



## Order Ship/Preferred Product Access Form

Account #: \_\_\_\_\_  
 Hospital Name: \_\_\_\_\_  
 Ship to Address: \_\_\_\_\_  
 Attention: \_\_\_\_\_  
 GPO Affiliation: \_\_\_\_\_  
 Standing PO#: \_\_\_\_\_  
 Customer Signature: \_\_\_\_\_  
 Name (*please print*): \_\_\_\_\_  
 Telephone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

Preferred Shipment Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_

- Preferred shipment may be cancelled with seven working days notice by contacting Rizwan Khan at (610) 280-0390.
- Cancellation of the same line item on two consecutive orders may cause the item to be removed from the sending order.
- Preferred shipment end date must correspond with contract end date.

**(Albumin must be ordered in case quantities of 10)**

Product Name	Size	NDC Number	# of Cases
Albumin - 5%	50 ml.	7670-06	
Albumin - 5% without admin sets	250 ml.	7670-31	
Albumin - 5% without admin sets	500 ml.	7670-32	
Albumin - 25% without admin sets	50 ml.	7680-32	
Albumin - 25%	100 ml.	7680-33	
Albumin - 25%	20 ml.	7680-01	
IV Administration Sets*		7970-04	
Gammar PIV g gm. (10 per case)	5 gm.	7486-05	
Gammar PIV 10 gm. (8 per case)	10 gm.	7486-10	

Sales Representative: \_\_\_\_\_

**Please fax this completed form to Rizwan Khan, Pioneer Life Sciences at (610) 280-0391.**

\* IV Administration Sets are available at no additional cost.