drug Code blank until you receive your shipment. Once the ordered product is received, you should fill in the NDC, number of packages received and date.
11. Please contact our Class 2 order assistance at **1-800-532-0766** for product availability and form inquiries.

<b>See Reverse of PURCHASER'S Copy for Instructions</b>		<small>No order form may be issued for Schedule I and II substances unless a completed application form has been received. (21 CFR 1305.04).</small>		<b>OMB APPROVAL No. 1117-0010</b>			
TO: (Name of Supplier) <b>1</b>			STREET ADDRESS <b>2</b>				
CITY and STATE		DATE <b>3</b>	TO BE FILLED IN BY SUPPLIER SUPPLIER'S DEA REGISTRATION No.				
TO BE FILLED IN BY PURCHASER							
<b>4</b>	LINE No.	No. of Packages	Size of Package	Name of Item	National Drug Code	Packages Shipped	Date Shipped
	1						
	2						
	3						
	4						
	5						
	6						
	7						
	8						
	9						
	10						
<b>5</b> LAST LINE COMPLETED (MUST BE 10 OR LESS)		<b>6</b> SIGNATURE OF PURCHASER OR ATTORNEY OR AGENT					
Date Issued		DEA Registration No.		<b>7</b> Name and Address of Registrant			
Schedules							
Registered as a		No. of this Order Form					
DEA Form -222 (Oct. 1992)		U.S. OFFICIAL ORDER FORMS - SCHEDULES I & II DRUG ENFORCEMENT ADMINISTRATION SUPPLIER'S Copy 1					

Pharmaceutical prices may change due to manufacturer price increases. Orders will be billed at prices effective at time of order.

Note: Federal Order Form Required for Class II Drugs. DEA # Required For All Class III, IV & V Drugs. See information above before ordering.