

# SUSPECT ADVERSE REACTION REPORT

## I. REACTION INFORMATION

1. PATIENT INITIALS (first, last) <b>PRIVACY</b>	1a. COUNTRY DOMINICAN REPUBLIC	2. DATE OF BIRTH			2a. AGE 11 Years	3. SEX Female	3a. WEIGHT Unk	4-6 REACTION ONSET			8-12 CHECK ALL APPROPRIATE TO ADVERSE REACTION  <input type="checkbox"/> PATIENT DIED  <input type="checkbox"/> INVOLVED OR PROLONGED INPATIENT HOSPITALISATION  <input type="checkbox"/> INVOLVED PERSISTENT OR SIGNIFICANT DISABILITY OR INCAPACITY  <input type="checkbox"/> LIFE THREATENING
		Day	Month	Year				Day	Month	Year	
			PRIVACY					Unk			

7 + 13 DESCRIBE REACTION(S) (including relevant tests/lab data)  
Event Verbatim [LOWER LEVEL TERM] (Related symptoms if any separated by commas)  
It just marks three stripes and doesn't mark the dose applying [Device battery issue]  
The device has three lines up and three lines down on the screen and does not dose the dose [Device image display issue]

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.

An 11-year-old female patient received somatropin (GENOTROPIN PEN),

(Continued on Additional Information Page)

## II. SUSPECT DRUG(S) INFORMATION

14. SUSPECT DRUG(S) (include generic name) #1 ) Genotropin Pen (SOMATROPIN) Solution for injection {Lot # LR7825; Exp.Dt. MAY-2027} #2 ) Genotropin Pen (SOMATROPIN (DEVICE CONSTITUENT)) Solution for injection {Lot # W125}		20. DID REACTION ABATE AFTER STOPPING DRUG?  <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> NA
15. DAILY DOSE(S) #1 ) 0.6 mg, every day (at night) #2 )	16. ROUTE(S) OF ADMINISTRATION #1 ) Unknown #2 ) Unknown	
17. INDICATION(S) FOR USE #1 ) Unknown #2 ) Unknown		21. DID REACTION REAPPEAR AFTER REINTRODUCTION?  <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> NA
18. THERAPY DATES(from/to) #1 ) Unknown #2 ) Unknown	19. THERAPY DURATION #1 ) Unknown #2 ) Unknown	

## III. CONCOMITANT DRUG(S) AND HISTORY

22. CONCOMITANT DRUG(S) AND DATES OF ADMINISTRATION (exclude those used to treat reaction)		
23. OTHER RELEVANT HISTORY. (e.g. diagnostics, allergies, pregnancy with last month of period, etc.) From/To Dates                      Type of History / Notes                      Description Unknown		

## IV. MANUFACTURER INFORMATION

24a. NAME AND ADDRESS OF MANUFACTURER Pfizer S.A. Laura Arce Mora Avenida Escazú, Torre Lexus, piso 7. Escazú San Jose, COSTA RICA		26. REMARKS
	24b. MFR CONTROL NO. <b>PV202500086119</b>	25b. NAME AND ADDRESS OF REPORTER NAME AND ADDRESS WITHHELD.  NAME AND ADDRESS WITHHELD.  NAME AND ADDRESS WITHHELD.
24c. DATE RECEIVED BY MANUFACTURER <b>04-AUG-2025</b>	24d. REPORT SOURCE <input type="checkbox"/> STUDY <input type="checkbox"/> LITERATURE <input type="checkbox"/> HEALTH PROFESSIONAL <input checked="" type="checkbox"/> OTHER: Spontaneous	
DATE OF THIS REPORT <b>07-AUG-2025</b>	25a. REPORT TYPE <input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> FOLLOWUP: 1	

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**ADDITIONAL INFORMATION****7+13. DESCRIBE REACTION(S) continued**

(Lot number: LR7825, Expiration Date: May2027) at 0.6 mg 1x/day (0.6 mg, every day (at night)), Device Lot Number: W125, Device Expiration Date: Jan2024. The patient's relevant medical history and concomitant medications were not reported.

The following information was reported: DEVICE POWER SOURCE ISSUE (non-serious), outcome "unknown", described as "It just marks three stripes and doesn't mark the dose applying"; DEVICE INFORMATION OUTPUT ISSUE (non-serious), outcome "unknown", described as "The device has three lines up and three lines down on the screen and does not dose the dose".

Additional information: Drug lot number: LR7825. Device lot number FF4160 (external) and W125 (internal). Reporter stated "I have a situation and I'd like to guide me, I have two cartridges that were the last ones that delivered me, but the device failed or I don't know what's going on, because it just marks three stripes and doesn't mark the dose applying. I called the PRIVACY distributor and they tell me they haven't received devices since January and they don't have a date to receive. I have a problem because I don't know how I can deliver the medication to the patient without the device and there is no chance to get a new one. I have two whole new cartridges and the girl from the distributor here at PRIVACY told me that she is recommending patients to switch to 5.3 mg instead of 12 mg, because she is not arriving in the country, I understand and I have no problem switching my medication, but the medication is expensive". Upon follow-up received on 04Aug2025, the nurse stated "The device has three lines up and three lines down on the screen and does not dose the dose. The pen has an expired date: Jan2024. Lot FF4160. Lot W125".

Causality for "it just marks three stripes and doesn't mark the dose applying" and "the device has three lines up and three lines down on the screen and does not dose the dose" was determined associated to device constituent of somatropin (malfunction).

Follow-up (04Aug2025): This is a spontaneous follow-up report received from a Nurse.

Updated information: suspect drug details (dosage regimen removed), new event added ("The device has three lines up and three lines down on the screen and does not dose the dose"), events details (event previously captured as "Device mechanical jam" removed; event recoded from "Device image display error" to "Device battery issue").