

# FDA - Adverse Event Reporting System (FAERS) FOIA Case Report Information

FDACDER2557v2

Case ID: 7979016

**Case Information:** 

Case Type: EXPEDITED (15- eSub: Y HP: Country: CAN Outcomes: OT, (A)NDA/BLA: 018936 /

DAY)

FDA Rcvd Date: 22-Jan-2013 Mfr Rcvd Date: 14-Jan-2013 Mfr Control #: CA-ELI\_LILLY\_AND\_COMPANY-CA201105008333

**Patient Information:** 

Age: 16 YR Sex: Male Weight:

Suspect Products:		Dose/					
#	Product Name	Frequency	Route	Dosage Text	Indications(s)	Start Date	End Date
1	PROZAC			UNK UNK, unknown	Depression	24-Jun-2009	
2	PROZAC			UNK, unknown		2009	2009
3	PROZAC			UNK, unknown		Jun-2009	2009

#	Product Name	Interval 1st Dose to Event	DeC	ReC	Lot#	Exp Date	NDC #	MFR/Labeler
1	PROZAC			Α				ELI LILLY AND CO
2	PROZAC			Α				ELI LILLY AND CO
3	PROZAC			Α				ELI LILLY AND CO

**Event Information:** 

Preferred Term ( MedDRA @ Version: 18.0 ) ReC

Agitation

Anger

Condition aggravated

Feeling abnormal

Homicide

Mania

Mental impairment

Off label use

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## FDA - Adverse Event Reporting System (FAERS)

FDACDER2558v2

(b) (6)

### **FOIA Case Report Information**

Case ID: 7979016

Preferred Term ( MedDRA & Version: 17.0 ReC

Self injurious behaviour

Suicide attempt

**Event/Problem Narrative:** 

Print Time: 20-AUG-2015 11:34 AM

If a field is blank, there is no data for that field



## FDA - Adverse Event Reporting System (FAERS)

FDACDER2559v2

### **FOIA Case Report Information**

Case ID: 7979016

			(b) (6)	
Relevant Medical History:				
Disease/Suprised Dyseasdure	Start Date	End Date	Continuing?	
Disease/Surgical Procedure  Alcohol abuse	Start Date	Eliu Date	Continuing:	
Depression				
Drug abuse				



## FDA - Adverse Event Reporting System (FAERS)

FDACDER2560v2

#### **FOIA Case Report Information**

Case ID: 7979016

**Start Date** Medical History Product(s) **End Date** Indications **Events** 

**Relevant Laboratory Data:** 

**Test Name Normal High Range** Info Avail Result Unit **Normal Low Range** 

**Concomitant Products:** 

# Product Name **Dosage Text** Dose/ Route Start Date **End Date** Interval 1st

Frequency

Indications(s)

Dose to Event

**Reporter Source:** 

Study Report?: No ELI LILLY AND CO Sender Organization:

**Literature Text:** 

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