Tab 22

Customer# 385

Cytodyne

Product Complaint Form

Sales Rep: Rich O.

Date: 4/15 **Product:** xenadrine RFA-1

Customer Name REDACTED

Account Number

Address

REDACTED

Phone #

Customer Problem: Customer's Daughter passed out & had a seizure. The neurologist said ephedrine caused the stroke. Kelly needs to call customer back ~~[illegible]~~ Daughter's REDACTED

Resolution / Action Taken: 4/15/03 - Spoke w/ mother - said daughter had stroke - She said her daughter "lost inches on Xen. that was great."
Gave Dr. Gilkers # → She is calling
She is sending a letter for a retainer & doctor's medical records

Supervisor Comments / Notes:

Customer# 385

Fax

To:	Kelly Conklin	**From:**	Carlon M. Colker, M.D.
Fax:	732.292.3095	**Pages:**	2 total
Phone:	732.292.4600	**Date:**	April 28, 2003
RE:		**CC:**	Shane Freedman

☐ URGENT ☒ For Review ☐ Please Comment ☐ Please Reply

COMMENTS:

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Customer# 385

Cytodyne, Inc. Call Record

Date: 4/28/3	Forwarded to me by: KELLY CONNELSON	Date of my response: 4/28/3
Name: REDACTED	Phone #: REDACTED	
Address: REDACTED (DAUGHTER) MOTHER CALLING FOR DAUGHTER		
Age: 18	Sex: F	Height: 5'0"	Weight: 150lbs

"All the information provided in this call is for educational and informational purposes only, and not intended to substitute for a consultation with and/or examination by your own personal physician. You must consult your own physician about the applicability of all opinions with respect to your own symptoms or medical conditions. The information provided in this call should not be considered complete or relied upon to suggest a course of treatment. You must always consult with your physician before embarking on a new treatment, diet or fitness program. Under no circumstances, including but not limited to negligence, shall Cytodyne or myself be liable for your reliance on any information contained in this telephone call, nor shall Cytodyne or myself be liable for any direct or indirect damages that result from your reliance on any information provided in this call."

Were the contents of this statement made clear to the caller? ☑ Yes ☐ No

Did they voice a clear agreement and understanding of this? ☑ Yes ☐ No

Comments (if any):

Name of product: XENADRINE RFA-1 Dose: 1 CAP/DAY → PER INSTRUCTIONS

Reason for taking: WEIGHT-LOSS.

Product started: FEBRUARY ~~MARCH~~ 2003 Product stopped: 3 WK LATER

Medical history: DENIES

Allergies NKDA

Complaint DAUGHTER WAS TAKING XEN RFA-1 AND "PASSED OUT AND HAD A SEIZURE" AT THE GYM AND HIT HER HEAD. SAN ANTONIO NORTHEAST BAPTIST HOSPITAL FEBRUARY 22, 2003. DIETING AND EXERCISING AT THE TIME. LEANING ON STAIRMASTER @ THE TIME. SAYS SHE IS "FINE" NOW BUT HAS LOST SOME "TASTE AND SENSATION" BUT THE NEUROLOGIST SAYS IT WILL RETURN.

Response REFERED HER BACK TO HER PMD. I TOLD HER I WOULD LET CYTODYNE KNOW HER CONCERNS AND LET HER & KELLY TAKE IT FROM THERE

Client company informed: ☑ Yes ☐ No

If "yes" enter date/ if "no" enter reason: 4/28/3

Carlon M. Colker, M.D., FACN [signature]

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Resolution / Action Taken:

Supervisor Comments / Notes: