

HMA WGEO – Rapid Alert Form

Counterfeit or illegal product found in the illegal supply chain

Shaded area to be completed by the secretariat

Reference: No:2		
Date: 2/08/2017.	Time: 16.30	Initials: GP
Please complete sections 1 to 5 providing as much information as possible.		
1. REPORTING PERSON		
Name:	Position:	
Organisation:		
Address:		
Telephone	Ext:	
e-mail address:		
2. PRODUCT DETAILS		
Product name: Amizol 10mg, 100x10mg		
Manufacturer: Label LEK, Ljubljana, Slovenia		
Supplier: illegal supple chain		
Legal status: Banned <input type="checkbox"/> Counterfeit X Unlicensed <input type="checkbox"/> Stolen <input type="checkbox"/>		
Dosage form: film tbl.		
Strength: 10mg		
Batch / lot no: GN8626	Is batch number genuine: Yes <input type="checkbox"/> No X	
If yes to the above, advise batch destination country:		
Expiry date: 01.2021.		
Language of packaging: English		
Date of discovery: 15/07/2017.		
Details of discovery: Police inspectors confiscated from street sale in the illegal trade.		
Analysed: YES X NO <input type="checkbox"/>		
If yes, result of analysis: Manufacturer send information from this batch do not produce in manufacturer object.		
3. DISTRUBUTION METHOD		
Internet: YES / NO X		

Internet.	Non internet, advise full details: Seized in the street sale.
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	
If yes, please advise details:	
Medical assessment details:	
5. NEED FOR PUBLICITY	
Are you making a public statement? YES X / NO <input type="checkbox"/>	
Are you issuing a press release? YES X / NO <input type="checkbox"/>	
Are you recalling product? YES X / NO <input type="checkbox"/>	
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 / 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 X Industry Security X Trade Associations X Traders X Other <input type="checkbox"/> Please specify _____	
7. PHOTOGRAPH	
If possible, please attach a photograph of the product.	

