Health care professional comment form.



This form is to be used by health care professionals to provide input to be reviewed by MedImpact's Quality Management Committee. Please fill out this form and fax to us at 330-405-8081.

If your comments concern a potential medication error, please use the FDA Med Watch Form at http://www.fda.gov/Safety/MedWatch/HowToReport/default.htm.

Your input is valuable to MedImpact. All comments, complaints, and/or suggestions will be reviewed upon receipt, corrective actions taken as needed and overseen by MedImpact's Quality Management Committee.

| Name | Address |
|---|----------------------|
| Phone | Email |
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| pharmacist physician other health care prof | fessional (describe) |
| Comments/Complaints/Suggestions (please be specific): | |
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Thank you for your input.

Internal use only: Once form is received, please email to Clinical Quality at **qualitymanagement@elixirsolutions.com**.

