

Urgent Product Recall Notification (Initiated 09-02-2011)

Pharmedix is requesting the return of all unexpired lot numbers of the following product under the Major label manufactured by H&P (Triad group):

Level of Recall:	RETAIL
Product:	Povidone Iodine 10% Topical Solution 8oz
Reason:	Possible objectionable microorganisms in the drug product
Lot #s	All unexpired lot numbers
Manufacturer:	Major label manufactured by H&P (Triad group)
NDC Code#	00904-1103-09

This voluntary recall is extended to the **RETAIL** level and is being made with the knowledge of the Food and Drug Administration (FDA). This recall is only to your **CLINIC LEVEL**. **You DO NOT need to contact any clients to whom the product was dispensed.**

Our records show that product with the referenced Lot #s has been shipped to your clinic. Please examine your inventory to verify if you have product from these lots remaining in stock. If so, **please discontinue dispensing it and promptly call Pharmedix at 1-800-486-1811, Ext. 11** to obtain the approved paperwork to return all concerned product to us for credit to your account.

Please check the appropriate box below, sign where indicated **and fax this form back to Pharmedix at 1-800-783-2038 even if you do not have any product from the indicated Lot # remaining in stock.**

Sincerely,

Richard J. Mangini

Richard J. Mangini, PharmD
Client Services

Clinic Code	Order Code	PMX Lot #	Original Mfg. Lot #

Check appropriate box:

Received affected Lot Number(s) – Do not have any stock on hand.

Received affected Lot Number(s) – Have ____ units remaining in stock.

Person verifying stock status (print): _____

Date: _____

Signature: _____