DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION				
DISTRICT ADDRESS AND PHONE NUMBER	DATE(S) OF INSPECTION			
300 River Place, Suite 5900	2/18/2016-3/16/2016*			
Detroit, MI 48207 (313) 393-8100 Fax:(313)393-8139	FEI NUMBER 3008213711			
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED	<u> </u>			
Paul J. Elmer , President and Owner				
FIRM NAME	STREET ADDRESS			
Pharmakon Pharmaceuticals, Inc.	14450 Getz Rd			
CITY, STATE, ZIP CODE, COUNTRY	TYPE ESTABLISHMENT INSPECTED			
Noblesville, IN 46060-3303	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 WE OBSERVED:

#### **OBSERVATION 1**

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

Specifically,

- i. Finished lots of sterile injectable drug products are not tested for potency prior to release and distribution. Morphine Sulfate (PF) 0.5mg/ml in 0.9% Sodium Chloride 1ml fill in a (b) (4) syringe lot #E52418EV11C was processed, released, and distributed on 2/3/16. Potency results were reported as 2460% on 2/10/16, acceptance criteria is (b) (4) (4) (4) (5). This lot was recalled by your firm on 2/11/16.
- ii. Finished lots of sterile injectable drug products containing preservative are not tested for preservative content, for example, Morphine Sulfate 5mg/ml in 0.9% Sodium Chloride 25ml fill in a (b) (4) syringe lot #E51192DK18C. This lot was processed and shipped on 2/18/16 without such testing.

#### **OBSERVATION 2**

There is a failure to thoroughly review any unexplained discrepancy and the failure of a batch or any of its components to meet any of its specifications whether or not the batch has been already distributed.

Specifically,

#### **AMENDMENT 1**

	EMPLOYEE(S) SIGNATURE		DATE ISSUED
SEE REVERSE	Emily J Orban, Investigator	3/21/2016	3/21/2016
OF THIS PAGE	Emilie Kahn, Investigator	X Emily J Orban	
	Gary C Pecic, Chemist/Biologist	Emly J Orban Investigator	
	Lisa T Michel, Chemist/Biologist	Signed by: Emily J. Orban -S	

FORM FDA 483 (09/08) PREVIOUS EDITION OBSOLETE INSPECTIONAL OBSERVATIONS PAGE 1 OF 17 PAGES

#### DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION DISTRICT ADDRESS AND PHONE NUMBER 300 River Place, Suite 5900 2/18/2016-3/16/2016\* Detroit, MI 48207 3008213711 (313) 393-8100 Fax: (313) 393-8139 NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED Paul J. Elmer , President and Owner FIRM NAME STREET ADDRESS Pharmakon Pharmaceuticals, Inc. 14450 Getz Rd CITY, STATE, ZIP CODE, COUNTRY TYPE ESTABLISHMENT INSPECTED

i. Since 4/2014, batches were released prior to receiving potency results that were out of specification. No investigation was conducted into these out of specification test results. Some examples of batches released and shipped include:

Outsourcing Facility

Noblesville, IN 46060-3303

		%		Date	Date
Lot #	Active Ingredient	Potency	Date Made	Shipped	Tested
E290653A8R	EPINEPHRINE	0	11-1	/ / \	11/6/2014
E14240A2R	NOREPINEPHRINE	0.4			2/24/2015
E133348.17R	PROMETHAZINE	1.8			1/15/2015
E34082DK8C	MIDAZOLAM	7.1			1/2/2015
E0228143R	PHENYLEPHRINE	25.3			7/29/2014
E09232530R07					
E09232530R	PHENYLEPHRINE	25.9			7/25/2014
E40292DK9C	MIDAZOLAM	27.6			6/9/2015
E39250DK31C	MIDAZOLAM	33.8			7/14/2015
E42428DK4C	MIDAZOLAM	34.7			10/20/2015
E40292DK4C	MIDAZOLAM	37.7			5/15/2015
E1106133R	PHENYLEPHRINE	39.4			5/6/2014
E40292DK7C	MIDAZOLAM	44.2			6/1/2015
E083327Z2R	PROMETHAZINE	45.6			5/18/2015
E30152DK5C	FENTANYL CITRATE	52.9			7/14/2014
E39250DK27C	MIDAZOLAM	55.7			6/23/2015
E15058A13R	NOREPINEPHRINE	66			10/26/2015
E34082DK3C	MIDAZOLAM	68.4			7/22/2014
E600949121R	OXYTOCIN	75.6			6/30/2015
E290653A10R	EPINEPHRINE	77.6			11/14/2014
EJKP0412A1R	VECURONIUM	77.6			8/28/2015
E102F0147R	CEFAZOLIN	80.4			9/10/2015

### **AMENDMENT 1**

	EMPLOYEE(S) SIGNATURE	DATE ISSUED
SEE REVERSE	Emily J Orban, Investigator	3/21/2016
OF THIS PAGE	Emilie Kahn, Investigator X Emily J Orban	
PECCHANICAL STREET, ST	Gary C Pecic, Chemist/Biologist	
	Lisa T Michel, Chemist/Biologist Syned by: Emby: Orban-5	
	-	

FORM FDA 483 (09/08) PREVIOUS EDITION OBSOLETE INSPECTIONAL OBSERVATIONS PAGE 2 OF 17 PAGES

# DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION

DISTRICT ADDRESS AND PHONE NUMBER

300 River Place, Suite 5900

Detroit, MI 48207

(313) 393-8100 Fax: (313) 393-8139

DATE(S) OF INSPECTION

2/18/2016-3/16/2016\*

FEI NUMBER

3008213711

NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED

Paul J. Elmer , President and Owner

FIRM NAME	STREET ADDRESS
Pharmakon Pharmaceuticals, Inc.	14450 Getz Rd
CITY, STATE, ZIP CODE, COUNTRY	TYPE ESTABLISHMENT INSPECTED
Noblesville, TN 46060-3303	Outsourcing Facility

	_	28	/	/ 4 \	
E60083313R	OXYTOCIN	85.5			11/14/2014
E06334312R	ATROPINE	85.6		(4)	12/31/2014
E16HL01222R	PROPOFOL	86	/		11/24/2015
E1243458R	PROMETHAZINE	114			11/10/2015
E46342DK6R	BUPIVICAINE	116			8/25/2015
E61055602R	HEPARIN	116			6/3/2015
E43187DK36C	MORPHINE SULFATE	116			11/19/2015
E600949149R	OXYTOCIN	118			8/11/2015
E271353A2R					
E27135A2R	EPINEPHRINE	119.9			4/2/2014
E40292DK10C	MIDAZOLAM	120.9			6/11/2015
E37235DD21C	HYDROMORPHONE	121.6			6/26/2014
E0353613R	PHENYLEPHRINE	124.2			10/13/2015
E02281416R	PHENYLEPHRINE	127.6			9/19/2014
E0643928R	PHENYLEPHRINE	129.1			6/8/2015
E02330736C	MORPHINE SULFATE	207.9			8/15/2014
	10.000				1/19/2015
E460953A2R	VANCOMYCIN	0.4			1/23/2015

- ii. No investigation was performed into the following test results for drug products already released and distributed:
  - a. Midazolam HCl 1mg/ml in 0.9% Sodium Chloride 2ml fill in a (b) (4) syringe lot #EMS3063C tested positive for sterility on 5/20/14.
  - b. Ephedrine Sulfate 5mg/ml in 0.9% Sodium Chloride 5ml fill in a (b) (4) syringe lot #E0714148R, Fentanyl Citrate 2meg/ml and Bupivacaine HCl 0.125% in 0.9% Sodium Chloride 200ml in (b) (4) 250ml Bag lot #E45248DK11C, and Ephedrine Sulfate 5mg/ml in 0.9% Sodium Chloride 10ml fill in a (b) (4) syringe lot #E0725141R were reported as "Cancelled or Sample Untestable" on 3/02/15, 4/16/15, and 6/10/15, respectively. No additional test results were provided for these three batches.

#### **AMENDMENT 1**

	EMPLOYEE(S) SIGNATURE	DATE ISSUED
SEE REVERSE	Emily J Orban, Investigator	3/21/2016
OF THIS PAGE	Emilie Kahn, Investigator X Emily 3 Orban	
6600 No. 1 (1908) CO. 6000 N. P.	Gary C Pecic, Chemist/Biologist Embylotan	
	Lisa T Michel, Chemist/Biologist Syned by: Embyl Orban-5	

FORM FDA 483 (09/08) PREVIOUS EDITION OBSOLETE INSPECTIONAL OBSERVATIONS PAGE 3 OF 17 PAGES

DISTRICT ADDRESS AND PHONE NUMBER	AND DRUG ADMINISTRATION  DATE(S) OF INSPECTION  2 / 10 / 2016 2 / 16 / 2016 +
300 River Place, Suite 5900 Detroit, MI 48207 (313) 393-8100 Fax:(313)393-8139	2/18/2016-3/16/2016* FEI NUMBER 3008213711
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED Paul J. Elmer , President and Owner	
FIRM NAME	STREET ADDRESS
Pharmakon Pharmaceuticals, Inc.	14450 Getz Rd
CITY, STATE, ZIP CODE, COUNTRY	TYPE ESTABLISHMENT INSPECTED
Noblesville, IN 46060-3303	Outsourcing Facility
OBSERVATION 3 Procedures designed to prevent microbiologic are not established, written and followed.	cal contamination of drug products purporting to be sterile

i. The following aseptic practices were observed:

Specifically,

- a. Operators were not observed to exhibit slow, deliberate movements while performing aseptic operations in the ISO 5 laminar flow hood. For example, during the filling of HYDROmorphone HCl 0.4 mg/ml in 0.9% Sodium Chloride 30ml fill in a (b) (4) vial lot #E52105DD25C on 2/18/16, an operator was observed to spray gloved hands with sanitizer and wave them around in the laminar flow hood to dry.
- b. On 2/19/16, an operator was observed leaving the ISO 5 Suite and performed a (b) (4) in the ISO 6 anteroom using the hand sink. After completion of this task, the operator did not change gloves or sanitize their hands prior to leaving the anteroom and returning to Suite o continue aseptic processing of Fentanyl Citrate 2mcg/ml and Bupivacaine HCl 0.125% in 0.9% Sodium Chloride 200ml in (b) (4) 250ml Bag lot #E3450DK9C-E53450DK9C.
- c. Sterile utensils are not always used to handle sterile materials. For example, on 2/23/16, an operator was observed to (b) (4) (b) (4) vials containing Bupivacaine PF (b) (4) (b) (4) (Fentanyl Citrate 2mcg/ml & Bupivacaine 0.125% in 0.9% Sodium Chloride 150ml in a 150ml (b) (4) bag).
- d. On 2/25/16, an operator was observed to (b) (4) of Norepinephrine Bitartrate (b) (4) with their gloved hands used in Norepinephrine Bitartrate 8mg added to 5% Dextrose 250ml bag lot #E15229B3R. Additionally, a (b) (4) is used for sterile drug components

No additional (b) (4) was observed in this process even though the

(b) (4)

Your firm management stated they were
unaware a (b) (4)

was not being used during this process.

## **AMENDMENT 1**

	EMPLOYEE(S) SIGNATURE	DATE ISSUED
SEE REVERSE	Emily J Orban, Investigator	3/21/2016
OF THIS PAGE	Emilie Kahn, Investigator X Emily J Orban	
To be a to be to be a	Gary C Pecic, Chemist/Biologist	
	Lisa T Michel, Chemist/Biologist Squed by: Ernly 1. Orban - S	

	DEPARTMENT OF HEAL FOOD AND DRUG	TH AND HUMAN SERVI ADMINISTRATION	CES	
300 River Pl	ne number ace, Suite 5900	20.00	INSPECTION 2016-3/16/2016*	
Detroit, MI	•	FEI NUMBER		
(313) 393-81	00 Fax: (313)393-8139	30082	13711	
NAME AND TITLE OF INDIVIDU	AL TO WHOM REPORT ISSUED			
	r , President and Owner	100 (000)		
Pharmalan Dh	armagoutigals Inc	street address 14450 Getz Rd		
CITY, STATE, ZIP CODE, COUN	armaceuticals, Inc.	TYPE ESTABLISHMENT INSPECTE	D	
Noblesville,	IN 46060-3303	Outsourcing Fa	cility	
ii. Adequate value and operator iv. No documer (b) (4) that periodic ma (b) (4)	tobservation of that written on the sure days of the sure of such is performed accomplex.	hedrine Sulfate 5m 5A11R on 3/15/16 ISO 5 work surface d to 100ml 0.9% Soved hands were of 5 Sodium Chloride ions, specifically, part to assure that steamently, each operation which (b) (4) iner closure systems, or equipment uses g room (b) (4) t the room regardle the (b) (4) has been adequate ording to the user research	ng/ml in 0.9% Sodium, both operators were ce. odium Chloride bag observed to block fin (b) (4)  process simulations erile processing technitor involved in aserile processing technitor involved in aserile din normal aseptice.  This (b) (4) ess of their garbing usedly validated for its inanual.	m Chloride re observed to g lot rst air while . (media fills), miques are ptic processing ress does not zes (ex: (b) (4) processing was not in attire. d to sterilize
	AIVIEN	DIVILIAL T		
	EMPLOYEE(S) SIGNATURE		N 50562335	DATE ISSUED
SEE REVERSE OF THIS PAGE	Emily J Orban, Investigator Emilie Kahn, Investigator		3/21/2014	3/21/2016
OF THIS FAGE	Gary C Pecic, Chemist/Biolog	gist	Emily J Orban Emy J Orban	-
	Lisa T Michel, Chemist/Biolo		Investigator Signed by: Emly J. Orban -S	
FORM FDA 483 (09/08)	PREVIOUS EDITION OBSOLETE INS	PECTIONAL OBSERVA	TIONS	PAGE 5 OF 17 PAGES

		F HEALTH AND HUMAN SE	RVICES	
DISTRICT ADDRESS AND PHON			S) OF INSPECTION	
TO COLUMN TO THE	ace, Suite 5900		8/2016-3/16/201	6*
Detroit, MI		700 300	MBER 08213711	
(313) 393-810	100 Fax: (313) 393-8139		0213/11	
NAME AND TITLE OF INDIVIDUA	AL TO WHOM REPORT ISSUED			
Paul J. Elmer	, President and Owner			
FIRM NAME		STREET ADDRESS		
	armaceuticals, Inc.	14450 Getz R		
CITY, STATE, ZIP CODE, COUN		TYPE ESTABLISHMENT INSPE		
Noblesville,	IN 46060-3303	Outsourcing	Facility	
since 1/2015; he a. On 2/ b. (b) (c) (4) c. The P specified lot E570 docume	SOP PH100 Environmental Conveyer, your firm management was observed to the way of the wa	The (b) (4) Int stated there have been to have a pressure readment of the compact	has en no (b) (4) ling of 0.005 inches of added to 5% Dex this day. examples of Suit	been in place of water. trose in a 250ml being outside the
No inve	stigation has been conducted	into these pressure rea	dings.	
ii. The Cleanroo Negative to the investigation wa		d(b) (4)	both report that, res	pectively. No
iii. The (b) (4) clean room suite	e. During the inspection, your the last time	e data was (b) (4) in	came aware that (b) the ISO 5 Suites (b)	
		AMENDMENT 1		
SEE REVERSE OF THIS PAGE	EMPLOYEE(S) SIGNATURE  Emily J Orban, Investigate  Emilie Kahn, Investigate  Gary C Pecic, Chemist/R  Lisa T Michel, Chemist,	tor Biologist	X Emily J Orban Emly J Orban Investigator Signed by: Emly J. Orban -S	DATE ISSUED 3/21/2016
FORM FDA 483 (09/08)	PREVIOUS EDITION OBSOLETE	INSPECTIONAL OBSER	VATIONS	PAGE 6 OF 17 PAGE

	DEPARTMENT OF HEAL FOOD AND DRUG	TH AND HUMAN ADMINISTRATION		S	
DISTRICT ADDRESS AND PHON	VI - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1		ATE(S) OF INSE		
	ice, Suite 5900		2/18/20 EI NUMBER	)16-3/16/2016*	
Detroit, MI 4			3008213	3711	
(313) 393-810	393-8100 Fax: (313) 393-8139				
NAME AND TITLE OF INDIVIDUA	L TO WHOM REPORT ISSUED	<u> </u>			
Paul J. Elmer	, President and Owner				
FIRM NAME	*	STREET ADDRESS			
Pharmakon Pha	rmaceuticals, Inc.	14450 Getz	z Rd		
CITY, STATE, ZIP CODE, COUNT	TRY	TYPE ESTABLISHMENT	INSPECTED		
Noblesville,	IN 46060-3303	Outsourcir	ng Faci	lity	
on 2/3/16, data of Pressure (b) (4) iv. Pressure gau calibrated prior v. The anteroom	Log.  ges in Suit used to aseptically properties to 2/20/16. suite has been in use	rocess Cephalse since 6/2/1	losporin 4.	drug products, w	ere not
	6 and is c nected to Suite which	Carlo	The state of the s	2010 on 2/19/10. 1	ins room is
considered 150	o and is c nected to suite which	is classified	150 5.		
This is a repeat	absorvation of that written on th	o EDA 103 d	lated 3/	13/2014	
This is a repeat	observation of that written on th	e FDA 403 u	iated 3/	13/2014.	
OBSERVATIO	N 5				
	ing areas are deficient regarding the	system for c	leaning	and disinfecting	the room to
Specifically,					
5/23/14, a mixtu		orted to be ste o clean Suite	erile. Ales (b) (4	so, between 4/30/1	
	Sanitization (Disinfection) requires to ance. The (b) (4) Sanitization Log:				reset e of a
(b)	<b>(4)</b>				
	AMEN	DMENT 1			
	EMPLOYEE(S) SIGNATURE				DATE ISSUED
SEE REVERSE	Emily J Orban, Investigator		ì	3/21/2016	3/21/2016
OF THIS PAGE	Emilie Kahn, Investigator			X Emily 3 Orban	
	Gary C Pecic, Chemist/Biolog			Emly 3 Orban Investigator	
	Lisa T Michel, Chemist/Biolo	gist		Signed by: Emily 3. Orban -S	

INSPECTIONAL OBSERVATIONS

PAGE 7 OF 17 PAGES

FORM FDA 483 (09/08)

PREVIOUS EDITION OBSOLETE

DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION			
DATE(S) OF INSPECTION			
2/18/2016-3/16/2016*			
FEI NUMBER			
3008213711			
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED			
Paul J. Elmer , President and Owner			
STREET ADDRESS			
14450 Getz Rd			
TYPE ESTABLISHMENT INSPECTED			
Outsourcing Facility			
•	DATE(S) OF INSPECTION  2/18/2016-3/16/2016*  FEI NUMBER 3008213711  STREET ADDRESS 14450 Getz Rd TYPE ESTABLISHMENT INSPECTED		

- iii. Disinfectant efficacy studies have not been performed to demonstrate that the disinfectants and the application methods used to clean the ISO 5 areas can sufficiently reduce bioburden.
- iv. Scientific justification was not provided to support that (b) (4) is an appropriate contact time for all disinfectants used in the sterile suites.
- v. On 2/18/16, a white colored residue was observed on the HEPA filter grate of laminar flow hood during the processing of HYDROmorphone HCl 0.4 mg/ml in 0.9% Sodium Chloride 30ml fill in a (b) (4) Vial lot #E52105DD25C. On 3/10/16, white residue was also observed on the HEPA filter grate of laminar flow hoods (b) (4)
- vi. No documentation was provided to support that Suite was sanitized (b) (4) from 4/23/14-9/22/14 or that Suite was sanitized (b) (4) from 6/2/14 to 11/5/15, according to SOP PH109 Sanitization (Disinfection). In addition, no documentation was provided to support that Suite was cleaned according to SOP PH108 (b) (4) Hood/Floor Cleaning from 6/2/14-11/24/14 and 2/12/15-10/28/15. Cefazolin 1GM in Sterile Water 10ml fill in a (b) (4) syringe lot #E102F00916R was processed in Suite n 8/4/15.
- vii. On 3/15/16, residue was observed on the metal surface on top of the following laminar flow hoods in the ISO 5 suites: (b) (4)

This is a repeat observation of that written on the FDA 483 dated 3/13/2014.

# **OBSERVATION 6**

Clothing of personnel engaged in the processing of drug products is not appropriate for the duties they perform.

Specifically,

#### **AMENDMENT 1**

	EMPLOYEE(S) SIGNATURE		DATE ISSUED
	Emily J Orban, Investigator	3/21/2016	3/21/2016
OF THIS PAGE	Emilie Kahn, Investigator	X Emily J Orban	
	Gary C Pecic, Chemist/Biologist	Emly J Orban Investigator	
	Lisa T Michel, Chemist/Biologist	Signed by: Emly J. Orban -S	

FORM FDA 483 (09/08) PREVIOUS EDITION OBSOLETE INSPECTIONAL OBSERVATIONS PAGE 8 OF 17 PAGES

DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION			
DISTRICT ADDRESS AND PHONE NUMBER	DATE(S) OF INSPECTION		
300 River Place, Suite 5900	2/18/2016-3/16/2016*		
Detroit, MI 48207 (313) 393-8100 Fax: (313)393-8139	FEI NUMBER 3008213711		
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED			
Paul J. Elmer , President and Owner			
FIRM NAME	STREET ADDRESS		
Pharmakon Pharmaceuticals, Inc.	14450 Getz Rd		
CITY, STATE, ZIP CODE, COUNTRY	TYPE ESTABLISHMENT INSPECTED		
Noblesville, IN 46060-3303	Outsourcing Facility		

The current gowning method may leave facial skin exposed. For example, on 2/25/16, an operator aseptically processing Norepinephrine Bitartrate 8mg added to 5% Dextrose 250ml bag lot #E15229B3R in the ISO 5 laminar flow hood 1 was observed with several inches of skin on their forehead exposed.

This is a repeat observation of that written on the FDA 483 dated 3/13/2014.

## **OBSERVATION 7**

Aseptic processing areas are deficient regarding air supply that is filtered through high-efficiency particulate air filters under positive pressure.

Specifically,

On 2/19/16, two ceiling tiles in the Suite (1) (4) processing area were observed to be exposed and not flush with the other ceiling tiles in this room. Your firm classifies this room as ISO 5.

#### **OBSERVATION 8**

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

Specifically,

- i. Environmental monitoring is not performed at least daily during drug production in the critical areas to evaluate the quality of the aseptic processing environment and assess whether aseptic conditions are maintained.
  - a. Non-viable particulate monitoring is performed in the aseptic processing areas once every six months.
  - b. Viable monitoring:

Passive air monitoring is performed (b) (4) but was not observed to occur in the laminar flow hoods where processing occurs. On 2/23/16, during processing of Cefazolin 2GM added to 5% Dextrose 50ml USP lot #E157084.114R in

#### **AMENDMENT 1**

	EMPLOYEE(S) SIGNATURE		DATE ISSUED
SEE REVERSE	Emily J Orban, Investigator	3/21/2016	3/21/2016
OF THIS PAGE	Emilie Kahn, Investigator	X Emily J Orban	
SECTION CONTRACTOR SECTION AND ADMINISTRATION OF THE PROPERTY	Gary C Pecic, Chemist/Biologist	Emly 3 Orban Investigator	
	Lisa T Michel, Chemist/Biologist	Signed by: Emly J. Orban -S	

FORM FDA 483 (09/08) PREVIOUS EDITION OBSOLETE INSPECTIONAL OBSERVATIONS PAGE 9 OF 17 PAGES

## DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION DISTRICT ADDRESS AND PHONE NUMBER 300 River Place, Suite 5900 2/18/2016-3/16/2016\* Detroit, MI 48207 3008213711 (313) 393-8100 Fax: (313) 393-8139 NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED Paul J. Elmer , President and Owner FIRM NAME STREET ADDRESS Pharmakon Pharmaceuticals, Inc. 14450 Getz Rd CITY, STATE, ZIP CODE, COUNTRY TYPE ESTABLISHMENT INSPECTED Noblesville, IN 46060-3303 Outsourcing Facility a media plate for viable passive air monitoring was set (b) (4) , away from the laminar flow hood. Active air monitoring is performe (b) (4) . It is also performed (b) (4) ii. On 2/18/16, an operator processing HYDROmorphone HCl 0.4mg/ml in 0.9% Sodium Chloride 30ml vial lot #E52105DD25C was observed to spray disinfectant on the laminar flow hood surface and then almost immediately after, a surface sample was collected using (b) (4) plates in this location. iii. The frequency of personnel monitoring is inadequate. A (b) (4) requires (b) (4) a. According to SOP PH100 Environmental Control and Monitoring, the action level for personnel monitoring for (b) (4) . The following are examples of CFUs reported on gloves: Date Operator Hood Product **CFU** 12/8/14 Ropivacaine HCl lot#E61080474R Promethezine lot#E143044.113R 2/10/15 Rocuronium lot#ERT416X4R 10/13/15 Bupivacaine HCl lot#E50379DK1R 16 HYDROmorphone HCl lot#E47345DD18C HYDROmorphone HCl lot#E50055DD33C 14 10/20/15 HYDROmorphone HCl lot#E50055DD32C Ephedrine Sulfate lot#E05141515R Fentanyl Citrate lot#E48234DK31C Fentanyl Citrate/Ropivacaine HCl AMENDMENT 1 EMPLOYEE(S) SIGNATURE DATE ISSUED SEE REVERSE Emily J Orban, Investigator 3/21/2016 OF THIS PAGE Emilie Kahn, Investigator X Emily J Orban Gary C Pecic, Chemist/Biologist Emly J Orban Lisa T Michel, Chemist/Biologist

#### DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION DISTRICT ADDRESS AND PHONE NUMBER 300 River Place, Suite 5900 2/18/2016-3/16/2016\* FEI NUMBER Detroit, MI 48207 3008213711 (313) 393-8100 Fax: (313) 393-8139 NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED Paul J. Elmer , President and Owner FIRM NAME STREET ADDRESS Pharmakon Pharmaceuticals, Inc. 14450 Getz Rd CITY, STATE, ZIP CODE, COUNTRY TYPE ESTABLISHMENT INSPECTED Noblesville, IN 46060-3303 Outsourcing Facility

Action 1	
lot#E48234DK32C	

The following are examples of CFUs reported on gowns:

Operator	Hood	Product	CFU
(b) (7)(C). (b) (6)	(b) (4)	HYDROmorphone HCl lot#E37235DD24C	TMTC
	_	Ketamine lot#E121005A21C	
		Fentanyl Citrate/Ropivacaine HCl	
		lot#E32266DK16C	
DAMES AND	F18.77	Fentanyl Citrate lot#E32266DK15C	
(b) (7)(C), (b) (6)	(b) (4)	Oxytocin lot#E60087905R	23
(b) (7)(C). (b) (6)	(b) (4)	Succinylcholine Chloride lot#E44378EV2R	TMTC
(b) (7)(C), (b) (6)	(b) (4)	Morphine Sulfate lot#E44152DK1C	TMTC
. <del>.</del>		Fentanyl Citrate lot#E45078DK2C	
(b) (7) (C), (b)	(b) (4)	Ceftriaxone lot#E4900208M3R	20
100	J. A.	E490208M3R	
		Cefazolin lot#E102F0079R	
		Cefazolin lot#E15702311R	
	(22 - 17)	Provocholine lot#EP5032H4R	
(b) (7) (C), (b)	(b) (4)	Sufentanil Citrate/Bupivacaine	105
(C)		lot#E10134417C	(b) (4)
		HYDROmorphone HCl lot	; 37
		#E50055DD33C HYDROmorphone HCl	(b) (4)
		lot #E50055DD32C Ephedrine Sulfate lot	99
		#E05141515R	
	(b) (7)(c), (b) (b) (c), (b) (d) (c), (b) (d)	Operator Hood  (b) (7)(C) (b) (b) (c) (c) (d) (c) (d) (d) (d) (d) (d) (d) (e) (d) (e) (d) (e) (d) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	HYDROmorphone HCl lot#E37235DD24C Ketamine lot#E121005A21C Fentanyl Citrate/Ropivacaine HCl lot#E32266DK16C Fentanyl Citrate lot#E32266DK15C Oxytocin lot#E60087905R Succinylcholine Chloride lot#E44378EV2R Morphine Sulfate lot#E44152DK1C Fentanyl Citrate lot#E45078DK2C Ceftriaxone lot#E4900208M3R E490208M3R Cefazolin lot#E102F0079R Cefazolin lot#E15702311R Provocholine lot#EP5032H4R  Sufentanil Citrate/Bupivacaine lot#E10134417C HYDROmorphone HCl lot #E50055DD33C HyDROmorphone HCl lot #E50055DD32C Ephedrine Sulfate lot

No investigation has been conducted into these results, nor has any identification been performed on the microorganisms.

## **AMENDMENT 1**

	EMPLOYEE(S) SIGNATURE		DATE ISSUED
SEE REVERSE	Emily J Orban, Investigator	3/21/2016	3/21/2016
	Emilie Kahn, Investigator	X Emily J Orban	
	Gary C Pecic, Chemist/Biologist	Emily J Orban Investigator	
	Lisa T Michel, Chemist/Biologist	Signed by: Emily J. Orban -S	

FORM FDA 483 (09/08) PREVIOUS EDITION OBSOLETE INSPECTIONAL OBSERVATIONS PAGE 11 OF 17

DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION			
DISTRICT ADDRESS AND PHONE NUMBER	DATE(S) OF INSPECTION		
300 River Place, Suite 5900	2/18/2016-3/16/2016*		
Detroit, MI 48207 (313) 393-8100 Fax:(313)393-8139	FEI NUMBER 3008213711		
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED			
Paul J. Elmer , President and Owner			
FIRM NAME	STREET ADDRESS		
Pharmakon Pharmaceuticals, Inc.	14450 Getz Rd		
CITY, STATE, ZIP CODE, COUNTRY	TYPE ESTABLISHMENT INSPECTED		
Noblesville, IN 46060-3303	Outsourcing Facility		

- iv. No documentation was provided to support that media plates used for operator glove monitoring contain disinfectant neutralizers to assure microbial contamination can be detected.
- v. On 2/15/16, the white colored residue observed on the HEPA filter grate of laminar flow hood analyzed and 1 CFU was recovered from a swab sample. No investigation has been conducted nor has identification been performed on the microorganism.

This is a repeat observation of that written on the FDA 483 dated 3/13/2014.

#### **OBSERVATION 9**

Each batch of drug product purporting to be sterile and pyrogen-free is not laboratory tested to determine conformance to such requirements.

Specifically,

Given the observed inadequate environmental controls, testing is deficient in that aseptically filled sterile injectable drug products are released and distributed prior to receiving laboratory results for sterility.

- i. Morphine Sulfate (PF) 0.5 mg/ml in 0.9% Sodium Chloride 1ml fill in a (b) (4) syringe lot #E0833054C was not sent for sterility testing. This batch was processed on 9/24/14 and distributed on 9/25/14.
- ii. Morphine Sulfate (PF) 0.5 mg/ml in 0.9% Sodium Chloride 1ml fill in a (b) (4) syringe lot #E08330552C was sent for sterility testing but results were not received. This lot was processed on 8/19/15 and distributed on 8/19/15.

This is a repeat observation of that written on the FDA 483 dated 3/13/2014.

#### AMENDMENT 1

SEE REVERSE OF THIS PAGE Emily J Orban, Investigator Emilie Kahn, Investigator Gary C Pecic, Chemist/Biologist Lisa T Michel, Chemist/Biologist Syned by: Emily J Orban S  3/21/2016 X Emily J Orban Emily J Orban Emily J Orban Emily J Orban Syned by: Emily J Orban S		EMPLOYEE(S) SIGNATURE	DATE ISSUED
Gary C Pecic, Chemist/Biologist	SEE REVERSE	Emily J Orban, Investigator	3/21/2016
	OF THIS PAGE	Emilie Kahn, Investigator X Emily 1 Orban	
Lisa T Michel, Chemist/Biologist Specify Emlyl Orban 5			1
		Lisa T Michel, Chemist/Biologist Symed by: Emby 1 Orban - 5	3.00

FORM FDA 483 (09/08) PREVIOUS EDITION OBSOLETE INSPECTIONAL OBSERVATIONS PAGE 12 OF 17 PAGES

DATE(S) OF INSPECTION		
2/18/2016-3/16/2016*		
FEI NUMBER 3008213711		
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED		
Paul J. Elmer , President and Owner		
SS		
Getz Rd		
HMENT INSPECTED		
ccing Facility		

#### **OBSERVATION 10**

The operations relating to the processing of penicillin are not performed in facilities separate from those used for other drug products for human use.

Specifically,

Procedures have not been established for the separation of tasks and segregation of personnel handling cephalosporin drug products from those for all other human drug products. For example, on 2/13/15, Cefazolin 2GM added to 5% Dextrose 50ml USP lot #E102E0232R was processed in Suite ISO 5 laminar flow hood ollowed by (b) (4) (Brevital Sodium) 10mg/ml 10ml syringe lo #E6929448C. Suite is dedicated to processing cephalosporin drug products; however, Suite is also used to process these products, as recently as 2/10/16 for Ceftriaxone 1GM in Sterile Water 10ml fill in a (b) (4) syringe lot #E570078M3R.

This is a repeat observation of that written on the FDA 483 dated 3/13/2014.

## **OBSERVATION 11**

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

Specifically,

i. No documentation was provided to support that drug product containers and closures are always received with a Certificate of Conformance or are tested for sterility and endotoxin levels prior to use.

These containers and closures are evaluated by (b) (4)

For example, (b) (4) as used to package HYDROmorphone HCl 0.4mg/ml in 0.9% Sodium Chloride 30ml fill in a (b) (4) vial lot

#### AMENDMENT 1

	EMPLOYEE(S) SIGNATURE	DATE ISSUED
SEE REVERSE	Emily J Orban, Investigator	3/21/2016
OF THIS PAGE	Emilie Kahn, Investigator X Emily 1 Orban	
	Gary C Pecic, Chemist/Biologist	
	Lisa T Michel, Chemist/Biologist Synedby: Embyl Orban-5	CL
	•	

FORM FDA 483 (09/08)

PREVIOUS EDITION OBSOLETE

INSPECTIONAL OBSERVATIONS

PAGE 13 OF 17

DEPARTMENT OF HEALTH AND HUMAN SERVICES		
FOOD AND DRUG	ADMINISTRATION	
DISTRICT ADDRESS AND PHONE NUMBER	DATE(S) OF INSPECTION	
300 River Place, Suite 5900	2/18/2016-3/16/2016*	
Detroit, MI 48207	FEI NUMBER	
(313) 393-8100 Fax: (313) 393-8139	3008213711	
A STATE OF THE STA		
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED		
Paul J. Elmer , President and Owner		
FIRM NAME	STREET ADDRESS	
Pharmakon Pharmaceuticals, Inc.	14450 Getz Rd	
CITY, STATE, ZIP CODE, COUNTRY	TYPE ESTABLISHMENT INSPECTED	
Noblesville, IN 46060-3303	Outsourcing Facility	

#E52105DD25C, however, a Certificate of Conformance was not received for this batch of vials, nor was testing performed by your firm prior to use.

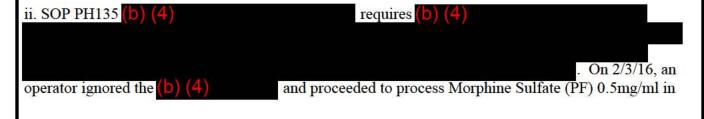
ii. No documentation was provided to support that caps used as closures for sterile drug products packaged in syringes are pyrogen-free. For example, the Certificate of Conformance for the "Tamper Evident Caps (White) Sterile" lot # does not state they are pyrogen-free. These caps were used to package Midazolam HCl 1mg/ml in 0.9% Sodium Chloride 2ml fill in a (b) (4) syringe lot #E091075A4C.

#### **OBSERVATION 12**

The responsibilities and procedures applicable to the quality control unit are not in writing and fully followed.

Specifically,

i. SOP PH117 *Quality Management* states "The quality unit has the authority to approve or reject all components, drug product, closures, packaging material, and labeling." Finished drug products are released and distributed prior to review of the batch record. For example, Morphine Sulfate (PF) 0.5mg/ml in 0.9% Sodium Chloride 1ml fill in a (b) (4) syringe lot #E52418EV11C was processed on 2/3/16 and released and distributed on 2/3/16. This batch record was reviewed by Compliance on 2/15/16 and the Pharmacy Operations Manager on 2/18/16, both members of the Quality Unit.



#### AMENDMENT 1

215 - 2000 - 27 - 0-0 (10-2000)	EMPLOYEE(S) SIGNATURE	G 555-540	DATE ISSUED
SEE REVERSE	Emily J Orban, Investigator	3/21/2016	3/21/2016
	Emilie Kahn, Investigator	X Emily J Orban	
THE SALLINGS	Gary C Pecic, Chemist/Biologist	Emly J Orban	
	Lisa T Michel, Chemist/Biologist	Investigator Signed by: Emly J. Orban -S	q.

FORM FDA 483 (09/08) PREVIOUS EDITION OBSOLETE

INSPECTIONAL OBSERVATIONS

PAGE 14 OF 17

DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION			
DISTRICT ADDRESS AND PHONE NUMBER	DATE(S) OF INSPECTION		
300 River Place, Suite 5900	2/18/2016-3/16/2016*		
Detroit, MI 48207	FEI NUMBER		
(313) 393-8100 Fax: (313) 393-8139	3008213711		
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED	<u> </u>		
Paul J. Elmer , President and Owner			
FIRM NAME	STREET ADDRESS		
Pharmakon Pharmaceuticals, Inc.	14450 Getz Rd		
CITY, STATE, ZIP CODE, COUNTRY	TYPE ESTABLISHMENT INSPECTED		
Noblesville, IN 46060-3303	Outsourcing Facility		

0.9% Sodium Chloride 1ml fill in a (b) (4) syringe lot #E52418EV11C with the wrong active ingredient.

This same SOP requires an operator (b) (4)

On 2/3/16, an employee who was not a pharmacist, nor the QC, reviewed these items for Morphine Sulfate (PF) 0.5mg/ml in 0.9% Sodium Chloride 1ml fill in a (b) (4) syringe lot #E52418EV11C. This employee signed off as a (b) (4) and did not notice the wrong active ingredient had been selected.

This batch of Morphine Sulfate (PF) 0.5mg/ml in 0.9% Sodium Chloride 1ml fill in a (b) (4) syringe lot #E52418EV11C was recalled on 2/11/16 by your firm due to potency results of 2460% received on 2/10/16.

# OBSERVATION 12 OBSERVATION 13

The labeling of your outsourcing facility's drug products does not include information required by sections 503B(a)(10)(A) and (B).

Specifically,

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

Information to facilitate adverse event reporting: <a href="www.fda.gov/medwatch">www.fda.gov/medwatch</a> and 1800-FDA-1088.

Examples of drug products that do not contain this information:

- o Adenosine 1mg/ml
- o Bupivacaine HCL 0.125%
- Promethazine HCL 25mg
- o Heparin 25,000 USP Units

#### AMENDMENT 1

	EMPLOYEE(S) SIGNATURE		DATE ISSUED
SEE REVERSE	Emily J Orban, Investigator	3/21/2016	3/21/2016
OF THIS PAGE	Emilie Kahn, Investigator	X Emily J Orban	
	Gary C Pecic, Chemist/Biologist	Emly J Orban Investigator	
	Lisa T Michel, Chemist/Biologist	Signed by: Emily J. Orban -S	

FORM FDA 483 (09/08) PREVIOUS EDITION OBSOLETE PAGES

INSPECTIONAL OBSERVATIONS

PAGE 15 OF 17

DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION					
DISTRICT ADDRESS AND PHONE NUMBER	DATE(S) OF INSPECTION				
300 River Place, Suite 5900	2/18/2016-3/16/2016*				
Detroit, MI 48207 (313) 393-8100 Fax:(313)393-8139	FEINUMBER 3008213711				
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED	•				
Paul J. Elmer , President and Owner					
FIRM NAME	STREET ADDRESS				
Pharmakon Pharmaceuticals, Inc.	14450 Getz Rd				
CITY, STATE, ZIP CODE, COUNTRY	TYPE ESTABLISHMENT INSPECTED				
Noblesville, IN 46060-3303	Outsourcing Facility				

## **OBSERVATION 13**

#### **OBSERVATION 14**

Your outsourcing facility has not submitted a complete report to FDA identifying all products compounded at your facility during the previous six months as required by section 503B(b)(2)(A). Specifically,

The following Some examples of products that you stated to have were compounded and were not identified on your report dated December 11, 2015:

- Sodium Citrate 4% injection
- Tetracaine 0.5% injection
- Nalbuphine 10mg/ml injection
- Norepinephrine Bitartrate 8mg injection
- Norepinephrine Bitartrate 16mg injection
- · Morphine Sulfate Oral Solution 1mg liquid
- Ropivacaine HCL 0.5% injection
- Sodium Phosphate 15mMOL injection
- Sodium Phosphate 3mMOL injection
- Labetalol 5mg/ml
- Norepinephrine Bitartrate 4mg (16 meg/ml) injection
- Phenylephrine HCL 400mcg
- Nitroglycerin 50mcg/ml injection
- Neostigmine 1mg/ml injection
- Sufentanil Citrate/Bupivacaine 0.4mcg/0.1% injection

## \*DATES OF INSPECTION

2/18/2016(Thu),2/19/2016(Fri),2/22/2016(Mon),2/23/2016(Tue),2/24/2016(Wed),2/25/2016(Thu),2/26/2016(Fri),3/09/2016(Wed),3/10/2016(Thu),3/11/2016(Fri),3/15/2016(Tue),3/16/2016(Wed)

#### AMENDMENT 1

	EMPLOYEE(S) SIGNATURE		DATE ISSUED
SEE REVERSE	Emily J Orban, Investigator	3/21/2016	3/21/2016
	Emilie Kahn, Investigator	X Emily J Orban	
	Gary C Pecic, Chemist/Biologist	Emly J Orban Investigator	
	Lisa T Michel, Chemist/Biologist	Signed by: Emily 3. Orban -S	

FORM FDA 483 (09/08) PREVIOUS EDITION OBSOLETE INSPECTIONAL OBSERVATIONS PAGE 16 OF 17 PAGES

#### DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION DISTRICT ADDRESS AND PHONE NUMBER 300 River Place, Suite 5900 2/18/2016-3/16/2016\* FEI NUMBER Detroit, MI 48207 3008213711 (313) 393-8100 Fax: (313) 393-8139 NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED Paul J. Elmer , President and Owner STREET ADDRESS Pharmakon Pharmaceuticals, Inc. 14450 Getz Rd CITY, STATE, ZIP CODE, COUNTRY TYPE ESTABLISHMENT INSPECTED Noblesville, IN 46060-3303 Outsourcing Facility

3/21/2016

X Emilie Kahn Emilie Kahn

Signed by: Emilie E. Kahn -S

#### AMENDMENT 1

SEE REVERSE

EMPLOYEE(S) SIGNATURE Emily J Orban, Investigator OF THIS PAGE | Emilie Kahn, Investigator Gary C Pecic, Chemist/Biologist Lisa T Michel, Chemist/Biologist

X Emily J Orban Emly J Orban Investigator Signed by: Emly J. Orban -S DATE ISSUED 3/21/2016

FORM FDA 483 (09/08)

PREVIOUS EDITION OBSOLETE

INSPECTIONAL OBSERVATIONS

PAGE 17 OF 17