ALPHAGAN P - brimonidine tartrate solution/ drops Physicians Total Care, Inc.

HIGHLIGHTS OF PRESCRIBING INFORMATION These highlights do not include all the information needed to use ALPHAGAN [®] P safely and effectively. See full prescribing information for ALPHAGAN [®] P.
ALPHAGAN [®] P (brimonidine tartrate ophthalmic solution) 0.1% and 0.15% Initial U.S. Approval: 1996
ALPHAGAN[®] P is an alpha adrenergic receptor agonist indicated for the reduction of elevated intraocular pressure (IOP) in patients with open-angle glaucoma or ocular hypertension. (1)
One drop in the affected eye(s), three times daily, approximately 8 hours apart. (2) DOSAGE FORMS AND STRENGTHS
Solution containing 1 or 1.5 mg/mL brimonidine tartrate. (3) CONTRAINDICATIONS
Neonates and infants (under the age of 2 years). (4.1) WARNINGS AND PRECAUTIONS
Potentiation of vascular insufficiency. (5.1)
solution (0.1%-0.2%) included allergic conjunctivitis, burning sensation, conjunctival folliculosis, conjunctival hyperemia, eye pruritus, hypertension, ocular allergic reaction, oral dryness, and visual disturbance. (6.1) To report SUSPECTED ADVERSE REACTIONS, contact Allergan at 1-800-433-8871 or the FDA at 1-800-FDA-
1088 or www.fda.gov/medwatch.
 Antihypertensives/cardiac glycosides may lower blood pressure. (7.1) Use with CNS depressants may result in an additive or potentiating effect. (7.2)
 Tricyclic antidepressants may potentially blunt the hypotensive effect of systemic clonidine. (7.3) Monoamine oxidase inhibitors may result in increased hypotension. (7.4)
USE IN SPECIFIC POPULATIONS
Use with caution in children \ge 2 years of age. (8.4) See 17 for PATIENT COUNSELING INFORMATION.

Revised: 3/2013

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* Sections or subsections omitted from the full prescribing information are not listed.

FULL PRESCRIBING INFORMATION

1 INDICATIONS AND USAGE

ALPHAGAN[®] P (brimonidine tartrate ophthalmic solution) 0.1% or 0.15% is an alpha adrenergic receptor agonist indicated for the reduction of elevated intraocular pressure (IOP) in patients with open-angle glaucoma or ocular hypertension.

2 DOSAGE AND ADMINISTRATION

The recommended dose is one drop of **ALPHAGAN**[®] **P** in the affected eye(s) three times daily, approximately 8 hours apart. **ALPHAGAN**[®] **P** ophthalmic solution may be used concomitantly with other topical ophthalmic drug products to lower intraocular pressure. If more than one topical ophthalmic product is to be used, the different products should be instilled at least 5 minutes apart.

3 DOSAGE FORMS AND STRENGTHS

Solution containing 1 mg/mL or 1.5 mg/mL brimonidine tartrate.

4 CONTRAINDICATIONS

4.1 Neonates and Infants (under the age of 2 years)

ALPHAGAN[®] **P** is contraindicated in neonates and infants (under the age of 2 years).

4.2 Hypersensitivity Reactions

ALPHAGAN[®] **P** is contraindicated in patients who have exhibited a hypersensitivity reaction to any

5 WARNINGS AND PRECAUTIONS

5.1 Potentiation of Vascular Insufficiency

ALPHAGAN[®] P may potentiate syndromes associated with vascular insufficiency. **ALPHAGAN[®] P** should be used with caution in patients with depression, cerebral or coronary insufficiency, Raynaud's phenomenon, orthostatic hypotension, or thromboangiitis obliterans.

5.2 Severe Cardiovas cular Disease

Although brimonidine tartrate ophthalmic solution had minimal effect on the blood pressure of patients in clinical studies, caution should be exercised in treating patients with severe cardiovascular disease.

5.3 Contamination of Topical Ophthalmic Products After Use

There have been reports of bacterial keratitis associated with the use of multiple-dose containers of topical ophthalmic products. These containers had been inadvertently contaminated by patients who, in most cases, had a concurrent corneal disease or a disruption of the ocular epithelial surface (see **PATIENT COUNSELING INFORMATION**, 17).

6 ADVERSE REACTIONS

6.1 Clinical Studies Experience

Because clinical studies are conducted under widely varying conditions, adverse reaction rates observed in the clinical studies of a drug cannot be directly compared to rates in the clinical studies of another drug and may not reflect the rates observed in practice.

Adverse reactions occurring in approximately 10-20% of the subjects receiving brimonidine ophthalmic solution (0.1-0.2%) included: allergic conjunctivitis, conjunctival hyperemia, and eye pruritus. Adverse reactions occurring in approximately 5-9% included: burning sensation, conjunctival folliculosis, hypertension, ocular allergic reaction, oral dryness, and visual disturbance.

Adverse reactions occurring in approximately 1-4% of the subjects receiving brimonidine ophthalmic solution (0.1-0.2%) included: abnormal taste, allergic reaction, asthenia, blepharitis, blepharoconjunctivitis, blurred vision, bronchitis, cataract, conjunctival edema, conjunctival hemorrhage, conjunctivitis, cough, dizziness, dyspepsia, dyspnea, epiphora, eye discharge, eye dryness, eye irritation, eye pain, eyelid edema, eyelid erythema, fatigue, flu syndrome, follicular conjunctivitis, foreign body sensation, gastrointestinal disorder, headache, hypercholesterolemia, hypotension, infection (primarily colds and respiratory infections), insomnia, keratitis, lid disorder, pharyngitis, photophobia, rash, rhinitis, sinus infection, sinusitis, somnolence, stinging, superficial punctate keratopathy, tearing, visual field defect, vitreous detachment, vitreous disorder, vitreous floaters, and worsened visual acuity.

The following reactions were reported in less than 1% of subjects: corneal erosion, hordeolum, nasal dryness, and taste perversion.

6.2 Postmarketing Experience

The following reactions have been identified during postmarketing use of brimonidine tartrate ophthalmic solutions in clinical practice. Because they are reported voluntarily from a population of unknown size, estimates of frequency cannot be made. The reactions, which have been chosen for inclusion due to either their seriousness, frequency of reporting, possible causal connection to brimonidine tartrate ophthalmic solutions, or a combination of these factors, include: bradycardia, depression, hypersensitivity, iritis, keratoconjunctivitis sicca, miosis, nausea, skin reactions (including

erythema, eyelid pruritus, rash, and vasodilation), syncope, and tachycardia. Apnea, bradycardia, coma, hypotension, hypothermia, hypotonia, lethargy, pallor, respiratory depression, and somnolence have been reported in infants receiving brimonidine tartrate ophthalmic solutions.

7 DRUG INTERACTIONS

7.1 Antihypertensives/Cardiac Glycosides

Because **ALPHAGAN**[®] **P** may reduce blood pressure, caution in using drugs such as antihypertensives and/or cardiac glycosides with **ALPHAGAN**[®] **P** is advised.

7.2 CNS Depressants

Although specific drug interaction studies have not been conducted with **ALPHAGAN**[®] **P**, the possibility of an additive or potentiating effect with CNS depressants (alcohol, barbiturates, opiates, sedatives, or anesthetics) should be considered.

7.3 Tricyclic Antidepressants

Tricyclic antidepressants have been reported to blunt the hypotensive effect of systemic clonidine. It is not known whether the concurrent use of these agents with **ALPHAGAN**[®] **P** in humans can lead to resulting interference with the IOP lowering effect. Caution is advised in patients taking tricyclic antidepressants which can affect the metabolism and uptake of circulating amines.

7.4 Monoamine Oxidase Inhibitors

Monoamine oxidase (MAO) inhibitors may theoretically interfere with the metabolism of brimonidine and potentially result in an increased systemic side-effect such as hypotension. Caution is advised in patients taking MAO inhibitors which can affect the metabolism and uptake of circulating amines.

8 USE IN SPECIFIC POPULATIONS

8.1 Pregnancy

Pregnancy Category B: Teratogenicity studies have been performed in animals.

Brimonidine tartrate was not teratogenic when given orally during gestation days 6 through 15 in rats and days 6 through 18 in rabbits. The highest doses of brimonidine tartrate in rats (2.5 mg/kg/day) and rabbits (5.0 mg/kg/day) achieved AUC exposure values 360- and 20-fold higher, or 260- and 15-fold higher, respectively, than similar values estimated in humans treated with **ALPHAGAN**[®] **P** 0.1% or 0.15%, 1 drop in both eyes three times daily.

There are no adequate and well-controlled studies in pregnant women; however, in animal studies, brimonidine crossed the placenta and entered into the fetal circulation to a limited extent. Because animal reproduction studies are not always predictive of human response, **ALPHAGAN**[®] **P** should be used during pregnancy only if the potential benefit to the mother justifies the potential risk to the fetus.

8.3 Nursing Mothers

It is not known whether brimonidine tartrate is excreted in human milk, although in animal studies, brimonidine tartrate has been shown to be excreted in breast milk. Because of the potential for serious adverse reactions from **ALPHAGAN**[®] **P** in nursing infants, a decision should be made whether to discontinue nursing or to discontinue the drug, taking into account the importance of the drug to the mother.

8.4 Pediatric Use

 $\mathbf{ALPHAGAN}^{\texttt{R}}$ **P** is contraindicated in children under the age of 2 years (see

CONTRAINDICATIONS, 4.1). During postmarketing surveillance, apnea, bradycardia, coma, hypotension, hypothermia, hypotonia, lethargy, pallor, respiratory depression, and somnolence have been reported in infants receiving brimonidine. The safety and effectiveness of brimonidine tartrate have not been studied in children below the age of 2 years.

In a well-controlled clinical study conducted in pediatric glaucoma patients (ages 2 to 7 years) the most commonly observed adverse reactions with brimonidine tartrate ophthalmic solution 0.2% dosed three times daily were somnolence (50-83% in patients ages 2 to 6 years) and decreased alertness. In pediatric patients 7 years of age (>20 kg), somnolence appears to occur less frequently (25%). Approximately 16% of patients on brimonidine tartrate ophthalmic solution discontinued from the study due to somnolence.

8.5 Geriatric Use

No overall differences in safety or effectiveness have been observed between elderly and other adult patients.

8.6 Special Populations

ALPHAGAN[®] **P** has not been studied in patients with hepatic impairment.

ALPHAGAN[®] P has not been studied in patients with renal impairment. The effect of dialysis on brimonidine pharmacokinetics in patients with renal failure is not known.

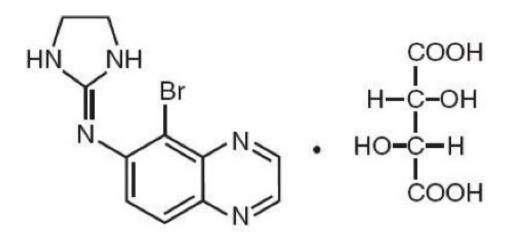
10 OVERDOSAGE

Very limited information exists on accidental ingestion of brimonidine in adults; the only adverse reaction reported to date has been hypotension. Symptoms of brimonidine overdose have been reported in neonates, infants, and children receiving **ALPHAGAN**[®] **P** as part of medical treatment of congenital glaucoma or by accidental oral ingestion (see **USE IN SPECIFIC POPULATIONS**, 8.4). Treatment of an oral overdose includes supportive and symptomatic therapy; a patent airway should be maintained.

11 DESCRIPTION

ALPHAGAN[®] **P** (brimonidine tartrate ophthalmic solution) 0.1% or 0.15%, sterile, is a relatively selective alpha-2 adrenergic receptor agonist (topical intraocular pressure lowering agent).

The structural formula of brimonidine tartrate is:



5-Bromo-6-(2-imidazolidinylideneamino) quinoxaline L-tartrate; MW= 442.24

In solution, **ALPHAGAN**[®] **P** (brimonidine tartrate ophthalmic solution) has a clear, greenish-yellow color. It has an osmolality of 250-350 mOsmol/kg and a pH of 7.4-8.0 (0.1%) or 6.9-7.4 (0.15%).

Brimonidine tartrate appears as an off-white to pale-yellow powder and is soluble in both water (0.6 mg/mL) and in the product vehicle (1.4 mg/mL) at pH 7.7.

Each mL of **ALPHAGAN**[®] **P** contains the active ingredient brimonidine tartrate 0.1% (1 mg/mL) or 0.15% (1.5 mg/mL) with the inactive ingredients sodium carboxymethylcellulose; sodium borate; boric acid; sodium chloride; potassium chloride; calcium chloride; magnesium chloride; PURITE[®] 0.005% (0.05 mg/mL) as a preservative; purified water; and hydrochloric acid and/or sodium hydroxide to adjust pH.

12 CLINICAL PHARMACOLOGY

12.1 Mechanism of Action

ALPHAGAN[®] **P** is a relatively selective alpha-2 adrenergic receptor agonist with a peak ocular hypotensive effect occurring at two hours post-dosing.

Fluorophotometric studies in animals and humans suggest that brimonidine tartrate has a dual mechanism of action by reducing aqueous humor production and increasing uveoscleral outflow.

12.3 Pharmacokinetics

Absorption

After ocular administration of either a 0.1% or 0.2% solution, plasma concentrations peaked within 0.5 to 2.5 hours and declined with a systemic half-life of approximately 2 hours.

Distribution

The protein binding of brimonidine has not been studied.

Metabolis m

In humans, brimonidine is extensively metabolized by the liver.

Excretion

Urinary excretion is the major route of elimination of brimonidine and its metabolites. Approximately 87% of an orally-administered radioactive dose of brimonidine was eliminated within 120 hours, with 74% found in the urine.

13 NONCLINICAL TOXICOLOGY

13.1 Carcinogenesis, Mutagenesis, Impairment of Fertility

No compound-related carcinogenic effects were observed in either mice or rats following a 21-month and 24-month study, respectively. In these studies, dietary administration of brimonidine tartrate at doses up to 2.5 mg/kg/day in mice and 1 mg/kg/day in rats achieved 150 and 120 times or 90 and 80 times, respectively, the plasma C_{max} drug concentration in humans treated with one drop of **ALPHAGAN**[®] **P** 0.1% or 0.15% into both eyes 3 times per day, the recommended daily human dose.

Brimonidine tartrate was not mutagenic or clastogenic in a series of in vitro and in vivo studies including the Ames bacterial reversion test, chromosomal aberration assay in Chinese Hamster Ovary (CHO) cells, and three in vivo studies in CD-1 mice: a host-mediated assay, cytogenetic study, and dominant lethal assay.

Reproduction and fertility studies in rats with brimonidine tartrate demonstrated no adverse effect on male or female fertility at doses which achieve up to approximately 125 and 90 times the systemic exposure following the maximum recommended human ophthalmic dose of **ALPHAGAN® P** 0.1% or 0.15%, respectively.

14 CLINICAL STUDIES

Elevated IOP presents a major risk factor in glaucomatous field loss. The higher the level of IOP, the greater the likelihood of optic nerve damage and visual field loss. Brimonidine tartrate has the action of lowering intraocular pressure with minimal effect on cardiovascular and pulmonary parameters.

Clinical studies were conducted to evaluate the safety, efficacy, and acceptability of **ALPHAGAN**[®] **P** (brimonidine tartrate ophthalmic solution) 0.15% compared with **ALPHAGAN**[®] administered threetimes-daily in patients with open-angle glaucoma or ocular hypertension. Those results indicated that **ALPHAGAN**[®] **P** (brimonidine tartrate ophthalmic solution) 0.15% is comparable in IOP lowering effect to **ALPHAGAN**[®] (brimonidine tartrate ophthalmic solution) 0.2%, and effectively lowers IOP in patients with open-angle glaucoma or ocular hypertension by approximately 2-6 mmHg.

A clinical study was conducted to evaluate the safety, efficacy, and acceptability of **ALPHAGAN**[®] **P** (brimonidine tartrate ophthalmic solution) 0.1% compared with **ALPHAGAN**[®] administered threetimes-daily in patients with open-angle glaucoma or ocular hypertension. Those results indicated that **ALPHAGAN**[®] **P** (brimonidine tartrate ophthalmic solution) 0.1% is equivalent in IOP lowering effect to **ALPHAGAN**[®] (brimonidine tartrate ophthalmic solution) 0.2%, and effectively lowers IOP in patients with open-angle glaucoma or ocular hypertension by approximately 2-6 mmHg.

16 HOW SUPPLIED/STORAGE AND HANDLING

ALPHAGAN[®] **P** is supplied sterile, in teal opaque plastic LDPE bottles and tips, with purple high impact polystyrene (HIPS) caps as follows: **0.1%**

5 mL in 10 mL bottle NDC 54868-4276-0

0.15%

5 mL in 10 mL bottle	NDC 54868-4690-2
10 mL in 10 mL bottle	NDC 54868-4690-0

Storage: Store at 15°-25°C (59°-77°F).

17 PATIENT COUNSELING INFORMATION

Patients should be instructed that ocular solutions, if handled improperly or if the tip of the dispensing container contacts the eye or surrounding structures, can become contaminated by common bacteria known to cause ocular infections. Serious damage to the eye and subsequent loss of vision may result from using contaminated solutions (see **WARNINGS AND PRECAUTIONS**, 5.3). Always replace the cap after using. If solution changes color or becomes cloudy, do not use. Do not use the product after the expiration date marked on the bottle.

Patients also should be advised that if they have ocular surgery or develop an intercurrent ocular condition (e.g., trauma or infection), they should immediately seek their physician's advice concerning the continued use of the present multidose container.

If more than one topical ophthalmic drug is being used, the drugs should be administered at least five minutes apart.

As with other similar medications, **ALPHAGAN**[®] **P** may cause fatigue and/or drowsiness in some patients. Patients who engage in hazardous activities should be cautioned of the potential for a decrease in mental alertness.

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🚔 ALLERGAN

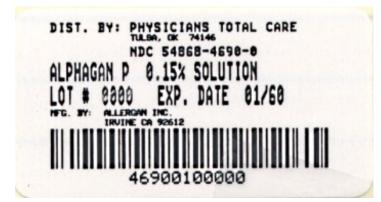
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Additional bar code label applied by: Physicians Total Care, Inc. Tulsa, Oklahoma 74146

Alphagan[®] P

(brimonidine tartrate ophthalmic solution) 0.15%

10 mL sterile

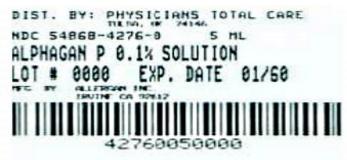


NDC 54868-4690-0

Rx Only

Alphagan [®] P (brimonidine tartrate ophthalmic solution) 0.1%

5 mL sterile



Rx Only

		onidine tartrate so	aropo				
PHTHALMC Active Ingredient/Active Moiety Ingredient Name Basis of Strength Strength brimonidine tartrate (UNIE 4S9CL2D2H) (brimonidine - UNIEE6GNX3HHTE) brimonidine tartrate 1.5 mg in 1 m Ingredient Name Strength Strength borie acid (UNIE R57ZHV85D4) Ingredient Name Strength adgesium chloride (UNIE 857ZHV85D4) Ingredient Name Ingredient Name softe acid (UNIE R57ZHV85D4) Ingredient Name Ingredient Name softe acid (UNIE 857ZHV85D4) Ingredient Name Ingredient Name softe acid (UNIE 01006 V098H10) Ingredient Name Ingredient Name softe acid (UNIE 01008 Softe 0100 (UNIE K6790B5311) Ingredient Name Ingredient Name softe acid (UNIE 01008 Softe 0100 (UNIE K6790B5311) Ingredient Name Ingredient Name softe 0100 m Lin 10000 (UNIE Strong 010	Pro	duct Informatio	n				
Active Ingredient/Active Moiety Ingredient Name Strength brimonidine tartrate (UNE: 459CL2DY2H) (brimonidine - UNEE6GNX3HHTE) Inactive Ingredients Ingredient Name Strength boric acid (UNE: K57ZHV85D4) added to the folde (UNE: K672OBS311) sociam chloride (UNE: 659Q9B10) added to the folde (UNE: K579OBS311) sociam borate (UNE: 91MBZ8H5Q0) arboxymethylcellulose sodium (UNE: K679OBS311) sodium chloride (UNE: 451W47IQ8 X) hydrochloric acid (UNE: 451W47IQ8 X) hydrochloride (UNE: 55X04QC32) Packaging I teen Code Package Description In I CARTON I DOTILE, DROPPER I teen Code In I CARTON I DO mL in I BOTTLE, DROPPER I ON I DOTILE, DROPPER I	Prod	luct T ype		HUMAN PRESCRIPTION DRUG	Item Code (Sou	rce) NDC:54868	-4690(NDC:0023-9177
Ingredient Name Basis of Strength Strength primonidine tartrate (UNIE 459CL2DY2H) (brimonidine - UNIEE6GNX3HHTE) brimonidine tartrate 1.5 mg in 1 m inactive Ingredients Ingredient Name Strength inactive Ingredients Ingredient Name Strength poric acid (UNIE R572HV85D4) Strength Strength acidium chloride (UNIE 02F3473H9O) sater (UNIE 059QF0K00R) sater (UNIE 059QF0K00R) potassium chloride (UNIE 660 YQ9BH0) sater (UNIE 059QF0K00R) sater (UNIE 059QF0K00R) sodium borate (UNIE 451W471Q8X) satosymethyleeHulose sodium (UNIE K6790BS311) satosymethyleeHulose sodium (UNIE K6790BS311) sodium chloride (UNIE 451W471Q8X) satosymethyleeHulose sodium (UNIE 55X04QC321) satosymethyleeHulose sodium (UNIE 55X04QC321) Packaging ftem Code Package Description Marketing Start Date Marketing End Date 1 NDC:54868-4690-2 in 1 CARTON sm. in 1 BOTTLE, DROPPER st. in 1 SOTTLE, DROPPER st. in 1 SOTTLE, DROPPER 2 ND in 1 BOTTLE, DROPPER in 1 CARTON st. in 1 SOTTLE, DROPPER st. in 1 SOTTLE, DROPPER st. in 1 SOTTLE, DROPPER	Rout	e of Administratio	n	OPHTHALMIC			
primonidine tartrate (UNII: 459CL2DY2H) (brimonidine - UNIEEGGNX3HHTE) brimonidine tartrate 1.5 mg in 1 m Inarctive Ingredients Ingredient Name Strength sale							

ALPHAGAN P

brimonidine tartrate solution/ drops

Product Informat	ion						
Product Type		HUMAN PRESCRIPTION DRUG	G Item C	Code (Source	e) NDC:5486	68-4276(I	NDC:0023-932
Route of Administra	tion	OPHTHALMIC					
Active Ingredient	/Active Moie	ety					
	Ing	redient Name			Basis of St	rength	Strength
brimonidine tartrate	(UNII: 4S9CL2DY	/2H) (brimonidine - UNII:E6GN)	X3HHTE)	b	rimonidine tar	trate	1 mg in 1 mL
Inactive Ingredie	nts						
		Ingredient Name					Strength
boric acid (UNII: R57Z	HV85D4)						
calcium chloride (UN	II: M4I0 D6 VV5M						
magnesium chloride (UNII: 02F3473H9	0)					
potassium chloride (U	JNII: 660 YQ 98 I 10))					
water (UNII: 059QF0K0	00R)						
sodium borate (UNII: 9	1MBZ8H3QO)						
carboxymethylcellulo	se sodium (UNI	: K679OBS311)					
sodium chloride (UNI	: 451W47IQ8X)						
hydrochloric acid (UN	NII: QTT17582CB)					
sodium hydroxide (UN	NII: 55X04QC32I)						
Packaging							
# Item Code	Pac	kage Description	Marketing Start Date M		Aarketing End Date		
1 NDC:54868-4276-0	1 in 1 CAR	ΓΟΝ					
1	5 mL in 1 E	OTTLE, DROPPER					
Marketing Info	ormation						
Marketing Category	Applicatio	n Number or Monograph C	itation	Marketing	Start Date	Marke	ting End Dat
NDA	NDA021770			03/08/2013			

Labeler - Physicians Total Care, Inc. (194123980)

Establishment						
Name	Address	ID/FEI	Business Operations			
Physicians Total Care, Inc.		194123980	relabel(54868-4690, 54868-4276)			

Revised: 3/2013

Physicians Total Care, Inc.