		NT OF HEALTH AND HUMAN SER	VICES	
DISTRICT ADDRESS AND PHON	PHONE NUMBER		DATE(S) OF INSPECTION	
Baltimore, MI	Drive, Suite 101 MD 21215 55 Fax: (410)779-5707		/2018-9/5/2018* SER :283530	
NAME AND TITLE OF INDIVIDUA				
Neil P. McGai	rvey, Pharmacist	STREET ADDRESS		
109-400-000000-	-		tchie Hwy Ste 103	
Arnold, MD 21		TYPE ESTABLISHMENT INSPEC Producer of r	Producer of non-sterile drug products	
observations, and do observation, or have action with the FDA	not represent a final Agency deter- implemented, or plan to implemen	resentative(s) during the inspection of mination regarding your compliance t, corrective action in response to artion or submit this information to Fill address above.	If you have an objection re observation, you may discu	garding an uss the objection or
DURING AN INSPECTOR	TION OF YOUR FIRM I OBSERVEN 1	ED:		
You used a non-pharmaceutical grade component in the formulation of a drug product.				
Specifically, your firm used (b) (4) water in the production of a released and distributed drug product. (b) (4) water was used in the production of Rx # (b) (6) , Amlodipine 1mg/mL, for a pediatric population. *DATES OF INSPECTION				
8/21/2018(Tue),	8/23/2018(Thu), 8/28/2018(Гue), 9/05/2018(Wed)		
SEE REVERSE OF THIS PAGE	EMPLOYEE(S)SIGNATURE Sena G Dissmeyer, Ir	vestigator	Sena G Dissemeyer Investigator Sugned by Sena G. Dissemeyer -S Dale Signed 09-05-2018 09 19 00	DATE ISSUED 9/5/2018
FORM FDA 483 (09/08)	PREVIOUS EDITION OBSOLETE	INSPECTIONAL OBSERV	ATIONS	PAGE 1 of 1 PAGES