HMA WGEO – Rapid Alert Form Counterfeit or illegal product found in the illegal supply chain

Shaded area to be completed Reference: No:	eted by the sec	retariat		
Date:	Time:		Initials:	
Please complete sections	1 to 5 providin	g as much	information as possible.	
1. REPORTING PERSON				
Name:		Position:		
Organisation:				
Address:				
Telephone No:			Ext:	
e-mail address:				
2. PRODUCT DETAILS				
Product name: GENOTROPIN				
Manufacturer: Pharmacia & Upjohn, AB (Fab. Stockholm), Sweden				
Supplier:				
Legal status: Banned Counterfeit Unlicensed Stolen Stolen				
Dosage form: 12 MG/1 MI (Pre-filed pen)				
Strength: 12 MG/1 ML				
atch / lot no: S47292 Is batch number genuine: Yes 🗓 No 🗌				
If yes to the above, advise batch destination country:				
Expiry date: 30.06.2019				
Language of packaging: Portuguese				
Product name:HUMATROPE				
Manufacturer: Federa S.A. (Fab. Landry), Bruxelles				
Supplier:				
Legal status: Banned ☐ Counterfeit ☐ Unlicensed ☐ Stolen ☒				
Dosage form: 12 MG/ 3,5 MI (Cartridge)				
Strength: 12 MG/3,5 ML				
Batch / lot no: C665264J	Is ba	atch numbe	er genuine: Yes 🗵 No 🗌	
If yes to the above, advise batch destination country:				
Expiry date: 07.2019				

Language of packaging: Portuguese				
Product name:HUMATROPE				
Manufacturer: Federa S.A. (Fab. Landry), Bruxelles				
Supplier:				
Legal status: Banned ☐ Counterfeit ☐ Unlicensed ☐ Stolen ☒				
Dosage form: 12 MG/ 3,5 MI (Cartridge)				
Strength: 12 MG/3,5 ML				
Batch / lot no: C775483D Is batch number genuine: Yes 🗵 No 🗌				
If yes to the above, advise batch destination country:				
Expiry date: 02.2020				
Language of packaging: Portuguese				
Date of discovery: 11.2017				
Details of discovery: The medicinal products have been stolen in Portugal				
from a hospital pharmacy .				
Analysed: YES NO X				
If yes, result of analysis:				
3. DISTRUBUTION METHOD				
Internet: YES / NO X				
Internet:				
URL:				
Website address:				
Other details:				
Currency of payment:				
Has product reached patients/consumers?				
4. RISK TO PUBLIC HEALTH				
Adverse reactions: YES / NO				
If yes, please advise details:				
Medical assessment details:				
5. NEED FOR PUBLICITY				
Are you making a public statement? YES ☐ / NO ☒				
Are you issuing a press release? YES \(\subseteq \) NO \(\subseteq \)				

Are you recalling product? YES / NO 🗵			
If yes to any of the above, when do you intend to take action?			
immediately			
6. DISSEMINATION			
Are you content for this Rapid Alert to be shared outside WGEO membership? YES $X \square$ / NO \square (please see below)			
If yes, please specify which of the below you are content for this to be shared			
with (you may tick more than 1 box)			
Law Enforcement T Industry Security Trade Associations			
Traders Other X Please specify- Wholesalers			
7. PHOTOGRAPH			
If possible, please attach a photograph of the product.			