

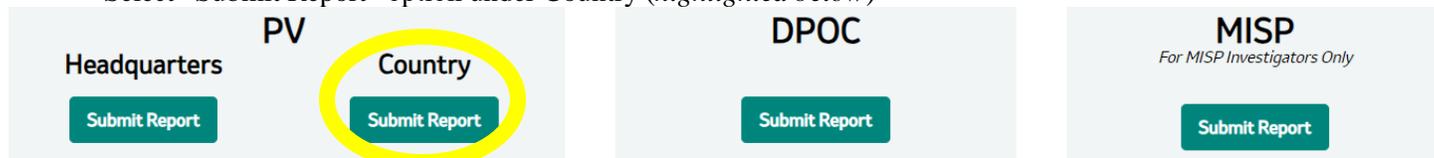
MSD Safety Reporting Portal

Tip Sheet for Business Partner/Vendor/Investigator/Other

If reporting to Country PV, refer to Page 1
If reporting to DPOC, refer to Page 2

Step 1: Navigate to the MSD Safety Reporting Portal ([Landing Page](#) | [Safety Reporting](#))

Select “Submit Report” option under Country (*highlighted below*)



Step 2: Report Adverse Events Screen – Complete Entry of Required Fields

(Refer to image below)

- a) Business Partner/Vendor/Investigator/Other’s Name – Enter the name of your company and/or your name
- b) Business Partner/Vendor/Investigator/Other’s Email Address – Enter your email address, multiple emails can be provided by adding a comma between each address
- c) Country of Incidence – Select appropriate country
- d) Description about the Adverse Event and associated Product Quality Complaint – This field is **not required** if uploading an AE/PQC form
- e) Business Partner/Vendor/Investigator/Other’s Case ID# – **Optional** field to enter any case reference ID if available
- f) Attachment(s) – Upload Attachment; Various formats accepted
- g) What code is in the image? - Enter Captcha Code
- h) Select Submit Report

Merck Safety Reporting

You can report one or more Adverse Event/Product Quality Complaint(s) for each submission. Please ensure that your total attachments do not exceed 35mb.

a

b
Comma separated for multiple emails

c
Select a country

d

e
(optional field for you to enter your company's internal case reference ID, if available)

f
Choose Files No file chosen
Maximum upload size is 35MB. File format includes ZIP, PDF, DOCX, DOC, PPT, PPTX, XLS, XLXS, JPEG, JPG, and PNG.

g


Enter the characters shown in the image.

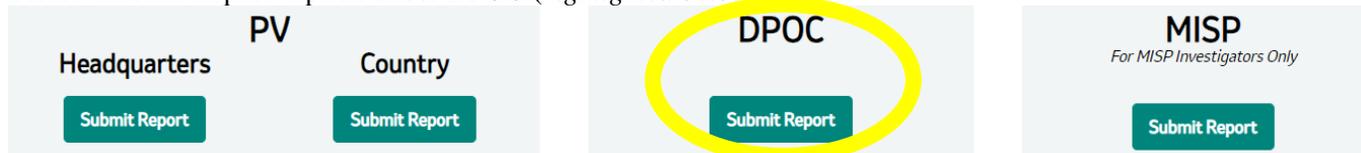
h

MSD Safety Reporting Portal

Tip Sheet for Business Partner/Vendor/Investigator/Other

Step 1: Navigate to the MSD Safety Reporting Portal ([Landing Page](#) | [Safety Reporting](#))

Select “Submit Report” option under DPOC (*highlighted below*)



Step 2: Report Adverse Events Screen – Complete Entry of Required Fields (Refer to image below)

- a) Business Partner/Vendor/Investigator/Other’s Name – Enter the name of your company and/or your name
- b) Business Partner/Vendor/Investigator/Other’s Email Address – Enter the email address for the PI and/or other team members. Multiple emails can be provided by adding a comma between each address.
- c) Consent for follow-up – Check Yes or No
- d) County of Incidence – Select appropriate country
- e) Description about the Adverse Event and associated Product Quality Complaint – Include Patient Identifier i.e. age or gender, Date of Awareness, Batch #, and Batch expiry date
- f) Name of product – Enter the product name
- g) Sample available for return - Check Yes or No
- h) Business Partner/Vendor/Investigator/Other’s Case ID# – **Optional** field to enter your company’s internal case reference ID, if available
- i) Attachment(s) – Upload MEDWATCH/CIOMS, Global Safety Intake form or similar form. Image requirement if reporting Product Quality Complaint. Various formats accepted.
- j) Acknowledgement of privacy statement – Review Our Company’s Privacy Statement and Click Yes
- k) What code is in the image? - Enter Captcha Code
- l) Select Submit Report

You can report one or more Adverse Event(s) for each submission

a Business Partner/Vendor/Investigator/Other’s Name *

b Business Partner/Vendor/Investigator/Other’s Email Address *
Enter the email address for the PI and/or other team members as needed. This email address will be used to request follow-up. Multiple emails can be provided by adding a comma between each address.

c Consent for follow-up *
 Yes No

d Country of Incidence *
Select a country

e Description about the Adverse Event / Product Quality Complaint *
(description to include Patient Identifier i.e. age or gender, Date of Awareness, Batch #, and Batch expiry date)
⚡ Limit to 1500 characters. Do not include URL links.

f Name of product *

g Sample available for return *
 Yes No

h Business Partner/Vendor/Investigator/Other’s Case ID#
(optional field for you to enter your company’s internal case reference ID, if available)

i Attachment(s) *
→ Upload the MEDWATCH/CIOMS Global Safety Intake Form or similar form(s) for reporting the Adverse Event.
→ Maximum upload size is 35MB
→ File format includes ZIP, PDF, DOCX, DOC, PPT, PPTX, XLS, XLXS, JPEG, JPG and PNG
→ Image requirement if reporting Product Quality issue:
→ 6-sided photos of the product – with visible defect and batch details

j Acknowledgement of privacy statement *
 Yes

k CAPTCHA *
What code is in the Image? *
Enter the characters shown in the image.

l Submit Report

MSD Safety Reporting Portal

Tip Sheet for Business Partner/Vendor/Investigator/Other

Step 3: Transmit Report

✓ Report will transmit to the appropriate mailbox

Step 4: Receive email acknowledging the case report was successfully transmitted

The screenshot shows an email client window with the following details:

- Subject:** 20241107-DPOC-0002-1651 - New Safety Report
- From:** MSD_Safety_Reporting-Dev (Profile picture: MD)
- To:** Kierker Murtagh, Brenda
- Retention Policy:** DPT - 3 Years Delete (3 years)
- Expires:** 11/7/2027
- Attachment:** test-pvrep.docx (27 KB)
- Message Content:**

Dear DPOC,

A new case has been reported in the Safety Reporting Portal.

Portal Unique ID: 20241107-DPOC-0002-1651

Date Reported to the Portal: 07-Nov-2024 20:52 (UTC)

Country of Incidence: Australia

Reporter: Test

Reporter Email: brenda.murtagh@merck.com

Consent for follow-up: Yes

Name of product: TEST

Sample available for return: No

Number of Attachments: 1

Business Partner/Vendor/Investigator/Other's Case ID#: TEST

Case Description: TEST

This is an automatically generated message - please do not respond to this email, as we won't receive your message.

Best regards,

Safety Reporting Portal

MSD Safety Reporting Portal

Tip Sheet for Business Partner/Vendor/Investigator/Other

Reporting an issue:

Step 1: Select “Report an Issue” in the top right hand corner or in the footer of the landing page (*highlighted below*)



OR



Step 2: Complete Entry of Required Fields

Report an Issue

Please do not submit any adverse event cases through this form. This channel is intended for users to report only technical issues encountered while using this site. For other queries, please reach out to your respective PV contact.

Name *

Email Address *

Case Reference ID (optional)

Message *

Submit

Step 3: Receive confirmation message

Report an Issue

Thank you for reaching out to us. We will investigate your issue and get back to you within 1 business day.

[Back to home](#)

[Submit another issue](#)