2024 AAEP Program

November 1, 2024 - December 19, 2024



Cumulatively purchase \$7,500 within a product category to earn rebate.					
	ELIGIBLE PRODUCTS		REBATE		
Vaccines	▼ VETERA®	* CALVENZA°	Other Vaccines*	20%	
Joint Health	Equioxx® (firocoxib)			12%	
	Hyvisc * (hyaluronate sodium)	Hyalovet * (hyaluronate sodium)	Legend (hyaluronate sodium)	3%	
Pharmaceuticals	GASTROGARD' (omeprazole)	Prascend (pergolide tablets)	Marquis (15% w/w ponazuril)	3%	

^{*}See list for qualifying products.

ADDITIONAL SAVINGS

- Buy \$7,500 of **one** category by 12/19/24 to earn the ability to purchase product into January 2025, and continue to earn the brand rebate.
- Buy \$7,500 within each of **two** categories by 12/19/24 to earn the ability to purchase product into January 2025, and continue to earn the brand rebate and earn an additional 2% rebate on November December 2024 purchases.
- Buy \$7,500 within all **three** categories by 12/19/24 to earn the ability to purchase product into January 2025, and continue to earn the brand rebate and earn an additional 3% rebate on November December 2024 purchases.

PROGRAM DETAILS

- Program will run through 12/19/24; if at least one \$7,500 category is invoiced by 12/19/24, customer is eligible to earn subsequent rebates on qualifying orders through January 2025.
- The program is available only to veterinarians in good standing with Boehringer Ingelheim with valid veterinary-client-patient relationships (VCPR), and the product must be used solely by the VCPR patient.
- Boehringer Ingelheim has the right to end or modify this program in whole or in part (including the removal of specific products or premiums) at any time without notice.
- Qualified orders will be paid approximately 6–8 weeks after the promotion ends.
- Rebate checks will only be issued for amounts more than \$50.
- Rebates are to be paid based on cumulative invoiced purchases of program brands during the program period.

- If an eligible customer returns any qualifying product purchased during the program term that impacts the minimum purchase amount, Boehringer Ingelheim may (in its sole discretion) deduct the difference from any other rebates earned during the program term.
- Account eligibility: EPEP accounts and General Vet accounts not participating in any other program (Corporate Accounts, Buying Group, etc.).
- Void where prohibited by law or regulations. All federal, state, and local laws and regulations apply.

Talk to your Boehringer Ingelheim representative for more information.



ELIGIBLE PRODUCTS

VACCIBIES				
VACCINES	1.17777 1.8 OVD			
131395	VETERA® 6 ^{XP}	10 mL		
108759	VETERA 4 ^{XP} + WNV	10 mL		
131392	VETERA 5 ^{XP}	1 mL		
131393	VETERA 5 ^{XP}	10 mL		
131390	VETERA Gold ^{XP}	1 mL		
131391	VETERA Gold ^{XP}	10 mL		
131388	VETERA Gold ^{XP} + VEE	1 mL		
131389	VETERA Gold ^{XP} + VEE	10 mL		
138903	VETERA EWT + WNV	1 mL		
138904	VETERA EWT + WNV	10 mL		
138905	VETERA WNV	1 mL		
138906	VETERA WNV	10 mL		
138912	VETERA EIV ^{XP}	10 mL		
138914	VETERA 2 ^{XP}	10 mL		
139066	VETERA VEWT + WNV	1 mL		
139067	VETERA VEWT + WNV	10 mL		
139305	VETERA EWT	10 mL		
139307	VETERA VEWT	10 mL		
139675	VETERA EHV ^{XP} 1/4	10 mL		
139136	CALVENZA° -03 EIV/EHV	20 mL		
113899	RHINOMUNE°	25 x 1 Doses		
139981	RHINOMUNE	1 x 5 Doses		
126660	IMRAB° Large Animal	20 mL		
126562	IMRAB Large Animal	50 mL		
126566	IMRAB + POTOMOVAC™	5 x 1 Doses		
126565	IMRAB + POTOMOVAC	3 x 10 Doses		
126564	POTOMOVAC	5 x 1 Doses		
126563	POTOMOVAC	3 x 10 Doses		
135216	STREPVAX* II	1 mL		
135217	STREPVAX II	10 mL		
135219	TETGUARD*	10 mL		
JOINT HEALTH	TETGO/IND	101112		
135909	HYVISC* (hyaluronate sodium)	2 mL Syringe		
139979	HYALOVET* (hyaluronate sodium)	2 mL Syringe		
139978	HYALOVET	2 mL Vial		
126675	EQUIOXX° (firocoxib) Tablets	180 Tablets x 1 Bottle		
126676	EQUIOXX Tablets	60 Tablets x 1 Bottle		
126658	EQUIOXX* (firocoxib) Oral Paste	20 x 1 Syringe		
126654	EQUIOXX (Indeexity) oracl date	72 x 1 Syringe		
126667	LEGEND* (hyaluronate sodium) Injectable Solution	2 mL x 6 Vials		
126668	LEGEND (Hyaturoriate sociality) injectable sociation	4 mL x 6 Vials		
126669	LEGEND	20 mL Multi-Dose Vial		
		20 ME MULLIPOSE VIAL		
PREMIUM PHARMACEUTICALS 126620 CASTROCARR' (amagrapada) 22 Suringga par Hagling Book				
126639	GASTROGARD (omeprazole)	28 Syringes per Healing Pack		
126631	GASTROGARD MARQUES* (15% or / or a page will) Anting at a page (Oral Page)	72 Syringes per Bulk Pack		
126672	MARQUIS* (15% w/w ponazuril) Antiprotozoal Oral Paste	1 Syringe		
126674	MARQUIS	4 x 1 Syringe		
139668	PRASCEND* (pergolide tablets)	60ct Tablets		
131356	PRASCEND	160ct Tablets		