

Exhibit C

<GENZYME LETTERHEAD>

CERTIFICATE OF PROCEDURES RELATED TO
MEDICAL NECESSITY FOR THYROGEN

Dear Customer:

On May ____, 2010, Genzyme entered into a Consent Decree of Permanent Injunction with the United States Food and Drug Administration to resolve litigation in which the United States has alleged that Genzyme manufactured, labeled, and distributed drugs at its Allston, Massachusetts facility in violation of the current good manufacturing practice requirements for drugs. Under the terms of the Consent Decree, Thyrogen may be distributed by Genzyme in the United States only to those customers who execute this certification once and agree to ship the product with a copy of the Dear Healthcare Provider Letter provided herewith, which describes the patients for whom Thyrogen is considered medically necessary by FDA. For purposes of this Certificate, “customers” shall mean entities that purchase Thyrogen kits directly from Genzyme. Downstream purchasers who do not purchase directly from Genzyme do not need to execute this certification. In order to receive Thyrogen from Genzyme, customers must execute this Certificate of Procedures Related to Medical Necessity once and return it to Genzyme at:

<Genzyme Mailing Address>

Scan and e-mail to: <email address>

Or fax to: <fax number>

Required Information

Customer Name: _____ Account #: _____

Address: _____

City: _____ State: _____ Postal Code: _____

I certify, in my capacity as a representative of the customer identified above, that the customer has received a copy of the Dear Healthcare Provider Letter. I hereby agree that, going forward, with each box of Thyrogen shipped by the customer identified above for use within the United States, the customer will ensure that there are enclosed copies of the Dear Healthcare Provider Letter equal to the number of individual kits of Thyrogen contained in the box.

Authorized Signature: _____
(E.g., Chief Executive Officer, President, Chief Medical Officer, Chief Operating Officer, Hospital Administrator)

Name: _____ (please print)

Title: _____

Date: _____

Telephone number: _____ Email address: _____