



URGENT DRUG RECALL- RETAIL SHELF LEVEL

Myoflex[®], Nupercainal[®] and 4-Way[®] Products

March 7, 2013

Dear Valued Customer,

Novartis Consumer Health, Inc. (NCH) is voluntarily recalling **all lots** of over-the-counter products Myoflex[®], Nupercainal[®] and 4-Way[®] in the United States, which are listed in the attached table. These products are being recalled because the lot number and/or expiration date on the tube or bottle may not be legible in these lots.

These products were shipped to customers between April 28, 2010 – January 17, 2012.

These actions have been communicated to the US Food and Drug Administration.

Recall Instructions

Although the FDA has not yet classified this voluntary recall, NCH, in consultation with the FDA, is treating this as a retail shelf level recall.

Again, this recall pertains only to the UPC and lot numbers of Myoflex[®], Nupercainal[®] and 4-Way[®] products listed in the attached table.

Retailers- Please notify all of your retail stores and instruct them to check the inventory on their store shelves and back rooms and return product to you or through your reclamation center. Once you have consolidated recalled product from your stores and distribution centers, please return to Inmar using the product return information below.

Wholesalers- Please notify any wholesale account who may have received the affected product and instruct them to notify their retail sub-accounts. In addition, please notify your retail sub-accounts and instruct them to check inventory in their warehouse/distribution centers and return product to you or through your reclamation center.

Once you have consolidated recalled product from your sub-accounts and warehouse/distribution centers, please return to Inmar using the product return information provided below.

Direct Customers with No Reclamation Process (excluding sub-accounts serviced by wholesalers) – Once you have consolidated recalled product from your retail store shelves, back rooms and warehouse/distribution centers, please return to Inmar using the product return information below.

Product Return:

All customers, including Rapid Recall subscribers, are requested to complete and return the attached Product Recall Response Form as soon as possible. **Receipt of the form will serve as confirmation that you have received this recall notification. The Product Recall Response Form should either be emailed to BRFResponse@inmar.com or faxed to 888-908-8603. For regulatory reporting purposes, it is important that you return this completed form, even if you do not have product to return.**

When you have collected your inventory, you should call Inmar at 1-800-821-5293 and a “Returns Kit” will be sent to you. You can also request a “Returns Kit” on your Product Recall Response Form. This kit will include:

- Pre-Paid shipping labels & shipping instructions for small quantities (or)
- For large quantities, a toll free number and shipping instructions for pre-paid Fed Ex Intl shipments consigned to Inmar.

In addition to the NCH published list price credit, you will be reimbursed an additional 10% for shipping and handling costs. Only products in the original manufacturer’s packaging are eligible for credit. **This recall applies only to the products indicated in the attached table. This voluntary recall does not affect any other NCH products. Any other products received in the return shipment that are not subject to this limited recall will be destroyed and no credit will be issued.**

NCH takes this issue seriously and is fully committed to ensuring all of our products meet the highest quality standards.

Again if you have any questions, please call your account manager directly. Thank you in advance for your assistance in this matter and for your continued support of NCH products.

Sincerely,



Roger Gravitte
Head of Sales, North America



Product Recall Response Form

Recall of all lots of Myoflex[®], Nupercainal[®] and 4-Way[®] Products

Date: _____

From: *Customer Name:* _____

Mailing Address: _____ *Contact Name:* - _____

_____ *Tel Number:* _____

Please check all that apply:

We have read and understand the recall instructions provided in the March 7, 2013 Recall Notice for Myoflex[®], Nupercainal[®] and 4-Way[®] SKUs

We have none of the recalled product in-stock.

We have the recalled product in- stock, and have placed it on hold: **Please see the attachment for all affected SKUs. Please indicate on the attachment the quantity of returned products.**

For those customers that have further shipped any of the recalled products:

We have notified our consignees to advise them about this recall and included a copy of the Recall Notice.

Product Return: We would like a Returns Kit containing pre-paid shipping labels to return product directly to Inmar. We will need _____ shipping labels.

PLEASE EMAIL OR FAX COMPLETED PRODUCT RECALL RESPONSE FORM TO:
INMAR Fax - # 1-888-908-8603; Email – BRFResponse@inmar.com Questions: 1-800-821-5293