HDMA Standard Product Information — Pharmaceutical Products

☒ New Item ☐ Promotion/Deal ☐ Open Stock ☐ Post Launch Change

Date: 08/01/2013

PRODUCT INFORMATION

Manufacturer/Broker Name: AvKARE, Inc. Number:
Product Name: Amantadine HCl 100 mg
Product ID Number:
☒ NDC 42291-0125-50 ☐ UPC/GTIN #
Description: Amantadine HCl 100 mg 500 count
Address: 615 North First Street
City, State, Zip: Pulaski TN 38478
Key Contact: Debbi Shaw Fax: 931-292-6229
Phone Number: 931-292-6222 Ext: 2110
Phone Number: 931-908-2194 Ext:
Is the Product? ☒ Direct Ship Item ☒ Drop Ship Item
Is the Product a Controlled Drug? ☐ Yes ☒ No
If Yes, Schedule Number:
Is this ARCOS reportable? ☐ Yes ☒ No
Is this Product a Legend Device? ☐ Yes ☒ No
Country of Origin: USA
Harmonization Code Number for International Shipping:
Is this product a Hazardous Material or Cytotoxic Agent?
☐ Yes ☒ No If yes, provide additional information on page 2.
Attach copy of Material Safety Data Sheet (MSDS)
Attach Package Insert

SPECIAL HANDLING AND STORAGE REQUIREMENTS

a. Temperature – Indicate the normal temperature range for this product.

I.	Controlled Room Temperature (68° – 77° F)	☒
II.	Room Temperature (59° – 86° F)	☐
III.	Excessive Heat (>104° F)	☐
IV.	Cool (46° – 59° F)	☐
V.	Refrigerated (36° – 46° F)	☐
VI.	Frozen (-4° – 14° F)	☐
VII.	No Requirement	☐

b. Are temperature excursions permitted/allowed for product? ☐ Yes ☒ No
If Yes, provide the temperature range and hours duration:
_____ and _____

c. Are there additional storage and shipping requirements? ☐ Yes ☒ No
If yes, please provide on page 2.

ADDITIONAL PRODUCT INFORMATION

Is there a minimum order quantity?
If yes, ☐ Case ☐ Carton ☐ Item
Number of Pieces? _____
Shelf Life: _____ Months
Whsl. Code #:
Fineline Code:
Is Item? ☐ Unit Dose ☐ Unit of Use
If Unit Dose, is item bar coded to unit dose for Hospital tracking purposes?
☐ Yes ☐ No
Will handling data change in the first:
6 months? ☐ Yes
9 months? ☐ Yes
12 months? ☐ Yes
Unknown? ☐ Yes

ITEM AND PACKING INFORMATION

Size/Strength /Form	Unit Of Sale	UPC Code	Mstr. Shpr.	Inner Case Pk	Wght. Lbs.	Cube	Case Dimensions	Item Dimensions	Pallet Dimensions	# Cases/ Pallet
500 ct 100 mg capsule	☒ Bottle ☐ Box ☐ Glass jar ☐ Ampule ☐ Other	Case:	36		Case: 19.8lb		Depth: 18 1/2"	Depth:	Depth:	30
		Carton:			Carton:		Height: 9 7/16"	Height: 5.220"	Height:	
		Item:			Item: 248.5gr		Width: 12 1/8"	Width: 2.895"	Width:	

For Generic Drug Products:
I. Orange Book Rating: AB
II. Product Color: see page 2
III. Brand Name Equivalent: Symmetrel®
IV. Generic Name For Brand: Amantadine®

COST INFORMATION

	Regular Cost ($)		Purchase Allowance ☐ OI ☐ BB $	Purchase Allowance %	Distribution Allowance ☐ OI ☐ BB $	Distribution Allowance %	Invoice Cost ($)	Net Cost ($)	Mfr's AWP	Avg Retl Price ($)	SRP ($)	Excise Tax
DZ												
EA							$911.45		1009.50			
PPK												

This offer is made on a proportionally equal basis to all sellers' accounts completive with customer. Signature: _____

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Item Description: Amantadine HCl 100 mg Capsules 500 ct **Manufacturer:** AvKARE, Inc.

If additional information is necessary, provide on right of page or as attachment.

HAZARDOUS MATERIAL INFORMATION

Is this product:

- a) Cytotoxic? ☐ Yes ☒ No
- b) Carcinogen? ☐ Yes ☒ No
- c) Inhalation Hazard? ☐ Yes ☒ No
- d) Contact Hazard? ☐ Yes ☒ No

Is this item considered a carcinogen? ☐ Yes ☒ No

Is this item an aerosol requiring special storage? ☐ Yes ☒ No

Does this product require special clean-up instructions? ☐ Yes ☒ No

If yes, attach MSDS with special instructions.

Department of Transportation (DOT) I.D. Number: _____

Hazard Class/ORM Code: _____

OSHA/DOT CHEMICAL STORAGE CLASS

Please check appropriate Class(s) for this product.

☐ ORGANIC	☐ ANTINEOPLASTIC
☐ INORGANIC	☐ STEROID/ANDROGEN
☐ CORROSIVE/OXIDIZER	☐ ESSENTIAL CHEMICAL
☐ AEROSOL	☐ PRECURSOR CHEMICAL (Describe below)
☐ AEROSOL CLASS	☐ MAXIMUM QTY LEVEL

Is the product restricted for air shipping?

- ☐ Passenger
- ☐ Cargo
- ☐ Passenger & Cargo

Precursor Chemical:			Size/Strength
Ephedrine	☐ Yes	☒ No	_____
Pseudoephedrine	☐ Yes	☒ No	_____
Phenylpropanolamine	☐ Yes	☒ No	_____

ADDITIONAL STORAGE AND SHIPPING REQUIREMENTS

Is this product to be shipped to customers on ice? ☐ Yes ☒ No

Is this product to be shipped to customers on dry ice? ☐ Yes ☒ No

Does this product require refrigerated truck for transport? ☐ Yes ☒ No

Is this Product State Regulated? ☐ Yes ☒ No

If yes, list states on the right or as an attachment.

Are there special returns requirements? ☐ Yes ☒ No

If yes, provide requirements in the space to the right or as attachment.

ADDITIONAL INFORMATION AS NECESSARY

yellow, soft gelatin capsules. Each capsule is imprinted with "A1" in black ink

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