

Selection Criteria:

Product Name:				
Product Active Ingredient:				
Active Ingredient:	[CHLOROQUINE,CHLOROQUINE HYDROCHLORIDE,CHLOROQUINE PHOSPHATE,CHLOROQUINE SALICYLATE,CHLOROQUINE SULFATE]			
Active Moiety:				
FDA Received Date:	From:	01-Feb-2020	To:	09-Jun-2020
MedDRA® Version* :	23.0			
Total Cases**:	117			
Number of Pages:	52			

Disclaimer: Submission of a safety report does not constitute an admission that medical personnel, user facility, importer, distributor, manufacturer or product caused or contributed to the event. The information in these reports has not been scientifically or otherwise verified as to a cause and effect relationship and cannot be used to estimate the incidence of these events.

*, "MedDRA® Version" refers to the name and version of the dictionary in use at the time the cases were retrieved from the FDA Adverse Event Reporting System (FAERS). MedDRA Medical Dictionary for Regulatory Activities (MedDRA®) is a medical terminology developed under the support of the International Conference on Harmonization (ICH) and is a registered trademark of the International Federation of Pharmaceutical Manufacturers and Associations (IFPMA). MedDRA is used by FDA, other regulatory agencies, and pharmaceutical manufacturers to code adverse events, medication errors and other information associated with the use of medical products. A MedDRA® Preferred Term (PT) is used to standardize a "medical concept" in a report. For example, a report of "heart attack" or "myocardial infarct" are standardized to the same Preferred Term, "Myocardial Infarction". MedDRA is updated twice a year.

**, "Total Cases" reflects the number of individual patient case reports associated with the product of interest that were submitted to FDA within the specified time period. A case consists of an initial report and any follow-up reports submitted to FDA. Because FDA may receive reports on the same patient from more than one source, some of these cases may be duplicate patient reports.

FDA Adverse Event Reporting System Freedom of Information Act (FOIA) Detailed Report

The information in this report is generated from the FDA Adverse Event Reporting System (FAERS) by using a report query where suspect product(s) or active ingredients are selected from a standardized dictionary and a date range is specified as search criteria. The table below provides the definitions for field headings that are listed on the report.

FAERS data have limitations, including the following. There is no certainty that the reported event was actually due to the product. Reports are often incomplete - a blank field means that no data were provided. FDA does not receive reports on all adverse events that occur with a product. Many factors can influence whether or not an event will be reported, therefore, FAERS data cannot be used to compare products or calculate how frequently an event occurs in the U.S. population.

Field Heading	Definition
FDA Received Date	The date that FDA received the most recent information regarding a case, either as an initial report or follow-up report. The FDA Received Date may not be the same as the date that the event occurred. The event may have occurred days or even months (or years) before the report was sent to (and received by) FDA. Note the displayed date on the report may be later than the query date range if FDA received follow-up information for a case. FDA provides the most current case information available.
Case #	A unique number assigned by FDA that identifies a FAERS case. A case includes the information received in the initial report plus any additional information received in follow-up reports.
Case Type	There are three case types in FAERS: Expedited (15-Day): submitted to FDA by manufacturers; these are reports containing serious, unexpected adverse events Nonexpedited: submitted periodically to FDA by manufacturers; these are reports containing adverse events other than those qualifying for expedited (15-day) reporting. Direct: submitted "directly" to FDA by healthcare professionals, patients and other consumers.
Health Prof	Indicates whether the initial source who provided information about the event is a health professional. Possible values are; Y - Yes, N – No or the field is blank if it was not reported
Outcomes	Based on FDA regulations, the reported outcome(s) determines whether a case is serious. The outcome categories include congenital anomaly/birth defect (CA), death (DE), disability (DS), hospitalization (HO), life-threatening (LT), other serious important medical event (OT), and required intervention to prevent permanent impairment/damage (RI). A case can have more than one outcome.
Mfr Control #	The Manufacturer Control Number is the manufacturer's unique identifier associated with the case. Also referred to as the Company Report Number.
503B Facility	Indicates whether the organization that sent the report to FDA is an outsourcing facility. An outsourcing facility is a facility at one geographic location or address that is engaged in the compounding of sterile drugs; has elected to register as an outsourcing facility; and complies with all of the requirements of section 503B of the Food, Drug, and Cosmetic Act. Possible value is Y – Yes.
Age	The patient's age, with age unit, based on information provided in the report.
Sex	Patient sex (Male, Female, Unknown).

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Country	The country where the event occurred. If not reported, then the country of the reporter. The International Organization for Standardization (ISO) 3166-1 alpha-3 country code is used as an abbreviation for the country.
Preferred Term	A Medical Dictionary for Regulatory Activities (MedDRA®) Preferred Term (PT) is used to standardize a "medical concept" in a report. For example, a report of "heart attack" or "myocardial infarct" are standardized to the same Preferred Term, "Myocardial Infarction". MedDRA is a medical terminology developed under the support of the International Conference on Harmonization (ICH) and is a registered trademark of the International Federation of Pharmaceutical Manufacturers and Associations (IFPMA). MedDRA is used by FDA, other regulatory agencies, and pharmaceutical manufacturers to "code" adverse events, medication errors and other information associated with the use of medical products.
Product	Name of a drug or biologic in the case report. A product name can appear as either a brand name (trade name) or an active ingredient name, depending on what was reported.
Comp.	Indicates whether the suspect product is a compounded drug, as identified in the report. Compounding is a practice in which a licensed pharmacist, a licensed physician, or, in the case of an outsourcing facility, a person under the supervision of a licensed pharmacist, combines, mixes, or alters ingredients of a drug to create a medication tailored to the needs of an individual patient. Possible value is Y – Yes.
OTC	Indicates whether the suspect product is an over-the-counter (OTC) drug, as identified in the report. OTC drug products are those drugs that are available to consumers without a prescription. Possible value is Y – Yes.
Role	There are two roles for products listed on the cases. Suspect (S) identifies the product(s) that the initial reporter deemed most likely to be associated with the event. Concomitant (C) identifies products taken at the same time as the suspect product, but not deemed by the initial reporter as being associated with the event.
Route	Reported route of product administration (e.g., oral, topical, injection, sublingual, inhalation).
Dosage Text	Refers to the amount of the product that was taken or given to a patient, and the frequency of administration. For example, 20 mg twice daily.
Duration	The length of time the product was used. For example, if someone reported taking Drug A from January 1 to January 30, the duration would be 30 days.
Mfr	The manufacturer of the product, as indicated in the report.

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<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
04-Feb-2020	15592728	EXPEDITED (15-DAY)		OT	ZA-SAKK-2018SA304134AA			Male	ZAF
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Drug Ineffective; Osteoarthritis; Tuberculin Test Positive; White Blood Cell Count Decreased	Arava			S	Unknown			Sanofi	
	Methotrexate			S		Unk		Not Reported	
	Chloroquine Sulfate			S		Unk		Sanofi	
	Sulfasalazine			S		Unk		Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
14-Feb-2020	17420980	EXPEDITED (15-DAY)		OT	ZA-PFIZER INC-2020064178		32 YR	Male	ZAF
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Alanine Aminotransferase Increased; Anxiety Disorder; C-Reactive Protein Increased; Drug Ineffective; Fibromyalgia; Joint Swelling; Loss Of Personal Independence In Daily Activities; Major Depression; Rheumatoid Arthritis; Sleep Apnoea Syndrome	Methotrexate			S		25 Mg, Unk		Pfizer	
	Salazopyrin			S		2 G, Unk		Pfizer	
	Chloroquine			S		200 Mg, Unk		Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
17-Feb-2020	17423522	EXPEDITED (15-DAY)		OT	CA-ROCHE-2549981			Female	CAN
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Drug Ineffective; Synovitis	Rituxan			S	Unknown	Solution Intravenous		Not Reported	
	Humira			S	Subcutaneous	Solution Subcutaneous		Not Reported	
	Hydroxychloroquine Sulfate			S	Unknown			Not Reported	

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	Chloroquine	S	Unknown	Not Reported
	Acetaminophen	C	Unknown	Not Reported
	Atorvastatin	C	Unknown	Not Reported
	Enbrel	C		Not Reported
	Methotrexate	C	Unknown	Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
17-Feb-2020	17424164	EXPEDITED (15-DAY)		OT	CA-TEVA-2020-CA-1184277		31 YR	Female	CAN

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Crying; Drug Ineffective; Joint Swelling	Leflunomide			S	Unknown			Barr
	Methotrexate			S	Unknown			Barr
	Chloroquine			S	Unknown			Not Reported
	Amitriptyline			C		150 Milligram Daily;		Not Reported
	Esomeprazole Magnesium Trihydrate/Naproxen			C				Not Reported
	Folate			C				Not Reported
	Pariet			C		40 Milligram Daily;		Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
18-Feb-2020	15156214	EXPEDITED (15-DAY)		OT	ZA-SA-2018SA183651			Female	ZAF

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Alopecia; Anxiety; Cachexia; Depression; Drug Intolerance; Job Dissatisfaction; Weight Decreased	Arava			S	Unknown	Unk		Sanofi
	Chloroquine (Salt Not Specified)			S	Unknown	200 Mg, Qd		Sanofi
	Methotrexate			C				Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
19-Feb-2020	17413694	EXPEDITED (15-DAY)		OT	PHHY2019SE002330		68 YR	Female	SWE

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
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Anxiety; Decreased Vibratory Sense; Dizziness; Drug Interaction; Erythema; Nerve Degeneration; Neuropathy Peripheral; Pain In Extremity; Peripheral Swelling; Polyneuropathy; Syncope; Systemic Lupus Erythematosus; Toxicity To Various Agents; Tremor	Ciprofloxacin Hydrochloride	S	Unknown	500 Mg, Bid	Novartis
	Naproxen	S	Unknown	500 Mg, 2x/Day (Bid Was Continued)	Not Reported
	Indometacin	S	Unknown	Unk	Not Reported
	Chloroquine	S	Unknown	250 Mg, Daily (More Than Five Years)	Not Reported
	Chloroquine	S			Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
20-Feb-2020	17439060	EXPEDITED (15-DAY)		OT	ZA-SA-2020SA036863		29 YR	Female	ZAF

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Arthropathy; Impaired Work Ability; Leukopenia; Nodule; Rheumatoid Arthritis	Chloroquine (Salt Not Specified)			S		200 Mg		Sanofi
	Arava			S		20 Mg		Sanofi
	Methotrexate Sodium			C		20 Mg		Not Reported
	Arcoxia			C				Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
26-Feb-2020	17376191	EXPEDITED (15-DAY)		OT	NG-BAUSCH-BL-2020-003411		30 YR	Female	NGA

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Dystonia	Metronidazole			S	Intravenous (not otherwise specified)	Seven-Day Course Post-Operatively		Not Reported
	Metronidazole			S	Oral			Not Reported
	Chloroquine Phosphate			S	Oral	Once, On The Sixth Day Post Operatively		Not Reported
	Ampicillin			C	Oral	Postoperatively		Not Reported
	Benylin			C		Before Chloroquine Administration		Not Reported

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Acetaminophen	C	2 Tablets Prn	Not Reported
Folic Acid	C		Not Reported
Promethazine	C	Intramuscular	Not Reported

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27-Feb-2020	16231133	EXPEDITED (15-DAY)		OT	CA-SA-2019SA110410			Male	CAN

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Diarrhoea; Drug Ineffective; Drug Ineffective; Drug Ineffective; Drug Ineffective; Juvenile Idiopathic Arthritis; Polyarthrititis	Hydroxychloroquine Sulfate			S		Unk Unk, Unk		Sanofi
	Chloroquine (Salt Not Specified)			S	Oral	400 Mg, Qd		Sanofi
	Methotrexate			S		25 Mg, Qw		Not Reported
	Methotrexate			S	Oral	10 Mg, Qw		Not Reported
	Humira			S	Subcutaneous	40 Mg		Not Reported
	Prednisone			C	Oral	7 Mg, Qd		Not Reported
	Etanercept			C		50 Mg, Qw		Not Reported
	Cosentyx			C		Unk		Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
02-Mar-2020	16513224	EXPEDITED (15-DAY)		OT	ZA-PFIZER INC-2019278913		56 YR	Female	ZAF

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Impaired Quality Of Life; Impaired Work Ability; Rheumatoid Arthritis	Methotrexate Sodium			S	Oral	25 Mg, Weekly		Pfizer
	Chloroquine			S		200 Mg, Daily		Not Reported
	Arava			S		20 Mg, Daily		Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
10-Mar-2020	17521544	EXPEDITED (15-DAY)		OT	ZA-PFIZER INC-2020103363		50 YR	Male	ZAF

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Diverticulum; Osteoarthritis;	Salazopyrin En			S		1 G, 2x/Day		Pfizer

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Seronegative Arthritis	Nivaquine [Chloroquine]	S	200 Mg, Daily	Not Reported
	Arava	S	10 Mg, Weekly	Not Reported
	Folic Acid	C	5 Mg, Daily	Not Reported
	Arcoxia	C	90 Mg, Alternate Day	Not Reported
	Prednisone	C	10 Mg, 4x Per Week	Not Reported
	Tramacet	C	1/8 Hourly Prn	Not Reported
	Dormonox	C	1/ Nocte Prn	Not Reported
	Lyrica	C	75-150 Mg, Daily Prn	Not Reported
	Cortisone	C	Intravenous (not otherwise specified) Unk	Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
12-Mar-2020	16971400	NON-EXPEDITED		OT	ZA-AMGEN-ZAFSP2018039633		61 YR	Male	ZAF
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Malignant Melanoma; Off Label Use; Upper Respiratory Tract Infection	Enbrel			S	Unknown	25 Milligram, Every 2 Weeks		Amgen	
	Abitrexate			S	Subcutaneous	15 Milligram, Unk		Not Reported	
	Plasmoquine			S	Unknown	200 Milligram 3/Week		Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
13-Mar-2020	17536862	EXPEDITED (15-DAY)		OT	NVSC2020CA065750		63 YR	Female	CAN
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Contraindicated Product Administered; Drug Ineffective; Drug Intolerance; Fatigue; Red Blood Cell Sedimentation Rate Increased; Rheumatoid Factor Positive; Synovitis; Treatment Failure	Neoral			S	Subcutaneous			Novartis	
	Neoral			S	Oral	Unk		Novartis	
	Leflunomide			S	Unknown			Not Reported	
	Methotrexate Sodium			S	Oral	20 Mg		Not Reported	
	Methotrexate Sodium			S	Subcutaneous	20 Mg		Not Reported	
	Methotrexate Sodium			S	Oral	20 Mg		Not Reported	

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Methotrexate Sodium	S	Oral	20 Mg	Not Reported
Methotrexate Sodium	S	Oral	20 Mg	Not Reported
Methotrexate Sodium	S	Subcutaneous	20 Mg	Not Reported
Methotrexate Sodium	S	Oral	20 Mg	Not Reported
Cyclosporine	S	Unknown		Novartis
Rituximab	S	Intravenous (not otherwise specified)		Not Reported
Humira	S	Subcutaneous		Not Reported
Chloroquine	S	Subcutaneous		Not Reported
Actemra	S	Intravenous (not otherwise specified)	8 Mg/Kg	Not Reported
Actemra	S	Intravenous (not otherwise specified)	8 Unk	Not Reported
Apo-Leflunomide	S	Oral		Not Reported
Enbrel	S	Subcutaneous	50 Mg, Qw	Not Reported
Orencia	S	Subcutaneous	125 Mg	Not Reported
Orencia	S	Subcutaneous	125 Mg	Not Reported
Plaquenil	S	Unknown		Not Reported
Remicade	S	Intravenous (not otherwise specified)	3 Mg	Not Reported
Rituxan	S	Intravenous (not otherwise specified)		Not Reported
Sulfasalazine	S	Oral		Not Reported
Xeljanz	C	Oral	5 Mg, Bid	Not Reported
Xeljanz Xr	C	Unknown		Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
16-Mar-2020	17546843	EXPEDITED (15-DAY)		OT	CA-TEVA-2020-CA-1202541		60 YR	Female	CAN
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Cataract; Off Label Use	Methotrexate			S	Subcutaneous			Barr	

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Chloroquine			S		Unknown			Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
16-Mar-2020	17546844	EXPEDITED (15-DAY)		HO, OT	CA-TEVA-2020-CA-1202539		55 YR	Female	CAN
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Bronchitis; Condition	Methotrexate			S	Unknown			Barr	
Aggravated; Diverticulitis;	Chloroquine Diphosphate			S	Unknown			Not Reported	
H1n1 Influenza; Hepatic	Belimumab			S	Unknown			Not Reported	
Enzyme Increased;	Hydroxychloroquine Sulfate			S	Unknown			Not Reported	
Hepatomegaly;									
Palpitations; Pneumonia;									
Renal Disorder; Tooth									
Extraction; Tooth Infection									
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
17-Mar-2020	17548310	EXPEDITED (15-DAY)		DS	CN-ABBVIE-20K-035-3317442-00		82 YR	Male	CHN
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Blood Bilirubin Increased;	Aluvia 200/50			S	Oral			Not Reported	
Hepatocellular Injury; Off	Aluvia 200/50			S				Not Reported	
Label Use; Therapeutic	Rosuvastatin Calcium			S	Oral			Not Reported	
Response Unexpected;	Chloroquine Phosphate			S	Oral			Not Reported	
Total Bile Acids Increased	Chloroquine Phosphate			S				Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
17-Mar-2020	17553377	EXPEDITED (15-DAY)		OT	CA-JNJFOC-20200309388		57 YR	Female	CAN
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Hot Flush; Hyperhidrosis;	Remicade			S	Intravenous (not otherwise specified)	Last Infusion: 04-Mar-2020		Not Reported	
Incorrect Drug	Remicade			S				Not Reported	
Administration Rate;	Chloroquine			S	Unknown			Not Reported	
Infusion Related Reaction;									
Insomnia; Mucous Stools;									
Off Label Use; Pain;									

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Systemic Lupus
Erythematosus

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
19-Mar-2020	14035262	EXPEDITED (15-DAY)		OT	ZA-PFIZER INC-2017422601		66 YR	Male	ZAF
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Benign Prostatic Hyperplasia; Prostate Cancer	Methotrexate Sodium			S		30 Mg, Weekly		Pfizer	
	Arava			S		20 Mg, Daily		Not Reported	
	Chloroquine			S	Oral	200 Mg, Daily		Not Reported	

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
19-Mar-2020	17560170	EXPEDITED (15-DAY)		DS, HO	NVSC2020CN074307		82 YR	Male	CHN
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Asthenia; Coronavirus Infection; Decreased Appetite; Hepatocellular Injury; Total Bile Acids Increased	Rosuvastatin Calcium			S	Oral	1 Df, Qd		Novartis	
	Lopinavir,Ritonavir			S	Oral	2 Df, Bid		Not Reported	
	Chloroquine Phosphate			S	Oral	2 Df, Bid		Not Reported	

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
19-Mar-2020	17560770	EXPEDITED (15-DAY)		OT	ZA-SA-2020SA065892		38 YR	Female	ZAF
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Rheumatoid Arthritis	Arava			S	Unknown			Sanofi	
	Methotrexate			S	Unknown			Not Reported	
	Chloroquine (Salt Not Specified)			S	Unknown			Sanofi	
	Sulfasalazine			S				Not Reported	

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
27-Mar-2020	13850822	EXPEDITED (15-DAY)		HO, OT	BR-GLAXOSMITHKLINE-BR2016GSK044952			Female	BRA

FDA Adverse Event Reporting System Freedom of Information Act (FOIA) Detailed Report

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Alopecia; Arthralgia; Back Pain; Cerebrovascular Accident; Circumstance Or Information Capable Of Leading To Medication Error; Decreased Appetite; Dyspnoea; Fatigue; Foot Operation; Gait Disturbance; Hypersensitivity; Inappropriate Schedule Of Product Administration; Menorrhagia; Musculoskeletal Pain; Myalgia; Onychomycosis; Pain; Physical Examination Abnormal; Product Availability Issue; Product Dose Omission; Product Prescribing Issue; Pruritus; Somnolence; Speech Disorder; Systemic Lupus Erythematosus Rash; Tremor; Underdose; Vaginal Haemorrhage; Weight Decreased; Weight Increased	Belimumab			S		540 Mg, Unk		Glaxosmithkline	
	Belimumab			S		540 Mg, Unk		Glaxosmithkline	
	Marevan			S		2.5 Mg, Qd		Glaxosmithkline	
	Fluconazole			S		Unk		Glaxosmithkline	
	Chloroquine Phosphate			S		Unk		Glaxosmithkline	
	Prednisone			S		Unk		Not Reported	
	Chloroquine			C		50 Mg, Unk		Not Reported	
	Methotrexate			C		Unk		Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
30-Mar-2020	17598304	EXPEDITED (15-DAY)		HO, LT	NVSC2020CA086753		58 YR	Male	CAN
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Apparent Death; C-Reactive Protein Increased; Deep Vein Thrombosis; Diverticulitis; Drug Ineffective;	Ilaris			S	Subcutaneous			Novartis	
	Ilaris			S				Novartis	
	Methotrexate			S	Unknown			Not Reported	
	Methotrexate			S				Not Reported	

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Intentional Product Use	Actemra	S	Unknown		Not Reported
Issue; Joint Swelling; Off	Actemra	S			Not Reported
Label Use; Pain;	Anakinra	S	Unknown		Not Reported
Pulmonary Embolism;	Anakinra	S			Not Reported
Pulmonary Thrombosis;	Arava	S	Unknown		Not Reported
Red Blood Cell	Arava	S			Not Reported
Sedimentation Rate	Enbrel	S	Unknown		Not Reported
Increased; Renal Failure;	Enbrel	S			Not Reported
Sepsis; Thrombosis	Humira	S	Subcutaneous	Solution	Not Reported
	Humira	S			Not Reported
	Chloroquine Phosphate	S	Unknown		Not Reported
	Chloroquine Phosphate	S			Not Reported
	Orencia	S	Intravenous (not otherwise specified)		Not Reported
	Orencia	S			Not Reported
	Remicade	S	Intravenous (not otherwise specified)	Powder For Solution	Not Reported
	Remicade	S			Not Reported
	Sodium Aurothiomalate	S	Unknown		Not Reported
	Sodium Aurothiomalate	S			Not Reported
	Sulfasalazine	S	Unknown		Not Reported
	Sulfasalazine	S			Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
31-Mar-2020	15208555	EXPEDITED (15-DAY)		OT	ZA-PFIZER INC-2017517635		57 YR	Female	ZAF

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Back Pain; Post	Enbrel			S	Subcutaneous	25 Mg, 2x/Week		Pfizer
Procedural Complication	Methotrexate			S		25 Mg, Unk		Pfizer
	Plasmoquine			S		1 Week		Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
01-Apr-2020	17610621	EXPEDITED (15-DAY)		OT	NL-ACCORD-177665		73 YR	Female	NLD

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<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Electrocardiogram Qt Prolonged; Potentiating Drug Interaction	Quetiapine			S		Tablet Mva, 300 Mg, 1 X Per Day 1 Piece		Not Reported
	Chloroquine			S		Tablet, 100 Mg, 2 X Per Dag 3 Stuks, 1e Dosis 6 Stuks		Not Reported
	Lithium			S		300 Mg, 1 X Per Dag 1 Piece		Not Reported
	Dalteparin			C		Injectievloeistof, 25.000 Ie/MI (Eenheden Per Milliliter)		Not Reported
	Paracetamol			C		Infusion Liquid, 10 Mg / MI (Milligrams Per Milliliter)		Not Reported
	Oxazepam			C		Tablet, 5 Mg (Milligram)		Not Reported
	Cefuroxime			C		Injection Liquid		Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
02-Apr-2020	17614974	EXPEDITED (15-DAY)		OT	NL-ASTRAZENECA-2020SE42678		73 YR	Female	NLD

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Electrocardiogram Qt Prolonged; Potentiating Drug Interaction	Quetiapine			S	Oral			Astrazeneca
	Chloroquine			S	Oral	Tablet, 100 Mg, 3 B.I.D., First Dose 6 Tablets		Not Reported
	Lithiumcarbonaat			S	Unknown			Not Reported
	Dalteparine			C	Unknown	1 Df, Injection Fluid, 25.000 Iu/MI (Units Per Milliliter)		Not Reported
	Paracetamol			C	Unknown	1.0df Unknown		Not Reported
	Oxazepam			C	Unknown	5.0mg Unknown		Not Reported
	Cefuroxim			C		1.0df Unknown		Not Reported

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<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
02-Apr-2020	17621574	DIRECT	Y	DE			32 YR	Female	USA
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Death	Chloroquine			S	Oral			Not Reported	
	Zejula			C				Not Reported	
	Keytruda 100/4ml Vial Iv			C				Not Reported	
	Celecoxib 400 Mg, Oral Capsule			C				Not Reported	
	Afinitor 2.5 Mg, Tablet Oral			C				Not Reported	
	Cyclophosphamide 25 Mg, Oral			C				Not Reported	
	Capecitabine 500mg, Oral			C				Not Reported	
	Chloroquine Ph, 250mg, Oral			C				Not Reported	
	Procrit 20,000 Units/ML Vial, Sq			C				Not Reported	
	As Directed								
	Neupogen 300 Mcg/ 0.5ml			C				Not Reported	
	Syringe, Sq								
	Venofer 200 Mg/10ml Vial Iv As			C				Not Reported	
	Directed								
	Chloroquine Ph 250 Mg, Daily			C				Not Reported	
	Chloroquine Ph 250 Mg, Daily			C				Not Reported	
	Venofer 200mg /10ml Vial Iv			C				Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
03-Apr-2020	17620967	EXPEDITED (15-DAY)		OT	ZA-PFIZER INC-2020136716		24 YR	Female	ZAF
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Psoriasis; Rheumatoid Arthritis	Methotrexate			S		25 Mg, Weekly		Pfizer	
	Chloroquine			S		200 Mg, Daily		Not Reported	
	Cyclosporin A			S	Oral	75 Mg, 2x/Day		Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
03-Apr-2020	17623442	EXPEDITED (15-DAY)		DE, OT	BR-GLAXOSMITHKLINE-BR2017GSK141512		61 YR	Female	BRA
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	

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Arthralgia; Arthritis;	Benlysta	S	550 Mg, Unk	Glaxosmithkline
Bronchitis; Death;	Benlysta	S	500 Mg	Glaxosmithkline
Decreased Appetite; Dry	Chloroquine Phosphate	S	250 Mg, Unk	Glaxosmithkline
Eye; Dysphagia; Gait	Paracetamol	C	Unk	Glaxosmithkline
Disturbance; Glossodynia;	Crestor	C	Unk	Glaxosmithkline
Hypoaesthesia;	Colecalciferol	C	Unk	Glaxosmithkline
Inappropriate Schedule Of	Methotrexate	C	Unk	Glaxosmithkline
Product Administration;	Mycophenolate	C	Unk	Glaxosmithkline
Joint Swelling; Lip	Calcium	C	Unk	Glaxosmithkline
Erythema; Oral	Glucosamine	C	Unk	Glaxosmithkline
Discomfort;	Clopidogrel	C	Unk	Glaxosmithkline
Oropharyngeal Pain;	Sodium Chloride	C	Intravenous (not otherwise specified) Unk	Not Reported
Osteoarthritis; Pain In	Prednisone	C	5 Mg, Unk	Not Reported
Extremity; Peripheral	Chondroitin	C	Unk	Not Reported
Coldness; Pneumonia;	Amytril	C	Unk	Not Reported
Product Dose Omission;	Rivotril	C	Unk	Not Reported
Renal Disorder;	Endofolin	C	Unk	Not Reported
Therapeutic Product Effect	Alginac	C	Unk(1000)	Not Reported
Decreased; Tongue	Cilostazol	C	Unk	Not Reported
Erythema; Underdose;				
Urinary Tract Infection;				
Visual Impairment; Weight				
Decreased; Weight				
Fluctuation; Wrong				
Product Administered;				
Wrong Technique In				
Product Usage Process				

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
06-Apr-2020	16462586	EXPEDITED (15-DAY)		OT	ZA-SA-2018SA247056		70 YR	Male	ZAF

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Benign Prostatic Hyperplasia;	Chloroquine (Salt Not Specified)			S		200 Mg		Sanofi
Hypertension; Platelet Count Abnormal; Prostate Cancer	Methotrexate			S		30 Mg		Not Reported
	Arava			S		20 Mg		Sanofi

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<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
07-Apr-2020	17639061	EXPEDITED (15-DAY)		OT	ZA-SA-2020SA071467			Female	ZAF
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Rheumatoid Arthritis	Arava			S	Unknown	20 Mg		Sanofi	
	Chloroquine (Salt Not Specified)			S	Unknown	200 Mg		Sanofi	
	Methotrexate Sodium			S	Unknown	25 Mg		Not Reported	
	Salazopyrin			S	Unknown	2 G		Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
07-Apr-2020	17639471	EXPEDITED (15-DAY)		OT	FR-IPCA LABORATORIES LIMITED-IPC-2020-FR- 001059			Unknown	FRA
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Anaemia; Cardiomyopathy; Cutaneous Lupus Erythematosis; Neutropenia; Renal Failure; Retinal Injury; Thrombocytopenia; Toxicity To Various Agents	Chloroquine Phosphate			S	Unknown	300 Milligram, Qd		Ipca	
	Hydroxychloroquine			S	Unknown	Unk		Ipca	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
08-Apr-2020	17647436	EXPEDITED (15-DAY)		OT	CA-ABBVIE-20K-028- 3356481-00			Unknown	CAN
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Constipation; Polyarthritis; Skin Lesion; Treatment Failure; Uveitis	Humira			S	Unknown			Not Reported	
	Leflunomide			S	Unknown			Not Reported	
	Methotrexate			S	Unknown			Not Reported	
	Aralen			S	Unknown			Not Reported	

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Plaquenil	S	Unknown	Not Reported
Sodium Aurothiomalate	S	Unknown	Not Reported
Remicade	S	Intravenous (not otherwise specified)	Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
08-Apr-2020	17648543	EXPEDITED (15-DAY)		OT	ZA-SA-2020SA075153		50 YR	Male	ZAF

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Adverse Drug Reaction; Diverticulum; Osteoarthritis; Seronegative Arthritis	Arava			S		10 Mg, Qw		Sanofi
	Sulfasalazine			S		1 G, Bid		Not Reported
	Chloroquine (Salt Not Specified)			S		200 Mg, Qd		Sanofi
	Folic Acid			C				Not Reported
	Arcoxia			C				Not Reported
	Prednisone			C				Not Reported
	Tramacet			C				Not Reported
	Dormonox			C				Not Reported
	Lyrica			C				Not Reported
	Cortisone			C		Unk		Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
08-Apr-2020	17648751	EXPEDITED (15-DAY)		OT	CA-ABBVIE-20K-028-3356478-00			Unknown	CAN

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Deformity; Movement Disorder; Polyarthritis; Skin Lesion; Treatment Failure; Uveitis	Humira			S	Subcutaneous			Not Reported
	Methotrexate			S	Unknown			Not Reported
	Leflunomide			S	Unknown			Not Reported
	Aralen			S	Unknown			Not Reported
	Plaquenil			S	Unknown			Not Reported
	Myochrysine			S	Intramuscular			Not Reported
	Remicade			S	Intravenous (not otherwise specified)			Not Reported

FDA Adverse Event Reporting System Freedom of Information Act (FOIA) Detailed Report

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
11-Apr-2020	15230238	NON-EXPEDITED		OT	ZA-AMGEN- ZAFSP2017181416		57 YR	Female	ZAF
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Back Pain; Post Procedural Complication	Enbrel			S	Subcutaneous	25 Milligram, 2x/Week		Amgen	
	Methotrexate			S	Unknown	25 Milligram, Unk		Not Reported	
	Plasmoquine			S	Unknown	1 Week		Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
13-Apr-2020	17660080	EXPEDITED (15-DAY)		OT	CA-PFIZER INC- 2020147592			Unknown	CAN
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Deformity; Movement Disorder; Polyarthritis; Skin Lesion; Treatment Failure; Uveitis	Methotrexate Sodium			S	Unknown			Pfizer	
	Myochrysine			S	Unknown			Not Reported	
	Aralen [Chloroquine Sulfate]			S	Unknown			Not Reported	
	Humira			S	Unknown			Not Reported	
	Leflunomide			S	Unknown			Not Reported	
	Plaquenil [Hydroxychloroquine Sulfate]			S	Unknown			Not Reported	
	Remicade			S	Unknown			Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
13-Apr-2020	17660089	EXPEDITED (15-DAY)		OT	CA-PFIZER INC- 2020147560			Unknown	CAN
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Constipation; Off Label Use; Polyarthritis; Product Use In Unapproved Indication; Skin Lesion; Treatment Failure; Uveitis	Methotrexate Sodium			S	Unknown			Pfizer	
	Aralen [Chloroquine Sulfate]			S	Unknown			Not Reported	
	Humira			S	Unknown			Not Reported	
	Leflunomide			S	Unknown			Not Reported	
	Plaquenil [Hydroxychloroquine			S	Unknown			Not Reported	

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Sulfate]									
Remicade		S		Unknown					Not Reported
Sodium Aurothiomalate		S		Unknown					Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
13-Apr-2020	17660569	EXPEDITED (15-DAY)		OT	CA-PFIZER INC-2020147922			Unknown	CAN

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Drug Ineffective; Musculoskeletal Stiffness; Off Label Use; Polyarthritis; Product Use In Unapproved Indication; Skin Lesion; Uveitis	Methotrexate Sodium			S		Unk		Pfizer
	Remicade			S		Unk		Not Reported
	Aralen Hydrochloride			S		Unk		Not Reported
	Humira			S		Unk		Not Reported
	Leflunomide			S		Unk		Not Reported
	Myochrysine			S		Unk		Not Reported
	Plaquenil [Hydroxychloroquine Phosphate]			S		Unk		Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
13-Apr-2020	17662489	EXPEDITED (15-DAY)		OT	NL-MYLANLABS-2020M1037190		73 YR	Female	NLD

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Electrocardiogram Qt Prolonged; Potentiating Drug Interaction	Quetiapine			S		Tablet Mva, 300 Mg, 1 X Per Dag 1 Stuk		Not Reported
	Chloroquine			S		Tablet, 100 Mg, 2 X Per Dag 3 Stuks, 1e Dosis 6 Stuks		Mylan
	Lithiumcarbonaat			S		300 Mg, 1 X Per Dag 1 Stuk		Mylan
	Dalteparin			C		Injectievloeistof, 25.000 Ie/MI (Eenheden Per Milliliter)		Mylan
	Paracetamol			C		Infusievloeistof, 10 Mg/MI (Milligram Per Milliliter)		Mylan

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Oxazepam	C	Tablet, 5 Mg (Milligram)	Mylan
Cefuroxim /00454601/	C	Injectievloeistof	Mylan

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
13-Apr-2020	17663224	EXPEDITED (15-DAY)		OT	FR-ADVANSZ PHARMA-202003002823			Unknown	FRA

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Angioedema	Hydroxychloroquine Sulfate (Authorized Generic),Plaquenil			S	Unknown	Unk		Concordia
	Nivaquine			S	Unknown	1 Dosage Form, Qd		Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
14-Apr-2020	17664171	EXPEDITED (15-DAY)		OT	CA-ORION CORPORATION ORION PHARMA-TREX2020-1698			Unknown	CAN

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Deformity; Movement Disorder; Polyarthriti	Methotrexate (Trade Name Unknown)			S	Unknown			Not Reported
Product Use In	Myochrysine			S	Unknown			Not Reported
Unapproved Indication; Skin Lesion; Treatment Failure; Uveitis	Aralen			S	Unknown			Not Reported
	Humira			S	Unknown			Not Reported
	Leflunomide			S	Unknown			Not Reported
	Plaquenil			S	Unknown			Not Reported
	Remicade			S	Unknown			Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
14-Apr-2020	17664281	EXPEDITED (15-DAY)		OT	CA-ORION CORPORATION ORION PHARMA-TREX2020-1710			Unknown	CAN

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Constipation; Polyarthriti	Methotrexate (Trade Name Unknown)			S	Unknown			Not Reported

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Unapproved Indication; Skin Lesion; Treatment Failure; Uveitis	Aralen	S	Unknown	Not Reported
	Humira	S	Unknown	Not Reported
	Leflunomide	S	Unknown	Not Reported
	Plaquenil	S	Unknown	Not Reported
	Remicade	S	Unknown	Not Reported
	Sodium Aurothiomalate	S	Unknown	Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
14-Apr-2020	17668362	EXPEDITED (15-DAY)		OT	CA-ABBVIE-20K-028-3362555-00			Unknown	CAN

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Drug Ineffective; Musculoskeletal Stiffness; Polyarthritis; Skin Lesion; Uveitis	Humira			S	Subcutaneous			Not Reported
	Remicade			S	Intravenous (not otherwise specified)			Not Reported
	Myochrysine			S	Intramuscular			Not Reported
	Plaquenil			S	Unknown			Not Reported
	Aralen			S	Unknown			Not Reported
	Leflunomide			S	Unknown			Not Reported
	Methotrexate			S	Unknown			Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
15-Apr-2020	17668886	EXPEDITED (15-DAY)		OT	CA-ORION CORPORATION ORION PHARMA-TREX2020-1730			Unknown	CAN

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Drug Ineffective For Unapproved Indication; Musculoskeletal Stiffness; Polyarthritis; Product Use In Unapproved Indication; Skin Lesion; Uveitis	Methotrexate (Trade Name Unknown)			S	Unknown			Not Reported
	Remicade			S	Intravenous (not otherwise specified)			Not Reported
	Aralen Hydrochloride			S	Unknown			Not Reported
	Humira			S	Subcutaneous			Not Reported

FDA Adverse Event Reporting System Freedom of Information Act (FOIA) Detailed Report

	Leflunomide		S	Unknown				Not Reported	
	Myochrysine		S	Intramuscular				Not Reported	
	Plaquenil		S	Unknown				Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
15-Apr-2020	17671033	EXPEDITED (15-DAY)		DE	SI-AMNEAL PHARMACEUTICALS- 2020-AMRX-01138		62 YR	Female	SVN
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Cardiac Failure; Congestive Cardiomyopathy	Chloroquine Phosphate			S	Unknown	Unk		Impax	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
15-Apr-2020	17671303	EXPEDITED (15-DAY)		OT	SI-AMNEAL PHARMACEUTICALS- 2020-AMRX-01140		41 YR	Male	SVN
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Cardiomyopathy	Chloroquine Phosphate			S	Unknown	Unk		Impax	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
16-Apr-2020	17677171	EXPEDITED (15-DAY)		HO	AU-VALIDUS PHARMACEUTICALS LLC-AU- 2020VAL000308			Unknown	AUS
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Disease Progression; Drug Ineffective; Off Label Use; Tachypnoea	Cefotaxime Sodium			S	Unknown	Unk		Validus	
	Chloroquine			S	Oral	10 Mg/Kg, Qd		Not Reported	
	Prednisolone			S	Oral	1 Mg/Kg, Qd		Not Reported	
	Methylprednisolone			S	Intravenous (not otherwise specified)	High Intravenous Dose		Not Reported	
	Flucloxacillin			S	Unknown	Unk		Not Reported	
	Tobramycin			S	Unknown	Unk		Not Reported	

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	Immunoglobulin /07494701/	S	Intravenous (not otherwise specified)	Unk	Not Reported
	Hydrocortisone	C		Unk	Not Reported
	Albuterol /00139501/	C		Unk	Not Reported
	Ampicillin	C		Unk	Not Reported
	Erythromycin	C		Unk	Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
17-Apr-2020	17678788	EXPEDITED (15-DAY)		HO	ES-ABBVIE-20K-144-3367101-00		34 YR	Male	ESP

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Condition Aggravated; Hepatocellular Injury	Kaletra 200/50			S	Oral			Not Reported
	Tocilizumab			S	Intravenous (not otherwise specified)			Not Reported
	Cloroquina			S	Oral			Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
17-Apr-2020	17679976	EXPEDITED (15-DAY)		HO, OT	DE-SANOFI-AVENTIS-2012SA019610		31 YR	Female	DEU

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Epidermal Necrosis; Lip Disorder; Pigmentation Disorder; Skin Lesion; Stevens-Johnson Syndrome; Toxic Epidermal Necrolysis	Cyclophosphamide			S	Unknown	Unk Unk,Unk		Not Reported
	Prednisone			S	Unknown	Unk Unk,Unk		Not Reported
	Chloroquine (Salt Not Specified)			S	Unknown	Unk Unk,Unk		Sanofi
	Sulfamethoxazole/Trimethoprim			S	Unknown	Unk Unk,Unk		Not Reported
	Prednisolone			S	Unknown	Unk Unk,Unk		Not Reported
	Hydroxychloroquine Sulfate			S	Unknown	Unk Unk,Unk		Sanofi
	Leflunomide			S	Unknown	Unk Unk,Unk		Sanofi

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
21-Apr-2020	17683654	EXPEDITED (15-DAY)		HO, OT	DE-IPCA LABORATORIES LIMITED-IPC-2020-DE-			Unknown	DEU

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<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Adverse Event; Drug Ineffective; Inflammation; Procalcitonin Increased	Mycophenolate Mofetil			S	Unknown	Unk		Not Reported
	Chloroquine			S	Unknown	Unk		Ipca
	Sulfasalazine			S	Unknown	Unk		Not Reported
	Leflunomide			S	Unknown	Unk		Not Reported
	Prednisolone			C	Unknown	Unk		Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
21-Apr-2020	17687792	EXPEDITED (15-DAY)		OT	CA-SA-2020SA100987			Unknown	CAN

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Drug Ineffective; Musculoskeletal Stiffness; Polyarthrits; Skin Lesion; Uveitis	Plaquenil			S	Unknown			Sanofi
	Aralen			S	Unknown			Sanofi
	Leflunomide			S	Unknown			Sanofi
	Methotrexate			S	Unknown			Not Reported
	Myochrysine			S	Unknown			Not Reported
	Remicade			S	Unknown			Not Reported
	Humira			S	Unknown			Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
21-Apr-2020	17688868	EXPEDITED (15-DAY)		OT	CA-SA-2020SA100832			Unknown	CAN

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Deformity; Movement Disorder; Polyarthrits; Skin Lesion; Treatment Failure; Uveitis	Plaquenil			S				Sanofi
	Methotrexate			S				Not Reported
	Leflunomide			S		Unk		Sanofi
	Chloroquine Sulfate			S				Sanofi

FDA Adverse Event Reporting System Freedom of Information Act (FOIA) Detailed Report

	Myochrysine			S					Not Reported
	Humira			S					Not Reported
	Remicade			S					Not Reported
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
21-Apr-2020	17688871	EXPEDITED (15-DAY)		OT	CA-SA-2020SA100853			Unknown	CAN
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Constipation; Polyarthriti Skin Lesion; Treatment Failure; Uveitis	Plaquenil			S	Unknown			Sanofi	
	Aralen			S	Unknown			Sanofi	
	Leflunomide			S	Unknown			Sanofi	
	Methotrexate			S	Unknown			Not Reported	
	Sodium Aurothiomalate			S	Unknown			Not Reported	
	Humira			S	Unknown			Not Reported	
	Remicade			S	Unknown			Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
22-Apr-2020	17691669	EXPEDITED (15-DAY)		OT	CA-ROCHE-2585066		44 YR	Female	CAN
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Abdominal Pain; Arthritis; C-Reactive Protein Increased; Drug Ineffective; Eye Infection; Inflammation; Ocular Toxicity; Skin Discolouration; Swelling; Therapeutic Product Effect Decreased; Treatment Failure; Vasculitic Rash	Rituxan			S	Intravenous drip			Not Reported	
	Rituxan			S				Not Reported	
	Mycophenolate Mofetil			S	Oral			Not Reported	
	Prednisone			S	Unknown			Not Reported	
	Azathioprine			S	Unknown			Not Reported	
	Chloroquine			S	Unknown			Not Reported	
	Acetaminophen			C	Oral			Not Reported	
	Actonel			C	Unknown			Not Reported	
	Amlodipine			C	Unknown			Not Reported	
	Diphenhydramine			C	Oral			Not Reported	
	Ferrous Gluconate			C	Unknown			Not Reported	

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Losec [Omeprazole]	C	Unknown	Not Reported
Medrol [Methylprednisolone]	C	Unknown	Not Reported
Methylprednisolone	C	Intravenous (not otherwise specified)	Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
22-Apr-2020	17691901	EXPEDITED (15-DAY)		OT	SI-BAYER-2020-063855		54 YR	Female	SVN
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Electrocardiogram Qt Prolonged	Chloroquine			S	Oral	250 Mg Experimental Therapy		Bayer	
	Micardis			C				Not Reported	
	Concor			C				Not Reported	
	Aspirin Protect 100 Mg			C	Oral			Bayer	
	Folkodin Alkaloid			C				Not Reported	
	Lekadol C			C				Not Reported	
	Sorvasta			C				Not Reported	

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
22-Apr-2020	17695429	EXPEDITED (15-DAY)		HO	DE-BAXTER-2020BAX008027		31 YR	Female	DEU
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Epidermal Necrosis;	Endoxan Lyophilisat			S	Unknown			Baxter	
Epidermal Necrosis; Lip Disorder; Lip Disorder;	Leflunomide			S	Unknown			Not Reported	
Pigmentation Disorder;	Trimethoprim/Sulfamethoxazole			S	Unknown			Not Reported	
Skin Lesion; Skin Lesion;	Chloroquine			S	Unknown			Not Reported	
Stevens-Johnson Syndrome; Toxic	Prednisone			S	Unknown			Not Reported	
Epidermal Necrolysis;	Hydroxychloroquine Sulfate			S	Unknown			Not Reported	
Toxic Epidermal Necrolysis; Toxic	Prednisolone			S	Nasal			Not Reported	
Epidermal Necrolysis									

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<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
24-Apr-2020	17704891	EXPEDITED (15-DAY)		OT	CN-BAYER-2020-066076		47 YR	Male	CHN
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Electrocardiogram Qt Prolonged; Off Label Use; Product Use In Unapproved Indication	Resochin 250 Mg			S	Oral	0.5 G, Bid		Bayer	
	Resochin 250 Mg			S				Bayer	

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
27-Apr-2020	17027055	EXPEDITED (15-DAY)		OT	CA-SA-2019SA305783			Female	CAN
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Rash	Nasacort			S	Oral	2 Mg		Sanofi	
	Acetylsalicylic Acid			S	Unknown	80 Mg		Not Reported	
	Calcium			S	Unknown	Unk, Unk		Sanofi	
	Methotrexate			S	Oral	Unk		Not Reported	
	Methotrexate			S	Subcutaneous	Unk		Not Reported	
	Levothyroxine Sodium			S	Unknown	200 Ug		Not Reported	
	Warfarin Sodium			S	Oral	2.0 Mg		Not Reported	
	Chloroquine Diphosphate			S	Unknown	Unk Unk, Unk		Not Reported	
	Xeljanz			S	Unknown	5 Mg, Bid		Not Reported	
	Azathioprine			S				Not Reported	
	Varenicline Tartrate			S	Unknown			Not Reported	
	Vitamin D [Colecalciferol]			C	Unknown	Unk, Unk		Not Reported	
	Prednisone			C	Unknown	10 Mg, Qd		Not Reported	
	Pantoprazole Magnesium			C		40 Mg, Qd		Not Reported	
	Mycophenolate Mofetil			C		1000 Mg		Not Reported	
	Mycophenolate Mofetil			C		500 Mg, Bid		Not Reported	
	Folic Acid			C	Oral	5 Mg, Unk		Not Reported	

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<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
27-Apr-2020	17672253	EXPEDITED (15-DAY)		OT	CA-JNJFOC-20200411530		49 YR	Female	CAN
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Arthritis; Contraindicated Product Administered; Drug Hypersensitivity; Drug Ineffective; Drug Intolerance; Seronegative Arthritis; Treatment Failure	Simponi			S	Subcutaneous			Janssen	
	Simponi			S				Janssen	
	Cosentyx			S	Unknown			Not Reported	
	Enbrel			S	Unknown			Not Reported	
	Hydroxychloroquine			S	Unknown			Not Reported	
	Hydroxychloroquine			S				Not Reported	
	Rituximab			S	Intravenous (not otherwise specified)			Not Reported	
	Rituximab			S	Intravenous (not otherwise specified)			Not Reported	
	Sulfasalazine			S	Unknown			Not Reported	
	Methotrexate			S	Unknown			Not Reported	
	Celebrex			S	Unknown			Not Reported	
	Chloroquine Diphosphate			S	Unknown			Not Reported	
	Humira			S	Subcutaneous			Not Reported	
	Orencia			S	Unknown			Not Reported	
	Xeljanz			S	Oral			Not Reported	
	Erythromycin			C	Unknown			Not Reported	
	Morphine			C	Topical			Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
28-Apr-2020	17620078	EXPEDITED (15-DAY)		OT	ES-ABBVIE-20K-144-3348741-00			Male	ESP
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Electrocardiogram Qt Prolonged; Off Label Use	Kaletra			S	Oral			Not Reported	
	Kaletra			S				Not Reported	

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Azithromycin	S	Unknown	Not Reported
Chloroquine	S	Unknown	Not Reported
Ceftriaxone	C		Not Reported
Tocilizumab	C		Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
29-Apr-2020	17687195	EXPEDITED (15-DAY)		OT	TH-ROCHE-2581494		38 YR	Male	THA

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Off Label Use; Pneumonitis; Product Use In Unapproved Indication	Actemra			S	Intravenous (not otherwise specified)			Not Reported
	Tamiflu			S	Oral			Not Reported
	Chloroquine			S	Oral			Not Reported
	Azithromycin			S	Oral			Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
30-Apr-2020	17727766	EXPEDITED (15-DAY)		OT	US-BAYER-2020-067458		63 YR	Female	AUS

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Dysstasia; Feeling Abnormal; Gait Inability; Malaise; Muscular Weakness; Nausea; Vertigo	Chloroquine			S		Unk		Bayer

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
30-Apr-2020	17730609	EXPEDITED (15-DAY)		OT	FR-US-PROVELL PHARMACEUTICALS LLC-9071647			Male	FRA

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Adverse Event; Back Pain; Dysstasia; Headache; Ill- Defined Disorder; Myalgia; Pain	Levothyrox			S				Not Reported
	Chloroquine			S				Not Reported

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<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
04-May-2020	17745411	EXPEDITED (15-DAY)		OT	ES-AUROBINDO-AUR-APL-2020-019615			Male	ESP
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Electrocardiogram Qt Prolonged; Off Label Use	Azithromycin			S	Unknown	Unk		Aurobindo	
	Chloroquine			S	Unknown	Unk		Not Reported	
	Kaletra			S	Oral	Unk		Not Reported	
	Kaletra			S				Not Reported	
	Ceftriaxone			C	Unknown	Unk		Not Reported	
	Tocilizumab			C	Unknown	Unk		Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
06-May-2020	17752542	EXPEDITED (15-DAY)		OT	SI-BAYER-2020-072342		71 YR	Female	SVN
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Atrioventricular Block First Degree; Electrocardiogram Qt Prolonged	Chloroquine			S	Oral	250 Mg Coated Tablets; 500mg At 12-Hour Intervals		Bayer	
	Pantoprazol [Pantoprazole]			C				Not Reported	
	Fentanyl			C				Not Reported	
	Flucloxacillin [Flucloxacillin]			C				Not Reported	
	Midazolam			C				Not Reported	
	Dexmedetomidine			C				Not Reported	
	Esmeron			C				Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
06-May-2020	17752580	EXPEDITED (15-DAY)		OT	NL-BAYER-2020-072354		46 YR	Female	NLD
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Mania	Chloroquine			S				Bayer	

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06-May-2020	17752587	EXPEDITED (15-DAY)		HO	NL-BAYER-2020-072388		68 YR	Male	NLD
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Abnormal Behaviour; Sexual Inhibition	Chloroquine			S		300 Mg		Bayer	
	Fraxiparine			C		Injection Liquid, 9500 Ie/MI (Units Per Milliliter)		Not Reported	
	Ceftriaxon			C		For Infusion, 2000 Mg (Milligrams)		Not Reported	
	Amoxicilline [Amoxicillin Sodium]			C		Tablet, 500 Mg (Milligram)		Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
06-May-2020	17752588	EXPEDITED (15-DAY)		HO	NL-BAYER-2020-072616		71 YR	Male	NLD
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Psychotic Disorder	Chloroquine			S		200 Mg, Q8hr		Bayer	
	Fraxiparine			C		Injection Liquid, 9500 Ie/MI (Units Per Milliliter)		Not Reported	
	Insulin			C		Variable		Not Reported	
	Entecavir			C		Unk		Not Reported	
	Movicolon			C		Unk		Not Reported	
	Ebilfumin			C		Unk		Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
06-May-2020	17752632	EXPEDITED (15-DAY)		HO	NL-BAYER-2020-073446		61 YR	Male	NLD
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Epilepsy	Chloroquine			S		Unknown, Can Be Requested From Physician In Hospital		Bayer	
	Ceftriaxon			C		Unknown, Can Be		Not Reported	

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Azitromycine	C	Requested From Physician In Hospital	Not Reported
		Unknown, Can Be Requested From Physician In Hospital	

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06-May-2020	17752638	EXPEDITED (15-DAY)		HO	ES-BAYER-2020-073621		34 YR	Male	ESP

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Coronavirus Infection; Hepatitis	Chloroquine			S	Oral	155 Mg, Bid		Bayer
	Tocilizumab			S	Intravenous (not otherwise specified)	600 Mg, Qd		Not Reported
	Kaletra			S	Oral	2 Df, Bid		Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
06-May-2020	17752640	EXPEDITED (15-DAY)		HO, OT	NL-BAYER-2020-073405			Unknown	NLD

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Delusion; Hypomania; Psychomotor Hyperactivity	Chloroquine			S		300 Mg, Bid		Bayer
	Chloroquine			S		600 Mg		Bayer

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
07-May-2020	16344713	EXPEDITED (15-DAY)		OT	PHHY2019BR116537		80 YR	Female	BRA

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Abdominal Discomfort;	Cosentyx			S	Subcutaneous	300 Mg, Qmo		Novartis
Abdominal Pain;	Cosentyx			S	Subcutaneous	300 Mg, Qmo		Novartis
Abdominal Pain Upper;	Cosentyx			S	Subcutaneous	300 Mg, Qmo		Novartis
Arthralgia; Blindness;	Adalimumab			S	Subcutaneous	1 Df, Unk (Once Every 15 Days)		Not Reported
Blood Pressure Decreased; Chest Pain;								
Cough; Diarrhoea;								

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Dizziness; Drug Ineffective; Drug Intolerance; Dysentery; Dyspepsia; Dysstasia; Feeling Abnormal; Gastrointestinal Infection; Generalised Oedema; Malaise; Metabolic Disorder; Nail Psoriasis; Palpitations; Peripheral Swelling; Pneumonia; Rhinitis; Sinusitis; Weight Decreased	Calcium	S	Oral	Unk, Qd	Not Reported
	Higroton	S	Oral	12.5 Mg, Qd	Not Reported
	Chloroquine	S	Oral		Not Reported
	Calcium	C	Oral	2 Df, Qd (After Lunch)	Not Reported
	Selozok	C	Oral	50 Mg, Qd	Not Reported
	Aspirin	C	Oral	1 Df, Qd	Not Reported
	Chlortalidone	C	Oral	12.5 Mg, Qd	Not Reported
	Prednisone	C	Oral	1 Df, Qd	Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
07-May-2020	17728298	EXPEDITED (15-DAY)		DE	BR-BAYER-2020-072489		53 YR	Female	BRA

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Death	Chloroquine			S				Bayer
	Azitromicina			S				Not Reported
	Tamiflu			S				Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
07-May-2020	17754239	EXPEDITED (15-DAY)		LT	FR-SUN PHARMACEUTICAL INDUSTRIES LTD-2020RR-246200		43 YR	Male	FRA

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Cardio-Respiratory Arrest	Azithromycin			S	Oral	250 Milligrams, Daily		Sun
	Nivaquine 100 Mg, Comprime			S	Oral	2-3 Cp Par Jour		Not Reported
	Secable							

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
07-May-2020	17756194	EXPEDITED (15-DAY)		OT	NL-BAYER-2020-071746		74 YR	Male	NLD

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
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Electrocardiogram Qt Prolonged; Nausea	Chloroquine	S	600 Mg, Once	Bayer
	Chloroquine	S	300 Mg, Bid	Bayer
	Rocuronium	C	Unk	Not Reported
	Captopril	C		Not Reported
	Propofol	C		Not Reported
	Insulin	C		Not Reported
	Macrogol	C		Not Reported
	Paracetamol	C		Not Reported
	Fentanyl	C		Not Reported
	Pantoprazol [Pantoprazole]	C		Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
07-May-2020	17756196	EXPEDITED (15-DAY)		HO	SI-BAYER-2020-072339		57 YR	Female	SVN

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Electrocardiogram Qt Prolonged	Chloroquine			S	Oral	Experimental Therapy: 1g, Then 500 Mg/12h		Bayer
	Magnesium Sulfate			C				Not Reported
	Kventiax			C		In The Evening		Not Reported
	Helex			C		In The Evening		Not Reported
	Fraxiparine			C				Not Reported
	Lekadol			C				Not Reported
	Pantoprazole			C				Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
07-May-2020	17756200	EXPEDITED (15-DAY)		LT	SE-BAYER-2020-071748		43 YR	Male	SWE

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Balance Disorder; Blindness Transient; Diplopia; Heart Rate Increased; Muscle Spasms; Thunderclap Headache; Vomiting	Chloroquine			S		2 Tablets Morning, 2 Tablets Evening X 7 Days, 1000mg Per Day		Bayer

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<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
07-May-2020	17756239	EXPEDITED (15-DAY)		HO, LT	NL-BAYER-2020-073397		68 YR	Male	NLD
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Depression Suicidal; Nausea; Off Label Use; Suicide Attempt	Chloroquine			S		Oplaat 600mg		Bayer	
	Chloroquine			S		Then 2dd 3 Pieces Of 100 Mg		Bayer	
	Amlodipine			C				Not Reported	
	Fenprocoumon			C				Not Reported	
	Paracetamol			C				Not Reported	
	Oxazepam			C				Not Reported	
	Amoxicilline [Amoxicillin]			C		500 Mg		Not Reported	
	Cefuroxim [Cefuroxime]			C		500 Mg		Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
07-May-2020	17756248	EXPEDITED (15-DAY)		OT	IT-BAYER-2020-075494		54 YR	Female	ITA
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Drug-Induced Liver Injury; Gamma-Glutamyltransferase Increased	Chloroquine			S	Oral	500 Mg, Qd		Bayer	
	Urbason [Methylprednisolone]			C	Intravenous (not otherwise specified)			Not Reported	
	Ceftriaxone			C	Intravenous (not otherwise specified)			Not Reported	
	Azithromycin			C				Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
07-May-2020	17756641	EXPEDITED (15-DAY)		HO	FR-MYLANLABS-2020M1045335		53 YR	Male	FRA
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Circulatory Collapse; Tachyarrhythmia	Zeclar			S	Unknown	1 Gram, Qd		Mylan	
	Chloroquine			S	Oral	Unk		Mylan	

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Cefotaxime	C	Unknown	2 Gram	Mylan
Magnesium Sulphate /01097001/	C		Unk	Mylan

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
08-May-2020	17021154	EXPEDITED (15-DAY)		OT	ZA-SA-2019SA309865			Female	ZAF

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Drug Ineffective; Rheumatoid Arthritis; Vomiting	Arava			S	Unknown	20 Mg, Qd		Sanofi
	Chloroquine (Salt Not Specified)			S	Unknown	200 Mg, Qd		Sanofi
	Methotrexate			C	Unknown	25 Mg, Qw		Not Reported
	Salazopyrin			C	Unknown	2 Mg, Qd		Not Reported
	Etanercept			C	Subcutaneous	50 Mg, Qw		Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
11-May-2020	17767320	EXPEDITED (15-DAY)		HO, OT	NVSC2020SI123287		67 YR	Male	SVN

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Body Temperature Increased; Cough; Electrocardiogram Qt Prolonged; Oropharyngeal Pain; Respiratory Failure; Respiratory Tract Infection; Tongue Discomfort; Tongue Dry	Amoksiklav			S	Intravenous (not otherwise specified)	1.2 G, Q8h		Novartis
	Chloroquine			S	Oral	1500 Mg (1g + 500 Mg), Q12h		Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
14-May-2020	13067806	EXPEDITED (15-DAY)		HO, OT	US-AUROBINDO-AUR- APL-2016-15732		16 YR	Female	USA

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Amaurosis; Anxiety; Areflexia; Condition Aggravated; Drug	Diphenhydramine			S	Unknown	Unk		Aurobindo
	Fluoxetine			S	Unknown	Unk		Aurobindo

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Interaction; Facial	Olanzapine 2.5mg	S	Unknown	2.5 Mg, Unk	Aurobindo
Paralysis; Hallucination;	Olanzapine 2.5mg	S	Unknown	17.5 Mg, Unk	Aurobindo
Insomnia; Mydriasis;	Risperidone	S	Unknown	Unk	Aurobindo
Paranoia; Toxic	Lorazepam	S	Unknown	Unk	Not Reported
Encephalopathy; Toxicity	Benzotropine Mesylate	S		Unk	Not Reported
To Various Agents	Clonazepam	S		Unk	Not Reported
	Chloroquine	S		250 Mg, Unk	Not Reported
	Azithromycin	C		Unk	Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
15-May-2020	17790293	EXPEDITED (15-DAY)		HO, OT	FR-IPCA LABORATORIES LIMITED-IPC-2020-FR- 001539			Unknown	FRA

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Cardiotoxicity; Dysphagia;	Chloroquine			S	Unknown	200 Milligram, Qd		Ipca
Musculoskeletal Toxicity;	Hydroxychloroquine			S	Unknown	400 Milligram, Qd		Ipca
Myopathy Toxic; Toxicity	Acetylsalicylic Acid			C	Unknown	75 Milligram, Qd		Not Reported
To Various Agents; Weight	Clopidogrel			C	Unknown	75 Milligram, Qd		Not Reported
Decreased	Fenofibrate			C	Unknown	100 Milligram, Qd		Not Reported
	Ranitidine			C	Unknown	300 Milligram, Qd		Not Reported
	Clobetasol			C	Unknown	Unk, Qd		Not Reported
	Paracetamol			C	Unknown	Unk		Not Reported
	Tramadol			C	Unknown	Unk		Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
15-May-2020	17794573	EXPEDITED (15-DAY)		HO, LT	SE-BAYER-2020- 076377		42 YR	Male	SWE

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Balance Disorder;	Chloroquine			S	Oral	2 Tablets Morning, 2 Tablets Evening X 7 Days		Bayer
Diarrhoea; Diplopia;								

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Dizziness; Head
Discomfort; Headache;
Heart Rate Increased;
Muscle Spasms; Venous
Pressure Abnormal; Vision
Blurred; Visual Field
Defect; Vomiting

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
15-May-2020	17794930	EXPEDITED (15-DAY)		OT	CA-TEVA-2020-CA-1235284		44 YR	Female	CAN

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Abdominal Pain; Arthritis; C-Reactive Protein Increased; Drug Ineffective; Eye Infection; Inflammation; Ocular Toxicity; Skin Discolouration; Swelling; Therapeutic Product Effect Decreased; Treatment Failure; Vasculitic Rash	Prednisone			S	Unknown			Actavis
	Azathioprine			S	Unknown	200 Milligram Daily;		Not Reported
	Chloroquine			S	Unknown	250 Milligram Daily;		Not Reported
	Mycophenolate Mofetil			S	Oral	3 Milligram Daily;		Teva
	Rituximab			S	Intravenous (not otherwise specified)			Not Reported
	Rituximab			S	Intravenous (not otherwise specified)			Not Reported
	Acetaminophen			C	Oral			Not Reported
	Amlodipine			C	Unknown			Not Reported
	Diphenhydramine			C	Oral			Not Reported
	Ferrous Gluconate			C	Unknown			Not Reported
	Losec [Omeprazole]			C	Unknown			Not Reported
	Medrol [Methylprednisolone]			C	Unknown			Not Reported
	Methylprednisolone			C	Intravenous (not otherwise specified)			Not Reported
	Risedronate Sodium			C	Unknown			Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
18-May-2020	17798528	EXPEDITED (15-DAY)		HO	FR-NATCO PHARMA-2020NAT00018		59 YR	Male	FRA

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<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Cardiotoxicity; Musculoskeletal Toxicity	Chloroquine Phosphate			S	Unknown	200 Mg, 1x/Day		Natco Pharma
	Hydroxychloroquine			S	Unknown			Not Reported
	Acetylsalicylic Acid			C	Unknown	75 Mg, 1x/Day		Not Reported
	Clopidogrel			C	Unknown	75 Mg, 1x/Day		Not Reported
	Fenofibrate			C	Unknown	100 Mg, 1x/Day		Not Reported
	Ranitidine			C	Unknown	300 Mg, 1x/Day		Not Reported
	Clobetasol			S	Unknown	1 Application/Day		Not Reported
	Paracetamol/Tramadol			C	Unknown	If Necessary		Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
19-May-2020	15986426	EXPEDITED (15-DAY)		OT	BR- GLAXOSMITHKLINE- BR2017GSK149224			Female	BRA

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Anxiety; Asthma; Choking; Circumstance Or Information Capable Of Leading To Medication Error; Cough; Decreased Appetite; Decreased Immune Responsiveness; Depressed Mood; Depression; Dyspnoea; Emotional Distress; Eye Disorder; Fatigue; Fear; Haematoma; Hypotension; Inappropriate Schedule Of Product Administration; Influenza; Limb Injury; Lung Opacity; Malaise; Memory Impairment; Nasopharyngitis; Nephrolithiasis; Nervousness; Pain In Extremity; Patient	Benlysta			S		960 Mg, Unk		Glaxosmithkline
	Chloroquine			S		Unk		Not Reported
	Cortisone Acetate			C		Unk		Glaxosmithkline
	Seretide			C		Unk		Glaxosmithkline
	Velija			C		Unk (60)		Not Reported
	Deflazacort			C		6 Mg, Bid		Not Reported
	Alprazolam			C		Unk		Not Reported

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Isolation; Poor Quality
Sleep; Product Availability
Issue; Product Dose
Omission; Pulmonary
Fibrosis; Retinal Disorder;
Skin Discolouration; Social
Problem; Stress; Systemic
Lupus Erythematosus;
Underdose; Varicose Vein;
Vision Blurred; Visual
Impairment; Weight
Decreased; Weight
Increased

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
20-May-2020	17804897	EXPEDITED (15-DAY)		OT	ES-TEVA-2020-ES-1236797		24 YR	Male	ESP
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Hepatitis	Hidroxicloroquina (2143a)			S	Oral	400 Milligram Daily;		Teva	
	Hidroxicloroquina (2143a)			S	Oral	400 Mg		Teva	
	Lopinavir/Ritonavir Sandoz 200 Mg/50 Mg Comprimidos Recubiertos Con Pe			S	Oral	4 Dosage Forms Daily; 200 Mg / 50 Mg		Not Reported	
	Interferon Beta-1b (2305od)			S	Subcutaneous	0.25 Mg		Not Reported	
	Cloroquina [Chloroquine]			S	Oral	310 Milligram Daily;		Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
20-May-2020	17805239	EXPEDITED (15-DAY)		OT	IN-IPCA LABORATORIES LIMITED-IPC-2020-IN-001602			Unknown	IND
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Abnormal Behaviour	Chloroquine			S	Unknown	600 Milligram, Qd		Ipca	
	Chloroquine			S	Unknown	300 Milligram, Qd		Ipca	
	Sulfadoxine Pyrimethamine			C	Unknown	1500 Mg/75 Mg		Not Reported	

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<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
21-May-2020	17810834	EXPEDITED (15-DAY)		HO	SE-BAYER-2020-090402		26 YR	Female	SWE
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Accidental Overdose; Electrocardiogram Qt Prolonged	Chloroquine			S	Oral	Unk		Bayer	

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
21-May-2020	17810882	EXPEDITED (15-DAY)		OT	PL-ROCHE-2602576		30 YR	Female	POL
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Intentional Product Use Issue; Interleukin Level Increased; Off Label Use	Tocilizumab			S	Intravenous (not otherwise specified)			Not Reported	
	Chloroquine			S	Unknown			Not Reported	
	Chloroquine			S	Unknown			Not Reported	
	Azithromycin			S	Unknown			Not Reported	
	Azithromycin			S	Unknown			Not Reported	
	Lopinavir;Ritonavir			S	Unknown			Not Reported	
	Methylprednisolone Thyroxine			C C				Not Reported Not Reported	

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
21-May-2020	17812004	EXPEDITED (15-DAY)		OT	NVSC2020PH137092		66 YR	Male	PHL
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Electrocardiogram Qt Prolonged; Product Use In Unapproved Indication	Azithromycin			S	Unknown	250 Mg, Qd (Once Daily For 10 Days Ngt)		Novartis	
	Chloroquine			S	Unknown	500 Mg, Bid (2x/Day For 10 Days)		Not Reported	

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Detailed Report

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
21-May-2020	17812024	EXPEDITED (15-DAY)		HO, OT	ZA-PFIZER INC-2020169504		73 YR	Female	ZAF
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Abscess; Condition Aggravated; Sepsis; Treatment Failure	Salazopyrin			S		1 G, 2x/Day		Pfizer	
	Methotrexate Sodium			S		25 Mg, Daily		Pfizer	
	Plasmoquine			S		200 G, Daily		Not Reported	
	Arava			S		Unk		Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
22-May-2020	17817879	EXPEDITED (15-DAY)		OT	CN-BAYER-2020-090052		63 YR	Male	CHN
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Chest Discomfort; Cytokine Storm; Dyspnoea; Hepatic Function Abnormal; Hypoxia; Leukopenia; Lymphocyte Count Increased; Oxygen Saturation Decreased; Po2 Decreased; Therapeutic Response Unexpected	Chloroquine			S	Oral	500 Mg, Bid, For 7 Days		Bayer	
	Methylprednisolone			C	Intravenous (not otherwise specified)	80-40mg, For 5 Days		Not Reported	
	Methylprednisolone			C				Not Reported	
	Tocilizumab			C	Intravenous (not otherwise specified)	8 Mg/Kg Immediately		Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
25-May-2020	17746062	EXPEDITED (15-DAY)		LT	FR-PFIZER INC-2020178143		43 YR	Male	FRA
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Cardio-Respiratory Arrest; Off Label Use; Product Use In Unapproved Indication	Azithromycin			S	Oral	250 Mg, 1x/Day		Pfizer	
	Nivaquine [Chloroquine Sulfate]			S	Oral	200 Mg, Daily (2-3 Tablets Per Day)		Not Reported	
	Plaquenil [Hydroxychloroquine]			S	Oral	400 Mg, Daily, 2-3 Tablets		Not Reported	

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Sulfate]

Per Day

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
26-May-2020	17765509	EXPEDITED (15-DAY)		OT	FR-LUPIN PHARMACEUTICALS INC.-2020-02071		59 YR	Male	FRA
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Cardiotoxicity; Impaired Work Ability; Myopathy	Hydroxychloroquine			S	Unknown	Unk		Lupin	
	Hydroxychloroquine			S				Lupin	
	Chloroquine			S	Unknown	Unk		Not Reported	
	Chloroquine			S				Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
26-May-2020	17826076	EXPEDITED (15-DAY)		OT	NL-MYLANLABS- 2020M1050851			Unknown	NLD
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Arrhythmia; Off Label Use; Supraventricular Extrasystoles; Ventricular Tachycardia	Lopinavir/Ritonavir			S	Unknown	Unk		Not Reported	
	Chloroquine			S	Unknown	Unk		Mylan	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
28-May-2020	17757804	EXPEDITED (15-DAY)		OT	SE-BAYER-2020- 071751		72 YR	Male	SWE
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Electrocardiogram Qt Prolonged	Chloroquine			S		Strength 250mg Dose 4x1in1, 2x2		Bayer	
	Chloroquine			S		Daily Dose 1000 Mg		Bayer	
	Atorvastatin Krka			C		20 Mg, Qd		Not Reported	
	Alvedon			C		3 G, Qd, 1 G Film Coated Tablet		Not Reported	
	Enalapril Comp			C		20 Mg/12.5 Mg Tablet		Not Reported	

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<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
28-May-2020	17817899	EXPEDITED (15-DAY)		OT	NL-BAYER-2020-092692		56 YR	Male	NLD
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Contraindicated Product Administered; Haemolytic Anaemia; Methaemoglobinaemia	Chloroquine			S		300 Mg, Bid		Bayer	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
28-May-2020	17834177	EXPEDITED (15-DAY)		HO	IL-BAYER-2020-092694		84 YR	Female	ISR
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Electrocardiogram Qt Prolonged; Torsade De Pointes	Chloroquine			S	Oral	500 Mg, Bid		Bayer	
	Bisoprolol			C				Not Reported	
	Letrozole			C				Not Reported	
	Memantine			C				Not Reported	
	Apixaban			C				Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
29-May-2020	17830292	EXPEDITED (15-DAY)		OT	NVSC2020FR145080		59 YR	Male	FRA
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Cardiotoxicity; Dysphagia; Muscle Disorder; Toxicity To Various Agents	Hydroxychloroquine			S	Unknown	400 Mg, Qd, 7.4 Mg/Kg/Day)		Novartis	
	Chloroquine			S	Unknown	200 Mg, Qd		Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
29-May-2020	17837429	EXPEDITED (15-DAY)		OT	NL-ALVOGEN-2020-ALVOGEN-108504		64 YR	Male	NLD
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Impaired Gastric Emptying	Fentanyl			S				Not Reported	

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Chloroquine	S	Oplaaddosering Van 600 Mg Op 23-03	Not Reported
Chloroquine	S	Daarna 2dd 300 Mg Van 24-03 T/M 28-03	Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
29-May-2020	17839236	EXPEDITED (15-DAY)		OT	NL-BIODELIVERY SCIENCES INTERNATIONAL-2020BDSI0363		64 YR	Male	NLD

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Impaired Gastric Emptying	Fentanyl Citrate			S	Unknown			Not Reported
	Chloroquine			S		Oplaaddosering Van 600 Mg Op 23-03		Not Reported
	Chloroquine			S		Daarna 2dd 300 Mg Van 24-03 T/M 28-03		Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
01-Jun-2020	14152913	EXPEDITED (15-DAY)		OT	ZA-PFIZER INC-2017467944		21 YR	Male	ZAF

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Cachexia; Drug Ineffective;	Methotrexate Sodium			S	Subcutaneous	30 Ug, Weekly		Pfizer
Gastrooesophageal Reflux Disease; Hepatic Steatosis; Hypersensitivity	Salazopyrin			S		1 G, Twice A Day		Pfizer
	Plasmaquine			S		200 Ug, Daily		Not Reported
	Arava			S		20 Ug, Daily		Not Reported
	Enbrel			C	Subcutaneous	50 Mg, Weekly		Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
01-Jun-2020	17813347	EXPEDITED (15-DAY)		HO, LT, OT	NL-MYLANLABS-2020M1049414		35 YR	Male	NLD

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Acute Kidney Injury; Acute Respiratory Distress	Everolimus			S		3 Milligram, Bid		Not Reported

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Syndrome; Cough; Covid-19 Pneumonia; Diarrhoea;	Everolimus	S	Unknown	6 Milligram, Qd	Not Reported
Drug Abuse; Drug	Everolimus	S	Unknown	3 Milligram, Qd	Not Reported
Interaction; Dyspnoea;	Everolimus	S	Unknown	2 Milligram, Qd	Not Reported
Headache; Hypoxia;	Everolimus	S	Unknown	4 Milligram, Qd	Not Reported
Intentional Product Misuse; Interstitial Lung Disease; Lung Consolidation;	Everolimus	S	Unknown	2 Milligram, Bid	Not Reported
Lymphopenia; Malaise; Metabolic Acidosis;	Prednisolone	S		7.5 Milligram, Qd	Not Reported
Myalgia; Nasal Congestion; Nausea; Off Label Use; Pneumococcal Infection; Productive Cough; Pyrexia; Rales; Renal Failure; Renal Impairment; Respiratory Alkalosis; Respiratory Failure; Rhabdomyolysis; Rhinorrhoea; Tachypnoea; Toxicity To Various Agents; Tubulointerstitial Nephritis; Vomiting	Kaletra	S	Oral	2 Dosage Form, Qd (Unit Dose: 400/100 Mg)	Mylan
	Kaletra	S	Oral	Unit Dose: 400/100 Mg	Mylan
	Chloroquine	S	Oral	600 Milligram, Qd	Mylan
	Chloroquine	S	Oral	600 Milligram (Loading Dose)	Mylan
	Chloroquine	S	Oral	600 Milligram (Loading Dose)	Mylan
	Chloroquine	S	Oral	300 Milligram, Bid	Mylan
	Chloroquine	S	Oral	300 Milligram, Qd	Mylan
	Tramadol	C		Unk	Mylan
	Tramadol	C		Unk	Mylan
	Tramadol	C		Unk	Mylan
	Tramadol	C		Unk	Mylan
	Tramadol	C		Unk	Mylan
	Ceftriaxone	C		Unk	Mylan
	Acetaminophen	C		Unk	Mylan
	Acetaminophen	C		Unk	Mylan
	Acetaminophen	C		Unk	Mylan
	Acetaminophen	C		Unk	Mylan
	Acetaminophen	C		Unk	Mylan
	Cefuroxime	C	Intravenous (not otherwise specified)	Unk	Mylan

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<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
01-Jun-2020	17846646	EXPEDITED (15-DAY)		OT	NL-MYLANLABS-2020M1052432		64 YR	Male	NLD
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Impaired Gastric Emptying	Fentanyl			S		Unk		Not Reported	
	Chloroquine			S		Oplaaddosering Van 600 Mg Op 23-03		Mylan	
	Chloroquine			S		Daarna 2dd 300 Mg Van 24-03 T/M 28-03.		Mylan	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
01-Jun-2020	17847238	EXPEDITED (15-DAY)		OT	NVSC2020US149060		49 YR	Female	USA
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Arthritis; Drug Interaction; Drug-Induced Liver Injury; Hepatic Enzyme Abnormal	Rifampicin			S	Unknown	Unk		Novartis	
	Isoniazid			S	Unknown	Unk		Not Reported	
	Ethambutol			S	Unknown	Unk		Not Reported	
	Pyrazinamide			S	Unknown	Unk		Not Reported	
	Chloroquine			S	Unknown	200 Mg, 4w		Not Reported	
	Sulfamethoxazole And Trimethoprim			S	Unknown	Unk		Not Reported	
	Prednisone			C	Unknown	30 Mg, Qd		Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
01-Jun-2020	17847737	EXPEDITED (15-DAY)		OT	NL-BAYER-2020-099151		64 YR	Male	NLD
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Impaired Gastric Emptying	Chloroquine			S		600 Mg, Qd		Bayer	
	Chloroquine			S		300 Mg, Bid		Bayer	
	Fentanyl			S		Unk		Not Reported	

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<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
02-Jun-2020	17848628	EXPEDITED (15-DAY)		HO	ES-ROCHE-2609780		34 YR	Male	ESP
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Condition Aggravated; Hepatitis; Hepatocellular Injury	Tocilizumab			S	Unknown	600 Mg Dia		Not Reported	
	Cloroquina [Chloroquine]			S	Oral	155 Mg Cada 12 Horas		Not Reported	
	Kaletra			S	Oral	2 U Cad 12 Horas		Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
02-Jun-2020	17851718	EXPEDITED (15-DAY)		OT	PL-ABBVIE-20K-129-3426312-00		30 YR	Female	POL
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Intentional Product Use Issue; Interleukin Level Increased; Off Label Use	Lopinavir/Ritonavir			S	Unknown			Not Reported	
	Azithromycin			S	Unknown			Not Reported	
	Azithromycin			S	Unknown			Not Reported	
	Tocilizumab			S	Intravenous (not otherwise specified)			Not Reported	
	Chloroquine			S	Unknown			Not Reported	
	Chloroquine			S	Unknown			Not Reported	
	Methylprednisolone			C				Not Reported	
	Thyroxine			C				Not Reported	
<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
03-Jun-2020	17856344	EXPEDITED (15-DAY)		OT	NL-TEVA-2020-NL-1242872		64 YR	Male	NLD
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Impaired Gastric Emptying	Fentanyl			S	Unknown	Therapy End Date : Asked But Unknown		Cephalon	
	Chloroquine			S	Unknown	600 Mg Loading Dose On 3/23, Therapy End Date : Asked But Unknown		Not Reported	

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Chloroquine	S	600 Milligram Daily; Then 300 Mg Twice Daily From 24-03 To 28-03.	Not Reported
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<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
04-Jun-2020	17771128	EXPEDITED (15-DAY)		DS, LT	FR-MYLANLABS- 2020M1045669		43 YR	Male	FRA

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Cardio-Respiratory Arrest	Azithromycin			S	Oral	250 Milligram, Qd		Not Reported
	Nivaquine /00001003/			S	Oral	200 Milligram, Qd (2-3 Cp Par Jour)		Mylan
	Plaquenil /00072602/			S	Oral	2-3 Cp Par Jour		Mylan

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
04-Jun-2020	17858935	EXPEDITED (15-DAY)		OT	BR-PFIZER INC- 2020204764		64 YR	Female	BRA

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Drug Interaction; Electrocardiogram Qt Prolonged; Protein C Decreased; Protein C Increased	Zitromax			S	Intravenous (not otherwise specified)	500 Mg, 1x/Day		Pfizer
	Azithromycin			S	Oral	500 Mg, 1x/Day		Pfizer
	Quinacris			S	Other	500 Mg, 2x/Day		Not Reported
	Kaletra			S	Other	2 Df, 2x/Day		Not Reported
	Bromoprida			C	Intravenous (not otherwise specified)	30 Mg, 3x/Day		Not Reported
	Vancomicina [Vancomycin Hydrochloride]			C	Intravenous (not otherwise specified)	1 G, 2x/Day		Not Reported
	Dormire [Midazolam Hydrochloride]			C	Intravenous (not otherwise specified)	100 Mg, As Needed		Not Reported
	Euthyrox			C	Other	50 Ug, 1x/Day		Not Reported
	Fentanest [Fentanyl Citrate]			C	Intravenous (not otherwise specified)	2500 Mg, As Needed		Not Reported
	Norepinefrina [Norepinephrine Bitartrate]			C	Intravenous (not	16 Mg, As Needed		Not Reported

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Ionclor	C	otherwise specified)		
Lasix [Furosemide]	C	Other	20 MI, 3x/Day	Not Reported
	C	Intravenous (not otherwise specified)	30 Mg, 3x/Day	Not Reported
Meronom	C	Intravenous (not otherwise specified)	1 G, 3x/Day	Not Reported
Muvinalax	C	Oral	14 G, 2x/Day	Not Reported
Nexium [Esomeprazole Magnesium]	C	Oral	20 Mg, 1x/Day	Not Reported
Ceftriaxone	C	Intravenous (not otherwise specified)	1 G, 2x/Day	Not Reported
Hydroxychloroquine	C	Other	400 Mg, 2x/Day	Not Reported
Simvastatin	C		10 Mg, 1x/Day	Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
04-Jun-2020	17859334	EXPEDITED (15-DAY)		OT	US-SUN PHARMACEUTICAL INDUSTRIES LTD- 2020R1-248933		48 YR	Female	USA

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Disease Progression	Methotrexate			S	Unknown	30 Milligram, Weekly		Sun
	Chloroquine			S	Unknown	150 Milligram 4 Times Per Week		Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
04-Jun-2020	17861385	EXPEDITED (15-DAY)		HO, OT	FR-TEVA-2020-FR- 1241998		47 YR	Male	FRA

<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>
Atrioventricular Block	Fenofibrate			S	Unknown			Actavis
Complete; Bundle Branch Block; Conduction Disorder; Decreased Appetite; Drug Ineffective; Dysphagia; Dysphonia; Left Ventricular	Hydroxychloroquine			S	Unknown	400mg Per Day 7.4 Mg/Kg/Day		Not Reported
	Chloroquine			S	Unknown			Not Reported
	Acetylsalicylic Acid			C	Unknown			Not Reported

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Hypertrophy; Muscle Injury; Myopathy Toxic; Subacute Cutaneous Lupus Erythematosus; Weight Decreased	Clopidogrel	C	Unknown		Not Reported
	Ranitidine	C	Unknown		Not Reported
	Clobetasol	C	Unknown	1 Application/Day	Not Reported
	Tramadol/Paracetamol	C	Unknown		Not Reported

<u>FDA Received Date</u>	<u>Case #</u>	<u>Case Type</u>	<u>Health Prof</u>	<u>Outcomes</u>	<u>Mfr Control #</u>	<u>503B Facility</u>	<u>Age</u>	<u>Sex</u>	<u>Country</u>
08-Jun-2020	17703460	EXPEDITED (15-DAY)		DS, LT, OT	FR-AUROBINDO-AUR-APL-2020-020222		43 YR	Male	FRA
<u>Preferred Term</u>	<u>Product</u>	<u>Comp.</u>	<u>OTC</u>	<u>Role</u>	<u>Route</u>	<u>Dosage Text</u>	<u>Duration</u>	<u>Mfr</u>	
Cardio-Respiratory Arrest	Azithromycin			S	Oral	250 Milligram, Once A Day		Aurobindo	
	Nivaquine			S	Oral	200 Milligram, Once A Day (2-3 Cp Per Day)		Not Reported	
	Plaquenil			S	Oral	400 Milligram, Once A Day (2-3 Tsp Per Day)		Not Reported	