

**United States Food and Drug Administration
Consumer Complaint / Injury Report**

This is an accurate reproduction of the original electronic record as of 02/03/2009

COMPLAINT # 74073

Complaint Date	Receiving Organization	Accomplishing District	How Received	Complaint Source	Complaint Received By	Complaint Status
01/28/2009	ATL-DO	ATL-DO	Telephone	Consumer	Herbert,Dellarese L	Closed

Complainant Identification

Name Address

(b) (6)

Phone (W) Phone (H) Source POC Name Source Phone

(b) (6)

Complaint/Injury

Complaint Description	Adverse Event Result	Adverse Event Date	Injury / Illness
Consumer called to file a complaint on Austin's Peanut butter crackers. She stated that her 17 year old son consumed the product and experienced a series of symptoms.	Non-Life Threatening Injury/Illness - No Adverse Event Reporting		Gastrointestinal distress

Notify DEIO/EMOPS?	Notification Date	Attended Health Professional?	Required Hospitalization?	Emergency Room / Outpatient Visit?	Reported Complaint To?	Need addnl. FDA Contact?
Yes	01/28/2009	No	No	Yes	Not Reported to Manufacturer	Unknown

Remarks

Complaint Symptoms

Sympton	System Affected	Onset Time	Duration	Remarks
Diarrhea	GASTROINTESTINAL			
Vomiting	GASTROINTESTINAL			
Gastrointestinal, nausea (psychosomatic)	PSYCHOPHYSIOLOGI C			

Health Care Professional

Provider Name Address Phone Occupation

Hospital Informatio

Hospital Name Address Phone Dates of Stay

Emergency Room/Outpatient Visit

Hospital Name	Address	Phone	ER Date
(b) (4)	(b) (4)	(b) (4)	1/15/2009

Product and Labeling

Brand Name	Product Name	Product Cod	Product Description	PAC	UPC Code
Austin's	Peanut Butter Crackers	03GGT01	Peanut Butter Filled Crackers;Plastic, Synth;Packaged Food (Not Commercially Sterile)	03R801	7978340612 5

Qty / Unit / Package	Lot/ Serial #	Exp/Use by Date	Purchase Date	Product Used	Amount Consumed/Used
10 Count Other, identify in Label Remarks	Po7249AV	none	1/12/2009	No	4 count

Date Used	Date Discontinued	Amount Remained	Imported Product?	Country of Origin	Label Remarks
1/15/2009	1/15/2009	5 count	No		individually wrapped

Retail

Problem Ingredient Group

Name **Address**

(b) (4)

Manufacturer/Distributor

FEI	Name & Address	Home District	Firm Type
1026111	Kellogg's Snacks 1 Quality Lane Cary North Carolina United States 27513-2001	ATL-DO	Manufacturer

Initial Evaluation/Initial Disposition

Problem Keyword	Problem Keyword Details
Reaction	cramps, vomiting, nausea

Initial Evaluation	Initial Disposition	Disposition Made By	Disposition Date
Violation, Action in Process	Closed without further Investigation	Harris,Georgette P	01/29/2009

Initial Disposition Remarks

recall

Referrals

Org Name	HHS Mail Code

There are no Cosmetics details for this Complaint.
 There are no Adverse Event details for this Complaint.

COMPLAINTS FOLLOW - UP

Grouped Follow - Up Operations

Operation Id	Operation Code	Assignment Number	Accomplishing Organization	Performing Organization	Sample Number	PAF	Status	Status Date
--------------	----------------	-------------------	----------------------------	-------------------------	---------------	-----	--------	-------------

There are no Follow Up Operations related to this complaint.

Disposition Summary

Is Consumer Responsible?	Responsible FEI	Address	Name	Firm Type
No	1026111	1 Quality Lane Cary North Carolina United States 27513-2001	Kellogg's Snacks	Manufacturer

Follow-Up Disposition	Disposition Made By	Disposition Date
Recall	Harris,Georgette P	01/29/2009

Disposition RemarksFollow-Up Sent To

Organization Name	HHS Mail Code
-------------------	---------------