

# Medicines and Healthcare products Regulatory Agency

## WHOLESALE DISTRIBUTION AUTHORISATION

### (MEDICINAL PRODUCTS FOR HUMAN USE)

1. Authorisation Number UK WDA(H) 55068
2. Name of Authorisation Holder RIVERSIDE HEALTH PARTNERSHIP
3. Legally registered address of Authorisation Holder RIVERSIDE HEALTH PARTNERSHIP, RIVERSIDE WALK, RETFORD, DN22 6FB, UNITED KINGDOM
4. Address(es) of Site(s) RIVERSIDE HEALTH PARTNERSHIP, MARSH LANE, MISTERTON, DONCASTER, DN10 4DL, UNITED KINGDOM  
RIVERSIDE HEALTH PARTNERSHIP, LEYS LANE, GRINGLEY-ON-THE-HILL, DONCASTER, DN10 4QU, UNITED KINGDOM
5. Scope of authorisation (complete for each site under 4) ANNEX 1
6. Legal basis of authorisation Regulation 18 of the Human Medicines Regulations 2012
7. Name of responsible officer of the competent authority of the member state granting the wholesaling authorisation Confidential
8. Date 22/09/2021
9. Annexes attached Annex 1 Scope of wholesale distribution authorisation Annex 2 (Optional) Address(es) of contract wholesale distribution sites and their authorisation number Annex 3 (Optional) Name(s) of responsible person(s) Annex 4 (Optional) Date of Inspection on which authorisation was granted Annex 5 Additional provisions

#### ANNEX 1

#### SCOPE OF WHOLESALE DISTRIBUTION AUTHORISATION

Name and address of the site:

**RIVERSIDE HEALTH PARTNERSHIP, MARSH LANE, MISTERTON, DONCASTER, DN10 4DL, UNITED KINGDOM**

#### 1. MEDICINAL PRODUCTS

1.1 With "an authorisation" (a UK, Great Britain or Northern Ireland Marketing Authorisation, an Article 126a authorisation, a certificate of registration or traditional herbal registration)

#### 2. AUTHORISED WHOLESALE DISTRIBUTION OPERATIONS

2.1 Procurement

2.2 Holding

## 2.3 Supply

### **Any restrictions or clarifying remarks (for all users)**

4 Categories of Products Handled at this Site: 4.1 Prescription Only Medicines, 4.2 General Sales List, 4.4 Pharmacy

Name and address of the site:

**RIVERSIDE HEALTH PARTNERSHIP**, LEYS LANE, GRINGLEY-ON-THE-HILL, DONCASTER, DN10 4QU, UNITED KINGDOM

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