DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION DISTRICT OFFICE ADDRESS AND PHONE NUMBER DATE(S) OF INSPECTION U. S. Food and Drug Administration Florida District 1/23/2017- 2/23/2017 555 Winderley Place Suite 200 Maitland, FL-32751 FEI NUMBER (407) 475-4700 3010922197 Industry Information: www.fda.gov/oc/industry NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT IS ISSUED TO: Gregory G. Gaiser, President and Owner FIRM NAME STREET ADDRESS Complete Pharmacy & Medical Solutions, LLC 5829 NW 158th Street

Miami Lakes, FL 33014

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

TYPE OF ESTABLISHMENT INSPECTED

DURING AN INSPECTION OF YOUR FIRM (I) (WE) OBSERVED:

Observation 1:

CITY, STATE AND ZIP CODE

Results of stability testing are not used in determining expiration dates.

YOU HAVE ANY QUESTIONS, PLEASE CONTACT FDA AT THE PHONE NUMBER AND ADDRESS ABOVE.

Specifically, your outsourcing facility lacked analytical and sterility data to support beyond use dates (BUDs) assigned to sterile compounded drug products. You stated your firm's BUDs are based on literature; however, this information is not specific to your firm's operations (for example, container closure data).

Below are your firm's BUDs that are pre-printed in your firm's batch records which are sometimes (b) (4)

(as stated in you BUD written procedure):

- 1. Human chorionic gonadotropin (HCG) 125 IU/ 0.5 ml, 0.5ml syringe 60 day BUD.
- 2. HCG lyophilized vials all strengths 2 year BUD.
- 3. HCG lyophilized reconstituted vials all strengths no BUD.
- 4. Lipo-Blast #(b) (4), 30 ml vial 3 month BUD.
- 5. MIC #504, 5 ml vial preserved 6 month BUD.
- 6. Ultra Burn #(b) (4), 10 ml vial preserved 6 month BUD.
- 7. Testosterone cyp/prop 180 mg/20 mg, 8 ml vial preserved 6 month BUD.

1 year BUD for the below products with preservative:

- 1. Cyancobalamin #(b) (4), 1mg/ml, 30 ml vial.
- 2. Hydroxycobalamin #(b) (4), 1 mg/ml, 30 ml vial.
- 3. Lipolean #(b) (4) 30 ml vial.
- 4. MIC B6 + B12 #(b) (4) 30 ml vial.
- 5. MIC B12 #(b) (4), 10 ml vial.
- 6. Lipo-Vite #(b) (4), 30 ml vial.
- 7. Lipolean #(b) (4) 30 ml vial.

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EMPLOYEE(S) SIGNATURE

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

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FORM FDA 483 (9/08) PREVIOUS EDITION OBSOLETE

INSPECTIONAL OBSERVATIONS

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DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION

DISTRICT OFFICE ADDRESS AND PHONE NUMBER

U. S. Food and Drug Administration Florida District
555. Winderley-Place-Suite-200

Maitland, FL 32751
(407) 475-4700

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

NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT IS ISSUED

TO: Gregory G. Gaiser, President and Owner

STREET ADDRESS

FIRM NAME

Complete Pharmacy & Medical Solutions, LLC

S829 NW 158th Street

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- 8. Lipo-B #(b) (4), 30 ml vial.
- 9. Super MIC B12 #(b) (4) 30 ml vial.
- 10. MIC #(b) (4), 30 ml vial.
- 11. Lipolean #(b) (4), 30 ml vial

Observation 2

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

- A. Specifically, the drug product label with the information required by section 503B(a)(10)(A) is not included on the following product: HCG 125 IU/0.5 ml, 0.5 ml pre-filled syringe.
- B. In addition, the following information is not found on your drug product labels:

The statement, "Office Use Only".

Examples of drug products that do not contain this information:

- 1. HCG 11,000 units injectable.
- 2. Cyanocobalamin (#(b) (4)) 1 mg/ml injectable.
- 3. MIC B6+B12+L carnitine (#(b) (4)) injectable.
- 4. Hydroxycobalamin (#(b)(4)) 1 mg/ml injectable.
- 5. Lipolean (#(b) (4)) injectable.
- 6. Lipo-vite (#(b) (4)) injectable.
- 7. Lipo-B (#(b) (4)) injectable.
- 8. Lipo-Blast (#(b) (4)) injectable.
- 9. BLT 20% 8% 6% cream.
- 10. BLT 20% 12% 12% cream.
- 11. HCG/methycobalamin/inositol (#(b) (4) tablet.
- 12. Vardenafil troche.

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2/23/17

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INSPECTIONAL OBSERVATIONS

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DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION

DISTRICT OFFICE ADDRESS AND PHONE NUMBER U.S. Food and Drug Administration Florida District DATE(S) OF INSPECTION

555 Winderley Place Suite-200-

1/23/2017- 2/23/2017

Maitland, FL 32751 (407) 475-4700

FEI NUMBER

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

3010922197

NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT IS ISSUED

TO: Gregory G. Gaiser, President and Owner

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The statement, "This is a compounded drug" and "Not for Resale".

Examples of drug products that do not contain this information:

- Yohimbine/caffeine 2 mg/50 mg capsule.
- 2. Yohimbine/caffeine 4 mg/50 mg capsule.
- 3. Ultra Burn 25/50/1/33/33.3/33.3/2.2/66.6/50/60 capsule.
- B. The following information is not found on your drug product container labels:

Information to facilitate adverse event reporting: www.fda.gov/medwatch and 1-800-FDA-1088.

Examples of drug products that do not contain this information:

- 1. BLT 20% 8% 6% cream.
- 2. Yohimbine/caffeine 4mg/50mg capsules.
- 3. Yohimbine/caffeine 2mg/50mg capsules.
- 4. BLT 20% 12% 12% cream.
- HCG/methycobalamin/inositol (#^{(b) (4)}) tablet.
- 6. Vardenafil troche.
- 7. Ultra Burn 25/50/1/33/33.3/33.3/2.2/66.6/50/60 capsules.

EMPLOYEE(S) SIGNATURE

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