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| **Recall Report** |

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| **Product Information:** |
| Product name & strength |  |
| MOH registration number |  |
| Affected batch number |  |
| Manufacturer |  |
| Manufacturing date |  |
| Expiry date |  |
| Packaging details (SKU) |  |

**Reason for Recall:**

*Detail about the nature of the issue leading to the recall.*

**Actions taken:**

*List of actions, dates, and details.*

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| **Results of product Recall** |
| Total Quantity |  |
| Overall Recall period (days) |  |
| Not distributed quantity |  |
| Returned quantity |  |
| Not returned quantity |  |
| Returned to supplier |  |
| Disposed by Customers |  |
| Disposed by Grau Pharma GmbH |  |
| **Reconciliation conclusion:**Explained reconciliation between the received, shipped and recovered quantities of the products |
| **Deviations occurred during Recall execution** |
| **Comments:** |

**Document approval**

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|  | **Name** | **Date** | **Signature** |
| **Reviewed and approved by:**All Members shall review and approve this document |  |  |  |
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