# Worksheet 03

Complete the information for the 5 products presented following Module 2.3:

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| **Dosage form**   |  |  | | --- | --- | | 1 = Tablet  2 = Suppository  3 = Granule  4 = Syrup | 5=Suspension  6 = Drops  7= Liquid inj.  8 = Powder inj. | | 96 = Other (specify) [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_] | | | | **Brand name** | | **Manufacture**  Name:  Country: | |
| **Active ingredient(s)**   |  | | --- | |  | |  | |  | | **Strengths**   |  | | --- | | 1. [\_\_|\_\_|\_\_|\_\_].[\_\_] mg/ [\_\_|\_\_|\_\_|\_\_].[\_\_]mL | | 1. [\_\_|\_\_|\_\_|\_\_].[\_\_] mg/ [\_\_|\_\_|\_\_|\_\_].[\_\_]mL | | 1. [\_\_|\_\_|\_\_|\_\_].[\_\_] mg/ [\_\_|\_\_|\_\_|\_\_].[\_\_]mL | | | **Salts**:   |  | | --- | |  | |  | |  | | | **FDC?**  1 = Yes  0 = No  8 = Don’t know |
| **Pack type**   |  |  | | --- | --- | | 1= Blister strip  2= Individual packet  3= Loose tablets | 4= Sachet  5= Bottle  6= Ampoule or vial | | 96 = Other (specify) [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_] | | | | **Pack size**   |  |  | | --- | --- | | For Tablets, Suppositories, or Granules:  For Suspensions, Syrups, Drops, and Liquid injections:  For Powder injections: | [\_\_\_|\_\_\_|\_\_\_|\_\_\_] [\_\_\_|\_\_\_|\_\_\_].[\_\_] mL  [\_\_\_|\_\_\_|\_\_\_].[\_\_] mg | | | | |

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