**\*\*URGENT\*\***

 ***Drug Recall***

1825 NW Vivion Road May 3, 2021

## Riverside MO 64150

Dear Valued Customer:

**URGENT: NP Thyroid Tablets**

***\*\*\*RETURN THIS LETTER, WHETHER OR NOT YOU HAVE ANY AFFECTED PRODUCT ON HAND\*\*\****

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Description** | **NDC** | **LOT NUMBER** | **YES, I have product to return to Qualanex** | **NO, I do not have product to return to Qualanex** |
| Thyroid 15mg (1/4G) Tab 100ea | 42192032701 | See attached list |   |  |
| Thyroid 120mg (2G) Tab 100ea  | 42192032801 | See attached list |  |  |
| Thyroid 30mg (1/2G) Tab 100ea | 42192032901 | See attached list |  |  |
| Thyroid 60mg (1G) Tab 100ea  | 42192033001 | See attached list |  |  |
| Thyroid 90mg (1 1/2G) Tab 100ea  | 42192033101 | See attached list |  |  |

Acella Pharmaceuticals, LLC is voluntarily recalling thirty-five (35) lots of NP Thyroid Tablets. Acella initiated this recall because testing has found these lots to be sub potent. The product contains less than 90% of the labeled amount of Levothyroxine (T4) or Liothyronine (T3).

This recall is being conducted with the knowledge of the Food and Drug Administration and extends to the **Consumer Level**. Please examine your inventory and quarantine all affected lots, as well as notify patients who have received these lots. Pharmacies and patients should contact Qualanex at 888-424-4341 to receive a return kit.

If you purchased this product from the PBA Health Distribution Center, please fill in the quantity you have to return to Inmar and sign below. ***Please be sure to clearly indicate your Customer ID or NCPDP to avoid multiple notifications.*** The signed letter may be faxed to your PBA Health Customer Service Representative at

1-877-535-3803 or emailed to customerservice@pbahealth.com.

Pharmacy Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Account #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sincerely,

*The Recall Team at PBA HEALTH*