

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

- |                                                                                                                                                                                                                                      |                |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|
| 1. These Regulations may be cited as the Medicines and Allied Substances (Agro-Veterinary Shops) Regulations, 2016.                                                                                                                  | Title          |
| 2. In these Regulations, unless the context otherwise requires—                                                                                                                                                                      | Interpretation |
| “authorised supplier” means a holder of a pharmaceutical licence issued under section <i>thirty-four</i> 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 <i>twenty-nine</i> 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

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

- 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 Authority, 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.

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.

Transfer of  
permit

(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.

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

Amendment  
of permit

(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.

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.

Application  
for  
duplicate  
permit

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

Suspension  
of permit

(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.

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

Location of  
agro-  
veterinary  
shop

(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.

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.

Identity of  
agro-  
veterinary  
shop

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

Sale of  
veterinary  
medicines

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

Sale, supply  
and  
dispensing  
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.

Storage of  
veterinary  
medicines

(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		√
<b>PARTICULARS OF APPLICANT</b>			
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
<b>PROPOSED LOCATION OF AGRO-VETERINARY SHOP</b>			
5	Name of agro-veterinary shop:		
6	Physical Address		
7	Postal Address		
<b>PARTICULARS OF RESPONSIBLE PERSON</b>			
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	





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

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8(5))



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*

1

**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**

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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: .....			
<b>FOR OFFICIAL USE ONLY</b>			
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	
<b>PARTICULARS OF APPLICANT</b>			
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
<b>PARTICULARS OF TRANSFEREE</b>			
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**

..... <i>Name</i>	..... <i>Designation</i>
..... <i>Signature</i>	..... <i>Date</i>

**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**

<b>Please complete in block letters</b>		Shaded fields for official use only	Application No. .... Date and time	
<i>Information Required</i>		<i>Information Provided</i>		
<b>PARTICULARS OF APPLICANT</b>				
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.	<b>PARTICULARS OF AMENDMENT</b>	<b>DESCRIPTION OF AMENDMENT(S)</b>		
	1.			
	2.			
	3.			
5.	<b>EXISTING</b>	<b>PROPOSED AMENDMENT</b>	<b>REASONS FOR AMENDMENT</b>	



1 VII  
or 9)  
ate)

**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**

.....	.....
<i>Name</i>	<i>Designation</i>
.....	.....
<i>Signature</i>	<i>Date</i>

**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**

Please complete in block letters		Application No.	
Information Required		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

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VIII  
(10)  
ate)

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

(2) Here insert the Permit No. intends to \*suspend/revoke your permit on the following grounds:  
(a) .....  
(b) .....  
(c) .....  
(d) .....

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.

IN THE MATTER OF (2) .....you are notified that

(3) Here insert the period  
(4) Signature of Director-General

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



5  
X  
(5)  
ate)



**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
<b>Analgesics- Non-Steroidal Anti-inflammatories</b>		
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
<b>Antiprotozoa</b>		
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

<b>Antifungals</b>		
1	Fluconazole	Tablets or powder
2	Griseofulvin	Tablets or capsules
3	Ketoconazole	Tablets, capsules, lotions shampoo
<b>Antihistamines</b>		
1	Chlorpheniramine	Tablets
2	Cimetidine	Tablets
3	Diphenhydramine	Tablets
4	Cetirizine	Tablets
<b>Antimicrobials</b>		
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
<b>Autonomic Drugs</b>		
1	Atropine	Injection
2	Bethanechol	Injection
3	Glycopyrrolate	Injection
<b>Electrolytes/Nutritional</b>		
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
<b>Gastrointestinal Agents</b>		
1	Metoclopramide	Tablets
2	Sucralfate	Tablets
<b>Hormones</b>		
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
<b>Respiratory</b>		
1	Aminophylline	Tablet or injection
2	Dextromethorphan	Injection
3	Doxapram	Injection
<b>Sedatives</b>		
1	Acepromazine	Tablet
<b>Miscellaneous</b>		
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 pamoate	Tablets or oral liquid
37	Levamisole/piperazine dihydrochloride	Powder
<b>Biologicals:</b>		
<b>Poultry vaccines</b>		
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 drop syndrome Vaccines	All dosage forms
8	Infectious bronchitis/Newcastle inactivated Vaccines	All dosage forms
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
<b>Ruminant Vaccines</b>		
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 syncytial 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 Perfringens Type C/Escherichia Coli Bacterin/ Toxoid Injectable vaccine/toxoid	All dosage forms
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
<b>Pig Vaccines</b>		
1	Parvovirus Killed Vaccine/Erysipelothrix / Leptospira Bacterin Vaccine/toxoid	All dosage forms
2	Boar-taint vaccine Vaccines	All dosage forms
3	E. coli/Clostridium Perfringens type C beta toxoid	All dosage forms



<b>Vaccines for companion animals</b>		
1	Equine Influenza virus Vaccines	All dosage forms
2	Feline viral rhinotracheitis/feline calicivirus/ feline panleukopenia Vaccines	All dosage forms
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 Bacterin Vaccine/toxoid	All dosage forms
6	Rabies Vaccines	All dosage forms
<b>Intra-uterine infusion drugs</b>		
1	Intrauterine pessaries	Pessaries
<b>Intramammary infusion drugs</b>		
1	Mastitis intramammary infusion	Ointments
<b>Ophthalmologic drug</b>		
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
<b>Antiseptics</b>		
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
<b>Analgesics-non-steroidal Anti-Inflammatories</b>		
1	Diclofenac	Tablets or gel
2	Dipyron	Injection
<b>Antiprotozoa</b>		
1	Amprolium	Soluble powders
	Diminazene aceturate	Injectable solutions
<b>Antihistamines</b>		
1	Chlorpheniramine	Tablets
<b>Antimicrobials</b>		
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
<b>Electrolytes/Nutritional</b>		
1	Multivitamin	Soluble powder
2	Potassium	Injection
3	Vitamin C	Tablets or powder
<b>Allied substances (Acaricides)</b>		
1	Chlorfenvinphos	Concentrate
<b>Anthelmintics</b>		
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
<b>Biologicals:</b>		
<b>Poultry vaccines</b>		
1	Newcastle disease	Thermostable vaccines
<b>Ophthalmologic drug</b>		
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.

LUSAKA  
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