	FOOD AND DI	ALTH AND HUMAN SERVICE RUG ADMINISTRATION	S		
DISTRICT ADDRESS AND PHON	ENUMBER	DATE(S) OF INS	DATE(S) OF INSPECTION		
60 Eighth Str Atlanta, GA 3		4/17/20 FEI NUMBER	4/17/2017-4/21/2017 FEI NUMBER		
	Fax: (404)253-1202	3011158	3011158388		
NAME AND TITLE OF INDIVIDUA	L TO WHOM REPORT ISSUED				
Lou W. Kenned	y , President and Owner	Lorser		-5406211-5-2115-6	
and the second s	aceuticals Corporation	street adoress 4500 12th Street Ext Type establishment inspected			
West Columbia	, SC 29172-3025	Outsourcing Facility			
observations, and do observation, or have is action with the FDA is	bservations made by the FDA representative not represent a final Agency determination represented, or plan to implement, corrective representative(s) during the inspection or subject FDA at the phone number and address a	egarding your compliance. If y we action in response to an obser- binit this information to FDA a	ou have an objection reg ervation, you may discus	garding an s the objection or	
	TION OF YOUR FIRM WE OBSERVED: Control System				
do not include a	on 1 gned to prevent microbiological of dequate validation of the sterilizate of performed aseptic process simulation process to provide evidence a (b) (4)	ulations to validate the	Phenylephrine Hy	drochloride	
procedures designidentity, strength	on 2 rols do not include the establishment to assure that components and h, quality and purity.	nent of scientifically so nd drug products confo	und and appropriates	te test standards of	
version 1.0", in visual inspection include a repres	t procedure, SOP.OC.4301, "Vist addition to (b) (n of finished product to detect con entative library of potential defec- carry out these tasks. Additional	tasked ntainer detects and pro- cts to ensure that your o	d with performing duct contaminates, perators are effect	the 100% do not	
SEE REVERSE OF THIS PAGE	EMPLOYEE(S) SIGNATURE Rachael L Cook, Investigat Bonita S Chester, Investic Diane P Goyette, Regulator	gator	X Rachael L Cook Rachael L Cook Rachael Cook Signed by: Rachael L Cook €	DATE ISSUED 4/21/2017	
FORM FDA 483 (09/08)	PREVIOUS EDITION OBSOLETE	INSPECTIONAL OBSERVAT	IONS	PAGE 1 OF 3 PAGES	

	DEPART	MENT OF HEALTH A FOOD AND DRUG ADM	ND HUMAN SERVICE	ES			
DISTRICT ADDRESS AND PHON			DATE(S) OF INSPECTION				
60 Eighth Str			4/17/2017-4/21/2017 FEI NUMBER				
Atlanta, GA 3	Fax: (404)253-1202		3011158388				
of the form 1	combine conditions, and resources, raced out the foreign			The absorvation			
NAME AND TITLE OF INDIVIDUA				are reported			
Lou W. Kenned	ly , President and		ET ADDRESS	of manager of			
Nephron Pharm	naceuticals Corpora		4500 12th Street Extens Type Establishment inspected				
West Columbia	, SC 29172-3025	Ou	Outsourcing Facility				
ability of the operator to detect particles and defec		and the second control of the second control	(b) (4) whereas currently you (b)		ntly you (b) (4)		
ог (2) ћез уул пасуулы	uniem filik al nitemban general university bytak diegografie university bytak ad glove university bytak	y freh, puurd or des inservasie een s may nave bees	e or in part of an acked, or help yo	consists in whole been prepared in contaminated with			
Quality Sys	- Proprieta de la composição de la compo						
	ties and procedures app		•				
	P.CP.1501, Supplier V (b) (4)				it you have not		
established	. , , , ,	as required by reviewed.	y your SOP, with	o(b) (4)			
	(b) (4)	reviewed.					
Packaging	and Labeling Sy	stem					
OBSERVATION The container la	ON 4 abels of your outsourcin	ng facility's drug	products are def	icient.			
Specifically, the syringe label:	following products did	l not have your f	firm address and/	or phone number	listed on the		
A. PF-Glycopy	rolate 1 mg/5 ml label la	acks firm address	s and phone num	ber.			
	EMPLOYEE(S) SIGNATURE			5X	DATE ISSUED		
SEE REVERSE OF THIS PAGE	Rachael L Cook, In Bonita S Chester, Diane P Goyette, I	Investigator		X Rachael L Cook	4/21/2017		
	prane r doyecce, r	acory con		Investigator (CTNN) Signed by: Rachael L. Cook -S			
FORM FDA 483 (09/08)	PREVIOUS EDITION ORSOLETE	INSPEC	TIONAL OBSERVATI	ONS	PAGE 2 OF 3 PAGE		

DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION DISTRICT ADDRESS AND PHONE NUMBER 60 Eighth Street NE 4/17/2017-4/21/2017 Atlanta, GA 30309 3011158388 (404)253-1161 Fax: (404)253-1202 NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED Lou W. Kennedy , President and Owner FIRM NAME STREET ADDRESS Nephron Pharmaceuticals Corporation 4500 12th Street Ext CITY, STATE, ZIP CODE, COUNTRY TYPE ESTABLISHMENT INSPECTED West Columbia, SC 29172-3025 Outsourcing Facility B. PF-Neostigmine 2mg/ml, 3mg/3ml, 4mg/4ml, and 5mg/5ml lack firm address and phone number. C. PF-Atropine 1.2mg/3ml label lacks firm address and phone number. D. Phenylephrine 0.4mg/10ml, 0.8mg/10ml, and 1.0mg/10ml labels lack firm phone number. ludoment indicate that are lood draip device E. Succinylcholine 200mg/10ml label lacks firm phone number. The plot of a later not be a later been prepared, packed, or held under instantiary conditions who reby it may have that contaminated with fith, or whereby it may have been render of such report shall be earl promptly to the Secretary 4/21/2017 4/21/2017 X Bonita S Chester X Diane P Goyette Bonita S Chester Diane P Govette Regulatory Counsel Signed by: Bonita S. Chester -S Signed by: Diane P. Goyette -S EMPLOYEE(S) SIGNATURE SEE REVERSE Rachael L Cook, Investigator (CTNH) 4/21/2017 OF THIS PAGE Bonita S Chester, Investigator X Rachael L Cook Diane P Goyette, Regulatory Counsel