GOVERNMENT OF ZAMBIA

STATUTORY INSTRUMENT NO. 10 OF 2016

The Medicines and Allied Substances Act, 2013
(Act No. 3 of 2013)

The Medicines and Allied Substances (Agro-Veterinary Shops) Regulations, 2016

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Copies of this Statutory Instrument can be obtained from the Government Printer, P.O. Box 30136, 10101 Lusaka. Price K64.00each.

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IN EXERCISE of the powers contained in section *twenty-nine* of the Medicines and Allied Substances Act, 2013, the following Regulations are made:

PART I

PRELIMINARY

Title

1. These Regulations may be cited as the Medicines and Allied Substances (Agro-Veterinary Shops) Regulations, 2016.

Interpretation

2. In these Regulations, unless the context otherwise requires—

"authorised supplier" means a holder of a pharmaceutical licence issued under section *thirty-four* of the Act;

"insanitary conditions" means the conditions or circumstances that could cause contamination of a medicine or allied substance with dirt or filth or could render the medicine or allied substance injurious or dangerous to health;

"permit" means an agro-veterinary shop permit issued under section *twenty-nine* of the Act; and

"responsible person" means a person who has the control and management of an agro-veterinary shop.

PART II

AGRO-VETERINARY SHOP PERMIT

Application for permit

3. (1) A person shall apply to the Authority for a permit in Form I set out in the First Schedule.

(2) The Authority shall, within fourteen days of the receipt of an application, notify the applicant of the decision of the Authority in respect of the application.

(3) A separate application shall be made and a separate permit issued in respect of each premises.

(4) The Authority may inspect the premises in respect of which an application for a permit is made to determine if the applicant meets the requirements of the Act and the guidelines issued by the Authority.

Request for information

4. The Authority may request an applicant to submit information in relation to an application for a permit in Form II set out in the First Schedule.

Rejection of application for permit

5. (1) The Authority shall reject an application for a permit if—

(a) the applicant fails to meet the requirements of the Act and the guidelines issued by the Authority;

(b) the permit issued to the applicant was revoked by the Authority within a period of two years preceding the application; or

(c) the applicant is convicted of an offence under the Act or any other relevant written law.

(2) The Authority shall, where it rejects an application under subregulation (1), inform the applicant within seven days of the decision in Form III set out in the First Schedule.

Issuance of permit

6. (1) The Authority shall, where the applicant meets the requirements of the Act and the guidelines issued by the Authroity, issue a permit in Form IV set out in the First Schedule.

(2) A permit shall be valid for two years from the date of issue.

(3) A permit may be issued in respect of the following classes of agroveterinary shops:

(a) class I, to stock for sell the veterinary medicines and allied substances specified in Part A of the Second Schedule;

(b) class II, to stock for sale the veterinary medicines and allied substances as specified in Part B of the Second Schedule; and

(c) class III, to stock for sale the veterinary medicines and allied substances specified in Part C of the Second Schedule.

(4) The classes of agro-veterinary shops shall be management as follows:

(a) class I, by a registered veterinary surgeon or pharmacist;

(b) class II, by a registered veterinary para-professional under the supervision of a registered veterinary surgeon or pharmacist; and

(c) class III, by a suitably qualified person as determined by the Authority.

Application for renewal of permit

7. (1) An application for the renewal of a permit shall be made to the Authority in Form V set out in the First Schedule.

(2) The Authority shall, within fourteen days of receipt of an application for the renewal of a permit, grant the application if the applicant meets the requirements of the Act and the guidelines issued by the Authority and has complied with the terms and conditions of the permit.

(3) A permit that is not renewed by the Authority lapses on its date of expiry.

Transfer of permit

8. (1) A permit shall be used solely by the holder and is not transferable to any other person without the prior approval of the Authority.

(2) An application for approval to transfer a permit shall be made to the Authority in Form VI set out in the First Schedule.

(3) The Authority shall, within thirty days of receipt of an application for the transfer of a permit, approve the transfer if the applicant meets the requirements of the Act and the guidelines issued by the Authority and issue the transferee with a new permit.

(4) The Authority shall reject an application for the transfer of a permit if the applicant fails to comply with the conditions for the grant of the permit, the provisions of the Act and the guidelines issued by the Authority.

(5) The Authority shall, where it rejects an application to transfer a permit under subregulation (4), inform the applicant in Form III set out in the First

Schedule.

Amendment of permit

9. (1) The Authority may amend a permit where—

(a) some other person succeeds to the interest of the business of the holder;

(b) the name of the business changes; or

(c) there is a change in the employment of the responsible person.

(2) An application for the amendment of a permit shall be made in Form VII set out in the First Schedule.

(3) The Authority shall communicate its decision to the permit holder within fourteen days of receipt of the application for amendment of the permit.

(4) The Authority shall, where it approves the amendment of a permit, issue the applicant with a new permit.

Application for duplicate permit

10. A person may, where a permit is lost, damaged or defaced, apply to the Authority for a duplicate permit in Form VIII set out in the First Schedule.

Suspension of permit

11. (1) The Authority shall suspend a permit if—

(a) the holder operates the agro-veterinary shop in respect of which it is issued under insanitary conditions;

(b) the holder or manager of the agro-veterinary shop in respect of which it is issued obtains or sells veterinary medicines from unauthorised suppliers or stocks and sells unauthorised products;

(c) the agro-veterinary shop in respect of which it was issued contravenes the prescribed standards or the provisions of the Act;

(d) the agro-veterinary shop is not managed or controlled by a responsible person determined by the Authority;

(e) the responsible person fails to maintain the required records on veterinary medicines and allied substances;

(f) the agro-veterinary shop stocks and sells medicines that are not on the prescribed list; or

(g) the holder contravenes the terms and conditions of the permit, the provisions of the Act or any other relevant written law.

(2) The Authority shall, before suspending a permit, give notice to the holder of the intention to suspend the permit and request the holder to show cause, within a specified period, why the permit should not be suspended.

(3) A notice of intention to suspend a permit shall be in Form IX set out in the First Schedule.

(4) The Authority shall suspend a permit if the holder of the permit fails to take remedial measures within the period specified in the notice issued under sub-regulation (2).

(5) A notice of the suspension of a permit shall be in Form X set out in the First Schedule.

(6) The Authority shall, during the period of the suspension of the permit, quarantine any product affected by the suspension of the permit at the cost of the permit holder.

Revocation of permit

12. (1) The Authority shall revoke a permit if the holder—

(a) contravenes the provisions of the Act or any other relevant written law or breaches the terms or conditions of the permit;

(b) fails to take corrective measures following the suspension of the permit within the specified period;

(c) changes the agro-veterinary shop premises without authorisation; or

(d) obtained the permit by fraud or deliberate or negligent submission of false information or statements.

(2) The Authority shall, before revoking a permit, give notice to the holder of the permit of the

intention to revoke the permit and request the holder to show cause, within a specified period, why the permit should not be revoked.

(3) A notice of the intention to revoke a permit shall be in Form IX set out in the First Schedule.

(4) The Authority shall revoke a permit if the holder fails to take remedial measures during the period specified by the Authority.

(5) A notice of the revocation of a permit shall be in Form X set out in the First Schedule.

(6) Upon the revocation of a permit, the medicines and allied substances on the premises shall be quarantined and disposed of as directed by the Authority at the holder's cost.

Location of agro-veterinary shop

13. The Authority shall, in considering an application for a permit, give priority to submissions filed by the applicants in the following areas:

(a) rural areas and districts where access to medicines is limited; and

(b) peripheral areas of municipalities or cities, where access to medicines is limited.

Identity of agro-veterinary shop

14. An agro-veterinary shop shall fix a standard logo for purposes of identifying the agro-veterinary shop as specified in the guidelines issued by the Authority.

Sale of veterinary medicines

15. A holder of a permit shall sell the veterinary medicines prescribed in the Second Schedule.

Sale, supply and dispensing of veterinary medicines

16. Veterinary medicines shall be sold, supplied and dispensed in accordance with the guidelines issued by the Authority.

Storage of veterinary medicines

17. (1) The storage of veterinary medicines in an agro-veterinary shop shall be in the manufacturer's original container and under conditions stipulated by the manufacturer.

(2) Where veterinary medicines are transferred to another container, care shall be taken to protect the integrity of the product and prevent contamination of the medicines.

(3) The Authority shall, where it is established that the holder of a permit stocks veterinary medicines or products under insanitary conditions, direct the holder to dispose of the veterinary medicines or products at the holder's cost.

PART III

General Provisions

Register of agro-veterinary shop permits

18. (1) The Authority shall keep and maintain a register of agro-veterinary permits in Form XI set out in the First Schedule.

(2) The register referred to in subregulation (1) shall be kept at the offices of the Authority and shall be open to inspection by the public at such times and upon

payment of an inspection fee prescribed in the Third Schedule.

FIRST SCHEDULE
(*Regulations* 3, 4, 5, 6, 7, 8, 9, 10, 11 and 12)
PRESCRIBED FORMS

Form I
(*Regulation* 3 (1))
(*To be completed in triplicate*)

THE ZAMBIA MEDICINES REGULATORY AUTHORITY

The Medicines and Allied Substances Act, 2013
(Act No. 3 of 2013)

The Medicines and Allied Substances
(Agro-Veterinary Shops) Regulations, 2016

APPLICATION FOR AN AGRO-VETERINARY SHOP PERMIT

Please complete in block letters	Shaded fields for official use only	Application No.	
		Date and Time	

	Information Required	*Information Provided*			√
	PARTICULARS OF APPLICANT				
1.	(a) Name of business entity				
	(b) Registration No.				
2.	Type of entity				
3.	Business premises				
	(a) Plot No:				
	(b) Street:				
	(c) Telephone No:				
	(d) Fax No:				
	(e) Mobile No:				
	(f) Email address				
	(g) Village				
	(h) Chief				
	(i) Town				
	(j) District				
	(k) Province				
4.	Type of permit applied for	Class I	Class II	Class III	
	PROPOSED LOCATION OF AGRO-VETERINARY SHOP				
5.	Name of agro-veterinary shop:				
6.	Physical Address				
7.	Postal Address				
	PARTICULARS OF RESPONSIBLE PERSON				
8.	(a) Name				
	(b) Registration Certificate No.				
	(c) Date:				
	(d) Signature:				
9.	**Attachments**				
	Appendix 1	Valid Practicing Certificate or licence for the Responsible Person from the relevant professional body			
	Appendix 2	Sketch of the floor plan of the premises			

DECLARATION AND SIGNATURE

I declare that all the information I have stated in this application is correct and truthful to the best of my knowledge and belief. I understand that submission of false information shall render the application void and that if approval is granted, it shall be revoked and the permit cancelled.

Particulars of the Person signing on behalf of the Applicant

…… ……..

Name *Designation*

…….. ……

Signature *Date*

FOR OFFICIAL USE ONLY

Date of Submission: ……..

Application Number: ……..

Payments Receipt Number: ……..

Application Accepted (Proceed for Inspection): ……..……..

Application Rejected (Notify applicant): ……..……

……...

OFFICIAL STAMP

Form II
(*Regulation* 4)

THE ZAMBIA MEDICINES REGULATORY AUTHORITY

The Medicines and Allied Substances Act, 2013
(Act No. 3 of 2013)

The Medicines and Allied Substances
(Agro-Veterinary Shops) Regulations, 2016

REQUEST FOR INFORMATION

To: ……

Address: ……..……..

Application No: …….

You are requested to furnish the following information or documents in respect of your application for……..…

(a) ……..

(b) ……..

(c) ……

(d) ……..

within…….. days of this notice.

If you fail to furnish the requested information within the stipulated period, your application will be treated as invalid and shall be rejected.

Dated this…… day of …….. 20…….

……

Director-General

OFFICIAL
STAMP

Form III
(*Regulations* 5(2) and 8(5))

THE ZAMBIA MEDICINES REGULATORY AUTHORITY

The Medicines and Allied Substances Act, 2013
(Act No. 3 of 2013)

The Medicines and Allied Substances
(Agro-Veterinary Shops) Regulations, 2016

NOTICE OF REJECTION OF APPLICATION

(1) Here insert the full names and address of the applicant

To (1)…….....…….....
…….....……

(2) Here insert the reference No. of the application
(3) Here insert type of application

IN THE MATTER OF (2) ……..... you are notified that your application for (3).....has been rejected by the Authority on the following grounds:

(a)…….....……

(b)…….....……..……

(c)…….....…..…….

(d)……..…….....……

Dated this ……day of …….....……..., 20……...

.....

Director-General

OFFICIAL STAMP

Form IV
(*Regulation* 6)

THE ZAMBIA MEDICINES REGULATORY AUTHORITY

The Medicines and Allied Substances Act, 2013
(Act No. 3 of 2013)

The Medicines and Allied Substances
(Agro-Veterinary Shops) Regulations, 2016

AGRO-VETERINARY SHOP PERMIT

Registration No.: …… AVS

Permit No.: AVS/ …….

This is to certify that (Name of Agro-Veterinary Shop) ……
…….....
of (Physical Address) …….....……
…….....…….
…….....…….. is registered to operate an agro-veterinary shop.

Name of Responsible Person: …….....
The conditions of the agro-veterinary shop permit are overleaf.

This permit is valid until …… 20 ……....

……
Director-General

Conditions for Agro-Veterinary Shop Permit

1. Any change in the responsible person, name, location or condition of permit of the agro-veterinary shop shall be approved by the Authority.
2. The agro-veterinary shop shall only stock and sell medicinal products that are on the prescribed list.
3. The premises and the manner in which the business is to be conducted must comply with the requirements of the Medicines and Allied Substances Act, No. 3 of 2013, and any other relevant written law.
4. The agro-veterinary shop permit is not transferable without the written approval of the Authority.
5. The agro-veterinary shop permit shall, upon grant, be displayed conspicuously at the front shop in a place visible to the public.

Form V
(*Regulation* 7(1))
(*To be completed in triplicate*

THE ZAMBIA MEDICINES REGULATORY AUTHORITY

The Medicines and Allied Substances Act, 2013
(Act No. 3 of 2013)

The Medicines and Allied Substances
(Agro-Veterinary Shops) Regulations, 2016

APPLICATION FOR RENEWAL OF AGRO-VETERINARY PERMIT

Please complete in block letters	Shaded fields for official use only	Application No.	
		Date and Time	

	Information Required	*Information Provided*	√
1.	Permit No.		
2.	Registration No.		
2.	Name(s) of permit holder		
3.	Address		
	(a) Telephone No.		
	(b) Fax No.		
	(c) Mobile phone No.		
	(d) Email address		
4.	**Appendix**		
	Annual Report (a) Monthly records of quantities of medicines ordered and received (b) Monthly records of names and receipts from authorized suppliers (c) Monthly records of prescriptions for POM-Vs/P-Vs dispensed (d) Monthly records of medicines stock-on-hand		

Name of Applicant (individual or authorised representative)

Date: …… *Signature:* ……

FOR OFFICIAL USE ONLY

Received by: …… Receipt No: ……

Amount Received: ……

Serial No. of application: ……

STAMP

OFFICIAL

Form VI
(*Regulation* 8(2))
(*To be completed in triplicate*)

THE ZAMBIA MEDICINES REGULATORY AUTHORITY

The Medicines and Allied Substances Act, 2013
(Act No. 3 of 2013)

The Medicines and Allied Substances
(Agro-Veterinary Shops) Regulations, 2016

APPLICATION FOR TRANSFER OF AGRO-VETERINARY SHOP PERMIT

Please complete in block letters	Shaded fields for official use only	Application No.	
		Date and Time	

Information Required	*Information Provided*	√
PARTICULARS OF APPLICANT		
1. *(a)* Name of business entity		
(b) Registration No.		
2. Type of entity		
3. Business premises		
(a) Plot No:		
(b) Street:		
(c) Telephone No:		
(d) Fax No:		
(e) Mobile No:		
(f) Email address		
(g) Village		
(h) Chief		
(i) Town		
(j) District		
(k) Province		
4. Type of permit	Class I / Class II / Class III	
PARTICULARS OF TRANSFEREE		
1. *(a)* Name of business entity		
(b) Registration No.		
2. Type of entity		
3. Business premises		
(a) Plot No:		
(b) Street:		
(c) Postal address		
(d) Telephone No:		
(e) Fax No:		
(f) Mobile No:		
(g) Email address		
(h) Village		
(i) Town		
(j) District		
(k) Province		

DECLARATION AND SIGNATURE

I declare that all the information I have stated is correct and true to the best of my knowledge and belief. I understand that submission of false information shall render the application void, and if the permit has been granted, it shall be revoked.

Particulars of the Person signing on behalf of the Applicant

…… ……..

Name *Designation*

…….. ……

Signature *Date*

FOR OFFICIAL USE ONLY

Date of Submission: ……..

Application Number: ……..

Payments Receipt Number: ……

Application Accepted (Proceed for Inspection): ……..

Application Rejected (Notify applicant): ……

……..

OFFICIAL STAMP

Form VII
(*Regulation* 9)
(*To be completed in triplicate*)

THE ZAMBIA MEDICINES REGULATORY AUTHORITY

The Medicines and Allied Substances Act, 2013
(Act No. 3 of 2013)

The Medicines and Allied Substances
(Agro-Veterinary Shops) Regulations, 2016

APPLICATION FOR AMENDMENT OF AN AGRO-VETERINARY SHOP PERMIT

Please complete in block letters		Shaded fields for official use only	Application No.	
			Date and Time	

	Information Required	*Information Provided*	√
	PARTICULARS OF APPLICANT		
1.	*(a)* Name of business entity		
	(b) Registration No.		
2.	Type of entity		
3.	Business premises		
	(a) Plot No:		
	(b) Street:		
	(c) Telephone No:		
	(d) Fax No:		
	(e) Mobile No:		
	(f) Email address		
	(g) Village		
	(h) Chief		
	(i) Town		
	(j) District		
	(k) Province		
4.	**PARTICULARS OF AMENDMENT**	**DESCRIPTION OF AMENDMENT(S)**	
	1.		
	2.		
	3.		

5.	**EXISTING**	**PROPOSED AMENDMENT**	**REASONS FOR AMENDMENT**

DECLARATION AND SIGNATURE

I declare that all the information I have stated is correct and true to the best of my knowledge and belief. I understand that submission of false information shall render the application void, and if the permit has been granted, it shall be revoked.

Particulars of the Person signing on behalf of the Applicant

…… ……..

Name *Designation*

…….. ……

Signature *Date*

FOR OFFICIAL USE ONLY

Date of Submission: ……..

Application Number: ……..

Payments Receipt Number: ……

Application Accepted (Proceed for Inspection): ……..

Application Rejected (Notify applicant): ……

……..

OFFICIAL STAMP

Form VIII
(*Regulation* 10)
(*To be completed in triplicate*)

THE ZAMBIA MEDICINES REGULATORY AUTHORITY

The Medicines and Allied Substances Act, 2013
(Act No. 3 of 2013)

The Medicines and Allied Substances
(Agro-Veterinary Shops) Regulations, 2016

APPLICATION FOR DUPLICATE PERMIT

Please complete in block letters	Shaded fields for official use only	Application No.	
		Date and Time	

	Information Required	*Information Provided*		√
1.	Name of business entity			
2.	Permit No.			
3.	Registration No.			
4.	Business Address			
5.	District and locations of proposed activities	Districts		
		Location of proposed activities		
6.	Affidavit			

DECLARATION AND SIGNATURE

I declare that all the information I have stated is correct and truthful to the best of my knowledge and belief. I understand that submission of false information shall render the application void, and if the permit has been granted, it shall be revoked.

Particulars of the Person signing on behalf of the Applicant

…… ……..
Name *Designation*

…….. ……
Signature *Date*

FOR OFFICIAL USE ONLY

Date of Submission: ……..
Application Number: ……..
Payments Receipt Number: ……
Application Accepted: ……..
Application Rejected (Notify applicant): ……
……..

OFFICIAL STAMP

Form IX
(*Regulation* 11 (3) and 12 (3))
(*To be completed in triplicate*)

THE ZAMBIA MEDICINES REGULATORY AUTHORITY

The Medicines and Allied Substances Act, 2013
(Act No. 3 of 2013)

The Medicines and Allied Substances
(Agro-Veterinary Shops) Regulations, 2016

NOTICE OF INTENTION TO SUSPEND/REVOKE AGRO-VETERINARY SHOP PERMIT

(1) Here insert the full names and address of holder of permit

To (1).....
.....
.....

IN THE MATTER OF (2) ..... you are notified that the Authority intends to *suspend/revoke your permit on the following grounds:

(a) .....
(b) .....
(c) .....
(d) .....

(2) Here insert the Permit No.

Accordingly, you are requested to show cause why your permit should not be suspended/revoked and to take action to remedy the breaches set out in paragraphs.....(above) within (3).....days of receiving this notice. Failure to remedy the said breaches shall result in the *suspension/revocation of your permit.

(3) Here insert the number of days stipulated

Dated this.....day of .....20.....

(4).....
Director-General

(4) Signature of Director-General

OFFICIAL STAMP

*Delete as appropriate

Form X
(*Regulation* 11 (5) and 12 (5))
(*To be completed in triplicate*)

THE ZAMBIA MEDICINES REGULATORY AUTHORITY

The Medicines and Allied Substances Act, 2013
(Act No. 3 of 2013)

The Medicines and Allied Substances
(Agro-Veterinary Shops) Regulations, 2016

NOTICE OF SUSPENSION OR REVOCATION OF AGRO-VETERINARY SHOP PERMIT

(1) Here insert the full names and address of holder of Permit

To (1) .....
.....

(2) Here insert the Permit No.
(3) Here insert the period
(4) Signature of Director-General

IN THE MATTER OF (2) .....you are notified that your permit has been *suspended for a period of (3) ...../*revoked on the following grounds:

(a) .....

(b) .....

(c) .....

(d) .....

Dated this .....day of .....20.....

(4) .....

Director-General

OFFICIAL STAMP

Form XI
(*Regulation* 19))

THE ZAMBIA MEDICINES REGULATORY AUTHORITY

The Medicines and Allied Substances Act, 2013
(Act No. 3 of 2013)

The Medicines and Allied Substances
(Agro-Veterinary Shops) Regulations, 2016

REGISTER OF AGRO-VETERINARY SHOP PERMITS

No.	Name and Address of business	Permit No.	Class of Permit	Registration number	Date of issue	Expiry Date
1.						
2.						
3.						
4.						
5.						
6.						
7.						

SECOND SCHEDULE
(*Regulations* 16(3) and 15(1))

VETERINARY PRODUCTS FOR AGRO-VETERINARY SHOPS

A. Agro-Veterinary Shop Class I

1. All Prescription-only veterinary Medicine (POM-V) with marketing authorisation
2. All Pharmacy (P-V) veterinary medicines with market authorisation
3. All general sales (GS-V) veterinary medicines and allied substances
4. All medicines that have been imported with special authorisation
5. Medicines and allied substances added by guidelines issued by the Authority on the recommendation of the Ministry responsible for veterinary services in response to changing disease epidemiological status or disease outbreaks

B. Agro-Veterinary Shops Class II

Part A

No.	*Item*	*Dosage Form*
Analgesics- Non-Steroidal Anti-inflammatories		
1	Acetaminophen	Tablets or powder
2	Carprofen	Tablets
3	Diclofenac	Tablets or gel
4	Dimethyl Sulfoxide (DMSO)	Tablets, or cream or ointment
5	Dipyrone	Injection
6	Flunixin Meglumine	Injection
7	Ketoprofen	Tablets or powder
8	Meloxicam	Tablets or powder
Antiprotozoa		
1	Amprolium	Injectable solutions
2	Amprolium	Soluble powders
3	Parvaquone	Injectable solutions
4	Burparvaquone	Injectable solutions
5	Diminazene aceturate	Injectable solutions
6	Diminazene aceturate	Injectable solutions granules
7	Imidocarb Dipropionate	Injectable solutions
8	Isometamidium chloride	Injectable solutions
9	Parvarquone	Injectable solutions power
10	Quinapyramine Sulphate/Chloride	Injectable solutions

Antifungals		
1	Fluconazole	Tablets or powder
2	Griseofulvin	Tablets or capsules
3	Ketoconazole	Tablets, capsules, lotions shampoo
Antihistamines		
1	Chlorpheniramine	Tablets
2	Cimetidine	Tablets
3	Diphenhydramine	Tablets
4	Cetirizine	Tablets
Antimicrobials		
1	Amikacin	Tablets
2	Amoxicillin	Tablets, capsules or injection
3	Ampicillin	Tablets, capsules or injection
4	Doxycycline	Tablets, capsules or injection
5	Neomycin	Pessaries, ointment or creams
6	Oxytetracycline injectable solutions	All concentrations and dosage forms
7	Oxytetracycline soluble powder	All concentrations and dosage forms
8	Oxytetracycline soluble powder with vitamins	All concentrations and dosage forms
9	Penicillin	Injection
10	Penicillin-streptomycin	Injection
11	Sulfadimidine	Injectable solutions 33%w/v, 33.3%
12	Sulfadimidine	Powder
13	Tetracycline	Ointment or spray
14	Tetracycline	Powder
15	Tiamulin	Powder
Autonomic Drugs		
1	Atropine	Injection
2	Bethanechol	Injection
3	Glycopyrrolate	Injection
Electrolytes/Nutritional		
1	Calcium	Injection and powder
2	Iron	Injection or oral liquid
3	Methionine, D-L	Powder
4	Multivitamin	Injectable solution

5	Multivitamin	Soluble powder
6	Potassium	Injection
7	Selenium/Vitamin E	Injection
8	Taurine	Injection
9	Vitamin A & D	Injection
10	Vitamin B complex	Injection
11	Vitamin C	Tablets or powder
12	Vitamin D	Injection
13	Vitamin K	Injection
14	Sodium Chloride 0.9% (N-Saline)	Solution
15	Dextrose 5%, 10%, 50%	Solution
16	Ringers Lactate	Solution
	Gastrointestinal Agents	
1	Metoclopramide	Tablets
2	Sucralfate	Tablets
Hormones		
1	Dexamethasone	Injection
2	Dinoprost	Injection
3	Estradiol cypionate	Injection
4	Gonadorelin	Injection
5	Oxytocin	Injection
6	Progesterone	Injection
7	Stilboestral dipropionate	Injection
8	Triamcinolone	Injection
Respiratory		
1	Aminophyline	Tablet or injection
2	Dextromethorphan	Injection
3	Doxapram	Injection
Sedatives		
1	Acepromazine	Tablet
Miscellaneous		
1	Methimazole	Tablet
2	Propylene glycol	Liquid
3	Protamine sulfate	Powder

Allied substances (Acaricides)		
1	Chlorfenvinphos	Concentrate
2	Dichlorvos	Concentrate
Anthelmintics		
1	Albendazole	Bolus up to 2.5g
2	Albendazole	Suspensions 2.5%w/v,10%w/v
3	Clorsulon	Injection
4	Closantel	Injection or drench
5	Febantel	Drench, bolus or injection
6	Fenbendazole	Drench, bolus or injection
7	Haloxon	Drench
8	Hexachloroethane	Drench
9	Hexachloroparaxylene	Drench
10	Hexachlorophene	Drench
11	Ivermectin	Bolus or powder
12	Ivermectin	Injectable solutions
13	Levamisole	Bolus or powder
14	Levamisole hydrochloride	Drench, powder or injection
15	Levamisole phosphate injection	Injection
16	Mebendazole	Drench, tablets, bolus
17	Niclosamide	Drench or bolus
18	Nitoxynil	Drench or bolus
19	Oxfendazole	Drench or bolus
20	Oxibendazole	Drench or bolus
21	Oxyclozanide	Drench or bolus
22	Oxyclozanide	Drench or bolus
23	Parbendazole	Drench or bolus
24	Piperazine citrate	Soluble powders
25	Piperazine citrate	Tablets
26	Praziquantel	Tablets
27	Pyrantel	Tablets or oral liquid
28	Rafoxanide	Drench or bolus
29	Tetramisole	Drench or bolus
30	Thiabendazole	Drench or bolus
31	Thiophanate	Drench or bolus
32	Trichlorfon	Drench or bolus

33	Triclabendazole	Drench or bolus
34	Ivermectin/Clorsulon	Injection
35	Levamisole/Oxyclozanide	Drench or bolus
36	Piperazine citrate/pyrantel parmoate	Tablets or oral liquid
37	Levamisole/piperazine dihydrochloride	Powder
Biologicals:		
Poultry vaccines		
1	Anticoccidial Vaccines	All dosage forms
2	Chicken Anaemia virus Vaccines	All dosage forms
3	Fowl cholera Vaccines	All dosage forms
4	Fowl Pox Vaccines	All dosage forms
5	Fowl typhoid Vaccines	All dosage forms
6	Infectious Bronchitis Vaccines	All dosage forms
7	Infectious bronchitis/Newcastle disease/egg	All dosage forms
	drop syndrome Vaccines	
8	Infectious bronchitis/Newcastle	All dosage forms
	Inactivated Vaccines	
9	Infectious Bursal Disease Vaccines	All dosage forms
10	Infectious Coryza Vaccines	All dosage forms
11	Infectious laryngotracheitis Vaccines	All dosage forms
12	Newcastle Cloned Vaccines	All dosage forms
13	Newcastle disease Live vaccine	All dosage forms
14	Newcastle disease Inactivated vaccines	All dosage forms
15	Newcastle disease Thermostable vaccines	All dosage forms
16	Salmonella Vaccines for avians	All dosage forms
17	Egg drop syndrome vaccines	All dosage forms
Ruminant Vaccines		
1	Anaplasmosis Vaccines	All dosage forms
2	Anthrax vaccines	All dosage forms
3	Avian & Bovine tuberculin kit	Injectible
4	Black leg -Clostridium chauvoei Vaccines	All dosage forms
5	Blackleg/Anthrax Vaccines	All dosage forms
6	Blue tongue Vaccines	All dosage forms
7	Botulism Vaccines	All dosage forms
8	Botulism/Anthrax Vaccines	All dosage forms

9	Anthrax/black quarter/botulism Vaccines	All dosage forms
10	Bovine Ephemeral fever Vaccines	All dosage forms
11	Brucella Vaccines	All dosage forms
12	Calf Paratyphoid Live and killed vaccines	All dosage forms
13	Enzootic abortion Vaccines	All dosage forms
14	Clostridial/Pasteurella Vaccines	All dosage forms
15	Infectious bovine rhinotracheitis/parainfluenza / bovine respiratory syncitial virus/bovine viral diarrhoea (combination) Vaccines, both live and killed	All dosage forms
16	Leptospirosis Vaccines	All dosage forms
17	Lumpy skin disease Vaccines	All dosage forms
18	Milk ring test Antigen	All dosage forms
19	Multiclostridials Vaccines	All dosage forms
20	Pasturella Vaccines	All dosage forms
21	Pulpy kidney Vaccines	All dosage forms
22	Rift valley fever Vaccines, live and inactivated	All dosage forms
23	Rota/Corona/E.coli Vaccine for cattle	All dosage forms
24	Rift Valley Fever Inactivated Vaccine for cattle	All dosage forms
24	Rift Valley Fever Live Vaccine for sheep	All dosage forms
26	Bovine Rota/Coronavirus Vaccine/ Clostridium	All dosage forms
	Perfringens Type C/Escherichia Coli Bacterin/	
	Toxoid Injectable vaccine/toxoid	
27	Sheep multiclostridial Vaccines	All dosage forms
28	Tetanus Vaccines	All dosage forms
29	Tetanus Toxoid	All dosage forms
30	Bovine Ephemeral Fever Vaccines	All dosage forms
31	Vibriosis Vaccines	All dosage forms
Pig Vaccines		
1	Parvovirus Killed Vaccine/Erysipelothrix /	All dosage forms
	Leptospira Bacterin Vaccine/toxoid	
2	Boar-taint vaccine Vaccines	All dosage forms
3	E. coli/Clostridium Perfringens type C beta toxoid	All dosage forms

Vaccines for companion animals		
1	Equine Influenza virus Vaccines	All dosage forms
2	Feline viral rhinotracheitis/feline calicivirus/	All dosage forms
	feline panleukopenia Vaccines	
3	Canine Parvovirus Vaccines	All dosage forms
4	Horse Sickness Polyvalent vaccine	All dosage forms
5	Canine Distemper/Adenovirus Type 2/ Parainfluenza/Parvovirus modified live virus vaccine/ Leptospira BacterinVaccine/toxoid	All dosage forms
6	Rabies Vaccines	All dosage forms
Intra-uterine infusion drugs		
1	Intrauterine pessaries	Pessaries
Intrammamary infusion drugs		
1	Mastitis intramammary infusion	Ointments
Ophthalmologic drug		
1	Cloxacillin Eye Ointment 16.7% w/w	Ointments
2	Dexamethasone ointment or drops	Ointments or drops
3	Doxycycline	Eye powder
4	Neomycin	Ointment or drops
5	Oxytetracycline	Power or ointment
Antiseptics		
1	Povidone Iodine	Concentrate

Part B

1. All general sales (GSV) veterinary medicines and allied substances
2. Medicines and allied substances added by guidelines issued by the Authority on the recommendation of the Ministry responsible for veterinary services in response to changing disease epidemiological status or disease outbreaks

Agro-Veterinary shop Class III

Part A

No.	*Item*	*Dosage Form*
Analgesics-non-steroidal Anti-Inflammatories		
1	Diclofenac	Tablets or gel
2	Dipyrone	Injection
Antiprotozoa		
1	Amprolium	Soluble powders
	Diminazene aceturate	Injectable solutions
Antihistamines		
1	Chlorpheniramine	Tablets
Antimicrobials		
1	Oxytetracycline injectable solutions	All concentrations and dosage forms
2	Oxytetracycline soluble powder	All concentrations and dosage forms
3	Oxytetracycline soluble powder with vitamins	All concentrations and dosage forms
4	Tetracycline	Ointment or spray
5	Tetracycline	Powder
Electrolytes/Nutritional		
1	Multivitamin	Soluble powder
2	Potassium	Injection
3	Vitamin C	Tablets or powder
Allied substances (Acaricides)		
1	Chlorfenvinphos	Concentrate
Anthelmintics		
1	Albendazole	Bolus up to 2.5g
2	Albendazole	Suspensions 2.5%w/v,10%w/v
3	Closantel	Injection or drench
4	Ivermectin	Bolus or powder
5	Levamisole	Bolus or powder
6	Oxfendazole	Drench or bolus
7	Oxyclozanide	Drench or bolus

8	Parbendazole	Drench or bolus
9	Piperazine citrate	Soluble powders
10	Piperazine citrate	Tablets
11	Praziquantel	Tablets
12	Pyrantel	Tablets or oral liquid
Biologicals:		
Poultry vaccines		
1	Newcastle disease	Thermostable vaccines
Ophthalmologic drug		
1	Cloxacillin Eye Ointment 16.7% w/w	Ointments
2	Doxycycline	Eye powder
3	Neomycin	Ointment or drops
4	Oxytetracycline	Power or ointment

Part B

1. All general sales (GSV) veterinary medicines and allied substances
2. Medicines and allied substances added by guidelines issued by the Authority, and are categorised for distribution in Class 3 agro-veterinary shops, on the recommendation of the Ministry responsible for veterinary services in response to changing disease epidemiological status or disease outbreaks.

Note: **All medicines with marketing authorisation for use in humans, if prescribed for use in animals, shall only be accessed from registered pharmacies on prescription from a registered veterinary surgeon.**

DR J. KASONDE,
Minister of Health

LUSAKA
27th January, 2016
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