	LTH AND HUMAN SERVICES  IG ADMINISTRATION
DISTRICT ADDRESS AND PHONE NUMBER	DATE(S) OF INSPECTION
404 BNA Dr., Bldg. 200, Ste. 500	6/14/2016-6/30/2016*
Nashville, TN 37217-2597	FEI NUMBER
(615) 366-7801 Fax: (615) 366-7802	1051570
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED	
Mark F. Binkley , Owner	
FIRM NAME	STREET ADDRESS
Health & Wellness Compounding Pharmacy	329 21st Ave N, Suite 3
CITY, STATE, ZIP CODE, COUNTRY	TYPE ESTABLISHMENT INSPECTED
Nashville, TN 37203-1839	Producer of Sterile Drugs
This document lists observations made by the EDA representative(s	during the inspection of your facility. They are inspectional

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**

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

Specifically,

Your firm does not depyrogenate glassware used for mixing drug products intending to be sterile.

## \*DATES OF INSPECTION

6/14/2016(Tue),6/15/2016(Wed),6/16/2016(Thu),6/20/2016(Mon),6/21/2016(Tue),6/29/2016(Wed),6/30/2016(Thu)

6/30/2016

	X Meocha V Whaley	
•	Meocha V Whaley	0
	Investigator	
	Signed by: Meocha V. Whaley -S	

	EMPLOYEE(S) SIGNATURE		DATE ISSUED
	Zada L Giles, Investigator Meocha V Whaley, Investigator		6/30/2016
		X Zada L Giles	
		Zada L Giles Investigator Signed by. Zada L. Giles -S	