

HMA WGEO – Rapid Alert Form

Counterfeit or illegal product found in the illegal supply chain

Shaded area to be completed by the secretariat

Reference:		
Date:	Time:	Initials:
Please complete sections 1 to 5 providing as much information as possible.		
1. REPORTING PERSON		
Name:	Position:	
Organisation: Supervision of Medicinal Products and Narcotics		
Address:		
Telephone No:	Ext:	
e-mail address:		
2. PRODUCT DETAILS		
Product name: Desire		
Manufacturer:		
Supplier: Unknown		
Legal status: Banned <input type="checkbox"/> Counterfeit <input type="checkbox"/> Unlicensed <input checked="" type="checkbox"/> Stolen <input type="checkbox"/>		
Dosage form: capsule		
Strength:		
Batch / lot no:	Is batch number genuine: Yes <input type="checkbox"/> No <input type="checkbox"/>	
If yes to the above, advise batch destination country:		
Expiry date: July 2016		
Language of packaging:		
Date of discovery:		
Details of discovery:		
Analysed: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		
If yes, result of analysis:		
3 different package		
Filbanserin		
52 mg/dose, 44 mg/dose and 44 mg/dose		

3. DISTRIBUTION METHOD

Internet: YES <input type="checkbox"/> / NO <input type="checkbox"/>	
Internet:	Non internet, advise full details: Bought in store in Sweden.
URL:	
Website address:	
Other details:	
Currency of payment:	
Has product reached patients/consumers?	
4. RISK TO PUBLIC HEALTH	
Adverse reactions: YES <input type="checkbox"/> / NO <input checked="" type="checkbox"/>	
If yes, please advise details:	
Medical assessment details:	
5. NEED FOR PUBLICITY	
Are you making a public statement? YES <input type="checkbox"/> / NO <input checked="" type="checkbox"/>	
Are you issuing a press release? YES <input checked="" type="checkbox"/> / NO <input type="checkbox"/>	
Are you recalling product? YES <input type="checkbox"/> / NO <input checked="" type="checkbox"/>	
If yes to any of the above, when do you intend to take action? We have published a report at our website and we have contacted the store and they have stopped the product from reaching customers.	
6. DISSEMINATION	
Are you content for this Rapid Alert to be shared outside WGEO membership? YES <input checked="" type="checkbox"/> / NO <input type="checkbox"/> (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 <input type="checkbox"/> Industry Security <input type="checkbox"/> Trade Associations <input checked="" type="checkbox"/>	
Traders <input checked="" type="checkbox"/> Other <input type="checkbox"/> Please specify _____	
7. PHOTOGRAPH	
If possible, please attach a photograph of the product.	
Please see below.	

