

VICTORIA PHARMACY ZURICH – SWITZERLAND

Professional's International Pharmacy™ - International Pharmaceutical Wholesaler

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As a **fully licensed Pharmacy** we **protect your privacy**. For your safety we strictly adhere to "**GDP-regulations**" ("good distributing practice for medicines"), controlled by health authorities of Switzerland.

We kindly ask you to read and sign the following disclaimer.
Thank you for your collaboration!

Dr.C.Egloff, Ph.D., Victoria Pharmacy Zurich

Professional's International Pharmacy – Pharmaceutical wholesaler - Hospital supplier

Disclaimer - Client Agreement

The undersigned health care professional (hereafter, the "client") hereby confirms to Victoria Pharmacy Zurich that:

Medicine is ordered for the treatment under strict indication and under medical supervision.

The medicine ordered is prescribed by a medical doctor who is licensed to practice medicine in the country, state, or other applicable jurisdiction in which client resides; that the prescription(s) for the requested medications were lawfully obtained from that physician and that the requested medications will be used only as directed by physician and only by the person for whom they were prescribed.

In this regard, client understands and assumes responsibility for the fact that some medication sold outside the United States, or other country from where the client is ordering, may be sold under a different brand name and packing insert may be in a foreign language. Client also understands that products may contain different colourings or inert ingredients such as binders and fillers that could cause an adverse reaction for people with allergies or sensitivities to small amounts of starch, sugar, lactose, peanut or other extracts and other ingredients.

A copy of MD's license is sent along with order.

Due to legal regulations in Switzerland for prescription drugs, we have to require an original medical prescription issued by a MD, licensed in your country of consignee. Client acknowledges and agrees that it is his/her responsibility that his/her patient has regular physical examinations including all suggested testing by said physician to ensure client can safely take the requested medications without complication.

It is the client's responsibility that medication is used under the guidance of the said physician. Patient is instructed by his/her prescribing Doctor about dosage and how to use medicine.

Victoria Pharmacy Zurich has extensive experience in sending medicines all over the world, taking care of all the required documentation and helping to ensure prompt arrival.

- **But in the event the requested products are detained and confiscated by foreign customs the risk of loss or delayed delivery lies completely with the purchaser;**
- **Victoria Pharmacy Zurich is not responsible for returning of products caused by improper delivery due to incorrect address recorded by the purchaser or other reasons not caused by supplier.**
- **Client understands that once shipped, due to legal regulations and for client's own personal safety, no pharmaceutical product may be returned or exchanged, nor will be refunded to purchaser!**

The buyer is responsible for determining his/her country's importation regulations. Any legal action that might be brought against the purchaser, if not acting in accordance with the regulations and importation laws applied by the government of the destination country, is solely the responsibility of the purchaser.

Client agrees that any and all agreements and contracts between client and Victoria Pharmacy Zurich shall be deemed to be made in Zurich, Switzerland, and accordingly shall be governed by authorities Zurich, Switzerland, and any dispute that may arise between client and Victoria Pharmacy Zurich shall be resolved under the laws of Switzerland. Client agrees that the courts located in Zurich Switzerland shall have sole and exclusive jurisdiction over any dispute between client and Victoria Pharmacy Zurich.

Patient is instructed that he/she must immediately contact his/her prescribing doctor or healthcare provider in case of any problem that may occur related to the drugs sent to client or recipient of the prescription.

I have read, understand and agree to the terms and conditions set by supplier for this order sent to Victoria Pharmacy Zurich !

MD's Name: _____

PATIENT's Name: _____

Health care professional SIGNATURE: _____

DATE: _____ **City:** _____