

October 20, 2021

MANUFACTURED BY:

Lupin Limited Pithampur (M.P.) 454 775 India

MANUFACTURED FOR:

Lupin Pharmaceuticals, Inc. Baltimore, MD 21202 United States RECEIVED RA&QA

OCT 2 0 2021

BY: SM 10-20-2021

Dear Healthcare Partner,

URGENT: DRUG RECALL - RETAIL LEVEL

Gatifloxacin Ophthalmic Solution, 0.5%

Lupin Pharmaceuticals, Inc. is voluntarily recalling lot **H002512** Expiry **March 2022** of Gatifloxacin Ophthalmic Solution, 0.5% to **retail** level. Out of an abundance of caution, this product lot is being recalled due to an out of specification result observed in a water loss test at the 9-month long term stability time point.

Increased water loss value might affect the assay content, evaporation of water from this liquid preparation may alter drug concentration.

The recalled lot was distributed between December 22, 2020 and March 1, 2021 to wholesalers, distributors, and super markets (food) nationwide.

Immediately examine your inventory and quarantine the product lot subject to recall. Wholesalers and distributors should forward this notification to retailers. Wholesalers and distributors who have the affected product lot in their inventory should contact Inmar Rx Solutions, Inc. at (855) 824-9449 Monday — Friday 9:00 am to 5:00 pm EST. For reimbursement, please have the recalled lot returned to Inmar Rx Solutions, Inc. on or before January 31, 2022. The lot number can be found on the side of the bottle.

Gatifloxacin Ophthalmic Solution, 0.5% is supplied as:

Strength	NDC's	Pack	Description
0.5%	68180-435-01	2.5mL	Gatifloxacin Ophthalmic Solution, 0.5% is yellow (pale yellow) sterile solution in a 5 mL white, low-density polyethylene (LDPE) bottle fitted with a white low-density polyethylene (LDPE) nozzle and sealed with a tan colored high-density polyethylene (HDPE) cap.

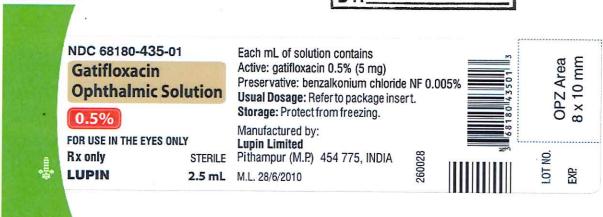


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Product label:



This recall should be carried out to the retail level.

A COMPLETE PACKAGE OF INFORMATION INCLUDING A REPLY FORM WILL BE MAILED WITHIN (5) BUSINESS DAYS. THE REPLY FORMS SHOULD BE RETURNED TO INMAR THROUGH MAIL/EMAIL/FAX. ONCE RECEIVED AN RA AND NEEDED BOX LABELS WILL BE PROVIDED.

Upon receipt of this packet, please take the following actions:

- 1. **Distributors/Pharmacies** Immediately examine your inventory, quarantine and discontinue distribution of above lot.
- 2. **Distributors** Complete the enclosed Business Response Form (BRF) even if you do not have any product on hand.
- 3. Distributors Please pass this Recall Notice ONLY to pharmacies that received recalled product lot.
- 4. **Pharmacies** If you have units of the affected product/lot in inventory, please contact Inmar Pharmaceuticals Services at (855) 824-9449 to receive a Business Recall Response form or acquire it from clanetlink.com.
- 5. Business Recall Response Form (BRF) can be submitted by any of these methods.

Fax: 817-868-5362

Email: rxrecalls@inmar.com

Address: Inmar, Attn: Recall Coordinator - 635 Vine St, Winston Salem, NC 27101

6. **Distributors/Pharmacies** – Return recalled product to Inmar Pharmaceuticals Services as instructed in recall/return packet.

Upon receipt of the completed BRF, a return kit will be sent including an RA form and necessary box labels.

We appreciate your immediate attention to this matter. This recall is being made with the knowledge of the U.S. Food and Drug Administration.



Sincerely,

Anurag Mishra Digitally signed by Anurag Mishra Date: 2021.10.20 13:02:39 -04'00'

Anurag Mishra

Associate Director, Quality