	LTH AND HUMAN SERVICES JG ADMINISTRATION	
DISTRICT ADDRESS AND PHONE NUMBER	DAYE(S) OF INSPECTION	
555 Winderley Place, Suite 200	4/23/2018-4/25/2018	
Maitland, FL 32751	FEI NUMBER	
(407)475-4700 Fax: (407)475-4768	3006899675	
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED		
Joseph S. Corgan, Owner and Pharmacist-In	n-Charge	
FIRM NAME	STREET ADDRESS	
Home Care Pharmacy of Palm Coast, Inc.	6 Florida Park Dr N Ste A	
CITY, STATE, ZIP CODE, COUNTRY	TYPE ESTABLISHMENT INSPECTED	
Palm Coast, FL 32137-3891	Producer of non-sterile drug products	

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 OBSERVED: OBSERVATION 1

You produced hazardous drugs without providing adequate containment, segregation and cleaning of work surfaces to prevent cross-contamination.

Specifically,

On 04/24/2018, I observed the production of prescription (b) (6) (estrogen and testosterone vaginal cream) and Methimazole 2.5mg/0.1mL, Lot 042418A, used in the filling of prescription # (b) (6). The scale was not cleaned in between the weighing of ingredients, including the active ingredients: methimazole, estrogen, and testosterone. In addition, the hood used to produce these drug products was not cleaned in its entirety in between the production of each drug product.

OBSERVATION 2

You produced beta-lactam drugs without providing adequate containment, segregation and cleaning of work surfaces to prevent cross-contamination.

Specifically,

Beta-lactam drug products are produced in the same hood as other drug products without appropriate segregation and cleaning of the hood and equipment. For example, on 04/17/18, your firm produced prescription # (b) (6) for Amoxicillin 125mg/mL followed by prescription # (b) (6) for Progesterone,

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Maitland, FL (407) 475-470	32751 0 Fax: (407)475-4768		3006899675	
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	AL TO WHOM REPORT ISSUED	0 225		
Joseph S. Con	rgan, Owner and Pharmacist-	In-Charge		
PC774/3472/AUV-0102.70	armacy of Palm Coast, Inc.	NAME OF THE OWNER OF THE PARTY	N Sto A	
CITY, STATE, ZIP CODE, COUN		6 Florida Park Dr N Ste A		
Palm Coast, 1	FL 32137-3891	Producer of non-sterile drug products		oducts
OBSERVATION You used a non Specifically,		t in the formulation of a	drug product.	
(b) (4) drug products. I 250mg/mL, pre) system. This water has bee For example, (b) (4) watescription # (b) (6) and Glutarale	er was used in the form	ulation for Potassiu	ım Bromide
William St. Co.	EMPLOYEE(S) SIGNATURE			DATE ISSUED
SEE REVERSE OF THIS PAGE	Jennifer L Huntington, Inv	restigator		4/25/2018
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