Enforcement Report - Week of November 22, 2017

Class II Drugs Event

Event ID: Product Type: Status: Date Terminated:

78035 Druas Ongoing

Recall Initiation Date: Voluntary / Mandated: Center Classification Date: Initial Firm Notification of 08/31/2017 Voluntary: Firm Initiated 11/13/2017 Consignee or Public:

Letter

Recalling Firm: Distribution Pattern: Amneal Pharmaceuticals LLC MS NC OH TX UT

118 Beaver Trl

Glasgow KY United States

Associated Products

Product Description: Product Quantity:

Fosphenytoin Sodium Injection, USP, 500 mg PE/10 mL (50 mg PE/mL, 10 mL Single Dose Vial, Rx Only,

Distributed by: Amneal Biosciences, Bridgewater, NJ 08807, NDC: 70121-1390-7

Reason for Recall: Recall Number: D-0076-2018

Presence of Particulate Matter

Code Information: Lot # AP160016; Exp. 05/18

14.000 vials

Letter

Class II Drugs Event

Event ID: Date Terminated: Product Type: Status:

78074 Drugs Ongoing

Recall Initiation Date: Voluntary / Mandated: Center Classification Date: Initial Firm Notification of 09/05/2017 Voluntary: Firm Initiated 11/15/2017 Consignee or Public:

Recalling Firm: **Distribution Pattern:**

Llorens Pharmaceutical Corp. Puerto Rico Carr. #1 Km 34.3

Associated Products

Caguas PR United States

Product Description: Product Quantity: 19232 bottles

Urin D/S Tablets Methenamine 81.6 mg, Sodium Biphosphate 40.8 mg, Phenyl Salicylate 36.2 mg, Methylene Blue 10.8 mg, Hyoscyamine Sulfate 0.12 mg, Rx Only, 100-count bottle, Manufactured For: Llorens Pharmaceutical Corp., International Division, Miami, FL 33166. NDC: 54859-701-10

Reason for Recall: Recall Number:

Superpotent Drug: Subpotent Drug. FDA analysis found this product to be Out of Specification for assay which D-0081-2018 could result in either Subpotent and/or Superpotent tablets.

Code Information:

Lots: 22811601, 22811602, Exp. 05/18; 202U1601 Exp. 11/18

Class II Drugs Event

Event ID: Product Type: Status: Date Terminated:

78402 Drugs Ongoing

Voluntary / Mandated: Initial Firm Notification of Recall Initiation Date: Center Classification Date: 10/25/2017 Consignee or Public:

Voluntary: Firm Initiated 11/14/2017 Telephone

Recalling Firm: Distribution Pattern: Fagron, Inc Nationwide in USA

2400 Pilot Knob Rd Saint Paul MN United States

Associated Products

Product Description: Product Quantity: 934 grams

Estriol, For Prescription Compounding, packaged in a) 1 G bottle (NDC: 51552-1392-1), b) 5 G bottle (NDC: 51552-1392-2), c) 25 G bottle (NDC; 51552-1392-3) and d) 100 G bottle (NDC 51552-1392-5), Rx only,

Distributed by Fagron, Inc., 2400 Pilot Knob Rd, St. Paul, MN 55120 Tel. 1-(800) 423-6967

Reason for Recall: Recall Number: D-0079-2018 cGMP Deviations: lack of quality assurance at the API manufacturer.

Code Information: Lot # Expiration Date: a) 1 G bottle: 16F23-U05-033657, Exp. 5/26/2017, b) 5 G bottle: 16F23-U05-033656, Exp. 5/26/2018: 17C02-U02-035890, Ex p. 1/19/2019. c) 25 G bottle: 16F23-U05-033655, Exp. 5/26/2018; 17C02-U02-035887, Exp. 1/19/2019. d) 100 G bottle: 17C02-U02-035888, Exp. 1/1

Class II Drugs Event

9/2019

Event ID: **Product Type:** Status: **Date Terminated:**

78503 Drugs Completed

Recall Initiation Date: Voluntary / Mandated: Center Classification Date: Initial Firm Notification of 10/13/2017 Voluntary: Firm Initiated 11/14/2017 Consignee or Public:

Telephone

Recalling Firm: Distribution Pattern:

PharMEDium Services, LLC. CA. IL

6100 Global Dr

Memphis TN United States

Associated Products

Product Description: **Product Quantity:** Hydromorphone HCl 0.5 mg per mL in 0.9% Sodium Chloride Injection 1 mL, packaged in syringes, Rx Only, 499 syringes

PharMEDium Services, LLC, 913 N. Davis Ave Cleveland, MS 38732, NDC 61553-352-40

Reason for Recall: Recall Number:

Superpotent drug: out of specification result for potency

D-0080-2018

Code Information:

Lot#: 172820134M, Exp 01/18

Event ID:

Product Type:

Status:

78118

Drugs

Ongoing

Recall Initiation Date: 08/29/2017

Voluntary / Mandated: Voluntary: Firm Initiated Center Classification Date:

Initial Firm Notification of Consignee or Public:

Letter

Date Terminated:

11/10/2017

Recalling Firm:

Amerisource Health Services 2550 John Glenn Ave Ste A Columbus OH United States Distribution Pattern:

Nationwide USA and Puerto Rico

Associated Products

Product Description:

Enalapril Maleate Tablets, USP, 5 mg, 100 Tablets (10 x 10), Rx Only. Packaged and Distributed by: American Health Packaging, Columbus, Ohio 43217. NDC: 68084-390-01

93,600 tablets

Product Quantity:

Health Fackaging, Columbus, Onio 43217. NDC. 00004-35

Reason for Recall:
Failed Stability Specifications

Recall Number: D-0074-2018

Code Information:

Lot #:167194; Exp. 12/31/2018

Class III Drugs Event

Event ID: 78286

10/12/2017

Product Type: Drugs Status: Ongoing **Date Terminated:**

Recall Initiation Date:

Voluntary / Mandated: Voluntary: Firm Initiated Center Classification Date:

Initial Firm Notification of Consignee or Public:

11/10/2017

Letter

Recalling Firm: Genzyme Corporation

11 Forbes Rd

Northborough MA United States

Distribution Pattern:

Nationwide

Associated Products

Product Description:

Clolar (clofarabine) 20 mg/20 mL (1 mg/mL) Injection, for intravenous use, Rx Only, Mfd. by: Teva Pharmachemie Swensweg 5 Haarlem, The Netherlands Mfd. for: Genzyme Corporation, Cambridge, MA 02142. NDC 0024-5860-01.

Product Quantity:

9,343 single dose vials

Reason for Recall:

Labeling: Incorrect or Missing Package Insert.

Recall Number: D-0075-2018

Code Information:

Lot #: K5006Y01; Exp. 08/31/18 Lot #: K5006Y03; Exp. 08/31/18 Lot #: K6001Y01; Exp. 03/31/19

Class III Drugs Event

Event ID: 78325

Product Type: Drugs Status: Ongoing **Date Terminated:**

Recall Initiation Date:

10/19/2017

Voluntary / Mandated: Voluntary: Firm Initiated Center Classification Date: 11/13/2017

Initial Firm Notification of Consignee or Public:

Letter

Recalling Firm:

Allergan Sales, LLC 8301 Mars Dr Waco TX United States Distribution Pattern:

Nationwide and Barbados, Curação, Dominican Republic, Guyana, Jam aica, and Trinidad and Tobago.

Associated Products

Product Description:

Combigan (brimonidine tartrate/timolol maleate ophthalmic solution) 0.2%/0.5%, Rx only, packaged in a) 2.5 mL NDC# 0023-9211-03; b) 5 mL (NDC# 0023-9211-05); c) 10 mL (NDC# 0023-9211-10); d) 15 mL (NDC# 0023-9211-15) bottles, Manufactured By: Allergan, Irvine, CA 92612...

Product Quantity:

715.041 bottles

Reason for Recall:

Failed Impurities/Degradation Specifications.

Recall Number:

D-0077-2018

Code Information:

Lot #: a) 94659 Exp. FEB-2019: b) 94715. Exp. JAN-2019: 94757. Exp. FEB-2019. 94715A. Exp. JAN-2019: 95297. Exp. MAR-2019: c) 95223 Exp. M AR-2019; d) 95220 Exp. MAR-2019

Product Description:

Lumigan (bimatoprost ophthalmic solution) 0.01%, 2.5 mL bottle, Rx only, Allergan, Irvine, CA 92612. NDC# 0023-3205-03

Product Quantity:

153.616 bottles

Reason for Recall:

Failed Impurities/Degradation Specifications

Recall Number:

D-0078-2018

Code Information:

Lot #: 92575 Exp. JUN-2018

Class III Drugs Event

Event ID: **Product Type:** Drugs

Status: Ongoing **Date Terminated:**

78461

10/30/2017

Voluntary / Mandated: Voluntary: Firm Initiated

Center Classification Date:

Initial Firm Notification of Consignee or Public:

Letter

Recalling Firm:

Recall Initiation Date:

Distribution Pattern:

Jubilant Cadista Pharmaceuticals, Inc.

207 Kilev Dr

Salisbury MD United States

Nationwide

11/16/2017

Associated Products

Product Description:

Meclizine hydrochloride tablets USP, 12.5 mg, 100 count HDPE bottle, Rx only, Manufactured by: Jubilant Cadista Pharmaceuticals Inc., Salisbury, MD 21801, NDC 59746-122-06

744 bottles

Product Quantity:

Reason for Recall:

Marketed without an approved NDA/ANDA: Bottles were released prior to final approval.

Recall Number:

Code Information:

Lot # 17P0430, Exp 05/19

D-0082-2018