



August 2024



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| GENERIC PRODUCT                      | BRAND<br>EQUIVALENT | THERAPY DESCRIPTION          | PAGE |
|--------------------------------------|---------------------|------------------------------|------|
| Carbamazepine ER Tablets             | Tegretol XR®        | Anticonvulsant               | 4    |
| Cyclobenzaprine HCI Tablets          | Flexeril®           | Analgesic muscle relaxant    | 4    |
| Escitalopram Tablets                 | Lexapro®            | Antidepressant               | 4    |
| Losartan Tablets                     | Cozaar®             | Antihypertensive             | 4    |
| Methenamine Hippurate Tablets        | Hiprex <sup>®</sup> | Antibiotic                   | 4    |
| Methylprednisolone Tablets           | Medrol®             | Corticosteroid               | 5    |
| Nitrofurantoin (Mono/Macro) Capsules | Macrobid®           | Antibiotic                   | 5    |
| Prochlorperazine Maleate Tablets     | Compazine®          | Antipsychotic                | 5    |
| Risperidone ODT                      | Risperdal®          | Antipsychotic                | 5    |
| Terazosin HCl Capsules               | Hytrin <sup>®</sup> | Benign Prostatic Hypertrophy | 6    |

| NDC             | STRENGTH      | SIZE  | CASE | DESCRIPTION / IMPRINT   |     |      |
|-----------------|---------------|-------|------|---|-----|------|
|                 |               |       | QTY  |   |     |      |
| Carbamazepine   | e ER Tablets  |       |      | AB rated to Tegretol XR®  |     |      |
| 59746-0789-01   | 100mg         | 100   | 24   | Peach colored, round shaped, biconvex film coated tablets with 'CR 100' debossed on one side and plain on the other side.   | 66  | 0    |
| 59746-0790-01   | 200mg         | 100   | 24   | Peach colored, round shaped, biconvex film coated tablets with 'CR 200' debossed on one side and plain on the other side.   | R   |      |
| 59746-0791-01   | 400mg         | 100   | 24   | Peach colored, round shaped, biconvex film coated tablets with 'CR 400' debossed on one side and plain on the other side.   | CR  |      |
| Cyclobenzaprin  | e HCl Tablets |       |      | AB rated to Flexeril®   |     |      |
| 59746-0735-01   | 7.5mg         | 100   | 48   | White, round, film coated tablets, debossed with "C 735"  |     |      |
| 55740-0755-01   | 7.3mg         | 100   | 40   | on one side and plain on the other side.  | 125 | -    |
| 59746-0177-06   | 10mg          | 100   | 48   | Yellow, round, film coated tablet debossed "TL 177" on  | TI. |      |
| 59746-0177-10   | 10mg          | 1000  | 12   | one side and plain on other side.   |     |      |
|                 |               |       |      |   |     |      |
|                 |               |       |      |   |     |      |
| Escitalopram Ta | ablets        |       |      | AB rated to Lexapro <sup>®</sup>  |     |      |
| 59746-0279-10   | 5mg           | 1000  | 12   | White, round, biconvex, film-coated tablets, debossed   |     |      |
| 33740 0273 10   | 5116          | 1000  | 12   | with 'B2' on one side and 'C ' on the other.  | B 2 |      |
|                 |               |       |      |   |     |      |
| 59746-0280-10   | 10mg          | 1000  | 12   | White, oval, biconvex, film-coated tablets with score line<br>on one side, debossed with 'B' left of score line, '3" right<br>of score line, and 'C' on the other side. | BB  |      |
| 59746-0281-10   | 20mg          | 1000  | 12   | White, oval, biconvex, film-coated tablets with score line<br>on one side, debossed with 'B4' left of score line, with 'C'<br>on right side of score line.              | 000 |      |
|                 |               |       |      |   |     |      |
| Losartan Potas  | sium Tablets  |       |      | AB rated to Cozaar®   |     |      |
| 59746-0333-90   | 25mg          | 90    | 24   | Green, oval, film coated tablet debossed with "C" on one  | G   | 223  |
| 59746-0333-10   | 25mg          | 1000  | 12   | side and "333" on other side.   |     |      |
| 59746-0334-30   | 50mg          | 30    | 48   | Green, oval, film coated tablet debossed with "C" and   | E   | 224  |
| 59746-0334-90   | 50mg          | 90    | 48   | scored on one side and "334" on other side.   | -   | 204  |
| 59746-0334-10   | 50mg          | 1000  | 12   |   |     |      |
|                 | 5             |       |      |   |     |      |
| 59746-0335-30   | 100mg         | 30    | 48   | Green, oval, film coated tablet debossed with "C" on one  | G   | 335  |
| 59746-0335-90   | 100mg         | 90    | 48   | side and "335" on other side.   |     |      |
| 59746-0335-10   | 100mg         | 1000  | 12   |   |     |      |
| Methenamine     | Hippurate Tal | olets |      | AB rated Hiprex®  |     |      |
| 59746-0797-01   | 1gm           | 100   | 60   | White to off white capsule shaped tablet, debossed with   | 6   | EG   |
| 55740 5757 51   | -9            | 100   | 50   | "I" and "59" on one side and break line (functional) on the<br>other side   |     |      |
|                 |               |       |      |   |     | 0004 |

PRODUCTS

| NDC            | STRENGTH      | SIZE   | CASE<br>QTY | DESCRIPTION / IMPRINT  |       |            |
|----------------|---------------|--------|-------------|--|-------|------------|
| Methylprednis  | olone Tablets | ;      |             | AB rated to Medrol®  |       |            |
| 59746-0001-06  | 4mg           | 100    | 24          | White, oval shaped tablets imprinted with 'TL 001' on one side and quadrisected on the other side.   | (Lao) | Ð          |
| 59746-0002-04  | 8mg           | 25     | 24          | White, oval shaped tablets imprinted with 'TL 002', scored on one side and plain on the other side.  |       | $\bigcirc$ |
| 59746-0003-14  | 16mg          | 50     | 24          | White, oval shaped tablet imprinted with 'TL 003' on one side and quadrisected on the other side.  | (tau) |            |
| 59746-0015-04  | 32mg          | 25     | 24          | White, oval shaped tablet imprinted with 'TL 015' on one side and bisected on the other side.  |       |            |
| Nitrofurantoin | (Mono/Macr    | o) Cap | sules       | AB rated to Macrobid®  |       |            |
| 59746-0762-01  | 100mg         | 100    | 24          | Light yellow to yellow powder blend and yellow colored<br>tablet filled in the hard gelatin capsule shell size '1' with<br>black cap imprinted '100' and yellow colored body<br>imprinted '102'. |       | 102        |
| Prochlorperazi | ne Maleate Ta | ablets |             | AB rated to Compazine®   |       |            |
| 59746-0113-06  | 5mg           | 100    | 48          | Chartreuse, round, film coated tablets imprinted with 'TL<br>113', scored on one side and plain on the other side.   |       |            |
| 59746-0115-06  | 10mg          | 100    | 48          | Chartreuse, round, film coated tablets imprinted with 'TL<br>115', scored on one side and plain on the other side.   | e     |            |
| Risperidone OI | от            |        |             | AB rated to Risperidal®  |       |            |
| 59746-0010-32  | 0.5mg         | 30     | 48          | Yellow colored, mottled, round, flat face beveled edged tablets, debossed with 'C' on one side and '01' on the other with peppermint flavor.   | C     | 01         |
| 59746-0020-22  | 1mg           | 28     | 48          | White colored, mottled, round, flat face beveled edged tablets, debossed with 'C' on one side and '02' on the other with peppermint flavor.  | C     | 02         |
| 59746-0030-22  | 2mg           | 28     | 48          | Blue colored, mottled, round, flat face beveled edged tablets, debossed with 'C' on one side and '03' on the other with peppermint flavor.   | C     | 03         |
| 59746-0040-22  | 3mg           | 28     | 48          | Orange colored, mottled, round, flat face beveled edged tablets, debossed with 'C' on one side and '04' on the other with peppermint flavor.   | C     | 04         |
| 59746-0050-22  | 4mg           | 28     | 48          | Pink colored, mottled, round, flat face beveled edged tablets, debossed with 'C' on one side and '05' on the   | C     | 05         |

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| NDC                            | STRENGTH     | SIZE        | CASE<br>QTY | DESCRIPTION / IMPRINT   |          |
|--------------------------------|--------------|-------------|-------------|---|----------|
| Terazosin HCl C                | Capsule      |             |             | AB rated to Hytrin®   |          |
| 59746-0383-06<br>59746-0383-10 | 1mg<br>1mg   | 100<br>1000 | 24<br>12    | Iron gray opaque, size 3 capsules, printed "TL 383" in black ink on body and cap.   | The The  |
| 59746-0384-06<br>59746-0384-10 | 2mg<br>2mg   | 100<br>1000 | 24<br>12    | Ivory opaque, size 3 capsules, printed "TL 384" in black ink on body and cap.       | The The  |
| 59746-0385-06<br>59746-0385-10 | 5mg<br>5mg   | 100<br>1000 | 24<br>12    | Orange opaque, size 3 capsules, printed "TL 385" in black ink on body and cap.      | <u> </u> |
| 59746-0386-06<br>59746-0386-10 | 10mg<br>10mg | 100<br>1000 | 24<br>12    | Light green opaque, size 3 capsules, printed "TL 386" in black ink on body and cap. |          |





#### **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.
- 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.
- Product with label defaced, covered, removed or unreadable.
- Products with lot number or expiration date missing, covered, removed or unreadable.
- Product damaged at the customer's warehouse or store level.
- Repackaged products or product not in its original containers.
- Product purchased for the purpose of stockpiling for speculative means.
- 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.

Disclaimer: 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.*