

MB12 shots **India and other International Parents** from Akhil Autism Foundation

Only for Members of the foundation

Methylcobalamine shots are vitamins shots which are compounded by special pharmacies from USA under a US Doctor prescription. A doctor has to provide the weight, age and other details. Any compounding pharmacy from USA will not write a prescription for international patients without any US doctor's prescription by Law.

Any US Doctor will not write prescription to international or any parents without consultation. US Doctor consulting fees are from \$300-\$500 per hr.

But this was the case before AKhil Autism Foundation now thru our foundation for our members our US Panel will write prescription FREE of charge.

- Become a member of :www.akhilautismfoundation.org : **Active AAF Membership**
- After becoming member parents have to send an email director@akhilautismfoundation.org stating Mb12 shots requirement.
- Details will be forwarded to the Hopewell pharmacy and parents can then directly contact pay the pharmacy by credit card. (**Pharmacy cannot process without the weight of the child, shipping address, doctor name, birth date and current prescription from local Indian doctor**).
- Pharmacy will take 2 days to process and will ship the products directly to parents at a cheaper shipping DHL cost. Tracking details will be provided.
- Orders placed on weekends will be processed only in the following business working days.
- It is a 3 months supply with pre-filled syringes it will be \$100 plus the shipping cost. (\$170 is the rough estimation).
- Cost will vary and will be lower if parents buy the vial and empty syringes separately
- CUSTOM DUTY MAY APPLY PARENTS HAVE TO DO THE NEEDFUL.**
- Pharmacy can club the orders with other parents if stated earlier
- Pharmacy can send a bulk order depending upon the local doctor from India.
- Any defects with the syringes please inform pharmacy will do the needful in the next order
- If packet reaches very late or stuck in the custom for long pharmacy will send the new shipment.
- Shipment is send is cold box to maintain the quality

See next page for model prescription.

Model Prescription:

Dr. XYZ

Qualification

Clinic Address

Email: _____@_____; Mobile: +91-_____

Dated: _____

For

Name: Master/Miss _____

Age: _____ years _____ months; **Sex:** (Male/Female); **Weight:** _____ kg

Birth date: _____(dd)/_____(mm)/_____(yy)

Diagnosis: Autism Spectrum Disorder

Father's Name: Mr. _____

Address: _____

Advised: Injection Methyl Cobalamin (preservative-free, 25 mg/ml concentration solution) at a dose of 64.5 mcg/kg body weight per dose, once in 3 days.

Dose: (Wt. in Kg x 64.5) mcg per dose, supplied in prefilled syringes: one such dose administered by shallow subcutaneously injection in hip once every 72 hours.

Duration: Three months stock to be sent = 30 prefilled syringes / vial with 30 doses+ and 30 suitable BD Insulin Syringes.

No refills without confirmation by me in writing or on email.

[DR. XYZ]