

CSOS Integration

Customers with a CSOS signing certificate can place orders for DEA Schedule 2 Controlled items on our web site. This will eliminate the need for processing paper 222 forms prior to ordering Schedule 2 items.

Customers wishing to purchase Schedule 2 items via CSOS should have:

1. A valid CSOS signing certificate. Customers can obtain a DEA signing certificate by initiating an application packet request at <http://www.deacom.gov/applycert.html>.
2. Java version 7, update 51 (or newer update) installed. Java software can be downloaded from <http://java.com/en/download/index.jsp>.
3. Unlimited strength Java policy files installed. The policy files can be downloaded from <http://www.oracle.com/technetwork/java/javase/downloads/jce-7-download-432124.html>.
4. An exception for <https://www.gkx.com> entered in their Java security settings.

Our support team will be available to assist customers holding a valid CSOS signing certificate with getting set up for placing CSOS orders.

Placing a CSOS order

1. When a Schedule 2 order is placed on our web site, the customer will be prompted to authorize the order.

Thank you for your order

Your order number is 2596436

CSOS (click here to authorize your order)

2. Clicking the above button will bring up an e222 CSOS order form, an example of which is shown on the next page:

https://www.qkrx.com/cgi/cgictl.pgm?pn=BSTCSOS&INV=2596436 - Google Chrome

https://www.qkrx.com/cgi/cgictl.pgm?pn=BSTCSOS&INV=2596436

DEA e222 Form

No order form may be issued for Schedule I and II substances unless a completed application form has been received. (21 CFR 1305.04)		OMB APPROVAL No. 1117-0010		
To: <i>(Name of supplier)</i>	QK Healthcare Inc	Date: <i>(MM-DD-YYYY)</i>		
		01-27-2014		
Supplier's DEA Registration Number	RQ0207945			
Line No.	Quantity Ordered	Size of Packages	Name of Item	National Drug Code
1	1	EA	OXYCODONE 5MG TAB 100S CII ALV	47781-0263-01
2	1	EA	OXYCODON/APAP 5-325MG 100 C2AMN	53746-0203-01
2	No. of lines completed			
DEA Registration No.	Name and Address of Registrant			
RQ0207945	QK HEALTHCARE SUITE 3 35 SAWGRASS DRIVE BELLPORT, NY, US, 11713			
Schedules				
2,2N,3,3N,4,5				
No. of this Order Form				
14X596436				
DEA Form -222 (Jun. 1983)	U.S.OFFICIAL ORDER FORMS -SCHEDULES I & II DRUG ENFORCEMENT ADMINISTRATION SUPPLIER'S COPY 1			39558785

Select a signing certificate

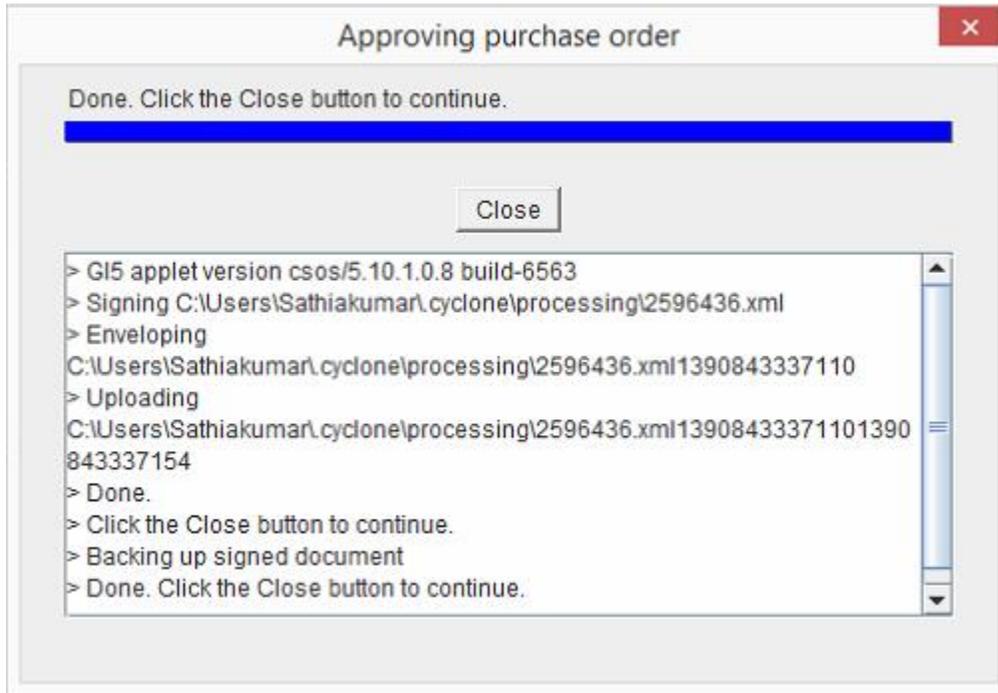
New file:

3. The customer has to select the appropriate DEA issued CSOS signing certificate by clicking on the "Browse" button in the above screen.
4. The customer will confirm the order by clicking the "Approve" button.
5. The customer is required to enter the password for their CSOS signing certificate on the next screen:

Enter password ✕

Please enter the password to unlock your signing certificate

6. If the password is correct, the order will be signed and the following screen will be displayed:



7. Clicking the "Close" button above will complete the order.

All compliance and accounting requirements will have to be met prior to the order being shipped.

Receiving and annotating a CSOS purchase

Customers can review and annotate a CSOS purchase by clicking on the “Account” tab, and then clicking the invoice number for the Schedule 2 items ordered.

1. Click on the Invoice number for the Schedule 2 items ordered.
2. You will see the following screen where the quantity and date of receipt of the Schedule 2 items can be recorded. There is an optional message field where notes relevant to the transaction may be annotated.

Invoice Details

Vendor

QK HEALTHCARE INC
35 SAWGRASS DRIVE SUITE 3
BELLPORT, NY 11713
RQ0207945

Customer

Shipto

Reference

Iniv :
PO: Internet
Rep:
Date: 2014/02/13
Amount:
E222 Nbr: [14X651951](#)

SKU	Cust-SKU	NDC	Description	Lot	Qty	UM	Reg Price	Your Price	%Saved	Qty Received	Date Received	Message
66791		9148000713	ABILIFY 5MG 30'S	3G76884	2	EA	776.30	743.70	4.1	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="message"/>
74074		1722023910	AMLODIPINE 10MG TAB 1000'S CAM	I1310207	1	EA	178.20	15.07	91.5	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="message"/>
75783		5963043864	ENULOSE SOL 10GM/15 473ML ACTA	17133842	2	EA	7.06	5.25	25.6	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="message"/>
60454		3746010205	GABAPENTIN 300MG CAP 500'S AMN	HK17713A	2	EA	80.00	23.20	71.0	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="message"/>
60356		3155000201	HYDRALAZINE 25MG TAB 100'S HER	K1311	2	EA	23.50	4.69	80.0	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="message"/>
70913		3746046605	IBUPROFEN 800MG TAB 500'S AMN	HH00213	1	EA	68.50	30.20	55.9	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="message"/>
74760		1991029301	OXCARBAZEPINE 300MG TB 100S BRE	333909	2	EA	185.82	13.06	92.9	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="message"/>
79233		7781026401	OXYCODONE 15MG TAB 100S CII ALV	454525	3	EA	50.44	55.48	9.9	<input type="text" value="3"/>	<input type="text" value="140218"/>	<input type="text" value="message"/>
79564		383080416	PROMETHAZINE W/COD SYR 16OZ HIT	625205	1	EA	12.35	7.58	38.6	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="message"/>

3. The E222 form number is located on the right of the page under the reference section. Clicking on the form number hyperlink will render the purchaser’s copy of the DEA e222 form on the screen. Customers can print a copy for their records or look it up when needed.

www.krx.com/cgi/cgictl.pgm?pn=BSTE222&INV=2651951 - Google Chrome
 www.krx.com/cgi/cgictl.pgm?pn=BSTE222&INV=2651951

DEA e222 Form

No order form may be issued for Schedule I and II substances unless a completed application form has been received. (21 CFR 1305.04) OMB APPROVAL No. 1117-0010

To: **QK Healthcare Inc** Date: **02-13-2014**
(Name of supplier) (MM-DD-YYYY)

Supplier's DEA Registration Number: **RQ0207945**

Line No.	Quantity Ordered	Size of Packages	Name of Item	National Drug Code	Quantity Confirmed	Quantity Received	Date Received	Notes
1	3	EA	OXYCODONE 15MG TAB 100S CII ALV	47781-0264-01	3	3	02-18-2014	

1 No. of lines completed

DEA Registration No. Name and Address of Registrant

Schedules: **2,2N,3,3N,4,5**

No. of this Order Form: **14X651951**

DEA Form -222 (Jun. 1983) U.S.-OFFICIAL ORDER FORMS -SCHEDULES I & II DRUG ENFORCEMENT ADMINISTRATION PURCHASER'S COPY 3 39558705

Details

Shipto
 CITY CARE SERVICES INC
 5557 SOUTH 78TH ST
 TAMPA, FL 33619
 FC2143787

Reference
 Iuv : 2651951
 PO: Internet
 Rep: MICHAEL NEWTON
 Date: 2014/02/13
 Amount: 2,230.25

E222 Nbr: 14X651951

Reg Price	Your Price	%Saved	Qty Received	Date Received	Message						
776.30	743.70	4.1	0	0	message						
178.20	15.07	91.5	0	0	message						
7.06	5.25	25.6	0	0	message						
80.00	23.20	71.0	0	0	message						
23.50	4.69	80.0	0	0	message						
70913	3746046605	IBUPROFEN 800MG TAB 500'S AMN	HH00213	1	EA	68.50	30.20	55.9	0	0	message
74760	1991029301	OXCARBAZEPINE 300MG TB 100S BRE	333909	2	EA	185.82	13.06	92.9	0	0	message
79233	7781026401	OXYCODONE 15MG TAB 100S CII ALV	454525	3	EA	50.44	55.48	9.9	3	140218	message
79564	383080416	PROMETHAZINE W/COD SYR 16OZ HIT	625205	1	EA	12.35	7.58	38.6	0	0	message