**CUSTOMER REPLY FORM**

**Product Alert**

**Water for Injection (WFI) ampoules** **co-packed with**

**Simulect 20mg**

Please complete the Customer Reply Form and return it to Novartis by emailing it into the mailbox, as indicated below, **within 1 working day**. Returning the customer reply form promptly will confirm your receipt of this notification.

|  |  |  |  |
| --- | --- | --- | --- |
| **Product** | **Batch Number** | **Associated lot number of WFI ampoules** | **Quantity**  |
| **Simulect 20 mg vial** | **SFTR2** | **M0797** |  |
| **Simulect 20mg vial** | **SHEN8** | **M0797** |  |

Has your organization supplied Simulect 20mg batch SFTR2 or SHEN8 to any other organization? (Yes / No) :

If Yes, please provide the name & contact details of the organization so Novartis can contact them:

Please complete and sign this form within 1 working day. Email a scanned copy to **qa.recalls@novartis.com** as a confirmation that you have received this notification.

Please note that ***NOVARTIS CANNOT PROCESS UNSIGNED FORMS***

*Your signature below indicates your understanding of the contents of the attached letter and that you performed the actions outlined and disseminated this information, if applicable.*

**FROM:**

|  |  |
| --- | --- |
| Organisation |  |
| Name |  |
| Position |  |
| Telephone number |  |
| Email |  |
| Date |  |
| Signature |  |