**DATOS DEL OFICIO DE REGISTRO SANITARIO DE MEDICAMENTOS**

**(Último oficio emitido en hojas de seguridad y oficios blancos de modificación)**

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| **Rubro del oficio de Registro** | **Dice en Hoja de Seguridad** | **Debe decir** | **Número de oficio en blanco de la modificación /corrección interna** |
| Registros Sanitario: | **XXXMXXXX SSA** |  |  |
| No. de solicitud |  |  |  |
| No. de solicitud anterior |  |  |  |
| Titular:  Domicilio:  RFC *(nacional)*: |  |  |  |
| Denominación distintiva: |  |  |  |
| Denominación genérica: |  |  |  |
| Clasificación artículo 226 LGS: |  |  |  |
| Forma farmacéutica |  |  |  |
| Fabricante(s) del(os) fármaco(s)  Razón social:  Domicilio: | *Indicar todos los sitios que estén en el registro* |  |  |
| Fabricante(s) del(os) proceso(s) adicional(es):  Razón social:  Domicilio: | *Indicar todos los sitios que estén en el registro* |  |  |
| Fabricante(s) del(os) medicamento(s)  Razón social:  Domicilio: | *Indicar todos los sitios que estén en el registro* |  |  |
| Sitio de Acondicionado primario  Razón social:  Domicilio: | *Indicar todos los sitios que estén en el registro* |  |  |
| Sitio de Acondicionado secundario  Razón social:  Domicilio: | *Indicar todos los sitios que estén en el registro* |  |  |
| Distribuidor  Razón social:  Domicilio: | *Indicar todos los sitios que estén en el registro* |  |  |
| Importador  Razón social:  Domicilio: | *Indiciar “No aplica” cuando sea un registro con titular en México* |  |  |
| Unidad de farmacovigilancia  Razón social:  Domicilio: | *Indiciar “No aplica” cuando sea un registro con titular en México* |  |  |
| Representante legal:  Nombre  Domicilio: | *Indiciar “No aplica” cuando sea un registro con titular en México* |  |  |
| Otro  (Para, Bajo licencia de, Fabricante del diluyente, etcétera; indique):  Nombre  Domicilio: |  |  |  |
| Presentaciones: |  |  |  |
| Envase: |  |  |  |
| Vida útil: |  |  |  |
| Indicación terapéutica: |  |  |  |
| Contraindicaciones: |  |  |  |
| Vía de administración: |  |  |  |
| Consideración de uso: |  |  |  |

**FÓRMULA**

***Replicar cuantas veces sea necesario.***

**DICE:**

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**DEBE DECIR:**

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