

THE GLOBAL SOURCING PARTNER OF CHOICE



ZYDUS
P H A R M A C E U T I C A L S

A GLOBAL GENERIC PHARMACEUTICAL COMPANY

Product Catalog

Spring 2012


New Products:

Clarithromycin Tablets, USP

Clarithromycin Extended-Release Tablets

Coming Soon:

Clarithromycin Oral Suspension, USP (May 2012)

NDC	Strength	Count	Case	Description/Imprint Code	
Acetazolamide Extended-Release Capsules					
<i>AB-Rated to Diamox[®] Sequels</i>					
68382-0261-01	500 mg	100	24	Capsule, Orange Opaque/White Opaque, EP/107	
Amiodarone HCl Tablets					
<i>AB-Rated to Cordarone[®] Tablets</i>					
68382-0227-14	200 mg	60	24	Round, White to Off-White, Bisect, ZE 65	
68382-0227-05	200 mg	500	12	Round, White to Off-White, Bisect, ZE 65	
Amlodipine Besylate Tablets					
<i>AB-Rated to Norvasc[®] Tablets</i>					
68382-0121-16	2.5 mg	90	24	Round, White to Off-White, Z/7	
68382-0121-05	2.5 mg	500	12	Round, White to Off-White, Z/7	
68382-0122-16	5 mg	90	24	Round, White to Off-White, Z3	
68382-0122-05	5 mg	500	12	Round, White to Off-White, Z3	
68382-0123-16	10 mg	90	24	Round, White to Off-White, Z5	
68382-0123-05	10 mg	500	12	Round, White to Off-White, Z5	
Anastrozole Tablets					
<i>AB-Rated to Arimidex[®] Tablets</i>					
68382-0209-06	1 mg	30	24	Round, White, A7	
68382-0209-10	1 mg	1000	12	Round, White, A7	
Atenolol Tablets, USP					
<i>AB-Rated to Tenormin[®] Tablets</i>					
68382-0022-01	25 mg	100	24	Round, White to Off-White, Z/65	
68382-0022-10	25 mg	1000	12	Round, White to Off-White, Z/65	
68382-0023-01	50 mg	100	24	Round, White to Off-White, Bisect, Z 66	
68382-0023-10	50 mg	1000	12	Round, White to Off-White, Bisect, Z 66	
68382-0024-01	100 mg	100	24	Round, White to Off-White, Z 67	
68382-0024-10	100 mg	1000	12	Round, White to Off-White, Z 67	
Azathioprine Tablets, USP					
<i>AB-Rated to Imuran[®] Tablets</i>					
68382-0003-01	50 mg	100	24	Round, Yellow, Bisect, ZC 59	
68382-0003-05	50 mg	500	12	Round, Yellow, Bisect, ZC 59	
Benzonatate Capsules, USP					
<i>AA-Rated to Tessalon[®] Perles</i>					
68382-0247-01	100 mg	100	24	Round, Light Yellow, Z	
68382-0247-05	100 mg	500	12	Round, Light Yellow, Z	
68382-0248-01	200 mg	100	24	Round, Light Yellow, β	
Carvedilol Tablets					
<i>AB-Rated to Coreg[®] Tablets</i>					
68382-0092-01	3.125 mg	100	24	Round, White to Off-White, Z/1	

NDC	Strength	Count	Case	Description/Imprint Code
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Carvedilol Tablets (continued)

AB-Rated to Coreg® Tablets

68382-0092-05	3.125 mg	500	12	Round, White to Off-White, Z/1
68382-0093-01	6.25 mg	100	24	Round, White to Off-White, ZC40
68382-0093-05	6.25 mg	500	12	Round, White to Off-White, ZC40
68382-0094-01	12.5 mg	100	24	Round, White to Off-White, ZC41
68382-0094-05	12.5 mg	500	12	Round, White to Off-White, ZC41
68382-0095-01	25 mg	100	24	Round, White to Off-White, ZC42
68382-0095-05	25 mg	500	12	Round, White to Off-White, ZC42

Clarithromycin Extended-Release Tablets

Same as Biaxin® XL Filmtab®

68382-0763-14	500 mg	60	48	Oval, Yellow, Abbott Logo KJ
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Clarithromycin Tablets, USP

Same as Biaxin® Filmtab®

68382-0761-14	250 mg	60	48	Oval, Yellow, Abbott Logo KT
68382-0762-14	500 mg	60	48	Oval, Yellow, Abbott Logo KL

Dipyridamole Tablets, USP

AB-Rated to Persantine® Tablets

68382-0187-01	25 mg	100	24	Round, Light Yellow, ZE 43
68382-0187-05	25 mg	500	12	Round, Light Yellow, ZE 43
68382-0188-01	50 mg	100	24	Round, Light Yellow, ZE 49
68382-0188-05	50 mg	500	12	Round, Light Yellow, ZE 49
68382-0189-01	75 mg	100	24	Round, Light Yellow, ZE 50
68382-0189-05	75 mg	500	12	Round, Light Yellow, ZE 50

Divalproex Sodium Capsules (Sprinkle)

AB-Rated to Depakote® Sprinkle Capsules

68382-0106-01	125 mg	100	24	Capsule, Blue/White, ZA66/125mg
68382-0106-10	125 mg	1000	12	Capsule, Blue/White, ZA66/125mg

Divalproex Sodium Delayed-Release Tablets, USP

AB-Rated to Depakote® Delayed-Release Tablets

68382-0031-01	125 mg	100	24	Oval, White to Off-White, ZA08
68382-0031-05	125 mg	500	12	Oval, White to Off-White, ZA08
68382-0032-01	250 mg	100	24	Oval, White to Off-White, ZA07
68382-0032-05	250 mg	500	12	Oval, White to Off-White, ZA07
68382-0033-01	500 mg	100	24	Oval, White to Off-White, ZA06
68382-0033-05	500 mg	500	12	Oval, White to Off-White, ZA06

Donepezil HCl Orally Disintegrating Tablets


AB-Rated to Aricept ODT®

68382-0346-06	5 mg	30	24	Round, White to Off-White, ZF14
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NDC	Strength	Count	Case	Description/Imprint Code
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Donepezil HCl Orally Disintegrating Tablets (continued)

AB-Rated to Aricept ODT®

68382-0347-06	10 mg	30	24	Round, White to Off-White, ZF15	
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Famotidine for Oral Suspension, USP

AB-Rated to Pepcid® for Oral Suspension

68382-0444-05	40 mg/5 mL	50 mL	24	White to Off-White, Cherry-Mint flavor
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
Haloperidol Tablets, USP

AB-Rated to Haloperidol Tablets, USP

68382-0080-01	10 mg	100	24	Capsule, Light Green, Partial Bisect, ZC 08	
68382-0081-01	20 mg	100	24	Capsule, Coral, Bisect, ZC 09	



Hydroxychloroquine Sulfate Tablets, USP

AB-Rated to Plaquenil® Tablets

68382-0096-01	200 mg	100	24	Capsule, White to Off-White, ZC38	
68382-0096-05	200 mg	500	12	Capsule, White to Off-White, ZC38	

Lamotrigine Chewable Dispersible Tablets

AB-Rated to Lamictal® Chewable Dispersible Tablets

68382-0108-01	5 mg	100	24	Round, White to Off-White, Bisect, Z 13	
68382-0109-01	25 mg	100	24	Round, White, Z 12	



Lamotrigine Tablets

AB-Rated to Lamictal® Tablets

68382-0006-01	25 mg	100	24	Round, White to Off-White, Bisect, ZC 79	
68382-0006-10	25 mg	1000	12	Round, White to Off-White, Bisect, ZC 79	
68382-0008-01	100 mg	100	24	Round, White to Off-White, Bisect, ZC 80	
68382-0008-10	100 mg	1000	12	Round, White to Off-White, Bisect, ZC 80	
68382-0009-14	150 mg	60	24	Round, White to Off-White, Bisect, ZC 81	
68382-0009-05	150 mg	500	12	Round, White to Off-White, Bisect, ZC 81	
68382-0010-14	200 mg	60	24	Round, White to Off-White, Bisect, ZC 82	
68382-0010-05	200 mg	500	12	Round, White to Off-White, Bisect, ZC 82	

Losartan Potassium and Hydrochlorothiazide Tablets, USP



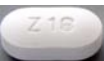
AB-Rated to Hyzaar® Tablets

68382-0142-06	50-12.5 mg	30	24	Capsule, White to Off-White, ZD18	
68382-0142-16	50-12.5 mg	90	24	Capsule, White to Off-White, ZD18	
68382-0142-10	50-12.5 mg	1000	12	Capsule, White to Off-White, ZD18	
68382-0143-06	100-25 mg	30	24	Capsule, White to Off-White, ZD19	
68382-0143-16	100-25 mg	90	24	Capsule, White to Off-White, ZD19	
68382-0143-10	100-25 mg	1000	12	Capsule, White to Off-White, ZD19	

Losartan Potassium Tablets, USP


AB-Rated to Cozaar® Tablets

68382-0135-06	25 mg	30	24	Capsule, White to Off-White, Z/2
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NDC	Strength	Count	Case	Description/Imprint Code	
Losartan Potassium Tablets, USP (continued)					
<i>AB-Rated to Cozaar® Tablets</i>					
68382-0135-16	25 mg	90	24	Capsule, White to Off-White, Z/2	
68382-0135-01	25 mg	100	24	Capsule, White to Off-White, Z/2	
68382-0135-10	25 mg	1000	12	Capsule, White to Off-White, Z/2	
68382-0136-16	50 mg	90	24	Capsule, White to Off-White, Z16/Breakline	
68382-0136-01	50 mg	100	24	Capsule, White to Off-White, Z16/Breakline	
68382-0136-10	50 mg	1000	12	Capsule, White to Off-White, Z16/Breakline	
68382-0137-06	100 mg	30	24	Capsule, White to Off-White, Z18	
68382-0137-16	100 mg	90	24	Capsule, White to Off-White, Z18	
68382-0137-01	100 mg	100	24	Capsule, White to Off-White, Z18	
68382-0137-10	100 mg	1000	12	Capsule, White to Off-White, Z18	

Meloxicam Tablets, USP

AB-Rated to Mobic® Tablets

68382-0050-01	7.5 mg	100	24	Round, Yellow, ZC 25	
68382-0050-05	7.5 mg	500	12	Round, Yellow, ZC 25	
68382-0051-01	15 mg	100	24	Round, Yellow, ZC 26	
68382-0051-05	15 mg	500	12	Round, Yellow, ZC 26	

Metformin HCl Extended-Release Tablets, USP

AB-Rated to Glucophage® XR Tablets

68382-0027-05	500 mg	500	12	Capsule, White to Off-White, 63/Z	
68382-0039-05	750 mg	500	12	Capsule, White to Off-White, ZC/20	


Metformin HCl Tablets, USP


AB-Rated to Glucophage® Tablets




68382-0028-01	500 mg	100	24	Round, White to Off-White, 70/Z	
68382-0028-05	500 mg	500	12	Round, White to Off-White, 70/Z	
68382-0028-10	500 mg	1000	12	Round, White to Off-White, 70/Z	
68382-0029-01	850 mg	100	24	Oval, White to Off-White, 69/Z	
68382-0029-05	850 mg	500	12	Oval, White to Off-White, 69/Z	
68382-0029-10	850 mg	1000	12	Oval, White to Off-White, 69/Z	
68382-0030-01	1000 mg	100	24	Oval, White to Off-White, Bisect, Z 71	
68382-0030-05	1000 mg	500	12	Oval, White to Off-White, Bisect, Z 71	
68382-0030-10	1000 mg	1000	12	Oval, White to Off-White, Bisect, Z 71	

Paroxetine Tablets, USP

AB-Rated to Paxil® Tablets




68382-0097-06	10 mg	30	24	Round, White to Off-White, Bisect, ZC 15	
68382-0097-16	10 mg	90	24	Round, White to Off-White, Bisect, ZC 15	
68382-0097-05	10 mg	500	12	Round, White to Off-White, Bisect, ZC 15	

NDC	Strength	Count	Case	Description/Imprint Code	
Paroxetine Tablets, USP (continued)					
<i>AB-Rated to Paxil® Tablets</i>					
68382-0097-10	10 mg	1000	12	Round, White to Off-White, Bisect, ZC 15	
68382-0098-06	20 mg	30	24	Round, White to Off-White, Bisect, ZC 16	
68382-0098-16	20 mg	90	24	Round, White to Off-White, Bisect, ZC 16	
68382-0098-01	20 mg	100	24	Round, White to Off-White, Bisect, ZC 16	
68382-0098-05	20 mg	500	12	Round, White to Off-White, Bisect, ZC 16	
68382-0098-10	20 mg	1000	12	Round, White to Off-White, Bisect, ZC 16	
68382-0099-06	30 mg	30	24	Round, White to Off-White, ZC17	
68382-0099-16	30 mg	90	24	Round, White to Off-White, ZC17	
68382-0099-05	30 mg	500	12	Round, White to Off-White, ZC17	
68382-0099-10	30 mg	1000	12	Round, White to Off-White, ZC17	
68382-0001-06	40 mg	30	24	Round, White to Off-White, ZC18	
68382-0001-16	40 mg	90	24	Round, White to Off-White, ZC18	
68382-0001-05	40 mg	500	12	Round, White to Off-White, ZC18	
Potassium Chloride Extended-Release Capsules, USP					
<i>Same as Micro-K® Extencaps® Extended-Release Capsules, USP</i>					
68382-0702-01	8 mEq (600 mg)	100	12	Capsule, Pale Orange, 002/002	
68382-0701-01	10 mEq (750 mg)	100	12	Capsule, Pale Orange/Opaque White, 001/001	
68382-0701-05	10 mEq (750 mg)	500	12	Capsule, Pale Orange/Opaque White, 001/001	
Potassium Chloride Extended-Release Tablets, USP					
<i>Same as K-Tab® Tablets</i>					
68382-0600-01	10 mEq (750 mg)	100	48	Ovaloid, Yellow, Abbott Logo/K-TAB	
68382-0600-10	10 mEq (750 mg)	1000	12	Ovaloid, Yellow, Abbott Logo/K-TAB	
Pramipexole Dihydrochloride Tablets					
<i>AB-Rated to Mirapex® Tablets</i>					
68382-0196-16	0.125 mg	90	24	Capsule, Pink, P1	
68382-0196-10	0.125 mg	1000	12	Capsule, Pink, P1	
68382-0197-16	0.25 mg	90	24	Round, Pale Blue, Bisect, P2	
68382-0197-10	0.25 mg	1000	12	Round, Pale Blue, Bisect, P2	
68382-0198-16	0.5 mg	90	24	Capsule, Lavender, Bisect, P3	
68382-0198-10	0.5 mg	1000	12	Capsule, Lavender, Bisect, P3	
68382-0199-16	1 mg	90	24	Round, Light Peach to Peach, Bisect, P4	
68382-0199-10	1 mg	1000	12	Round, Light Peach to Peach, Bisect, P4	
68382-0200-16	1.5 mg	90	24	Round, Bisect, Yellow, P5	
68382-0200-10	1.5 mg	1000	12	Round, Bisect, Yellow, P5	
Pravastatin Sodium Tablets, USP					
<i>AB-Rated to Pravachol® Tablets</i>					
68382-0070-16	10 mg	90	24	Oval, White to Off-White, ZC46	

NDC	Strength	Count	Case	Description/Imprint Code	
Pravastatin Sodium Tablets, USP (continued)					
<i>AB-Rated to Pravachol® Tablets</i>					
68382-0070-05	10 mg	500	12	Oval, White to Off-White, ZC46	
68382-0071-16	20 mg	90	24	Oval, White to Off-White, ZC45	
68382-0071-05	20 mg	500	12	Oval, White to Off-White, ZC45	
68382-0072-16	40 mg	90	24	Oval, White to Off-White, ZC44	
68382-0072-05	40 mg	500	12	Oval, White to Off-White, ZC44	
68382-0073-16	80 mg	90	24	Oval, White to Off-White, ZC43	
68382-0073-05	80 mg	500	12	Oval, White to Off-White, ZC43	





Promethazine HCl Tablets, USP

AB-Rated to Phenergan® Tablets

68382-0040-01	12.5 mg	100	24	Round, White to Off-White, Bisect, ZC 01	
68382-0041-01	25 mg	100	24	Round, White to Off-White, Quadrisect, Z C 0 2	
68382-0041-10	25 mg	1000	12	Round, White to Off-White, Quadrisect, Z C 0 2	
68382-0042-01	50 mg	100	24	Round, White to Off-White, ZC 03	


Ramipril Capsules

AB-Rated to Altace® Capsules

68382-0144-06	1.25 mg	30	24	Capsule, White Opaque/Yellow Opaque, ZA-43/1.25 mg	
68382-0144-01	1.25 mg	100	24	Capsule, White Opaque/Yellow Opaque, ZA-43/1.25 mg	
68382-0144-05	1.25 mg	500	12	Capsule, White Opaque/Yellow Opaque, ZA-43/1.25 mg	
68382-0145-06	2.5 mg	30	24	Capsule, White Opaque/Orange Opaque, ZA-44/2.5 mg	
68382-0145-01	2.5 mg	100	24	Capsule, White Opaque/Orange Opaque, ZA-44/2.5 mg	
68382-0145-05	2.5 mg	500	12	Capsule, White Opaque/Orange Opaque, ZA-44/2.5 mg	
68382-0146-06	5 mg	30	24	Capsule, White Opaque/Red Opaque, ZA-45/5 mg	
68382-0146-01	5 mg	100	24	Capsule, White Opaque/Red Opaque, ZA-45/5 mg	
68382-0146-05	5 mg	500	12	Capsule, White Opaque/Red Opaque, ZA-45/5 mg	
68382-0147-06	10 mg	30	24	Capsule, White Opaque/Blue Opaque, ZA-46/10 mg	
68382-0147-01	10 mg	100	24	Capsule, White Opaque/Blue Opaque, ZA-46/10 mg	
68382-0147-05	10 mg	500	12	Capsule, White Opaque/Blue Opaque, ZA-46/10 mg	


Ribavirin Capsules

AB-Rated to Rebetol® Capsules

68382-0260-04	200 mg	42	24	Capsule, White/White, ZA-12/200mg	
68382-0260-07	200 mg	56	24	Capsule, White/White, ZA-12/200mg	
68382-0260-09	200 mg	70	24	Capsule, White/White, ZA-12/200mg	
68382-0260-12	200 mg	84	24	Capsule, White/White, ZA-12/200mg	










Ribavirin Tablets

AB-Rated to Copegus® Tablets

68382-0046-03	200 mg	168	24	Round, Light Pink to Pink, ZC19	
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NDC	Strength	Count	Case	Description/Imprint Code	
Risperidone Orally Disintegrating Tablets					
<i>AB-Rated to Risperdal® M-Tab® Orally Disintegrating Tablets</i>					
68382-0154-06	0.5 mg	30	24	Round, White to Off-White, ZD22	
68382-0155-06	1 mg	30	24	Round, White to Off-White, ZD21	
68382-0156-06	2 mg	30	24	Round, White to Off-White, ZD20	
Risperidone Tablets, USP					
<i>AB-Rated to Risperdal® Tablets</i>					
68382-0112-14	0.25 mg	60	24	Round, Dark Yellow, Z/4	
68382-0112-05	0.25 mg	500	12	Round, Dark Yellow, Z/4	
68382-0113-14	0.5 mg	60	24	Round, Red-Brown, Z/6	
68382-0113-05	0.5 mg	500	12	Round, Red-Brown, Z/6	
68382-0114-14	1 mg	60	24	Round, White to Off-White, ZC75	
68382-0114-05	1 mg	500	12	Round, White to Off-White, ZC75	
68382-0115-14	2 mg	60	24	Round, Orange, ZC76	
68382-0115-05	2 mg	500	12	Round, Orange, ZC76	
68382-0116-14	3 mg	60	24	Round, Yellow, ZC77	
68382-0116-05	3 mg	500	12	Round, Yellow, ZC77	
68382-0117-14	4 mg	60	24	Round, Green, ZC78	
68382-0117-05	4 mg	500	12	Round, Green, ZC78	
Simvastatin Tablets, USP					
<i>AB-Rated to Zocor® Tablets</i>					
68382-0065-16	5 mg	90	24	Oval, White, ZA19	
68382-0065-10	5 mg	1000	12	Oval, White, ZA19	
68382-0066-16	10 mg	90	24	Oval, Pink, ZA20	
68382-0066-05	10 mg	500	12	Oval, Pink, ZA20	
68382-0066-10	10 mg	1000	12	Oval, Pink, ZA20	
68382-0067-16	20 mg	90	24	Oval, Brown, ZA21	
68382-0067-05	20 mg	500	12	Oval, Brown, ZA21	
68382-0067-10	20 mg	1000	12	Oval, Brown, ZA21	
68382-0068-16	40 mg	90	24	Oval, Pink, ZA22	
68382-0068-05	40 mg	500	12	Oval, Pink, ZA22	
68382-0068-10	40 mg	1000	12	Oval, Pink, ZA22	
68382-0069-16	80 mg	90	24	Capsule, White to Off-White, ZA23	
68382-0069-05	80 mg	500	12	Capsule, White to Off-White, ZA23	
68382-0069-10	80 mg	1000	12	Capsule, White to Off-White, ZA23	
Tamsulosin HCl Capsules, USP					
<i>AB-Rated to Flomax® Capsules</i>					
68382-0132-01	0.4 mg	100	24	Capsule, Green/Peach, ZA-18/0.4 mg	
68382-0132-10	0.4 mg	1000	12	Capsule, Green/Peach, ZA-18/0.4 mg	

NDC	Strength	Count	Case	Description/Imprint Code	
Topiramate Capsules (Sprinkle)					
<i>AB-Rated to Topamax® Sprinkle Capsules</i>					
68382-0004-14	15 mg	60	24	Capsule, White Opaque/White Opaque, ZA63/15 mg	
68382-0005-14	25 mg	60	24	Capsule, White Opaque/White Opaque, ZA63/15 mg	
Topiramate Tablets					
<i>AB-Rated to Topamax® Tablets</i>					
68382-0138-14	25 mg	60	24	Round, White to Off-White, ZD 16	
68382-0138-05	25 mg	500	12	Round, White to Off-White, ZD 16	
68382-0139-14	50 mg	60	24	Round, White to Off-White, ZD 15	
68382-0139-05	50 mg	500	12	Round, White to Off-White, ZD 15	
68382-0140-14	100 mg	60	24	Round, White to Off-White, ZD 14	
68382-0140-05	100 mg	500	12	Round, White to Off-White, ZD 14	
68382-0141-14	200 mg	60	24	Round, White to Off-White, ZD 13	
68382-0141-05	200 mg	500	12	Round, White to Off-White, ZD 13	
Tramadol HCl Tablets					
<i>AB-Rated to Ultram® Tablets</i>					
68382-0319-01	50 mg	100	24	Round, White to Off-White, 319	
68382-0319-05	50 mg	500	12	Round, White to Off-White, 319	
68382-0319-10	50 mg	1000	12	Round, White to Off-White, 319	
Venlafaxine HCl Extended-Release Capsules					
<i>AB-Rated to Effexor XR® Extended-Release Capsules</i>					
68382-0034-06	37.5 mg	30	24	Capsule, Grey/White, ZA-35/37.5 mg	
68382-0034-16	37.5 mg	90	24	Capsule, Grey/White, ZA-35/37.5 mg	
68382-0034-10	37.5 mg	1000	12	Capsule, Grey/White, ZA-35/37.5 mg	
68382-0035-06	75 mg	30	24	Capsule, Peach/White, ZA-36/75 mg	
68382-0035-16	75 mg	90	24	Capsule, Peach/White, ZA-36/75 mg	
68382-0035-10	75 mg	1000	12	Capsule, Peach/White, ZA-36/75 mg	
68382-0036-06	150 mg	30	24	Capsule, Dark Orange/White, ZA-37/150 mg	
68382-0036-16	150 mg	90	24	Capsule, Dark Orange/White, ZA-37/150 mg	
68382-0036-10	150 mg	1000	12	Capsule, Dark Orange/White, ZA-37/150 mg	
Venlafaxine HCl Tablets					
<i>AB-Rated to Effexor® Tablets</i>					
68382-0018-01	25 mg	100	24	Round, Peach, Bisect, ZC 64	
68382-0019-01	37.5 mg	100	24	Round, Peach, Bisect, ZC 65	
68382-0020-01	50 mg	100	24	Round, Peach, Bisect, ZC 66	
68382-0021-01	75 mg	100	24	Round, Peach, Bisect, ZC 67	
68382-0101-01	100 mg	100	24	Round, Peach, Bisect, ZC 68	

NDC	Strength	Count	Case	Description/Imprint Code	
Warfarin Sodium Tablets, USP					
<i>AB-Rated to Coumadin® Tablets</i>					
68382-0052-01	1 mg	100	24	Oval, Pink, Bisect, WAR 1	
68382-0052-10	1 mg	1000	12	Oval, Pink, Bisect, WAR 1	
68382-0053-01	2 mg	100	24	Oval, Lavender, Bisect, WAR 2	
68382-0053-10	2 mg	1000	12	Oval, Lavender, Bisect, WAR 2	
68382-0064-01	2.5 mg	100	24	Oval, Green, Bisect, WAR 2½	
68382-0064-10	2.5 mg	1000	12	Oval, Green, Bisect, WAR 2½	
68382-0054-01	3 mg	100	24	Oval, Tan, Bisect, WAR 3	
68382-0054-10	3 mg	1000	12	Oval, Tan, Bisect, WAR 3	
68382-0055-01	4 mg	100	24	Oval, Blue, Bisect, WAR 4	
68382-0055-10	4 mg	1000	12	Oval, Blue, Bisect, WAR 4	
68382-0056-01	5 mg	100	24	Oval, Peach, Bisect, WAR 5	
68382-0056-10	5 mg	1000	12	Oval, Peach, Bisect, WAR 5	
68382-0057-01	6 mg	100	24	Oval, Teal, Bisect, WAR 6	
68382-0058-01	7.5 mg	100	24	Oval, Yellow, Bisect, WAR 7½	
68382-0059-01	10 mg	100	24	Oval, White, Bisect, WAR 10	

Therapeutic Category	Generic Name	Brand
Analgesic	Meloxicam Tablets	Mobic® Tablets
Analgesic	Tramadol HCl Tablets, USP	Ultram® Tablets
Antiarrhythmic	Amiodarone HCl Tablets	Cordarone® Tablets
Antibiotic	Clarithromycin Extended-Release Tablets	Biaxin® XL Filmtab®
Antibiotic	Clarithromycin Tablets, USP	Biaxin® Filmtab®
Anticoagulant	Warfarin Sodium Tablets, USP	Coumadin® Tablets
Anticonvulsant	Divalproex Sodium Capsules (Sprinkle)	Depakote® Sprinkle Capsules
Anticonvulsant	Divalproex Sodium Delayed-Release Tablets, USP	Depakote® Delayed-Release Tablets
Anticonvulsant	Lamotrigine Chewable Dispersible Tablets	Lamictal® Chewable Dispersible Tablets
Anticonvulsant	Lamotrigine Tablets	Lamictal® Tablets
Anticonvulsant	Topiramate Capsules (Sprinkle)	Topamax® Sprinkle Capsules
Anticonvulsant	Topiramate Tablets	Topamax® Tablets
Antidepressant	Paroxetine Tablets, USP	Paxil® Tablets
Antidepressant	Venlafaxine HCl Extended-Release Capsules	Effexor XR® Extended-Release Capsules
Antidepressant	Venlafaxine HCl Tablets	Effexor® Tablets
Antiglaucoma Agent	Acetazolamide Extended-Release Capsules	Diamox® Sequels
Antihyperlipidemic	Pravastatin Sodium Tablets, USP	Pravachol® Tablets
Antihyperlipidemic	Simvastatin Tablets, USP	Zocor® Tablets
Antihypertensive	Ramipril Capsules	Altace® Capsules
Antimalarial	Hydroxychloroquine Sulfate Tablets, USP	Plaquenil® Tablets
Antineoplastic Agent	Anastrozole Tablets	Arimidex® Tablets
Antiparkinson Agent	Pramipexole Dihydrochloride Tablets	Mirapex® Tablets
Antipsychotic	Haloperidol Tablets, USP	Haloperidol Tablets, USP
Antipsychotic	Risperidone Orally Disintegrating Tablets	Risperdal® M-Tab® Orally Disintegrating Tablets
Antipsychotic	Risperidone Tablets, USP	Risperdal® Tablets
Antirheumatic, Cytotoxic	Azathioprine Tablets, USP	Imuran® Tablets
Antitussive	Benzonatate Capsules, USP	Tessalon® Perles
Antiviral	Ribavirin Capsules	Rebetol® Capsules
Antiviral	Ribavirin Tablets	Copegus® Tablets
Benign Prostatic Hypertrophy Agent	Tamsulosin HCl Capsules, USP	Flomax® Capsules
Cardiovascular Agent	Amlodipine Besylate Tablets	Norvasc® Tablets
Cardiovascular Agent	Atenolol Tablets, USP	Tenormin® Tablets
Cardiovascular Agent	Carvedilol Tablets	Coreg® Tablets
Cardiovascular Agent	Losartan Potassium and Hydrochlorothiazide Tablets, USP	Hyzaar® Tablets
Cardiovascular Agent	Losartan Potassium Tablets, USP	Cozaar® Tablets
Central Nervous System Agent	Donepezil HCl Orally Disintegrating Tablets	Aricept ODT®
Electrolyte Supplement	Potassium Chloride Extended-Release Capsules, USP	Micro-K® Extencaps® Extended-Release Capsules, USP
Electrolyte Supplement	Potassium Chloride Extended-Release Tablets, USP	K-Tab® Tablets
Gastric Acid Secretion Inhibitor	Famotidine for Oral Suspension, USP	Pepcid® for Oral Suspension
Gastrointestinal Agent	Promethazine HCl Tablets, USP	Phenergan® Tablets
Hypoglycemic	Metformin HCl Extended-Release Tablets, USP	Glucophage® XR Tablets
Hypoglycemic	Metformin HCl Tablets, USP	Glucophage® Tablets
Platelet Aggregation Inhibitor	Dipyridamole Tablets, USP	Persantine® Tablets

Return Goods Policy

This return goods policy applies to all ZyGeneric (68382) and Nesher (51477) labeled pharmaceutical products. All ZyGeneric and Nesher product returns must be sent prepaid to our designated return goods processor at **Stericycle RMS, Dock 19, 2670 Executive Drive, Indianapolis, IN**. Each return must also be accompanied by an itemized list on a **Product Return Form which may be obtained by calling (800) 777-6565**. Zydus does not pay fees such as processing charges for returning any product other than recalled product. For customers using other return companies for processing and destruction Zydus will not assume responsibility for charges incurred.

Returnable Items (For Reimbursement):

- Products within three months of expiration date and up to 12 months after the expiration date in sealed, full, unopened, original Zydus or Nesher containers.
- Products received in error or damaged in shipping to consignee (accompanied by a signed bill of lading noting such damage) if reported to Zydus customer service within 5 days of receipt and returned within 30 days.
- Prior written approval is required for all return of all overstocked product with greater than 12 months expiration dating. This merchandise will be subject to a 15% restocking fee.

Returnable Items (No Credit):

- Products returned without an approved Product Return Form.
- Products sold on a non-returnable basis, professional sample, or free goods.
- Partial or open bottles, except where required by law.
- Product which has been repackaged, product purchased through a bankruptcy sale, fire sale, distress merchandise, or product not in original container are not eligible for credit. Zydus will not credit for product damaged due to insurable causes such as fire, floods or earthquake.
- Products with broken seals, opened, coded, dated, damaged or missing label, or soiled packages.
- Products damaged at customers warehouse or store, or not stored under proper conditions.
- Products with greater than three months expiration dating or are greater than 12 months past the expiration date.
- Private label products.
- Return of over stocked product without prior written approval of Zydus
- Merchandise distributed contrary to federal, state or local laws.
- Product not purchased from either Zydus or the customer's authorized distributor / wholesaler.

Valuation of Returns:

- Direct buying customers will be issued a credit by Zydus. This credit will be issued at the lowest of either original invoice price or the prevailing contract price on the date the goods are returned to Zydus.
- Non-Direct customers will receive credit directly from **Stericycle Inc.** If no contract exists, Zydus will use its current standard market price.

Transportation Charges:

- Prepaid by customer, unless shipped in error by Zydus.
- Returned product shipped collect will be refused.

Miscellaneous:

- Representatives cannot authorize return of in date product or pick up merchandise.
- Returned products will be promptly evaluated and credit will reflect eligibility and / or ineligibility. All products returned, whether eligible for credit or not, become property of Zydus. All products are returned with the understanding that they are subject to final review and evaluation by Zydus, and will be processed in accordance with the most recent return policy in effect at the time of the return.
- Wholesalers are not authorized to accept returns of Zydus products except in the case of mis-shipments or other ordering errors.
- Zydus reserves the right to amend this policy at any time.
- Claim merchandise-even exchange or credit will be allowed for loss or damage evident at delivery time if noted on the carrier' delivery receipt and reported to us within five days. Concealed loss or damage must be inspected by carrier within 15 days after delivery and carrier's inspection report must be forwarded to Zydus USA.
- Zydus USA policy strictly prohibits any sales representative or any other employee from giving samples or stock packages to any customer to replace merchandise. All returns must be made according to this return goods policy.

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