

RECALL STOCK RESPONSE FORM

Product RECALL 03/20/2019

Clindamycin Injection USP 300mg/2mL ADD-Vantage (NDC #47781-619-69)

Clindamycin Injection USP 600mg/4mL ADD-Vantage (NDC #47781-620-69)

Clindamycin Injection USP 900mg/6mL ADD-Vantage (NDC #47781-621-69)

VOLUNTARY RECALL

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

Distributor Name _____ DEA # _____

**DEA # is required, if not provided the processing of your form will be delayed.*

Address _____

City _____ State _____ Zip _____

Contact Name (please print) _____ Telephone # _____

Contact Signature _____ Date _____

I have checked my stock and:

_____ Do not have any stock of the recalled **items**.

OR

Have quarantined and listed in the table below the quantity of recalled units. I will be returning the recalled units 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 _____.

NDC	Product / Size	Lots	Quantity of product returning (In units)
47781-621-69	Clindamycin Injection, USP 900mg/6mL - Add-Vantage, 25 Ct.	T96398	
47781-619-69	Clindamycin Injection, USP 300mg/2mL - Add-Vantage, 25 Ct.	T97472	
47781-621-69	Clindamycin Injection, USP 900mg/6mL - Add-Vantage, 25 Ct.	T97492	
47781-620-69	Clindamycin Injection, USP 600mg/4mL - Add-Vantage, 25 Ct.	T97496	
47781-620-69	Clindamycin Injection, USP 600mg/4mL - Add-Vantage, 25 Ct.	T97497	
47781-620-69	Clindamycin Injection, USP 600mg/4mL - Add-Vantage, 25 Ct.	W28564	

47781-621-69	Clindamycin Injection, USP 900mg/6mL - Add-Vantage, 25 Ct.	W28567	
47781-620-69	Clindamycin Injection, USP 600mg/4mL - Add-Vantage, 25 Ct.	W31812	
47781-621-69	Clindamycin Injection, USP 900mg/6mL - Add-Vantage, 25 Ct.	W31813	
47781-619-69	Clindamycin Injection, USP 300mg/2mL - Add-Vantage, 25 Ct.	W31814	
47781-619-69	Clindamycin Injection, USP 300mg/2mL - Add-Vantage, 25 Ct.	T97473	
47781-619-69	Clindamycin Injection, USP 300mg/2mL - Add-Vantage, 25 Ct.	W28573	

If you did not purchase the product directly from the Manufacturer please complete the below section.

Purchased From: Wholesaler Name _____ DEA # _____

City _____ State _____

If you have any questions regarding this form or product return please contact Inmar at 1-800-967-5952 Office hours 9am to 5pm EST, Mon thru Fri.

Please fax this form to: 1-817-868-5362 or E-mail: rxrecalls@inmar.com