DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION DISTRICT OFFICE ADDRESS AND PHONE NUMBER DATE(S) OF INSPECTION 11/27/2017-01/05/2018 404 BNA Dr., Bldg. 200, Ste 500 Nashville, TN 37217-2597 FEI NUMBER Phone: (615) 366-7801 Fax: (615) 366-7802 3004153061 Industry Information: www.fda.gov/oc/industry NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT IS ISSUED TO: Brenda L. Womack, General Manager FIRM NAME STREET ADDRESS PharMEDium Services, LLC. 913 N. Davis Ave. CITY, STATE AND ZIP CODE TYPE OF ESTABLISHMENT INSPECTED Cleveland, MS 38732-2106 **Outsourcing Facility** THIS DOCUMENT LISTS OBSERVATIONS MADE BY THE FDA REPRESENTATIVE(S) DURING THE INSPECTION OF YOUR FACILITY. THEY ARE INSPECTIONAL OBSERVATIONS; AND DO NOT REPRESENT A FINAL AGENCY DETERMINATION REGARDING YOUR COMPLIANCE. IF YOU HAVE AN OBJECTION REGARDING AN OBSERVATION, OR HAVE IMPLEMENTED, OR PLAN TO IMPLEMENT CORRECTIVE ACTION IN RESPONSE TO AN OBSERVATION, YOU MAY DISCUSS THE OBJECTION OR ACTION WITH THE FDA REPRESENTATIVE(S) DURING THE INSPECTION OR SUBMIT THIS INFORMATION TO FDA AT THE ADDRESS ABOVE. IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT FDA AT THE PHONE NUMBER AND ADDRESS ABOVE. DURING AN INSPECTION OF YOUR FIRM (I) (WE) OBSERVED: OBSERVATION #1 Procedures designed to prevent microbiological contamination of drug products purporting to be sterile are not established, written, and followed. ****THIS IS A REPEAT OBSERVATION FROM THE 2013 & 2015 INSPECTIONS**** Specifically, 1) On 11/27/2017 and 11/28/2017, we observed the firm's technicians preforming aseptic processing for sterile drug products and the following significant aseptic technique deficiencies were observed, which were also deviations from the firm's SOP CPS-313, titled "ASEPTIC TECHNIQUE AND CLASSIFIED AREA MANAGEMENT", Version 4 Effective Date: 02/28/17: a) We observed compromise of the ISO 5 work areas by technicians leaning and over-reaching into the hoods to retrieve material that had been placed behind the product being filled on several occasions. This action placed the technician's arm in front of the laminar air flow allowing for turbulence to occur above the product. b) We observed technicians not sanitizing hands/wrist with sterile (b) (4) prior to entering/re-entering ISO 5 work areas on numerous occasions. c) We observed technicians to have continuous rapid movements in the ISO 5 hood work areas during aseptic processing especially while observing for particulate matter after filling plastic IV bags. 2) A review of the firm's security surveillance video, ((b) (4)) regarding 3 mcg/mL Fentanyl Citrate and 0.05% Bupivacaine HCL in Sodium Chloride 0.9% Lot #172760060C dated 10/04/2017 that failed endotoxin EMPLOYEE(S) NAME AND TITLE (Print or Type) DATE ISSUED EMPLOYEE(S) SIGNATURE REVERSE Marvin D. Jones, Investigator 01/05/2018 Saundrea A. Munroe, Investigator

FOO	DD AND DRUG ADMINISTRATION
DISTRICT OFFICE ADDRESS AND PHONE NUMBER	DATE(S) OF INSPECTION
404 BNA Dr., Bldg. 200, Ste 500 Nashville, TN 37217-2597	11/27/2017-01/05/2018
Phone: (615) 366-7801 Fax: (615) 366-7802	
Industry Information: www.fda.gov/oc/industry	3004153061
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT IS ISSUED TO: Brenda L. Womack, General Manager	
FIRM NAME	STREET ADDRESS
PharMEDium Services, LLC.	913 N. Davis Ave.
CITY, STATE AND ZIP CODE	TYPE OF ESTABLISHMENT INSPECTED

testing, noted the following significant aseptic technique deviations, which were also deviations from the firm's SOP CPS-313, entitled "ASEPTIC TECHNIQUE AND CLASSIFIED AREA MANAGEMENT" Version 4 Effective Date: 02/28/17:

Outsourcing Facility

- a) The technician did not sanitize their gloves upon re-entering the ISO 5 hood work area at least 41 times during processing of this lot.
- b) The technician was observed leaning and over-reaching into the ISO 5 hood work area at least 19 times during processing of this lot.
- c) The technician was observed touching items in the trash container on 3 occasions and then re-entering the ISO 5 hood work area without sanitizing/changing their gloves during processing of this lot.
- d) The return airflow to the ISO 5 hood was observed to be blocked by the technician and equipment at least 6 times during processing of this lot.
- e) The technician used the (b) (4) in the ISO 5 hood work area without sanitizing the unit at least 4 times during processing of this lot.
- f) The technician placed an electronic weigh scale into the ISO 5 hood work area without sanitizing the unit during processing of this lot.

OBSERVATION #2

Cleveland, MS 38732-2106

Control procedures are not established which validate the performance of those manufacturing processes that may be responsible for causing variability in the characteristics of in-process material and the drug product.

Specifically,

Your firm has been experiencing potency (over and under) failures with combo drug families such as; Fentanyl/Bupivacaine and Fentanyl/Ropivacaine from the 2 mcg/mL to 7 mcg/mL concentration. Also, your firm has been

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EMPLOYEE(S) NAME AND TITLE (Print or Type)

Marvin D. Jones, Investigator

Saundrea A. Munroe, Investigator

01/05/2018

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TO: Brenda L.	Womack, Ger	neral Manager				
FIRM NAME			STREET ADDRESS			
PharMEDium S	Services, LLC.		913 N. Davis Ave.	b.		
CITY, STATE AND 2	ZIP CODE		TYPE OF ESTABLISHMENT I	NSPECTED		
Cleveland, MS	38732-2106		Outsourcing Facility			
#055 dated 0 10/26/2017. The (b) (4) for the (b) (4		he firm has had a total of 152 delive per specification for each dru	r the quantity of each a	ctive drug ingredien	at and the diluent	
50 PMATRIX		lots that require active drug i	- ,	Drug lots that		
(b) (4) are curre			b) (4)	. This change w		
		where a majority of the failu		of the active dru		
The second secon		The equipment manual for the		10	declares	
"Acceptable	volume rang	ges between (b) (4)	."			
V C l		(I) (I) : 2012 C .1 (I)	/A)			
y our tirm na ingredients a		(b) (4) since 2013 for the (b) nt.	(4)	, which co	ontain active drug	
are not capab finished drug	le of consist products ar	bened and closed Nonconform tently delivering the proper are e within acceptable specifical drug products for distribution	mount of active drug in tions. Therefore, your f	gredients or diluent irm is relying solely	to ensure that on finished drug	
a) NCR #CN #1727500040		ated 10/03/2017 regarding the	e over potency testing r	esults for Lot #1727	750002C and Lot	
		sed on the potency result of 0 mg/ml delivered to the (b) (4)		72750002C, the (b) (b) (4) . This was	A color	
(b) (4) than t	he recipe an	nount (b) (4) an under-delivery of (b) (4)	The (b) (4)	of diluent delivered	d was (b) (4)	
		sed on the potency result of 0 mg/ml delivered to the (b) (4		72750004C, the (b) (b) (4) . This was		
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	ation: www.fda.gov/oc/industry DF INDIVIDUAL TO WHOM REPORT IS ISSUED		3004153061	
FIRM NAME	Womack, General Manager	STREET ADDRESS		
PharMEDium S	Services IIC	913 N. Davis Ave.		
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Cleveland, MS		Outsourcing Facility	10. 20125	
(b) (4) than t	the recipe amount (b) (4)	The (b) (4)	of diluent delivered	d was (b) (4)
100 100 100 100 100 100 100 100 100 100	nted to an under-delivery of (b) (4)	,,,,,		() ()
Per this inves	C-17-324 dated 10/04/2017 regarding the stigation, based on the potency result of 0 one HCL 10 mg/ml delivered to the (b) (4	0.211 mg/ml for Lot #17		(4) o
	he recipe amount (b) (4)	The (b) (4)	of diluent delivered	
	nted to an under-delivery of (b) (4).			
c) NCR #CN	C-17-327 dated 10/05/2017 regarding the	e over potency testing re	esults for Lot #1727	770003C.
hydromorpho (b) (4) than t	stigation, based on the potency result of 0 one HCL 10 mg/ml delivered to the (b) (4 the recipe amount (b) (4) ated to an under-delivery of (b) (4).		2770003C, the (b) (c) (4) . This was of diluent delivered	(b) (4)
d) NCR #CN	C-17-383 dated 10/10/2017 regarding the	e under-potency testing	results for Lot #172	2830001C.
explain the or implementatic closed, and a effect on the	stigation, the under-delivery of drug solut ut-of-limit (OOL). A procedural change to on on 11/05/2017 to (b) (4) new CAPA (corporate-wide) will continumber and rate of potency OOL's. It shows used the firm's (b) (4) for delivery of (b)	ue to monitor the effect	omitted and approve Ca iveness of this chan	ed for APA-055 will be ge by noting any r/under potency
OBSERVAT	ION #3			
	nd utensils are not maintained at appropri ty, strength, quality or purity of the drug	1.00	contamination that	would alter the
	EMPLOYEE(S) SIGNATURE	EMPLOYEE(S) NAME AND TITLE	(Print or Type)	DATE ISSUED
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FOOD AND DRUG ADMINISTRATION

DISTRICT OFFICE ADDRESS AND PHONE NUMBER DATE(S) OF INSPECTION 11/27/2017-01/05/2018 404 BNA Dr., Bldg. 200, Ste 500 Nashville, TN 37217-2597 FEI NUMBER Phone: (615) 366-7801 Fax: (615) 366-7802 3004153061 Industry Information: www.fda.gov/oc/industry NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT IS ISSUED To: Brenda L. Womack, General Manager FIRM NAME STREET ADDRESS PharMEDium Services, LLC. 913 N. Davis Ave.

TYPE OF ESTABLISHMENT INSPECTED

Outsourcing Facility

****THIS IS A REPEAT OBSERVATION FROM THE 2013 INSPECTION****

Specifically,

CITY, STATE AND ZIP CODE

Cleveland, MS 38732-2106

During a walk-through of your facility on 11/27/17 and 11/28/17, we observed the following objectionable conditions during compounding operations in your ISO 5 and 7 environments:

- a) Rusted metal hinges on plastic totes used to store in-process and finished drug products in your ISO 7 cleanroom
- b) White film residue on wall surfaces of three of your ISO 5 hoods
- c) Chipped paint on floor surface of your ISO 7 cleanroom
- d) Gray paint residue on walls in your ISO 7 cleanroom
- e) Foreign material residue on rubber wheels, located on your metal carts used to transport materials through-out your ISO 7 cleanroom

OBSERVATION #4

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

Specifically,

Environmental monitoring for non-viable particulates is not performed at sufficient frequencies to represent routine production conditions within the ISO 5 and ISO 7 areas of your cleanroom. According to CPS-707, Microbiological and Environmental Testing, Version 23, Effective Date: 10/06/17, your firm performs non-viable monitoring in the ISO 5 areas on a (b) (4) basis. You stated your ISO 7 cleanroom area also follows this same monitoring schedule.

EMPLOYEE(S) SIGNATURE EMPLOYEE(S) NAME AND TITLE (Print or Type) DATE ISSUED Marvin D. Jones, Investigator 01/05/2018 Saundrea A. Munroe, Investigator

FOO	D AND DRUG ADMINISTRATION
DISTRICT OFFICE ADDRESS AND PHONE NUMBER	DATE(S) OF INSPECTION
404 BNA Dr., Bldg. 200, Ste 500	11/27/2017-01/05/2018
Nashville, TN 37217-2597 Phone: (615) 366-7801 Fax: (615) 366-7802	FEI NUMBER
Industry Information: www.fda.gov/oc/industry	3004153061
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT IS ISSUED TO: Brenda L. Womack, General Manager	
FIRM NAME	STREET ADDRESS
PharMEDium Services, LLC.	913 N. Davis Ave.
CITY, STATE AND ZIP CODE	TYPE OF ESTABLISHMENT INSPECTED

OBSERVATION #5

Cleveland, MS 38732-2106

Aseptic processing areas are deficient regarding systems for maintaining any equipment used to control the aseptic conditions.

Outsourcing Facility

Specifically,

- a) Your firm had the ISO 7 compounding room (cleanroom) floor resurfaced on two occasions, from 09/01/2017 to 09/04/2017 and from 09/14/2017 to 09/17/2017 by an outside contractor. Prior to this resurfacing on both occasions, all of the ISO 5 LAFHs and other processing equipment were covered with plastic and moved to an unclassified area for storage during this timeframe. After completion of resurfacing on both occasions, the ISO 5 hoods were moved back into the ISO 7 compounding room. Sterile drug processing began in these hoods on 09/05/2017 after the first resurfacing and on 09/17/2017 after the second resurfacing. The ISO 5 hoods were not recertified until 09/22/2017 and the ISO 7 compounding room was not recertified until 09/23/2017. Your firm failed to recertify the ISO 7 cleanroom and ISO 5 LAFHs prior to processing sterile drug products to ensure that the hoods and compounding room were operating within acceptable specification.
- b) The certification of your ISO 5 Laminar Airflow Hoods, which is performed and documented every (b) (4) , indicates repairs for HEPA Filter Leaks in the following Hoods:
- Hood (b) (4) (b) (4) 2017 documented HEPA Filter Leaks)
- Hood (b) (4) (b) (4) 2017 documented HEPA Filter Leaks)
- Hood (b) (4) (b) (4) 2017 documented HEPA Filter Leaks)
- Hood (b) (4) September 2017 documented HEPA Filter Leak)
- Hood #(b) (4) 2017 documented HEPA Filter Leaks)
- Hood # (b) (4) 2017 documented HEPA Filter Leaks)
- Hood # (September 2017 documented HEPA Filter Leak)
- Hood # (March 2017 documented HEPA Filter Leak)
- Hood # (September 2017 documented HEPA Filter Leak)
 Hood # (b) (d) 2017 documented HEPA Filter Leaks)

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Saundrea A. Munroe, Investigator

DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION DISTRICT OFFICE ADDRESS AND PHONE NUMBER DATE(S) OF INSPECTION 11/27/2017-01/05/2018 404 BNA Dr., Bldg. 200, Ste 500 Nashville, TN 37217-2597 FEI NUMBER Phone: (615) 366-7801 Fax: (615) 366-7802 3004153061 Industry Information: www.fda.gov/oc/industry NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT IS ISSUED TO: Brenda L. Womack, General Manager FIRM NAME STREET ADDRESS PharMEDium Services, LLC. 913 N. Davis Ave. CITY, STATE AND ZIP CODE TYPE OF ESTABLISHMENT INSPECTED Cleveland, MS 38732-2106 Outsourcing Facility • Hood # (b) (4) 2017 documented HEPA Filter Leaks) Hood #'s (b) (4) had documented HEPA Filter Leaks during both the (b) (4) 2017 certifications. Your firm failed to take corrective actions regarding sterile drug products (b) (4) processed, inside the above listed ISO 5 Hoods, between documented repairs for HEPA Filter Leaks. OBSERVATION #6 Samples taken of drug products for determination of conformance to written specifications are not representative. Specifically, A review of processing records noted concerns with your firm's current sampling methods for sterile injectable finished drug products. For example, your firm is only pulling (b) (4) for sterility/endotoxin (sample pulled for testing) and (b) (4) for potency/ID (sample pulled needs to be (b) (4) needs to be (b) (4) testing) testing. Per management, the largest finished batch size processed at this facility is approximately (b) (4) (b) (4) units of finished sterile drug product. These samples are pulled only on a (b) (4) basis which is not representative of the entire batch manufacturing process (beginning, middle, and end). Also, the largest (b) (4) batch size is approximately (b) (4) (b) (4) of finished drug product. The firm does not sample (b) (4) for potency. Per the firm's CAPA #055 dated 07/13/2017, the firm has been having quantity delivery concerns with the (b) (4) delivering the required amount of active drug ingredients and diluent, which has a direct impact on potency. **OBSERVATION #7** Aseptic processing areas are deficient regarding the system for cleaning and disinfecting the room and equipment to produce aseptic conditions. ****THIS IS A REPEAT OBSERVATION FROM THE 2015 INSPECTION**** DATE ISSUED EMPLOYEE(S) SIGNATURE EMPLOYEE(S) NAME AND TITLE (Print or Type) REVERSE OF THIS Marvin D. Jones, Investigator 01/05/2018

Saundrea A. Munroe, Investigator

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Nashville, TN 3 Phone: (615) 36	66-7801 Fax: (615) 366-7802		FEI NUMBER		
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	F INDIVIDUAL TO WHOM REPORT IS ISSUED				
To: Brenda L.	Womack, General Manager				
FIRM NAME		STREET ADDRESS			
PharMEDium S	ervices, LLC.	913 N. Davis Ave.			
CITY, STATE AND Z		TYPE OF ESTABLISHME			
Cleveland, MS	38732-2106	Outsourcing Facilit	у		
microbial/env	conducted an efficacy study to support a (vironmental logs document, on numerous	occasions, spore-fo		The second secon	
(b) (4)	cleaning efforts. Although a disinfectant time was sufficient for the sporicide, the			time.	
3. Your firm solution, which stoppers and	to the ISO 7 and ISO 5 environments for uses unfiltered, non-sterile (b) (4) ch is used in the sanitization process as a sIV ports) prior to aseptic processing. This in the ISO 5 classified area.	in th		on sites (vial	
	to your firm's SOP CPS-310, entitled "SAPORTS INCLUDING PREPARATION (7,(b) (4)				
your firm has	your firm has not conducted any studies supporting the (b) (4) documented in your SOP.				
OBSERVAT There is a fail distributed.	ION #8 lure to thoroughly review any unexplained	d discrepancy wheth	her or not the batch has	been already	
****THIS IS	A REPEAT OBSERVATION FROM TH	HE 2015 INSPECT	ION****		
Specifically,					
	s had several media fill failures, which incurring 2016 and 2017, your firm had a total				
	EMPLOYEE(S) SIGNATURE	EMPLOYEE(S) NAME AND T	TTLE (Print or Type)	DATE ISSUED	
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FOOD AND DRUG ADMINISTRATION

DISTRICT OFFICE ADDRESS AND PHONE NUMBER

404 BNA Dr., Bldg. 200, Ste 500

Nashville, TN 37217-2597

Phone: (615) 366-7801 Fax: (615) 366-7802

Industry Information: www.fda.gov/oc/industry

NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT IS ISSUED

TO: Brenda L. Womack, General Manager

FIRM NAME STREET ADDRESS PharMEDium Services, LLC. 913 N. Davis Ave.

CITY, STATE AND ZIP CODE

Cleveland, MS 38732-2106

TYPE OF ESTABLISHMENT INSPECTED

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FEI NUMBER

3004153061

11/27/2017-01/05/2018

Outsourcing Facility

properly address the products that were processed by the technicians that failed the media fills.

2017

For example: Per CNC-17-075 dated 02/20/2017, the technician ((b) (6)) had two media fill failures on 02/15/201: The failed test results, regarding the two media fills, were not obtained until 02/20/2017. The investigation concluded that the video footage provided substantial evidence that the processing technician ((b) (6)) had multiple procedural violations relating to improper sanitizations during aseptic processing per CPS-313. Your firm did not perform any type of corrective actions/investigations as to the sterile drug products that were produced by the technician (b) (6) on the 02/15/2017, 02/16/2017, 02/17/2017, and 02/20/2017, which included Lot #'s 170450032C, 170460041C, 170460048C, 170460026C, 170480001C, 170470015C, 170470038C, 170500024C. 170500032C, and 170500034C. These Lots were released for distribution.

OBSERVATION #9

The production area air supply lacks an appropriate air filtration system.

****THIS IS A REPEAT OBSERVATION FROM THE 2013 INSPECTION****

Specifically,

A review of the firm's dynamic smoke study videos, dated March 2017 of the ISO 7 cleanroom environment certification, indicated that the pressure differential (airflow) between the cleanroom and ante rooms appeared neutral. According to the smoke study report, signed by QA on 04/03/17, "(b) (6) recommends that an (b) (4)

(b)(4)

(b)(4)

(b)(4)

99

OBSERVATION #10

There are no written procedures for production and process controls designed to assure that the drug products have the identity, strength, quality, and purity they purport or are represented to possess.

SEE

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01/05/2018

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INSPECTIONAL OBSERVATIONS

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TO: Brenda L.	Womack, General Manager			
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PharMEDium S	Services LLC	913 N. Davis Ave.		
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Cleveland, MS	38/32-2106	Outsourcing Facility		
b) Your firm during the (b) (b) (4) with the perform a (b) (c) Your firm (b) (4) Bags codes), and 2	uses a (b) (4) to remove particle of the (b) (4) with the products not uses a (b) (4) in the process (4) process. Your firm has not be product nor is the (b) (4) use/lot not (4) after use of this (b) thas not validated the process for a (b) (a) product codes), 250 mL Blue 50 mL White cassettes (b) (a) product does not perform daily checks on	r firm has not validated the user is the (b) (4) use/lot number doing of sterile Ephedrine drug p validated the use of this (b) (4) tumber documented in the batch (4) manufacturing sterile finished to Cassettes (b) (4) product codes), 2 ct codes).	e of these (b) (4) to documented in the bat roducts (^{b) (4)} different o determine the com- h record. Also, the fi drug products contain 250 mL Yellow Case	etermine the ch record. It item codes) Expatibility of the irm does not ined in 250 mL settes (**) product
(b) (4) (b) (4)	depending upon usage. The scale containing diluent and active in ibrated in house every (b) (4)	es are used for weighing (b) (4)	(b) (4) of active ing	redient,(b) (4)
OBSERVAT	ION #11			
	nd closures are not tested for conf			
****THIS IS	A REPEAT OBSERVATION F	ROM THE 2013 INSPECTION	1+***	
Specifically,				
Your firm do	es not conduct any sampling/testi	ng upon receipt of sterile finish	ned injectable drug i	ngredients,
	EMPLOYEE(S) SIGNATURE	EMPLOYEE(S) NAME AND TITLE	(Print or Type)	DATE ISSUED
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DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION

DISTRICT OFFICE ADDRESS AND PHONE NUMBER	DATE(S) OF INSPECTION
404 BNA Dr., Bldg. 200, Ste 500	11/27/2017-01/05/2018
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Industry Information: www.fda.gov/oc/industry	3004153061
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT IS ISSUED	
TO: Brenda L. Womack, General Manager	

FIRM NAME	STREET ADDRESS		
PharMEDium Services, LLC.	913 N. Davis Ave.		
CITY, STATE AND ZIP CODE	TYPE OF ESTABLISHMENT INSPECTED		
Cleveland, MS 38732-2106	Outsourcing Facility		

product containers or closures; they are approved/released by Quality Assurance without testing. Since raw materials are not tested upon receipt to your facility, potentially defective products are released by your quality unit and utilized in compounding operations. On 11/28/17, your firm initiated a supplier corrective action request (SCAR) for missing graduations on syringes used to produce lot 173310013C HYDROmorphone HCl 1mg/mL on 11/28/17. Since initiation of the SCAR, your firm continued to use this lot of syringes to compound eight (8) additional lots of finished product (173340014C, 173340016C, 173340017C, 173340018C, 173340019C, 173340020C, 173340021C, 173340022C). All products listed have been released by your QA department without resolution of this investigation.

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.

****THIS IS A REPEAT OBSERVATION FROM THE 2013 INSPECTION****

Specifically,

On 11/27/17 during a walk-through of your facility, we observed the storage of two (2) clear in-process containers filled with 10 mcg/ml Fentanyl Citrate in Sodium Chloride 0.9% Lot# 173300032C contained in plastic IV bags, which was awaiting labeling in the staging area. Additionally, we observed one (1) opaque container of Morphine Sulfate 1mg/mL Lot# 173250006C located in the finished product vault. The lid to the storage container was left ajar, allowing light to contact the product. According to labeling on both raw ingredients and compounded products, both are light sensitive and specify to "protect from light." Your SOP, CPS-013, "Storage and Handling of Inventory" Version 13, Effective Date: 06/29/17 also states, "(b) (4)

OBSERVATION #13

Batch production and control records do not include complete labeling control records, including specimens or copies of all labeling used for each batch of drug product produced.

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Marvin D. Jones, Investigator
Saundrea A. Munroe, Investigator

FORM FDA 483 (9/08) PREVIOUS EDITION OBSOLETE

INSPECTIONAL OBSERVATIONS

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DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION

FOOL	D AND DRUG ADMINISTRAT	ION	
DISTRICT OFFICE ADDRESS AND PHONE NUMBER		DATE(S) OF INSPECTION	
404 BNA Dr., Bldg. 200, Ste 500		11/27/2017-01/05/2018	
Nashville, TN 37217-2597			
Phone: (615) 366-7801 Fax: (615) 366-7802		FEI NUMBER	
Industry Information: www.fda.gov/oc/industry	+	3004153061	
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT IS ISSUED			
TO: Brenda L. Womack, General Manager			
FIRM NAME	STREET ADDR	ESS	
PharMEDium Services, LLC.	913 N. Dav	is Ave.	
CITY, STATE AND ZIP CODE	TYPE OF ESTA	BLISHMENT INSPECTED	

Outsourcing Facility

Specifically,

A review of several batch records revealed that these records do not contain samples of the original approved primary, secondary, and case labels applied to the finished drug product.

OBSERVATION #14

Cleveland, MS 38732-2106

Procedures describing the handling of all written and oral complaints regarding a drug product are not followed.

Specifically,

On 09/11/17, your firm performed a recall (RE-17-017) that originated from a consumer complaint regarding illegible expiration date on product label. Per your SOP CPS-007, Recall Procedure, Version 8 Effective Date: 05/04/17, you "will remove the product from the field and then notify the appropriate FDA District office." Your firm did not notify the FDA until inquiry during this inspection.

Additionally, there were 6 recalls performed in 2015 in which zero (0) of them were reported to the FDA. Three (3) (HHE-15-017, HHE-15-020, HH-15-023) were potency related due to stability failures. HHE-015-002 was initiated due to broken syringe caps, HHE-15-022 was initiated due to a cut off expiry date, and HHE-015-026 was initiated due to syringe discoloration. All recalls listed, except for identified stability failures, originated from consumer complaints.

OBSERVATION #15

Laboratory controls do not include the establishment of scientifically sound and appropriate test procedures designed to assure that drug products conform to appropriate standards of identity, strength, quality and purity.

****THIS IS A REPEAT OBSERVATION FROM THE 2013 INSPECTION****

Specifically,

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O1/05/2018

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FOOD AND DRUG ADMINISTRATION

DISTRICT OFFICE ADDRESS AND PHONE NUMBER	DATE(S) OF INSPECTION
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Nashville, TN 37217-2597	
Phone: (615) 366-7801 Fax: (615) 366-7802	FEI NUMBER
	3004153061
Industry Information: www.fda.gov/oc/industry	5001155001
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT IS ISSUED	
TO: Brenda L. Womack, General Manager	

10. District D. Worlder, General Haringer		
STREET ADDRESS		
913 N. Davis Ave.		
TYPE OF ESTABLISHMENT INSPECTED		
Outsourcing Facility		

- a) All but 20 of the drug products manufactured by your firm contain preservatives. Your firm does not perform preservative testing on finished sterile injectable drug products that contain preservatives to ensure the concentration is within acceptable specification.
- b) Your firm does not test the pH for finished sterile injectable drug products.
- c) Your firm does not perform negative controls during the microbial testing of environmental monitoring samples.

OBSERVATION #16

The labels of your outsourcing facility's drug products do not include information required by section 503B(a)(10) (A).

Specifically,

The following information is not found on your drug product labels:

- a) The date that the drug was compounded.
- b) A list of active and inactive ingredients, identified by established name and the quantity or proportion of each ingredient.

Examples of drug product labels that do not contain this information include:

- Morphine Sulfate 1 mg per mL in 0.9% Sodium Chloride Injection (55 mL in 60 mL BD syringe)
- Morphine Sulfate 1 mg per mL Injection (2 mL in BD syringe)
- Fentanyl Citrate 2 mcg per mL and Bupivacaine HCl 0.125% in Sodium Chloride 0.9% Injection (100 mL, 250 mL)
- Morphine Sulfate 5 mg per mL in 0.9% Sodium Chloride Injection (30 mL in 35 mL Monoject Barrel, 50 mL Cassette Reservoir)

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FOOD AND DRUG ADMINISTRATION

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404 BNA Dr., Bldg. 200, Ste 500

Nashville, TN 37217-2597

Phone: (615) 366-7801 Fax: (615) 366-7802

Industry Information: www.fda.gov/oc/industry

NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT IS ISSUED

TO: Brenda L. Womack, General Manager

PharMEDium Services, LLC.

FIRM NAME

CITY, STATE AND ZIP CODE

Cleveland, MS 38732-2106

STREET ADDRESS

913 N. Davis Ave.

TYPE OF ESTABLISHMENT INSPECTED

DATE(S) OF INSPECTION 11/27/2017-01/05/2018

FEI NUMBER

3004153061

Outsourcing Facility

- Fentanyl Citrate 20 mcg per mL in Sodium Chloride 0.9% (100 mL)
- Fentanyl Citrate 2 mcg per mL and Ropivacaine HCl 0.2% in Sodium Chloride 0.9% Injection (100 mL)
- Fentanyl Citrate 10 mcg per mL in Sodium Chloride 0.9% (250 mL)
- HYDROmorphone HCl 1 mg/mL in Sodium Chloride 0.9% (30 mL)
- Lidocaine HCl 2% 20 mg per mL (10 mL)
- Midazolam HCl 2 mg per mL in Sodium Chloride 0.9% (50 mL)
- Rocuronium Bromide 10 mg per mL Injection (5 mL)
- Ropivacaine HCl 0.2% in Sodium Chloride 0.9% (100 mL yellow cassette reservoir)

OBSERVATION#17 Observation Deleted. MOJ 1/5/2018

Your outsourcing facility has not submitted a report to FDA identifying a product compounded during the December 1, 2016, through May 31, 2017, reporting period as required by section 503B(b)(2)(A).

Specifically,

The following combination drug products were compounded and not identified on your June 2017 report:

- Sufentanil Citrate and Bupivacaine HCl in 0.9% Sodium Chloride
- · Sufentanil Citrate and Ropivacaine HCl in 0.9% Sodium Chloride
- Fentanyl Citrate and Bupivacaine HCl in 0.9% Sodium Chloride
- Fentanyl Citrate and Ropivacaine HCl in 0.9% Sodium Chloride
- Hydromorphone HCl and Bupivacaine HCl in 0.9% Sodium Chloride

Hydromorphone HCl and Ropivacaine HCl in 0.9% Sodium Chloride M \$5 1/5/2018

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