

**** URGENT ****

**Type I - Recall of drug
Atropine Injection BP 0.4 mg/mL Lot 50187
DIN : 02094681**

November 19, 2015

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Instructions for pharmacists

Dear Pharmacist:

In accordance with the Food and Drug Regulations, we are writing to inform you that **Alveda Pharmaceuticals Inc.** has initiated a Type I recall for **Atropine Injection BP 0.4 mg/mL, DIN: 02094681, Lot: 50187, Expiry: April 2019**

This recall is due to an incorrect barcode on the ampoule label. It is a duplicate barcode to another drug product. The active ingredient, declared strength and all other label details are correct.

This recall is at the level of the hospitals and pharmacies. Therefore, we ask you to **immediately** stop the sale and the distribution of this lot. Health Canada was advised of this recall.

A Type I recall is situation in which there is a reasonable probability that the use of, or exposure to, a product will cause serious adverse health consequences or death.

The following lot is affected:

Product	DIN	Lot	Expiry date	Sold between
Atropine Injection BP 0.4 mg/mL	02094681	50187	2019.04	2015.08.13 and 2015.11.17

Concerning your current inventory of **Atropine Injection BP 0.4 mg/mL, Lot: 50187:**

- 1) Please fill out the form attached (Recall Response Form) and send it to us by fax preferably within 24 hours. - **even if you have none of the involved product in stock.**
- 2) Your account will be credited upon receipt of the product in question.
- 3) Return the goods to your point of purchase / wholesaler. Please identify the goods with the wording "**Atropine Injection BP 0.4 mg/mL Lot: 50187 – Recall**".

Should you have any questions or require further clarification, please contact **Alveda Pharmaceuticals Inc.** Customer Service at 1-800-656-0793. We thank you for your collaboration.

Yours sincerely,



Josey Hobbs
Senior Director, Regulatory Affairs

Suite 1100, 21 St Claire Avenue East, Toronto, Ontario M4T 1L9 Canada

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www.alvedapharma.com



RECALL RESPONSE FORM

Within 24 hours, please complete this form and send it back to Alveda Pharmaceuticals Inc. by fax, at the following number: 416-485-8352 even if you have none of the involved product in stock.

- If you have product to return, please record the amount in the appropriate section below.
- If you do not have any product to return, please verify this by checking the appropriate box below.

To the attention of (Quality Alveda Pharmaceuticals Inc.):	Ms. Josey Hobbs
Subject:	URGENT RECALL – TYPE I
Name of the product:	Atropine Injection BP 0.4 mg/mL
Lot Number:	50187
Expiry Date:	April 2019
DIN Number of the product:	02094681

- Yes, I have the recalled product(s).
- No, I do not have any of the recalled products and lot(s).

Name (in capitals): _____

Telephone number : _____

Number and percentage : _____

Wholesaler's company name: _____

Signature: _____

Date : _____