	Ctandard	Droduct	Information
TUIVIA	Stantuaru	Product	mnormanon

**Pharmace** 

eutical Products	New Item	☐ Promotion/Deal	☐ Open Stock	☐ Post Launch Chang
		Dato:	11/20/14	Page 1 of

PRODUCT INFORMATION			SPECIAL HANDLING AND STORAGE REQUIREMENTS										
Manufacturer/Broker Name: AvKARE, Inc. Number:					a. Temperature – Indicate the normal temperature range for this product.								
Product Name: Cephalexin 500mg Unit Dose 5x10 Capsule				I. Controlled Room Temperature (68° − 77° F)									
Product ID Number:								•	•	,	_	_	
	UPC/G	TIN #				II. Koon	n rempera	ature (59° –	86° F)				
Description: Cephalexin 500mg Unit Do	se 5x10 Capsul	e				III. Excessive Heat (>104° F)						]	
Address: 615 North First Street					l	IV. Cool (46° – 59° F)						]	
City, State, Zip: Pulaski TN 38478						V. Refrigerated (36° – 46° F)						]	
Key Contact: Kathy Mitchell Fax: 931-292-6229			VI. Frozen (-4° – 14° F)										
Phone Number: <u>931-292-6222</u>							•	•				_	
Phone Number: 931-908-0013					\ \ \	/II. No R	equireme	nt				J	
Is the Product?		hip Item			b. Are temperature excursions permitted/allowed for product?   Yes							⊠ No	
Is the Product a Controlled Drug?	'es ⊠ No				<b>.</b>	_		-		-		05	<u> </u>
If Yes, Schedule Number:	/ M N -					If Yes	•	-	ture range a		uration:		
Is this ARCOS reportable?						-		a	ind		_		
Is this Product a Legend Device? ☐ Yes ☐ No  Country of Origin: India				c. Are there additional storage and shipping requirements? ☐ Yes ☒ No							⊠ No		
Harmonization Code Number for Interna	tional Shipping	<u> </u>			If yes, please provide on page 2.								
Is this product a Hazardous Material or	Cytotoxic Agent	:?											
☐ Yes   ⊠ No  If yes, p	rovide addition	al information	on page 2.										
<b>Attach copy of Material Safety Data Si</b>	neet (MSDS)												
Attach Package Insert													
ADDITIONAL PRODUCT INFORMATION					ITEM	AND PAG	CKING IN	FORMATIO	N				
Is there a minimum order quantity?	Size/Strength /Form	Unit Of Sale	UPC Code	Ms Sh		Inner Case Pk	Wght. Lbs.	Cube	Case Dimensions	Item Dimens		Pallet mensions	# Cases/ Pallet
If yes, ⊠ Case ☐ Carton ☐ Item	5 x 10 UD	□ Bottle	Case:	500	•	10 box	Case:		Depth:	Depth:		epth:	333333
Number of Pieces? 1	500mg	⊠ Box			- 1	per	5.0		9.50"	2.00"			
Shelf Life:Months	Сар	☐ Glass jar	Carton:		(	case	Carton:	1 1	Height:	Height:	Н	eight:	
Whsl. Code #:		☐ Ampule				5 cards			4.50"	4.25"			
Fineline Code:		☐ Other	Item:			per	Item:		Width:	Width:	W	idth:	
Is Item? ⊠ Unit Dose ☐ Unit of Use	For Generic F	rua Products	-   Orango	Book P		DOX AB	.50		6.50"	3.25"	0 0200 2		
If Unit Dose, is item bar coded to unit	For Generic Drug Products: I. Orange Book Rating: AB II. Product Color: See page 2  nit III. Brand Name Equivalent: Keflex® IV. Generic Name For Brand: Cephalexin												
dose for Hospital tracking purposes?													
☐ Yes ☐ No	Purchase Allowance Distribution Allowance Invoice Net Mfr's Avg Retl SRP Excise												
Will handling data change in the first:	Regular		☐ OI ☐ BB			□ OI □ BB		Cost (\$)	Cost (\$)	AWP	Price (\$)		Tax
6 months?	Cost	(\$)	\$	%	\$		%					1	
9 months?	DZ							¢04.05		¢c4.40		1	
12 months?	EA							\$24.65		\$61.12		1	
Unknown? 🔲 Yes	PPK												

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



Manufacturer: AvKARE, Inc. **Item Description:** Cephalexin 500mg Unit Dose 5x10 Capsule If additional information is necessary, provide on right of page or as attachment. **HAZARDOUS MATERIAL INFORMATION ADDITIONAL INFORMATION AS NECESSARY** Is this product: ⊠ No a) Cytotoxic? ☐ Yes b) Carcinogen? ☐ Yes ⊠ No ☐ Yes ⊠ No c) Inhalation Hazard? d) Contact Hazard? ☐ Yes ⊠ No Is this item considered a carcinogen? ☐ Yes 🖾 No ⊠ No Is this item an aerosol requiring special storage? ☐ Yes 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 White to off white powder filled into size 0 capsule (light green cap and light green body) ☐ AEROSOL ☐ PRECURSOR CHEMICAL (Describe below) that are imprinted with "219" on both the cap and body in edible black ink. ☐ AEROSOL CLASS ■ MAXIMUM QTY LEVEL Is the product restricted for air shipping? Passenger ☐ Cargo ☐ Passenger & Cargo **Precursor Chemical:** Size/Strength **Ephedrine** ☐ Yes ⊠ No ⊠ No ☐ Yes **Pseudoephedrine** ⊠ No Phenylpropanolamine ☐ Yes ADDITIONAL STORAGE AND SHIPPING REQUIREMENTS ☐ Yes Is this product to be shipped to customers on ice? ⊠ No ☐ Yes ⊠ No Is this product to be shipped to customers on dry ice? 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. ☐ Yes ⊠ No



Are there special returns requirements?

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