

2020 IV Drugs Product Catalogue



PURCHASE TERMS AND CONDITIONS

GENERAL

A purchaser of product from Fresenius Kabi Canada Ltd. shall not: sell product for export from Canada to any other jurisdiction; or sell product to any party who it knows, or reasonably should know will: i) Export said product from Canada to any other jurisdiction ii) Sell said product to any party who it knows, or reasonably suspects or reasonably should know will export said product from Canada to any other jurisdiction.

ORDER TERMS

Ordering Channels: **Fresenius Kabi Canada** currently accepts Purchase Orders through the following channels:

1. Global Health Exchange (GHX)
2. Electronic Data Interchange (EDI)
3. Email-Orders: Canada_customerservice@fresenius-kabi.com
4. Fresenius Kabi direct orders Tel: 1-877-821-7724 (Toll Free)
5. Fresenius Kabi direct orders Fax: 1-877-821-2108 (Toll Free)

McKesson Distribution Partners – Order Desk

1. Ontario & Atlantic Canada Fax: 1-888-600-8104
2. Ontario & Atlantic Canada Tel: 1-877-671-1376
3. West of Ontario Fax: 1-800-830-6436 (Toll Free)
4. West of Ontario Tel: 1-800-830-6465 (Toll Free)
5. Quebec, please contact your wholesaler

All orders are subject to acceptance by Fresenius Kabi Canada at its head office

CONTROLLED DRUG ORDERING

Controlled drugs should be ordered through McKesson Distribution Partners or a participating wholesaler. When that is not possible, product can be ordered directly from Fresenius Kabi Canada using the following procedure:

Controlled drug orders must be initiated by a pharmacist or a practitioner registered with a licensing body of a province, or possesses a degree in an applicable science such as pharmacy, medicine, dentistry, veterinary medicine or pharmacology. Or in the case of a licensed dealer (e.g. wholesaler) a person who is authorized to place orders on behalf of the licensed dealer.

Controlled drugs must be ordered on a separate endorsed script or order form and sent by mail or courier to the following address:

Fresenius Kabi Canada Ltd.
c/o Accuristix
109 Summerlea Road
Brampton, Ontario L6T 4P6

PAYMENT

For Purchasers with pre-approved Fresenius Kabi Credit, terms of payment are Net 30 days. Fresenius Kabi reserves the right, without notice, to hold orders for Purchasers with past due balances.

Remittance Address for direct orders only:

Fresenius Kabi Canada Ltd.
P.O Box 15677, Station A
Toronto, Ontario
M5W 1C1

For orders placed with McKesson Distribution Partners:

McKesson Distribution Partners
4705 Dobrin
St. Laurent, Quebec
H4R 2P7

PRICE

All Purchaser Orders will be filled and invoiced at the prices in effect at the time the order is processed. All prices are subject to change without notice. All prices are exclusive of G.S.T., P.S.T. and H.S.T.

MINIMUM ORDER

All orders less than \$500.00 placed directly with Fresenius Kabi Canada Ltd. are subject to a \$75.00 handling charge. FOB customer. Special delivery instructions may incur additional freight charges. RUSH orders are subject to a \$75.00 handling charge.

BACK ORDERS

All back orders will be cancelled 60 days from date of order if product remains unavailable for shipping at that time.

McKesson Distribution Partners:

Every effort will be made to ensure your order is filled at the time it is placed. If a product you have ordered is not available from the McKesson Distribution Partners depot where the order originated, head office Customer Service will notify you if the product is available for shipment from an alternate location.

INABILITY TO SUPPLY POLICY AND PROCEDURE

When a customer is unable to obtain a contracted pharmaceutical item from Fresenius Kabi Canada Ltd. and therefore must purchase from an alternate source at a higher price, Fresenius Kabi will honour price differentials provided the following conditions and procedures are met:

PURCHASE TERMS AND CONDITIONS

A. Conditions

1. The customer is in compliance with the contract and regularly purchased the product in question.
2. The contracted product was an exclusive award, i.e. the item was not dual awarded to Fresenius Kabi and another vendor.
3. If Fresenius Kabi has communicated to a customer or Group Purchasing Organization (GPO) that a product will not be available for an extended period, the customer or GPO should secure an alternate vendor. Fresenius Kabi will honour price differentials up to eight (8) weeks after the notification of product unavailability, to commence on the date of the notification letter.
4. Credit may be issued in the form of replacement product.
5. It is the responsibility of the Group Purchasing Organization to communicate this policy to their membership.

B. Procedure

To submit an inability to supply price differential claim:

Send a copy of the invoice from the alternate vendor, your contract price and amount of price differential requested to the Customer Service department, Attention: Price Differentials. Claims submitted more than six (6) months from date of purchase from an alternate vendor will not be accepted.

RETURNS

CREDIT AND RETURNED GOODS POLICY

No credit exists until a credit note is issued by Fresenius Kabi Canada Ltd. and no deduction, offset, or adjustment to any invoice may be made by the customer except on the basis of a credit note. Before any product is returned to Fresenius Kabi Canada Ltd., a "returned goods authorization" number must be obtained from the Customer Service Department. Product must be returned in full, unopened, undamaged, original Fresenius Kabi packaging and customer must provide adequate documentation to ensure that the product was properly stored. The credit value will be assessed on a pro rata considering full cases, no credit will be issued for partial cases. Credit will be issued at the original purchase price with a minimum of credit of \$100.00. Credit allowance for authorized returns submitted will be issued under the following circumstances:

ACCEPTABLE RETURNS

Product may be returned for credit under the following conditions:

1. SHIPPING ERRORS
2. VISIBLE DAMAGE
3. CONCEALED DAMAGE
4. EXPIRED GOODS

1. SHIPPING ERRORS: Immediately, but in no event later than three (3) working days after receipt, contact the Fresenius Kabi Customer Service Department and report any product shipping errors. A Representative will issue a Returned Goods Authorization number and provide the product conditions listed above "Credit and Returned Goods Policy".

- 2. VISIBLE DAMAGE:** Any visible damage should be noted on the carrier's bill upon receipt of the order and should place a request for the carrier's inspector to view the goods in question at that point. **DO NOT REFUSE THE SHIPMENT.** Refusing the shipment will void Fresenius Kabi's right to claim reimbursement for damages. **REFUSED SHIPMENTS DUE TO DAMAGE WILL NOT BE CREDITED.** Immediately contact the Fresenius Kabi Customer Service Department and report the product damage. A representative will issue a credit note or a replacement order.
- 3. CONCEALED DAMAGE:** Upon discovery of any concealed damage after accepting delivery, immediately, but in no event seven (7) working days after discovery, contact the Fresenius Kabi Customer Service Department and report such damage. Upon verification of the damage, a representative will issue a credit note or a replacement order.
- 4. EXPIRED GOODS:** A credit or replacement will be issued for any product on hand at the time the product expires. You must apply for credit within 12 months from the date of product expiration. No credit will be issued for partial cases. Please forward your expired goods request list by fax (1-877-821-2108) directly to Fresenius Kabi to the attention of "Customer Service Department" or call (1-877-821-7724).

NON-ACCEPTABLE RETURNS

1. Product with good dating
2. Broken, marked or damaged due to negligence or improper storage
3. Product involved in a fire or flood or other hazards
4. Product which has been purchased from a bankruptcy sale or going out of business sale
5. Unexpired product, which has been repackaged, over labeled or reconstituted
6. Customer order errors
7. Products shipped for clinical evaluations free of charge to customer
8. Products purchased on a non-refundable basis
9. Product shipped in error but not reported to Fresenius Kabi Canada within 3 working days.

RETURN AUTHORIZATION

An authorized return must be sent within 30 days from the receipt of an authorization number.

Fresenius Kabi Canada Ltd.

c/o Accuristix
109 Summerlea Road
Brampton, Ontario L6T 4P6

Fresenius Kabi sales representatives are not permitted to pick up product for return and we reserve the right to inspect all returns before issuing a credit. We have the right to destroy product which is returned outside the policy or which is considered unfit or unsafe for use.

Please note: Product cannot be accepted for return at our Head Office. Product ordered through McKesson Distribution Partners Calgary, AB and Port Coquitlam, BC that is authorized for credit can be returned to the following address:

PURCHASE TERMS AND CONDITIONS

McKesson Distribution Partners

4440-78 Ave S.E Calgary, Alberta T2C 2Z5
TEL: (800) 830-6465
FAX: (800) 830-6436

Product ordered through McKesson Distribution Partners Brampton that is authorized for credit can be returned to the following address:

McKesson Distribution Partners

8555 Torbram Rd Brampton, ON L6T 5R1
TEL: (877) 671-1376
FAX: (888) 600-8104

GOODS RETURNED UNAUTHORIZED WILL RECEIVE NO CREDIT

Please remit your expired goods list by telephone, fax or email to our Fresenius Kabi Customer Service Department.

Customer Service Tel: (877) 821-7724 Toll Free
Customer Service Fax: (877) 821-2108 Toll Free
Customer Service Email: Canada_customerservice@fresenius-kabi.com

FORCE MAJEURE

Fresenius Kabi Canada Ltd. shall not be held liable for any delay or failure in performance hereunder arising out of cause beyond its control or without its fault or negligence. Such causes may include, but are not limited to, fires, strikes, embargoes, shortages or unavailability of supplies, raw materials, components or products from customary sources at customary prices, acts of God, production or delivery problems, labour problems, acts of government, war, sabotage, acts of customer, inability to secure transportation, national disasters or discontinuance of a product line. Customer agrees that in such events, available products may be allocated by Fresenius Kabi in its sole discretion among its customers without liability.

PRODUCT RECALL AND PRODUCT COMPLAINTS

Should a product recall or withdrawal be necessary, Fresenius Kabi will compensate customers only for direct expenses in performing all recall services requested by Fresenius Kabi. For any product complaints, please contact:
Canada_Product_Complaints@fresenius-kabi.com or toll free: 1-877-953-9002.

WARRANTY

Fresenius Kabi Canada Ltd. guarantee of the Products is strictly limited and is restricted to the identity of the Products and their manufacture in conformance with good manufacturing practices and applicable laws upon delivery. More specific warranties including the length of the warranty period may accompany individual Products. Any product sold by Fresenius Kabi must be used as intended and approved, and in a manner consistent with the related product labeling and instructions for use (IFU).

Unless the Product(s) is (are) used in accordance with its (their) instructions, these warranties are void and of no effect. **THERE ARE NO OTHER EXPRESSED OR IMPLIED WARRANTIES, INCLUDING ANY WARRANTY OR MERCHANTABILITY, FITNESS FOR A PARTICULAR PURPOSE, OR NON-INFRINGEMENT. FRESENIUS KABI'S SOLE OBLIGATION AND CUSTOMER'S EXCLUSIVE REMEDY FOR BREACH OF ANY WARRANTY SHALL BE, AT FRESENIUS KABI'S OPTION, TO REPAIR OR REPLACE THE PRODUCT.**

LIMITATION OF LIABILITY

FRESENIUS KABI CANADA LTD. WILL NOT BE LIABLE FOR LOST PROFITS, LOSS OF BUSINESS OR OTHER CONSEQUENTIAL, SPECIAL, INDIRECT OR PUNITIVE DAMAGES, EVEN IF ADVISED OF THE POSSIBILITY OF SUCH DAMAGES, OR FOR ANY CLAIM BY ANY THIRD PARTY. FRESENIUS KABI CANADA LTD. SHALL NOT BE SUBJECT TO ANY OTHER OBLIGATIONS OR LIABILITIES ARISING OUT OF BREACH OF CONTRACT OR WARRANTIES, ANY OBLIGATIONS WHATSOEVER ARISING FROM TORT CLAIMS, INCLUDING NEGLIGENCE AND STRICT LIABILITY, OR ARISING UNDER ANY OTHER THEORIES OF LAW, FRESENIUS KABI CANADA LTD. WILL NOT BE LIABLE FOR PRODUCTS NOT BEING AVAILABLE FOR USE OR FOR LOST OR CORRUPTED DATA OR SOFTWARE OR THE PROVISION OF SERVICES BY THIRD PARTIES. BUYER AGREES THAT FOR ANY LIABILITY RELATED TO THE PURCHASE OF PRODUCTS OR SERVICES PROVIDED DIRECTLY BY FRESENIUS KABI CANADA LTD., FRESENIUS KABI CANADA LTD. WILL NOT BE LIABLE OR RESPONSIBLE FOR ANY AMOUNT OF DAMAGE IN EXCESS OF THE LESSER OF : (i) THE DOLLAR AMOUNT PAID BY BUYER FOR THE PRODUCTS GIVING RISE TO THE CLAIM; OR (ii) \$50,000.00.

COMPLIANCE WITH LAWS

Purchaser and Fresenius Kabi Canada Ltd. shall each comply with all federal, provincial and local laws, rules and regulations applicable to its operations and/or its obligations with respect to the purchase and sale of products hereunder.

GOVERNING LAW

The relationship between Purchaser and Fresenius Kabi Canada Ltd. Hereunder shall be governed by and construed in accordance with the laws of the Province of Ontario without regard to its conflicts of laws principles.

Product Photography is not to scale

Acyclovir Sodium Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02236926	C302510	50 mg/mL	10 mL	10	919937	629336305100	629336000128
SD Vial	02236926	C302520	50 mg/mL	20 mL	10	919949	629336305209	629336000135

• Bar Coded • Latex Free • Preservative Free



Adenosine Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02267659	C605102	3 mg/mL	2 mL	10	937071	629336601028	629336000142
Prefilled syringe	02457474	K051002	3 mg/mL	2 mL	10	970852	629336001712	629336002696
Prefilled syringe	02457482	K051004	3 mg/mL	4 mL	10	970864	629336001729	629336002702

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Amiodarone Hydrochloride for Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
MD Amber Vial	02245248	C601603	50 mg/mL	3 mL	25	919950	629336606030	629336000159

• Bar Coded • Latex Free



Product Photography is not to scale

Ampicillin for Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/ Carton) #
SD Vial	02227029	103767	250 mg	10 mL	10	975709	629336003648	629336003655
SD Vial	02227010	103768	500 mg	10 mL	10	975710	629336003662	629336003679
SD Vial	02227002	103769	1 g	10 mL	10	975722	629336003686	629336003693
SD Vial	02226995	103770	2 g	20 mL	10	975734	629336003709	629336003716

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Bivalirudin for Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/ Carton) #
SD Vial	02435268	C506210	250 mg/vial	10 mL	10	976453	629336004010	629336004027

• Bar Coded • Latex Free • Preservative Free



Bleomycin for Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/ Carton) #
SD Vial	02265982	C103610	15 Units	10 mL	1	958499	629336106103	629336106103

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Product Photography is not to scale

Calcium Gluconate Injection, USP 10%

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial (Plastic)	02141019	C360019	100 mg/mL	10 mL	25	970682	629336002757	629336002764
SD Vial (Plastic)	02141019	C360059	100 mg/mL	50 mL	25	970694	629336002771	629336002788
SD Vial (Plastic)	02141019	C360161	100 mg/mL	100 mL	20	970700	629336002795	629336002801

• Taxable • Bar Coded • Latex Free • Preservative Free



Caspofungin for Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
Vial	02486989	C356110	50 mg/mL	10 mL	10	975424	629336002870	629336003556
Vial	02486997	C358110	70 mg/mL	10 mL	10	975412	629336002887	629336003563

• Bar Coded • Latex Free • Preservative Free



Product Photography is not to scale

Cefazolin for Injection, USP

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02237138	102016	1 g	15 mL	10	967658	629336001330	629336001347
PBP Vial	02237140	103650	10 g	100 mL	10	974833	629336002986	629336002993
SmartPak®	02401029	CP1455B1	100 grams of Cefazolin	Bag	5	966988	629336001033	629336001040

• Bar Coded • Latex Free • Preservative Free



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Ceftazidime for Injection, USP

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	00886971	VL7231	1 g	20 mL	10	920472	629336072316	629336000241
SD Vial	00886955	VL7234	2 g	50 mL	10	920484	629336072347	629336000258
PBP Vial	00886963	VL7241	6 g	100 mL	6	920496	629336072415	629336000265

• Bar Coded • Latex Free • Preservative Free



CefTRIAxone for Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SmartPak®	02409968	CP1456B1	100 grams	Bag	5	967774	629336001057	629336001064

• Bar Coded • Latex Free • Preservative Free



SmartPak®

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Product Photography is not to scale

Cefuroxime for Injection, USP

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02241638	102008	750 mg	15 mL	10	968195	629336001194	629336001200
SD Vial	02241639	102009	1.5 g	50 mL	10	968110	629336001217	629336001224

• Bar Coded • Latex Free • Preservative Free



Chorionic Gonadotropin for Injection, USP

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
MD Vial**	02247459	C25011	10,000 USP units	10 mL	1	*see below	629336002832	629336002832

• Bar Coded

*Product distributed by Ferring Pharmaceuticals. To place an order for HCG and/or for Customer Service contact Ferring Pharmaceuticals Sales Support at 1-800-263-4057.

For Medical Information contact 1-866-384-1314 or medicalinformation@ferring.com.

**Multi-dose vial when reconstituted with sterile diluent. (Bacteriostatic Water for Injection)



Cladribine Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02319918	C104010	1 mg/mL	10 mL	1 Vial	958785	629336100101	629336100101

• Bar Coded • Latex Free • Preservative Free



Product Photography is not to scale

Colistimethate for Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02403544	C309306	150 mg	6.5 mL	1	967749	629336001392	629336001392

• Bar Coded • Latex Free • Preservative Free



DiphenhydrAMINE Hydrochloride Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02369567	C660401	50 mg/mL	1 mL	25	963744	629336000647	629336000654

• Taxable • Bar Coded • Latex Free • Preservative Free



Dipyridamole Injection, USP

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02244475	C601310	5 mg/mL	10 mL	10	921014	629336603107	629336000302

• Bar Coded • Latex Free



Product Photography is not to scale

Ertapenem for Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02496127	17403701	1 g	20 mL	10	975746	629336003532	629336003549

• Bar Coded • Latex Free Stopper • Preservative Free



Flumazenil Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
MD Vial	02266342	C402405	0.1mg/mL	5 mL	10	945110	629336404056	629336000319

• Taxable • Bar Coded • Latex Free



Folic Acid Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
MD Vial	02139480	C18410	5 mg/mL	10 mL	1	898995	629336001446	629336001446

• Taxable • Bar Coded • Latex Free



Ganciclovir for Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02404761	C315110	500 mg	10 mL	25	967622	629336001095	629336001101

• Bar Coded • Latex Free • Preservative Free



Product Photography is not to scale

Haloperidol Injection, USP

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
MD Vial	02406411	C437401	5 mg	1 mL	1	970402	629336001453	629336001460

• Bar Coded • Latex Free



Heparin Sodium Injection, USP

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
MD Vial	02264315	C504013	1,000 USP units/mL	1 mL	25	976258	629336004829	629336004836
MD Vial	02264315	C504710	1,000 USP units/mL	10 mL	25	936315	629336507108	629336000333
MD Vial	02264315	C504036	1,000 USP units/mL	30 mL	25	976295	629336004867	629336004874
SD Vial	02392453	C504301	10,000 USP units/mL	*0.5 mL	25	966964	629336000975	629336000982
MD Vial	02264307	C504801	10,000 USP units/mL	1 mL	25	936339	629336508013	629336000357
MD Vial	02264307	C504805	10,000 USP units/mL	5 mL	25	935815	629336508051	629336000364

• Taxable • Bar Coded • Latex Free

*Note: Heparin 0.5 mL only is Preservative Free



Product Photography is not to scale

HYDROmorphone Hydrochloride Injection, USP

Format	DIN	Product Code	Description	Size	Unit/ Pack	Packs/ Case	Unit/ Case	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02491699	C853101	2 mg/mL	1 mL	25	18	450	975655	629336003952	629336003969
SD Vial	02491680	C851101	10 mg/mL	1 mL	10	20	200	975631	629336003907	629336003914
SD Vial	02491680	C851105	10 mg/mL	5 mL	10	10	100	975643	629336003921	629336003938
SD Vial	02491680	C851150	10 mg/mL	50 mL	1	10	100	975667	629336003945	629336003952

• Bar Coded • Latex Free Stopper • Preservative Free



Isoflurane USP

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
Bottle	02231929	M60303	99.9%	100 mL	6	941190	629336603039	629336000388
Bottle	02231929	M60302	99.9%	250 mL	6	941323	629336603022	629336000371

• Bar Coded • Latex Free • Preservative Free



Ketorolac Tromethamine Injection, USP

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02244947	C160201	30 mg/mL	1 mL	25	922456	629336162017	629336000401

• Bar Coded • Latex Free • Preservative Free



Product Photography is not to scale

Levothyroxine Sodium for Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02245948	C506248	500 µg	10 mL	1	965352	629336000944	629336000944

• Bar Coded • Latex Free • Preservative Free



Levothyroxine Sodium Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02499916	C887110	40 mcg / mL	5 mL	1	977111	629336004287	629336004287
SD Vial	02499924	C886110	100 mcg / mL	5 mL	1	977123	629336004294	629336004294

• Bar Coded • Latex Free Stopper • Preservative Free



Linezolid Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Bag) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
freeflex [®] Bag	02430827	ABU 0723	2 mg/mL	300 mL	10	970463	629336001736	629336001743

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Product Photography is not to scale

Magnesium Sulfate Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02139499	C96410P	500 mg/mL	10 mL	25	922468	629336964109	629336000418
PBP Vial	02139499	C6450	500 mg/mL	50 mL	25	922493	629336064502	629336000425

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Mannitol Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02243176	C1550	250 mg/mL	50 mL	25	922511	629336015504	629336000432

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Meropenem for Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02415216	4523001	500 mg/vial	20 mL	10	970414	629336000999	629336001002
SD Vial	02415224	4524001	1 g/vial	20 mL	10	967798	629336001019	629336001026

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Mesna for Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
MD Vial	02244931	C730310	100 mg/mL	10 mL	10	922523	629336733101	629336000449

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Midazolam Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
MD Vial	02242904	C410102	1 mg/mL	2 mL	10	922535	629336411023	629336000753
MD Vial	02242904	C410105	1 mg/mL	5 mL	10	922547	629336411054	629336000760
MD Vial	02242904	C410110	1 mg/mL	10 mL	10	922559	629336411108	629336000777
MD Vial	02242905	C410201	5 mg/mL	1 mL	10	922560	629336412013	629336000784
MD Vial	02242905	C410202	5 mg/mL	2 mL	10	922572	629336412020	629336000791
MD Vial	02242905	C410210	5 mg/mL	10 mL	10	922584	629336412105	629336000807

• Bar Coded • Latex Free

For current product availability please contact PPC customer service



Product Photography is not to scale

Milrinone Lactate Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02244622	C601710	1 mg/mL	10 mL	10	922596	629336607105	629336000456
SD Vial	02244622	C601720	1 mg/mL	20 mL	10	922602	629336607204	629336000463

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MitoXANTRONE Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02286300	C132010	2 mg/mL	10 mL	1	943393	629336130108	629336130108

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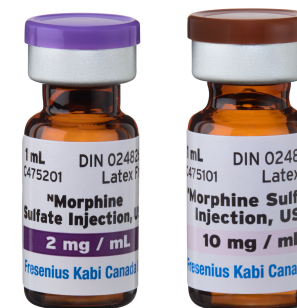


Product Photography is not to scale

Morphine Sulfate Injection, USP

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
Vial	02482681	C475201	2 mg/mL	1 mL	25	975515	629336003785	629336003792
Vial	02482746	C475101	10 mg/mL	1 mL	25	975503	629336003860	629336003877

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Moxifloxacin Injection

Format	DIN	Product Code	Description	Size	Unit/ Case	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
freeflex® Bag	02433087	ABU0422	1.6 mg/mL	250 mL	10	970955	629336002672	629336002689

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Oxytocin Injection, USP

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02139561	C912011	10 USP units/mL	*1 mL	25	975965	629336004300	629336004317
MD Vial	02139561	C1210	10 USP units/mL	10 mL	25	922626	629336012107	629336000487

• Bar Coded *Latex Free



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Pamidronate Disodium for Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02246597	452000	3 mg/mL	10 mL	1	918623	629336450008	629336450008
SD Vial	02246598	452005	6 mg/mL	10 mL	1	918647	629336450053	629336450053
SD Vial	02246599	452010	9 mg/mL	10 mL	1	918659	629336450107	629336450107

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Pantoprazole for Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02352214	CP100411	40 mg	10 mL	10	959716	629336000951	629336000968

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Penicillin G Sodium for Injection, USP

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02220261	PF170003	1 million unit	15 mL	25	975321	629336004218	629336004225
SD Vial	02220288	PF170001	5 million unit	15 mL	25	975199	629336004232	629336004249
SD Vial	02220296	PF170002	10 million unit	50 mL	10	975205	629336004256	629336004263

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Potassium Phosphates Injection, USP

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial (15 mL fill in 30 mL vial)	02139545	C8615P	3 mmol/mL Phosphorus	15 mL	25	922754	629336086153	629336000524
SD Vial	02139545	C860569	Phosphorus 3 mmol/mL	50 mL	25	976441	629336004638	629336004645

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Propofol Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02437643	4463021	10 mg/mL	20 mL	10	970980	629336002016	629336002023
SD Vial	02437643	4462051	10 mg/mL	50 mL	10	970438	629336001491	629336001507
SD Vial	02437643	4462031	10 mg/mL	100 mL	10	970451	629336001514	629336001521

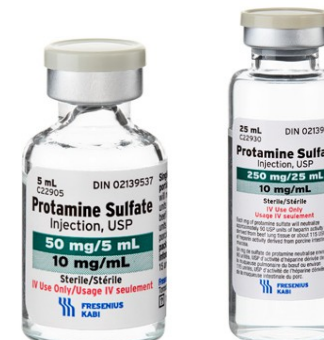
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Protamine Sulfate Injection, USP

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02139537	C22905	10 mg/mL	5 mL	25	922778	629336229055	629336000548
SD Vial	02139537	C22930	10 mg/mL	25 mL	1	900242	629336229307	629336229307

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Ropivacaine Hydrochloride Injection, USP

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
freeflex® Bag	02439379	ABH3110 *	2 mg/mL	100 mL	5	974870	629336003006	629336003013
freeflex® Bag	02439379	ABH3111 *	2 mg/mL	200 mL	5	974912	629336003020	629336003037
Ampoule	02439387	ABA1823	5 mg/mL	10 mL	5	974900	629336003044	629336003051
Ampoule	02439409	ABA1846	10 mg/mL	10 mL	5	974894	629336003068	629336003075
Ampoule	02439409	ABA1847	10 mg/mL	20 mL	5	974882	629336003082	629336003099



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*PVC Free, DEHP Free

Sodium Acetate Injection, USP

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02139529	C3250	4 mmol/mL 4 mEq/mL	50 mL	25	922833	629336032501	629336000555
Maxivial®	02139529	C32B1	4 mmol/mL 4 mEq/mL	100 mL	20	922821	629336032617	629336000562



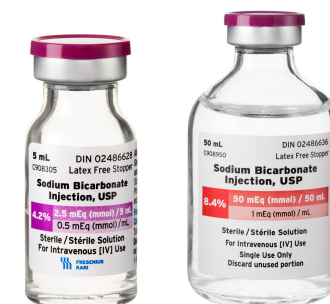
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Product Photography is not to scale

Sodium Bicarbonate Injection, USP

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
Vial	02486628	C908305	4.2% 2.5 mEq (mmol)	5 mL	25	975369	629336004034	629336004041
Vial	02486636	C908950	8.4% 50 mEq (mmol)	50 mL	25	975357	629336004058	629336004065

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Sodium Chloride Injection, USP

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02139510	C918930	4 mmol/mL 4 mEq/mL	30 mL	25	975916	629336004539	629336004546
Maxivial®	02139510	C88B1	4 mmol/mL 4 mEq/mL	100 mL	20	922857	629336088614	629336000586
Maxivial®	02139510	C88B2	4 mmol/mL 4 mEq/mL	200 mL	20	922869	629336088638	629336000593

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Tobramycin for Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
PBP Vial	00533688	C300351	1.2 g	50 mL	6	928781	629336303519	629336000609

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Tobramycin Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
MD Vial	02230640	C300602	40 mg/mL	2 mL	25	922882	629336306022	629336000920
MD Vial	02230640	C300630	40 mg/mL	30 mL	10	922894	629336306305	629336000937

• Bar Coded • Latex Free



Vancomycin Hydrochloride for Injection, USP

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02139375	C22110	500 mg	10 mL	25	922900	629336221103	629336000616
SD Vial	02139383	C28420	1 g	20 mL	10	922912	629336284207	629336000623
PBP	02139243	C295B1	5 g	100 mL	1	900795	629336295616	629336295616
PBP	02241807	C314061	10 g	100 mL	1	896706	629336314065	629336314065

• Bar Coded • Latex Free • Preservative Free



Vasopressin Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
MD Vial	02139502	C30201	20 units/mL	1 mL	25	922924	629336302017	629336000630

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Product Photography is not to scale

Vinorelbine Injection, USP

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
Single Use Vial	02511347	CP211102	10 mg/mL Single Use vial	1 mL	1	977226	629336004676	629336004676
Single Use Vial	02511347	CP216906	10 mg/mL Single Use vial	5 mL	1	976118	629336004683	629336004683

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Voriconazole for Injection

Format	DIN	Product Code	Description	Size	Unit/ Pack	McKesson Distribution Partners #	GTIN 12 Barcode Unit of Use (Vial) #	GTIN 12 Barcode Pack Selling Unit (Tray/Carton) #
SD Vial	02493829	CP106730	200 mg / vial	30 mL	1	976386	629336004195	629336004195

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