**CUSTOMER CONTACT INFORMATION SHEET**

**LUTATHERA®**

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| **PRODUCT:\****\*Please include full product details with quantity, volume, vial etc* | ***Lutathera® – Solution for infusion******INN: [177 Lu] - DOTAo – Tyr3 – Octreotate, 370 MBq/ml at calibration time: Expiration: 72 hours******VIAL:* 30ML GLASS VIAL** ***ACTIVITY (GBq): 7.4******VOLUMEADMINISTRATION ON DATE OF DELIVERY VOLUME: 22Ml******ADMINISTRATION ON THE DAY AFTER DELIVERY VOLUME: 25Ml*** |
| **INVOICING NAME AND ADDRESS FOR LUTATHERA® ORDERS** |  |
| **GMC/ARSAC LICENCE NUMBER & DETAILS OF THE ADMINISTERING PHYSICIAN** |  |
| **HOSPITAL DELIVERY ADDRESS:\****\*Please include full address with Department, floor, room etc* |  |
| **OUT OF HOURS DETAILS \****\*Contact phone number etc* |  |
| **ADDITIONAL CONTACTS AND CONTACT INFO** |   |
| **NET NURSE/CLINICIANS DETAILS FOR PATIENT INFORMATION PACKS** |  |