|  |  |                       |               |               |  |  |     |        |              |                  |   |   |  |  | CIC              | )MS | FO | RM |  |
|--|--|-----------------------|---------------|---------------|--|--|-----|--------|--------------|------------------|---|---|--|--|------------------|-----|----|----|--|
| SUSPE  |  |                       |               |               |  |  |     |        |              |                  | <u> </u>  |   | <br>T  |  |                  |     |    |    |  |
|  |  |                       | I DE          | Λ CΤΙΩΝ       |  | MATION   | ı   |        |              |                  |   |   |  |  |                  |     |    |    |  |
| 1. PATIENT INITIALS  | 1a. COUNTRY  | 2.                    | DATE OF BIRTH | 2a. AGE       |  | 3a. WEIGHT   | _   | 1-6 RE | ACTIO        | N ON             | ISET  | 8-1   |  |  | CK ALL           |     |    |    |  |
| (first, last) PRIVACY  | COSTA RICA   | Day                   | PRIVACY Year  | 13<br>Years   | Male   | Unk  | Da  | ıy     | Month<br>Unk |                  | Yea   | r   |  |  | ROPRIA<br>ERSE R |     | N  |    |  |
| 7 + 13 DESCRIBE REACTION(S) (including relevant tests/lab data) Event Verbatim [LOWER LEVEL TERM] (Related symptoms if any separated by commas)  2 days of not injecting him/and it's been four days without my son being able to receive the hormone [Drug dose omission by device] caregiver wasted a dose of medication trying to figure out how to fix it and it doesn't work [Wrong technique in device usage process] it is damaged [Device defective] caregiver wasted a dose of medication trying to figure out how to fix it [Device leakage] the pen, had a low battery, so the dose indicator did not appear on the screen [Device image display issue] |  |                       |               |               |  |  |     |        |              |                  |   | ]<br>]<br>]                                 | PATIENT DIED  INVOLVED OR PROLONGED INPATIENT HOSPITALISATION  INVOLVED PERSISTENT OR SIGNIFICANT DISABILITY OR INCAPACITY |  |                  |     |    |    |  |
| (Continued on Additional Information Page  |  |                       |               |               |  |  |     |        | e) [         | LIFE THREATENING |   |   |  |  |                  |     |    |    |  |
|  |  |                       | II. SUSPE     | CT DRI        | JG(S) IN   | IFORMA   | TIO | N      |              |                  |   |   |  |  |                  |     |    |    |  |
| 14. SUSPECT DRUG(S) (include generic name) #1 ) Genotropin Pen (SOMATROPIN) Solution for injection {Lot # KC8721; Exp.Dt. JAN-2027} #2 ) Genotropin Pen (SOMATROPIN (DEVICE CONSTITUENT)) Solution for injection   |  |                       |               |               |  |  |     |        |              |                  | 20.   | 20. DID REACTION ABATE AFTER STOPPING DRUG? |  |  |                  |     |    |    |  |
| #1 ) 1.4 mg, daily   |  |                       |               |               |  | . Route(s) of administration<br>1 ) Unknown<br>2 ) Unknown |     |        |              |                  |   |   | ☐YES ☐NO 🔲 NA  |  |                  |     |    |    |  |
| 17. INDICATION(S) FOR USE #1 ) Unknown #2 ) Unknown  |  |                       |               |               |  |  |     |        |              | 21.              | 21. DID REACTION<br>REAPPEAR AFTER<br>REINTRODUCTION? |   |  |  |                  |     |    |    |  |
| #1 ) Unknown #1  |  |                       |               |               |  | THERAPY DURATION ) Unknown ) Unknown                       |     |        |              |                  |   |   | YES NO NA  |  |                  |     |    |    |  |
|  | JG(S) AND DATES OF ADM   | IINISTRA<br>allergies |               | used to treat | reaction)  | s) AND H   | IST | OR     | Y            |                  |   |   |  |  |                  |     |    |    |  |
|  |  |                       | IV. MANU      | FACTU         | RER IN   | FORMAT   | ΙΟΙ | ٧      |              |                  |   |   |  |  |                  |     |    |    |  |
| 24a. NAME AND ADDRESS OF MANUFACTURER Pfizer S.A. Laura Arce Mora Avenida Escazú, Torre Lexus, piso 7. Escazú San Jose, COSTA RICA   |  |                       |               |               |  | MARKS  |     |        |              |                  |   |   |  |  |                  |     |    |    |  |
| 24c. DATE RECEIVED   | 24b. MFR CC PV20250 24d. REPOR                                       | 00526                 | 615           | NAMI          | 25b. NAME AND ADDRESS OF REPORTER NAME AND ADDRESS WITHHELD.  NAME AND ADDRESS WITHHELD. |  |     |        |              |                  |   |   |  |  |                  |     |    |    |  |
| 24c. DATE RECEIVED BY MANUFACTURE 02-MAY-2025  | 02-MAY-2025    HEALTH   OTHER: Spontaneous   NAI                     |                       |               |               |  |  |     |        |              | ELC              | Э.  |   |  |  |                  |     |    |    |  |
| DATE OF THIS REPORT 12-MAY-2025  | DATE OF THIS REPORT 25a. REPORT TYPE    25a. REPORT TYPE   FOLLOWUP: |                       |               |               |  |  |     |        |              |                  |   |   |  |  |                  |     |    |    |  |

## ADDITIONAL INFORMATION

## 7+13. DESCRIBE REACTION(S) continued

Case Description: This is a spontaneous report received from a Consumer or other non HCP and a Nurse from product quality group, Program ID: 164974.

A 13-year-old male patient received somatropin (GENOTROPIN PEN), (Lot number: KC8721, Expiration Date: Jan2027) at 1.4 mg daily. The patient's relevant medical history and concomitant medications were not reported.

The following information was reported: DRUG DOSE OMISSION BY DEVICE (non-serious), described as "2 days of not injecting him/and it's been four days without my son being able to receive the hormone"; WRONG TECHNIQUE IN DEVICE USAGE PROCESS (non-serious), described as "caregiver wasted a dose of medication trying to figure out how to fix it and it doesn't work"; DEVICE DEFECTIVE (non-serious), described as "it is damaged"; DEVICE LEAKAGE (non-serious), described as "caregiver wasted a dose of medication trying to figure out how to fix it"; DEVICE INFORMATION OUTPUT ISSUE (non-serious), described as "the pen, had a low battery, so the dose indicator did not appear on the screen". The action taken for somatropin was temporarily withdrawn.

Additional information: The patient's caregiver stated his son's pen got damaged, that they would send someone and replace the pen. Additionally, caregiver wasted a dose of medication trying to figure out how to fix it and it doesn't work. It's been 2 days since she last injected him. The patient's mother reported that the pen got damaged, it shows an error and the error won't go away. She stated it's been four days without my son being able to receive the hormone, and she urgently need to resolve this. On 02May2025, the nurse indicated that what was reported was that the device, the pen, had a low battery, so the dose indicator did not appear on the screen. Nurse explained to the patient's mother how to use the pen without needing to see the dose on the screen, but she indicated that they wanted a new pen. On 03May2025, patient's mother stated that all of this was a waste of time. In fact, the same guy told to the patient's mother that if he had known it was this over the phone, he would have resolved it. It was a waste of time for both. The pen just had a low battery, patient's mother don't even know why, because theoretically it should last until 2027. He couldn't even provide to the patient's mother what she needed, which is a new pen. Patient's mother still without the pen, the nurse was of no help, and her son is still without the hormone. Patient's mother dealing with this for a week.

Causality for "2 days of not injecting him/and it's been four days without my son being able to receive the hormone", "caregiver wasted a dose of medication trying to figure out how to fix it and it doesn't work", "it is damaged", "caregiver wasted a dose of medication trying to figure out how to fix it" and "the pen, had a low battery, so the dose indicator did not appear on the screen" was determined associated to device constituent of somatropin (malfunction).

Follow-up (02May2025 and 03May2025): This is a follow-up report from a Nurse, Program ID: 164974. Updated information: new event added (the pen, had a low battery, so the dose indicator did not appear on the screen) and clinical course.