Form TS6

Department of Community Services and Health

File Number EU1

PERMIT TO IMPORT

THERAPEUTIC SUBSTANCE(S) UNDER REGULATION 5A OF THE CUSTOMS (PROHIBITED IMPORTS) REGULATIONS

Number 19363 LT

This permit is to be presented to the Collector of Customs at the port of entry

Importer's Name and Address

[redacted]
Medical & Dental Supply Co
Guildford Logistics Battalion
GUILDFORD WA 6055

Permission is granted to the above named to import into Australia the following therapeutic substance(s) under the above stated Regulations (where applicable, the application to import has been subjected to quarantine scrutiny):

Eighty (80) vials Morphine Hydrochloride injection 10mg/mL 10mL manufactured by Dupont UK, supplier Boots, New Zealand.

THIS PERMISSION IS SUBJECT TO THE FOLLOWING REQUIREMENTS OR PROHIBITIONS:

1. This permit is a LIMITED AUTHORITY for the importation of the above stated quantity (ies) ONLY.
2. The importer is required to keep records with respect to the custody, use, disposal or distribution of the above therapeutic substance(s) for a period of three years from the date of importation.
3. For use in combat zone only. Not for general distribution in Australia. As this Dept has not evaluated any data for this product no guarantees of quality, safety or efficacy are given or implied

THIS PERMISSION IS ALSO SUBJECT TO THE PROHIBITIONS OR REQUIREMENTS SPECIFIED WITH AN 'X' BELOW:

- ☐ for invitro (diagnostic) use **ONLY.**
- ☐ to be labelled **'CAUTION MAY BE INFECTIOUS'.**
- ☐ Australian Radiation Laboratory approval to import also required.
- ☐ for personal use **ONLY – NOT** to be distributed for use by other persons or in animals.
- ☐ for delivery into store **ONLY** – distribution may **NOT** take place without permission of the Secretary.
- ☐ for supply to approved users **ONLY.**
- ☐ for laboratory animal use **ONLY.**
- ☐ for veterinary use **ONLY.**
- ☐ **NOT** to be used in animals.

Signature of Authorised Officer for the Secretary

[redacted]

Date 14.8.90

Further applications to import this/these or any other Therapeutic substance(s) should be made in writing to: The Drug Evaluation Branch, Therapeutic Goods Administration, P.O. Box 100, WODEN ACT 2606, AUSTRALIA