

RECALL RETURN RESPONSE FORM

Fluocinolone Acetonide Oil 0.01% (Ear Drops) (NDC 68462-185-56)

Retail Level**01/23/2024**

Please fill out this form completely. By doing so, this will acknowledge that you have read and understood the recall instructions and have taken the appropriate action.

Customer Name:		DEA#:
<i>DEA # is required, if it is not provided, the processing of your form will be delayed.</i>		
Address:		
City:	State:	Zip:
Contact Name (Please Print):		
Telephone#:	Email:	
Contact Signature:	Date:	
DEBIT MEMO# (If unsure, leave blank):		

Wholesaler Information if not directly purchased from Glenmark Pharmaceuticals Ltd.:

Wholesaler Name:	DEA#:
City:	State: Zip:

I have checked my stock and communicated to my customers at the appropriate level:

☐ I confirm that all locations that received the impacted products have been notified to the retail level
_____ (Initial and date)

☐ I do not have any stock of the recalled items.

OR

☐ I have quarantined and listed in the box below the quantity of recalled units and I will be returning to Inmar, as soon as possible. Upon receipt of this Response Form, Inmar, will issue return authorization label(s) Please indicate the # of needed box labels_____.

Item Description	NDC#	Lot#	Exp. Date	Total Full/Sealed and Partial/Open Bottle Count
Fluocinolone Acetonide Oil 0.01% (Ear Drops)	68462-185-56	05220346	January 2024	
Fluocinolone Acetonide Oil 0.01% (Ear Drops)	68462-185-56	05220369	January 2024	
Fluocinolone Acetonide Oil 0.01% (Ear Drops)	68462-185-56	05220582	February 2024	
Fluocinolone Acetonide Oil 0.01% (Ear Drops)	68462-185-56	05220861	March 2024	

If you have any questions regarding this form or product return please contact Inmar at 877-805-3585, Monday thru Friday 9 am to 5 pm EST.

**Please fax this form to: 1-817-868-5362 or E-mail rxrecalls@inmar.com
Recall Event ID RCL274-23 / N131119**