

Fax or email this form to:

FAX: 614-652-7727

Email: GMB-SPS-ARNAPHARMA@cordlogistics.com

Phone: 877-663-5219

BRONCHITOL® TOLERANCE TEST REQUEST FORM

NOTE: Maximum of 10 Tolerance tests per HCP per month

BRONCHITOL TOLERANCE TEST

10 capsules and 1 inhaler per carton

NDC#84639-212-04 Quantity requested.....carton(s)

Name (as it appears on your State license):

Professional Designation (MD, DO, NP, PA. etc.)

Office Address (no PO Boxes):

City: State:

ZIP Code: State license Number: Office phone:

Office fax: Office Contact Name: Office Email address:

Licensed Practitioner's Signature (Required) **Date:**

By signing and returning, I certify that I am a licensed practitioner eligible to request, receive, prescribe, and dispense these complimentary tolerance tests at the location above. If I am a Nurse Practitioner or Physician Assistant, I certify I am authorized and eligible, in the state in which I am now practicing, to request and receive these tolerance tests, and I have my supervising Physician's approval to do so. I have requested these tolerance tests for the medical needs of my patients and I will not sell, trade, barter, return for credit, or seek third-party reimbursement for them. I understand in order to continue to receive tolerance tests an acknowledgement of content / delivery must be signed. OHIO PRESCRIBERS ONLY: I understand that OHIO law (Rev Code 4729.51) requires me (or my practice) to hold a valid Terminal Distributor of Dangerous Drugs (TDDD) license or meet an exemption to receive prescription drugs, including tolerance tests. By signing this form, I certify that I (or my practice) possess a valid Ohio TDDD license for the "ship to" address on this form or I (or my practice) are exempt from the Ohio TDDD licensing requirements.

Please note:

In compliance with the Prescription Drug Marketing Act regulations, incomplete request forms cannot be processed and Tolerance Tests will not be sent.

Arna Pharma, Inc. does not ship BRONCHITOL Tolerance Tests to any licensed healthcare professional in the state of Vermont due to state law, restricting Rx drug sampling.

For any questions pertaining to your order, please call 877-663-5219. For any questions pertaining to the product or usage, please visit www.bronchitol.com

To report SUSPECTED ADVERSE REACTIONS, or any product defects, contact Arna Pharma, Inc. at adverse.events@arnapharma.com or product.complaints@arnapharma.com

FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

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