

Office use only

Complementary and OTC Medicines Branch (COMB)

Note for file

Purpose

This form should be:

- used to record details of the evaluation conducted during the review process of Listed medicines
- used as part of a decision making process; and
- completed electronically and saved to the relevant file in TRIM.

Type of event	Evaluation record
Topic	s22
s22	

Key points

Q1. Medicine name, AUST L and sponsor name	s22	
Q2. Did the sponsor respond to the RFI \$22	Yes	
Q3. Details of information provided	Describe the type of information that was provided, e.g. chemical data, risk assessment, etc.	
Q4. Evaluation	Describe your evaluation process, considerations, deficiencies found, etc.	
Q5. Do the labels provided include the three required warning statements?	Yes	

Q6. Is there any mitigating reasons provided why a recall would not be necessary?	Yes	
Q7. Does the medicine have other evident safety-related issues that are not related to the fennel related warnings?	No Session Ses	Legislative contravention
s22	s22	
Q9 s22 , please select the compliance breaches found in this product.	to be used 26A(2)(cb) – [C005] – The manufacture comply with the listing requirements fo paragraph 26BB(1)(B) CATEGORY – OTHER	e is not safe for the purposes for which it is ded medicine contains ingredients that do not or those ingredient(s) specified under adde a statement in, or in connection with, the that was false or misleading that mot eligible for listing the contact of the c
Q10. Follow-up action	Describe what action was taken, spons links	sor's response and include relevant TRIM
Q11. Final Decision	s22	

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Author details (include contact details and date note prepared)
Delegate details (include details when satisfied with the assessment above)

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