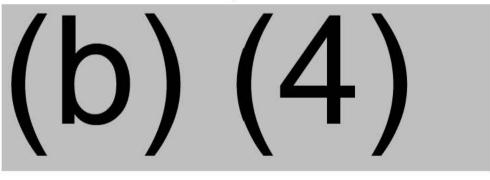
	DEPARTMENT OF HEAL	TH AND HUMAN S	ERVICES		
	FOOD AND DRUG	<b>G</b> ADMINISTRATION			
DISTRICT ADDRESS AND PHO 19701 Fairch		in the second se	DATE(S) OF INSPECTION 11/1/2016-12/2/2016*		
Irvine, CA 9		FEIN	FEINUMBER		
(949)608-290	00 Fax:(949)608-4417		12228279		
NAME AND TITLE OF INDIVID	DUAL TO WHOM REPORT ISSUED				
	Pharm.D. , President				
FIRM NAME	STREET ADDRES		s arbor Blvd Ste F		
Auro Pharmac		511 S Hardo TYPE ESTABLISHMENT INS			
La Habra, CA		Outsourcing	Facility		
observations, and de observation, or have action with the FDA	observations made by the FDA representative(s) o not represent a final Agency determination rega e implemented, or plan to implement, corrective a A representative(s) during the inspection or subm intact FDA at the phone number and address above	arding your compliant action in response to it this information to	nce. If you have an objection n an observation, you may disc	regarding an cuss the objection or	
OBSERVATI Procedures des do not include	CTION OF YOUR FIRM WE OBSERVED: ON 1 signed to prevent microbiological con adequate validation of the sterilization		drug products purporti	ng to be sterile	
Specifically,					
	not represent the actually manuface:			are inadequate 500mg/ml. For	
1)	The process simulations were condu	cted using (b) (	4)		
2)	The inspection process of the proces	ss simulations v	vials are not described	in the SOP-SC-	
	01.1365.01, "Aseptic Media Filling				
	firm indicated that (b) (4)	, riceedare a		before they are	
	(b) (4)			before they are	
	Growth promotion conducted for inc of organisms were used for the g promotion of the incubated vials by to inoculate the vials.	rowth promotio			
SEE REVERSE OF THIS PAGE	Evelyn Wong, Microbiologist	•	X Uttaniti Limchumroon	DATE ISSUED 12/2/2016	
	کی	hulige Wog	Uttaniti Linchumroon Investigator Signed by: Uttaniti Linchumroon -S		
FORM FDA 483 (09/08)	PREVIOUS EDITION OBSOLETE INS	₽ U O		PAGE 1 OF 13 PAGES	

	ALTH AND HUMAN SERVICES RUG ADMINISTRATION	
DISTRICT ADDRESS AND PHONE NUMBER	DATE(S) OF INSPECTION	
19701 Fairchild	11/1/2016-12/2/2016*	
Irvine, CA 92612-2445	FEINUMBER	-
(949)608-2900 Fax:(949)608-4417	3012228279	
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED		
Nayan Patel, Pharm.D. , President		
FIRM NAME	STREET ADDRESS	-
Auro Pharmacies Inc	511 S Harbor Blvd Ste F	
CITY, STATE, ZIP CODE, COUNTRY TYPE ESTABLISHMENT INSPECTED		
La Habra, CA 90631-9375	Outsourcing Facility	
() The presses simulations do not a	encount actual maduation filling batch size. One	

- 4) The process simulations do not represent actual production filling batch size. Operators filled(b) (4) batches for the process simulations. The manufactured Ascorbic Acid 500mg/ml batches are(b) (4) .
- 5) The process simulations conducted had operational times that were shorter than the manufactured Ascorbic Acid 500mg/ml.



Ascorbic Acid Lot #	Start time	End time	<b>Operation time</b>
161026@1	(b) (4)		
161028@1	(b) (4)		
161102@1	(b) (4)		

B. Your firm failed to performed smoke studies under dynamic conditions for ISO 5 laminar flow hoods involved with manufacturing of Ascorbic Acid 500 mg/ml Lot # 161026@1, 161028@1, and 161102@1.

There are  ${}^{(b)(4)}$  laminar flow hoods inside the ISO 7 Room  ${}^{(b)(4)}$ . Laminar flow hood (b) (4) (b) (4) were involved in the manufacturing of Ascorbic Acid 500 mg/ml lot # 161026@1, 161028@1, and 161102@1. Only laminar flow hood #  ${}^{(b)(4)}$  had smoke study conducted under (b) (4) . All  ${}^{(b)(4)}$  laminar flow hoods can be used for aseptic filling operations.

FORM FDA 483 (09/08)	PREVIOUS EDITION OBSOLETE	INSPECTIONAL OBSERVAT	IONS	PAGE 2 OF 13 PAGES
SEE REVERSE OF THIS PAGE			12/2/2016 X Uttaniti Limchumroon Uttanit Undumroon Investigator Signed by: Uttanit Limchumroon -S	DATE ISSUED

	HEALTH AND HUMA D DRUG ADMINISTRATI	
DISTRICT ADDRESS AND PHONE NUMBER		DATE(S) OF INSPECTION
19701 Fairchild		11/1/2016-12/2/2016*
Irvine, CA 92612-2445		FEINUMBER
(949)608-2900 Fax: (949)608-4417		3012228279
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED Nayan Patel, Pharm.D., President		
FIRM NAME	STREET ADDRESS	
Auro Pharmacies Inc	511 S Ha	rbor Blvd Ste F
CITY, STATE, ZIP CODE, COUNTRY	TYPE ESTABLISHME	INT INSPECTED
La Habra, CA 90631-9375 Outsourcing Facility		ing Facility

### **OBSERVATION 2**

Aseptic processing areas are deficient regarding the system for monitoring environmental conditions.

Specifically,

- A. Your firm has not performed qualification of the Room<sup>(b) (4)</sup> to demonstrate that ISO 5 and ISO 7 environmental conditions can be met. For example, your firm does not conduct viable and nonviable monitoring in dynamic conditions.
- B. Your firm does not have a justification or rational to support the sampling sites used for monitoring the environment during aseptic filling operation.
- C. Your firm's current environmental monitoring program does not include any non-viable particulate monitoring during filling of sterile drug product.
- D. Your firm's monitoring of the pressure differentials throughout the classified areas where aseptic filling occurs is inadequate. Room pressure is monitored (b) (4) the(b) (4) . Pressure differentials are not monitored during aseptic filling of the product manufactured which does not assure notification of a disruption in established pressure cascade for a prolonged duration which could impact the classified areas.
- E. Your firm has no justification for the alert and action limits set for environmental monitoring.

OBSERVATIO	ON 3		
	EMPLOYEE(S) SIGNATURE	T.	DATE ISSUED
SEE REVERSE	Uttaniti Limchumroon, Investigator UC Evelyn Wong, Microbiologist	A C 12/2/2016	12/2/2016
OF THIS PAGE		X Uttaniti Limchumroon	
	600	Uttanti Linchumroon Investigator Signed by: Uttanti Linchumroon -S	
FORM FDA 483 (09/08)	PREVIOUS EDITION OBSOLETE INSPECTIONAL	OBSERVATIONS	PAGE 3 OF 13 PAGES

	DEDADTMENT OF HEAT	TH AND HUMAN CEDVIL	320	
	FOOD AND DRU	G ADMINISTRATION		
DISTRICT ADDRESS AND PHON 19701 Fairch:		DATE(S) OF II	NSPECTION 2016-12/2/2016*	
Irvine, CA 92	2612-2445	FEINUMBER 301222		
(949)608-2900	00 Fax:(949)608-4417		28219	
1960 C 1960 C 28	AL TO WHOM REPORT ISSUED			
Nayan Patel,	Pharm.D. , President	I STREET LODDECC		
Auro Pharmac	ies Inc	STREET ADDRESS 511 S Harbor B		
CITY, STATE, ZIP CODE, COUN		TYPE ESTABLISHMENT INSPECTED		
La Habra, CA	90631-9375	Outsourcing Fac	cing Facility	
Time limits are the quality of th Specifically,	not established when appropriate for a drug product.	or the completion of	f each production p	hase to assure
Your firm does	s not have a hold time study to s	upport the (b) (4)		
			ot was compounde	ed and (b) (4)
			÷	ourden was not
performed prior	to (b) (4)			
	sonnel engaged in the manufacturing ate for the duties they perform.	g, processing, packi	ng and holding of c	lrug products
A. On 11/02/2016, aseptic fill process support staffs with exposed eye area were observed to have placed their face directly in front of the ISO 5 laminar flow hood during the filling process of Ascorbic Acid 500mg/ml lot # 161102@1.				
B. On 11/(	12/2016 one asentic fill process	support staff with	exposed eve area	was observed
B. On 11/02/2016, one aseptic fill process support staff with exposed eye area was observed reaching inside and place face in front of the ISO 5 laminar flow hood during the filling process of Ascorbic Acid 500mg/ml lot # 161102@1.				
C. On 11/01/2016,(b) (4) operators with exposed eye area were observed placing their faces in front of the ISO 5 laminar flow hood during the cleaning process.				
D. On 11/01/2016, one operator with exposed eye area was observed placing the head inside the ISO 5 laminar flow hood during the cleaning process.				
SEE REVERSE	EMPLOYEE(S) SIGNATURE Uttaniti Limchumroon, Invest	tigator	12/2/2016	DATE ISSUED 12/2/2016
OF THIS PAGE	Evelyn Wong, Microbiologist	ŧW	Uttaniti Limchumroon Uttaniti Limchumroon Investigator Signed by: Uttaniti Limchamroon -S	12/2/2010
FORM FDA 483 (09/08)	PREVIOUS EDITION OBSOLETE INS	SPECTIONAL OBSERVAT	IONS	PAGE 4 OF 13 PAGES

	DEPARTMENT OF HEAL	TH AND HUMAN	SERVICES	
DISTRICT ADDRESS AND PHON		G ADMINISTRATION	TE(S) OF INSPECTION	
19701 Fairch		1.000	1/1/2016-12/2/2016*	
Irvine, CA 92			UNUMBER 012228279	
(949)608-2900	00 Fax:(949)608-4417		012228279	
NAME AND TITLE OF INDIVIDUA	UAL TO WHOM REPORT ISSUED			
Navan Patel,	Pharm.D. , President			
FIRM NAME		STREET ADDRESS		
Auro Pharmac	Contract and Article and Artic		arbor Blvd Ste F	
CITY, STATE, ZIP CODE, COUN				
La Habra, CA	abra, CA 90631-9375 Outsourcing Facility			
Acid 500 F. On 11/0 ISO 7 a compon G. On 11/0 sterile b	2/16, <sup>(b) (4)</sup> unqualified operators we g with manufacturing and filling pro 0mg/mL lot # 161102@1. 1/16 and 11/02/16, <sup>(b) (4)</sup> personnel and ISO 8 rooms without followi ents and perform environmental mo 02/16, operators were observed to oots after donning on the sterile ge s were involved with compoundi @1.	cess including were observed ng the gowni nitoring. be sitting down own inside the	g environmental monitor d to be moving repeated ing procedure and proc wn on the bench while e room <sup>(b) (4)</sup> , Gowning In	ing of Ascorbic ly between the sess to transfer putting on the n Room. These
Specifically, yo sterility. For exa A. Your fir	with subsequent approval or rejection our firm does not have adequate co ample, rm does not have a study to show	ontrol over eq	uipment and closures to	
(b) (4)				
For example, the (b) (4) (b) (4) , and(b) (4) at the (b) (4) . The(b) (4) are then (b) (4) (b) (4) for used in Ascorbic Acid 500mg/ml Lot # 161026@1, 161028@1, and 161102@1.				
SEE REVERSE OF THIS PAGE	EMPLOYEE(S) SIGNATURE Uttaniti Limchumroon, Invest Evelyn Wong, Microbiologist	ŧW	12/2/2616 X Uttaniti Limchumroon Uttanei unchumroon Investigator Signed by: Uttanti Limchumroon -S EDVATIONS	
FORM FDA 483 (09/08)	PREVIOUS EDITION OBSOLETE INS	PECTIONAL OBS	ERVATIONS	PAGE 5 OF 13 PAGES

	FOOD AND DF	RUG ADMINISTRATION	SERVICES		
DISTRICT ADDRESS AND PHON 19701 Fairch:		10.753	ATE(S) OF INSPECTION 1/1/2016-12/2/2016*		
Irvine, CA 92	92612-2445 00 Fax:(949)608-4417		012228279		
NAME AND TITLE OF INDIVIDUA					
Nayan Patel,	Pharm.D., President	STREET ADDRESS			
Auro Pharmacies Inc 5		WEATER DAY ACT. 171	511 S Harbor Blvd Ste F		
CITY, STATE, ZIP CODE, COUNTRY La Habra, CA 90631-9375		and the second s	TYPE ESTABLISHMENT INSPECTED Outsourcing Facility		
Your fir 500mg/r B. On 11/0 stored in Ascorbia (b) (4) laminar (b) (4)	, stated that (b) (4) rm did not fill the log until 11 ml Lot # 161102@1. 02/16, operators were observed of n ISO 7 and moved to ISO 5 lam c Acid 500 mg/ml lot # 161102@2 . Operators flow hood. The(b) (4) within ISO 7 area.	to b /01/16. These using previousl inar flow hood 1. Rubber stoppo placed (b) (4) (b) (4)	y (b) (4) rubber st to be used in asepticall ers are stored in(b) (4) wi	Ascorbic Ac oppers that a y filled vials ar thin the ISO aced back on	
(b) (4)	2/16, an operator was observed n (b) (4) from ISO 8 ore placing into the ISO 5 laminar	Room (b) (4) throu	ugh ISO 8 Room <sup>(b) (4)</sup> in		
(b) (4) <sup>(b) (4)</sup> before <b>OBSERVATIO</b> Aseptic process equipment to pro- Specifically, A. No sport B. Your fin	(b) (4) from ISO 8 ore placing into the ISO 5 laminar ON 6 sing areas are deficient regarding the roduce aseptic conditions.	Room <sup>(b) (4)</sup> throu flow hood. he system for cla ninar Flow Hood	eaning and disinfecting d where aseptic filling of ttles to refill with new	the room and ccurs. (b) (4)	
(b) (4) <sup>(b) (4)</sup> beform <b>OBSERVATIO</b> Aseptic process equipment to pro- Specifically, A. No sport B. Your fin (b) (4)	(b) (4) from ISO 8 ore placing into the ISO 5 laminar ON 6 sing areas are deficient regarding the roduce aseptic conditions.	Room <sup>(b) (4)</sup> throu flow hood. he system for cla hinar Flow Hood bo surance of sterili , a technician v	eaning and disinfecting d where aseptic filling of ottles to refill with new ity and documenting new was observed to refill a	to ISO 7 Roo the room and ccurs. (b) (4) w lot number n old bottle	

		ALTH AND HUMAN SERV	ICES		
DISTRICT ADDRESS AND PHO		a second s	FINSPECTION		
19701 Fairch:			/2016-12/2/2016*		
Irvine, CA 93			FEINUMBER 3012228279		
(949)608-2900	(949)608-2900 Fax:(949)608-4417				
NAME AND TITLE OF INDIVIDU	AL TO WHOM REPORT ISSUED				
Nayan Patel,	Pharm.D. , President				
FIRM NAME		STREET ADDRESS			
1.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2			arbor Blvd Ste F		
Street Street Wagnes	bra, CA 90631-9375 Type Establishment INSPECTED Outsourcing Facility				
ha nabra, ch	50051 5575	Outsourcing ra	active		
(b) (4)	(b) (4)	with (b) (4)	from a bulk one gallor		
bottle fr	om (b) (4) that was used to clean	the ISO 5, ISO 7 and	d ISO 8 areas.		
OBSERVATIO	DN 7				
Written records	are not always made of investiga	tions into unexplained	ed discrepancies.		
Specifically,					
A. Your fir	m failed to investigate action leve	el excursion involvin	g personnel monitoring of the(b) (4)		
			luct on 11/28/16. The documented		
action le	evel is (b) (4) 7 CFI	Us was reported for o	perator (c, m).		
D. Vaue C.		and an Investment			
			sions involving viable particulate		
monitor	ing during operation of ISO 7 and	ISO 8 rooms.			
1)		·	· · · · · · · · · · · · · · · · · · ·		
1) (	On (b) (4) , an action level e	xcursion of TMTC	(Too many to count) was found in		
I	Room (b) (4) Room), how	vever an investigation	n or follow up was not conducted.		
-					
2) (	On(b) (4) , an action level e	xcursion of 41 CFU	was found in Room (b) (4)		
(	b) (4) Room); however an invest	igation or follow up	was not conducted.		
		-			
3) (	On(b) (4) , an action level ex	cursion of 100 CFU	was found in Room (b) (4)		
I	Room); however an investigation	or follow up was not	conducted.		
	,,				
4) (	On (b) (4), action level exc	ursions of 31 and 7	9 CFU were found in Room <sup>(b) (4)</sup>		
			or follow up was not conducted.		
		and an an an an an and the second	North State and State of the St		
ľ	Additionally action level excursio	ns of 100 CFU was	iound in Room (D) (4)		
	EMPLOYEE(S) SIGNATURE		DATE ISSUED		
SEE REVERSE	Uttaniti Limchumroon, Inve		12/2/2016		
OF THIS PAGE	Evelyn Wong, Microbiologis	t EW	X Uttaniti Limchumroon		
			Utaniti Linchurron Investigator		
			Signed by: Utanbi Linchumroon -S		
FORM FDA 483 (09/08)	PREVIOUS EDITION OBSOLETE	INSPECTIONAL OBSERVA	TIONS PAGE 7 OF 13 PAGES		

	DEPARTMENT OF HEAL	TH AND HUMAN	SERVICES	and the second	
DISTRICT ADDRESS AND PHO	FOOD AND DRU	G ADMINISTRATION	TE(S) OF INSPECTION		
19701 Fairch.			11/1/2016-12/2/2016*		
	ine, CA 92612-2445 9)608-2900 Fax:(949)608-4417		INUMBER 012228279		
Service the Ar	NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED				
Nayan Patel, Pharm.D., President		STREET ADDRESS			
		second second in	S Harbor Blvd Ste F		
CITY, STATE, ZIP CODE, COUNTRY TYPE ESTABLISH		TYPE ESTABLISHMENT IN	ISHMENT INSPECTED		
La Habra, CA 90631-9375 Outsou		Outsourcin	sourcing Facility		
<ul> <li>Room) and 100 CFU was found in Room (b) (4) Room); how investigation or follow up was not conducted.</li> <li>5) On (b) (4) , an action level excursion of 24 CFU was found in Room (b) (4 (b) (4) Room); however an investigation or follow up was not conducted.</li> <li>6) On (b) (4) , an action level excursion of 24 CFU was found in Room (b) (4 (b) (4) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c</li></ul>					
	<ul><li>(b) (4) Room); however an investigation or follow up was not conducted.</li><li>C. Your firm failed to investigate pressure differential excursion between Cleanroom (b) (4)</li></ul>				
OBSERVATION Laboratory complans and test p	Additionally, your firm does not have a written procedure or process for investigating excursion occurred within your facility.           OBSERVATION 8           Laboratory controls do not include the establishment of scientifically sound and appropriate sampling plans and test procedures designed to assure that drug products conform to appropriate standards of identity, strength, quality and purity.				
Specifically,					
Your firm does not perform growth promotion testing of new batches of media (b) (4) ) that were (b) (4) for use in media fill and environmental monitoring to ensure that the media used can support microbiological growth.					
OBSERVATION 9					
SEE REVERSE OF THIS PAGE	EMPLOYEE(S)SIGNATURE Uttaniti Limchumroon, Inves Evelyn Wong, Microbiologist	tigator NL EW	12/2/2016 X Uttaniti Limchumroon Uttaniti undumroon Investigator Segred by: Uttaniti Undhamroon -S	DATE ISSUED 12/2/2016	
FORM FDA 483 (09/08)	PREVIOUS EDITION OBSOLETE IN	SPECTIONAL OBS	ERVATIONS	PAGE 8 OF 13 PAGES	



	ALTH AND HUMAN SERVICES RUG ADMINISTRATION
DISTRICT ADDRESS AND PHONE NUMBER	DATE(S) OF INSPECTION
19701 Fairchild	11/1/2016-12/2/2016*
Irvine, CA 92612-2445	FEI NUMBER
(949)608-2900 Fax:(949)608-4417	3012228279
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED	
Nayan Patel, Pharm.D. , President	
FIRM NAME	STREET ADDRESS
Auro Pharmacies Inc	511 S Harbor Blvd Ste F
CITY, STATE, ZIP CODE, COUNTRY	TYPE ESTABLISHMENT INSPECTED
La Habra, CA 90631-9375	Outsourcing Facility

Each batch of drug product purporting to be is not laboratory tested to determine conformance to such requirements.

Specifically,

Suitability testing for the sterility test method necessary to demonstrate that the product does not interfere with the test, has not been performed by the contract testing laboratory which conducts the release testing of the product made.

# **OBSERVATION 10**

There is no written testing program designed to assess the stability characteristics of drug products.

Specifically,

Your firm could not provide the supporting data	including batch worksheet and drug substance supplier
for the Ascorbic Acid (b) (4) $lot # (b) (4) t$	hat is used to support the 180 days expiration date. The
stability study was started on (b) (4)	with Ascorbic Acid (b) (4) lot $\#$ (b) (4). No
comparison can be made for the Ascorbic Ac	id (b) (4) lot $\#$ (b) (4) to the formulation, drug
substance, and container closure (b) (4)	

to ensure that they are the same.

#### **OBSERVATION 11**

Testing and release of drug product for distribution do not include appropriate laboratory determination of satisfactory conformance to the final specifications prior to release.

SEE REVERSE OF THIS PAGE	EMPLOYEE(S) SIGNATURE Uttaniti Limchumroon, Investigator UL Evelyn Wong, Microbiologist tw Uttanti Limchumroon Utanti Limchumroon		DATE ISSUED 12/2/2016
	0.0	Uttaniti Limchumroon Investigator Signed by: Uttaniti Limchumroon -S	
FORM FDA 483 (09/08)	PREVIOUS EDITION OBSOLETE INSPECTIONAL OBSERVA	TIONS	PAGE 9 OF 13 PAGES



	OF HEALTH AND HUMAN SERVICES AND DRUG ADMINISTRATION	
DISTRICT ADDRESS AND PHONE NUMBER	DATE(S) OF INSPECTION	
19701 Fairchild	11/1/2016-12/2/2016*	
Irvine, CA 92612-2445 (949)608-2900 Fax:(949)608-4417	FEI NUMBER 3012228279	
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED		
Nayan Patel, Pharm.D. , President		
FIRM NAME	STREET ADDRESS	
Auro Pharmacies Inc	511 S Harbor Blvd Ste F	
CITY, STATE, ZIP CODE, COUNTRY	TYPE ESTABLISHMENT INSPECTED	
La Habra, CA 90631-9375	Outsourcing Facility	

Specifically, your firm's 100% visual inspection of the finished product vials is inadequate. For example,

- A. There is no written procedure describing the process for 100% visual inspection of filled vials.
- B. No formal training process for the visual inspectors to ensure that inspectors are provided with adequate training to perform the inspection process.
- C. No qualification process for the visual inspectors to ensure that they are properly qualified to perform the inspection process. The finished sterile drug product vials are amber.

## **OBSERVATION 12**

Container closure systems do not provide adequate protection against foreseeable external factors in storage and use that can cause deterioration or contamination of the drug product.

Specifically,

Your firm does not have container closure study for the container and closure used for Ascorbic Acid 500 mg/ml. Your firm's management indicated that study was performed but unable to locate the study supporting documents and data.

## **OBSERVATION 13**

Drug product containers and closures were not clean and sterilized and processed to remove pyrogenic properties to assure that they are suitable for their intended use.

Specifically,

SEE REVERSE OF THIS PAGE	Uttaniti Limchumroon, Investigator		DATE ISSUED 12/2/2016
FORM FDA 483 (09/08) PAGES	PREVIOUS EDITION OBSOLETE	INSPECTIONAL OBSERVATIONS	PAGE 10 OF 13

DEPARTMENT OF HEALTH AND HUMAN SERVICES				
DISTRICT ADDRESS AND PHO		G ADMINISTRATION	) OF INSPECTION	
19701 Fairch			11/1/2016-12/2/2016*	
Irvine, CA 92		V DOLLAR AND	FEI NUMBER 3012228279	
(949)606-2900	0 Fax:(949)608-4417			
NAME AND TITLE OF INDIVIDU	AL TO WHOM REPORT ISSUED			
	Pharm.D. , President			
FIRM NAME	Tool Tool Tool Tool Tool Tool Tool Tool	STREET ADDRESS		
Auro Pharmac:				
La Habra, CA	90631-9375	Outsourcing Facility		
vials are adequa	ate in reducing microbial load, endo		p for the rubber stoppers and product ulates.	
OBSERVATION The quality con occurred. Specifically,	<b>DN 14</b> trol unit lacks authority to review p	production record	ls to assure that no errors have	
Your firm failed to thoroughly complete and review the qualification documents for the (b) (4) and (b) (4) . Your firm provided the following documents and indicated that they were the final reports for the qualification of the listed equipment. However, these documents have not been completed and reviewed prior to use for processing components, vials, rubber stoppers, and utensils in the Ascorbic Acid 500 mg/ml Lot # 161026@1, 161028@1, and 161102@1.				
<ul> <li>Document VAL-SC-05.5002.01.(b) (4) Equipment Installation, Operational &amp; Performance Qualification AN 0530. Qualification was started on 04/06/16 and the last run was completed on 04/11/16.</li> </ul>				
• Document VAL-SC-05.5004.01.(b) (4) Equipment Installation, Operational and				
Performance Qualification AN 0042. Qualification was started on 04/15/16 and the last run was completed on 05/11/16.				
Docume	ent VAL-SC-05.5003.01, (b) (4)		Equipment Installation,	
		AN 0550 Ownit		
		AIN 0350. Quali	fication was started on 04/25/16 and	
the last run was completed on 05/05/16.				
SEE REVERSE OF THIS PAGE	EMPLOYEE(S)SIGNATURE Uttaniti Limchumroon, Invest Evelyn Wong, Microbiologist	tigator NL FW	DATE ISSUED 12/2016 X Uttaniti Limchumroon Uttaniti Limchumroon Investigator Signed by: Uttaniti Universion -S	
FORM FDA 483 (09/08) PAGES	PREVIOUS EDITION OBSOLETE INS	PECTIONAL OBSER	VATIONS PAGE 11 OF 13	

DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION			
DISTRICT ADDRESS AND PHONE NUMBER		DATE(S) OF INSPECTION	
19701 Fairchild		11/1/2016-12/2/2016*	
Irvine, CA 92612-2445		3012228279	
(949)608-2900 Fax:(949)608-4417			
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED			
Nayan Patel, Pharm.D. , President			
FIRM NAME Auro Pharmacies Inc	STREET ADDRES	ss Harbor Blvd Ste F	
AUTO PHARMACLES INC CITY, STATE, ZIP CODE, COUNTRY	ter	HARDOR BLVA STE F HMENTINSPECTED	
La Habra, CA 90631-9375		coing Facility	
<b>OBSERVATION 15</b> There is a lack of written procedures describ	-		
handling, sampling, examination and testing	of labeling and p	packaging materials.	
Specifically,			
Your firm does not have a written procedu sampling, and examination of labeling and pa	. 2014년 - 1919년 - 1919년 - 1919 <del>년</del> 1917년 <del>-</del> 1917년 - 191	사실 같은 것 가슴이 가 것 같은 것 같이 가슴 것 같은 것 같은 것이 있었다. 것 같은 것 같	
<b>OBSERVATION 16</b> Procedures designed to assure that correct lal products are not written.	bels, labeling and	d packaging materials are used for drug	
Specifically,			
Your firm does not have a written procedure describing the labeling operations of finished drug products.			
*DATES OF INSPECTION 11/01/2016(Tue),11/02/2016(Wed),11/03/20 ),11/15/2016(Tue),12/02/2016(Fri)	)16(Thu),11/04/2	2016(Fri),11/07/2016(Mon),11/10/2016(Thu	

SEE REVERSE OF THIS PAGE		Investigator MAN Logist	12/2/2016 X Uttaniti Limchumroon Uttaniti Limchumroon Imetigater Syreet by: Uttaniti Limchumroon -5	DATE ISSUED
FORM FDA 483 (09/08) PAGES	PREVIOUS EDITION OBSOLETE	U O INSPECTIONAL OBSERVATIO	INS	PAGE 12 OF 13