# Brazil | Pharmacy-linked clinical services

V20 · National decision edition · 22 October 2026 · VXOG SpA / MI LATAM.

Translation and layout T1: 30 October 2026 · ES / EN / PT-BR. Data retain their original dates.

For service, procurement, partnership and benefits managers deciding what to offer, how to fund it and which conditions to require. The analytical unit is a business decision within twelve families; care, channel, payer and supplier remain separate.

The commercial conclusion is conditional: a low-priced offer can lack the required function; utilisation can exhaust a recurring fee; a lead can consume work without revenue. The study provides routes and boundaries to identify these cases without invented contracts, demand or costs.

This edition replaces the sequence of appendices as the main reading route. Earlier research remains in a separate historical archive. This is not a LATAM study, regulatory audit, business valuation or monetary national market estimate.

Static research edition: terms for an individual operation require revalidation before contracting. Approval and evaluation administration is kept separate from this reading route.

# 1. How to use the evidence

Documentary fact: a page or disclosure contains a statement at the inspection date. A supplier offer is not proof of purchase, execution or efficacy. Own calculation: a reproducible output from stated inputs. Hypothesis: a mechanism awaiting observation. Unknown: a missing input that prevents a conclusion.

S01–S118 retain their earlier inspection dates and limitations. They were not all revisited on 22 October. B1901–B1920 are twenty V19 retrieval records; eight match normalised baseline URLs. They are not twenty independent companies or observations.

This review reopened NuvemFarma, Clinicarx plans, Health Hub and ManipuleJá terms. They support the restrictions used in T01–T04, not a new survey or contract audit. The source register records URLs, dates and limits.

Precedence: a specific applicable dated offer takes priority over a generic illustration; an individual contract may differ from a marketing page. Index-only passages, failed access and conflicting retrievals remain labelled. A different supplier tariff cannot fill their gaps.

Retrieved regulatory evidence does not complete a current-law or individual-site authorisation check. Authorisation and clinical appropriateness are prerequisites for each operation; economic boundaries do not replace them.