



January 2022



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GENERIC PRODUCT	BRAND EQUIVALENT	THERAPY DESCRIPTION	PAGE
Clomipramine HCl Capsules	Anafranil®	Anti-depressant	4
Cyclobenzaprine HCl Tablets	Flexeril®	Analgesic muscle relaxant	4
Losartan Tablets	Cozaar®	Antihypertensive	4
Losartan HCTZ Tablets	Hyzaar®	Antihypertensive	5
Meclizine HCl Tablets	Antivert®	Antihistamine, antiemetic	5
Methylprednisolone Tablets	Medrol®	Corticosteroid	5
Olanzapine ODT	Zyprexa Zydis®	Anti-psychotic	5
Predniso <mark>ne</mark> Tablets	Deltasone <sup>®</sup>	Corticosteroid	6
Prochlorperazine Maleate Tablets	Compazine <sup>®</sup>	Anti-psychotic	6
Risperidone ODT	Risperdal <sup>®</sup>	Anti-psychotic	6
Spironolactone Tablets	Aldactone <sup>®</sup>	Antihypertensive	6
Terazosin HCl Capsules	Hytrin®	Benign Prostatic Hypertrophy	7
Valsartan Tablets	Di <mark>ovan</mark> ®	Antihypertensive	7

NDC	STRENGTH	SIZE	CASE QTY	DESCRIPTION / IMPRINT	
Clomipramine H	CI Capsules			AB rated to Anafranil®	
59746-0710-30	25mg	30	24	White/Yellow opaque, size 2 hard gelatin capsules- 'C710'	
59746-0710-90	25mg	90	24	writter remow opaque, size 2 mard geratificapsules- C710	2 1
59746-0711-30	50mg	30	24		
	•			White opaque, size 1 hard gelatin capsules- 'C711'	0 111
59746-0711-90	50mg	90	24		
59746-0712-30	75mg	30	24	Light Valley, are two size 1 hand coletin as review (C712)	C C
59746-0712-90	75mg	90	24	Light Yellow opaque, size 1 hard gelatin capsules- 'C712'	
Cyclobenzaprine	= 10	400	40	AB rated to Flexeril®	
59746-0211-06	5mg	100	48	Orange, round, film coated tablet- 'TL 211'	
59746-0211-10	5mg	1000	12		
59746-0735-01	7.5mg	100	48	White, round, film coated tablet- 'C 735'	735
59746-0177-06	10mg	100	48		
59746-0177-10	10mg	1000	12	Yellow, round, film coated tablet- 'TL 177'	
Losartan Tablets	(8)			AB rated to Cozaar®	
59746-0333-90	25mg	90	24	Green, oval, film coated tablet- 'C' / '333'	6 333
59746-0333-10	25mg	1000	12		
59746-0334-30	50mg	30	48		
59746-0334-90	50mg	90	48	Green, oval, film coated scored tablet- 'C' / '334'	324
59746-0334-10	50mg	1000	12		
59746-0335-30	100mg	30	48		
59746-0335-90	100mg	90	48	Green, oval, film coated tablet- 'C' / '335'	G (335)
59746-0335-10	100mg	1000	12		
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			CASE		
NDC	STRENGTH	SIZE	QTY	DESCRIPTION / IMPRINT	
Losartan HCTZ T	ablets			AB rated to Hyzaar®	
59746-0337-30	50-12.5mg	30	24		
59746-0337-90	50-12.5mg	90	24	Yellow, oval, film coated tablet- 'C'/'337'	C 337)
59746-0337-10	50-12.5mg	1000	12		
59746-0338-30	100-12.5mg	30	24		
59746-0338-90	100-12.5mg	90	24	White, oval, film coated tablet- 'C'/'338'	G 335
59746-0338-10	100-12.5mg	1000	12		
59746-0339-30	100-25mg	30	48		
59746-0339-90	100-25mg	90	24	Yellow, oval, film coated tablet- 'C'/'339'	G 339
59746-0339-10	100-25mg	1000	12		
					) /
Meclizine HCl Ta	ablets	200		AA rated to Antivert®	
59746-0122-06	12.5mg	100	24	Blue, oval tablet- 'TL 122'	
59746-0122-10	12.5mg	1000	12	blue, Oval tablet- 11 122	The state of the s
59746-0121-06	25mg	100	48	Vellow eval tablet 'TI 121'	
59746-0121-10	25mg	1000	12	Yellow, oval tablet- 'TL 121'	
Methylpredniso	lone Tablets		1	AB rated to Medrol®	
59746-0001-03	4mg	21	72	White, oval tablet- 'TL 001'	(19)
59746-0001-06	4mg	100	24	Wille, Oval tablet- 12 001	
59746-0002-04	8mg	25	24	White, oval tablet- 'TL 002'	
59746-0003-14	16mg	50	24	White, oval tablet- 'TL 003'	(640)
59746-0015-04	32mg	25	24	White, oval tablet- 'TL 015'	
Olanzapine ODT	7			AB rated to Zyprexa Zydis®	
59746-0306-32	5mg	30	48	Yellow, round, flat faced tablet- 'D5'/'CO'	05 00
59746-0307-32	10mg	30	48	Yellow, round, flat faced tablet- 'D10'/'CO'	D10 CO
59746-0308-32	15mg	30	48	Yellow, round, flat faced tablet- 'D15'/'CO'	0.15
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59746-0309-32	20mg	30	48	Yellow, round, flat faced tablet- 'D20'/'CO'	020 00
	-				

NDC	STRENGTH	SIZE	CASE	DESCRIPTION / IMPRINT			
			QTY				4
Prednisone Table				AB rated to Deltasone®			-
59746-0171-06	1mg	100	48	White, round tablet- 'TL 171'	499		
59746-0171-10	1mg	1000	48				
59746-0172-06	5mg	100	48				
59746-0172-10	5mg	1000	48	White, round tablet- 'TL 172'	(172)		
59746-0173-06	10mg	100	48				
59746-0173-10	10mg	1000	12	White, round tablet- 'TL 173'			
337 10 0173 10	106	1000			The second secon		
59746-0175-06	20mg	100	48	Peach, round tablet- 'TL 175'			
59746-0175-09	20mg	500	12		175		
Prochlorperazine	Malaata Tabl	lots		AB rated to Compazine®			
	GO OR SE		40	the state of the s			1
59746-0113-06	5mg	100	48	Chartreuse, round, film coated tablet- 'TL 113'	(13)		
59746-0115-06	10mg	100	48	Chartreuse, round, film coated tablet- 'TL 115'	115		
Diamanidana ODT				AD noted to Discondate			
Risperidone ODT	186	20	40	AB rated to Risperdal®			-
59746-0010-32	0.5mg	30	48	Yellow, mottled, round, flat face beveled tablet- 'C' / '01'	C	01)	
59746-0020-22	1mg	28	48	White, mottled, round, flat faced beveled tablet- 'C' / '02'	C	02	
59746-0030-22	2mg	28	48	Blue, mottled, round, flat faced beveled tablet- 'C' / '03'	C	03)	
59746-0040-22	3mg	28	48	Orange, mottled, round, flat faced beveled tablet- 'C' / '04'	C	04	
	0	_3	. •	5,, <u></u> ,			F
59746-0050-22	4mg	28	48	Pink, mottled, round, flat face beveled tablet- 'C' / '05'	C	05	
Spironolactone T	ablets			AB rated to Aldactone®			
59746-0216-01	25mg	100	48		TH		1
59746-0216-05	25mg	500	48	Brown, round, biconvex, film coated tablet- 'TL216'	215		
					717		
59746-0217-01	50mg	100	48	Brown, round, biconvex, film coated tablet- 'TL217'			
59746-0218-01	100mg	100	48	Brown, round, biconvex, film coated tablet- 'TL218'	7L 218		
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NDC	STRENGTH	SIZE	CASE QTY	DESCRIPTION / IMPRINT
Terazosin HCl Capsules				AB rated to Hytrin®
59746-0383-06	1mg	100	24	Iron gray anagua siza 2 cansula ITI 2021
59746-0383-10	1mg	1000	12	Iron gray opaque, size 3 capsule- 'TL 383'
	_			
59746-0384-06	2mg	100	24	Ivory opaque, size 3 capsule- 'TL 384'
59746-0384-10	2mg	1000	12	The y opaque, size a capsule 12 so .
59746-0385-06	5mg	100	24	
59746-0385-10	5mg	1000	12	Orange opaque, size 3 capsule- 'TL 385'
39740-0383-10	Silig	1000	12	
59746-0386-06	10mg	100	24	Light green opaque, size 3 capsule- 'TL 386'
59746-0386-10	10mg	1000	12	Light green opaque, size 3 capsule- 12 300
Valsartan Tablets				AB rated to Diovan®
59746-0360-30	40mg	30	48	Yellow, capsule shaped, biconvex, film coated tablet- 'C'/'I'
59746-0361-90	80mg	90	48	Peach, round, biconvex, film coated tablet- 'C3'/'C'
33,40 0301 30	001118	30	-10	Cost, round, stocker, fill could take to ye
59746-0362-90	160mg	90	48	Yellow, oval shaped, biconvex, film coated tablet- 'C4'/'C'
59746-0363-90	320mg	90	24	Yellow, oval shaped, biconvex, film coated tablet- 'C5'/'C'



#### **GENERAL GUIDELINES:**

Jubilant Cadista Pharmaceuticals will only accept returns from parties purchasing product directly from Jubilant Cadista or through an authorized distributor of record for purposes of resale in the normal course and/or dispensing to the general public. To the extent that this policy conflicts with the requirements of any applicable state law, the policy will parallel the applicable state law. Jubilant Cadista requires that the account indicate from which authorized distributor the product was purchased. Jubilant Cadista further reserves the right to request proof of purchase in the form of an invoice that identifies the name of the supplier, which is (or was at the time of purchase) an authorized distributor of record, quantity and date of purchase. Returned product that does not meet these requirements will be destroyed and no credit will be extended. Upon receipt of RA, please send all eligible returns to Inmar at the following address:

Inmar RX Solutions, Inc. 3845 Grand Lakes Way, Suite 125 Grand Prairie, Texas 75050 Phone: 800-967-5952

#### WAYS TO REQUEST A RETURN AUTHORIZATION:

- 1. The most efficient way to obtain your return label and track the progress of the return is by visiting Inmar's RA website at: https://clsnetlink.com (You will be required to upload a debit memo in PDF format).
- 2. E-mail debit memo to rarequest@inmar.com
- 3. Fax debit memo to 817-868-5343.

#### **RETURNS VALUATION:**

Returns will be valued and credited at the lower of the current or most recent net purchase price, a standard market price where contract doesn't exist (non-direct customers), or the actual direct invoice price paid for the product, less any promotions or discounts. Product sold to any government stockpile program will not be accepted for return.

### **RETURNABLE PRODUCT FOR CREDIT:**

Expired product with no more than twelve (12) months past expiration and no more than six (6) months shelf life remaining.

#### **NON-RETURNABLE PRODUCT:**

- Product that has more than six (6) months remaining on its expiration date, or more than twelve (12) months past expiration date.
- Unauthorized returns.
- o Product obtained illegally or sold as short-dated, close-out, special promotion and/or sold as non-returnable.
- Product not purchased directly from Jubilant Cadista Pharmaceuticals Inc., or an authorized distributor of record. No third-party returns will be allowed
- Product shall be ineligible for return when the intent of the customer is to temporarily reduce inventory. Credit may be reduced or refused when inadequate inventory controls cause excessive product returns.
- o Product with label defaced, covered, removed or unreadable.
- o Products with lot number or expiration date missing, covered, removed or unreadable.
- o Product damaged at the customer's warehouse or store level.
- $\circ\quad$  Repackaged products or product not in its original containers.
- o Product purchased for the purpose of stockpiling for speculative means.
- o Inmar will not accept returns of product shipped or ordered in error or concealed damage claims. Please contact Jubilant Cadista Pharmaceuticals directly at 800-313-4623 (within 10 days of receipt) to obtain authorizations/instructions on how to return.

JUBILANT CADISTA PHARMACEUTICALS INC. IS NOT RESPONSIBLE FOR TRANSPORTATION CHARGES OR ADDITIONAL FEES FROM ITS CUSTOMER'S 3RD-PARTY RETURNS PROCESSOR.

<u>Disclaimer</u>: These policies are subject to applicable state and/or other regulatory agency's regulations.



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Please contact our Medical Communications team, at 1-800-308-3985, to obtain the most up-to-date product information available.