			ALTH AND HUMAN SERVICES RUG ADMINISTRATION	the required 48	box to generate 3 statement on page	
DISTRICT OFF	CE ADDRESS AND PHONE NUMBER	III III S S III II II	TOTAL OF SMICE SINCE SINCE SINCE	1 for medical d ATE(S) OF INSPECTION	evice observations.	
US. Custom		₹	9000	The second control of the second seco		
200 Chestnut St, Rm 900				7/22/2019-8/09/2019*		
Philadelphia, PA 19106				EI NUMBER		
215-597-439		3	3006708880			
	rmation: www fda.gov/oc/indu .E OF INDIVIDUAL TO WHOM REPO			and the second of the second o	*	
TO: Jaime I	Della Paula					
FIRM NAME	5 (2007) (36-57) (16-67) (16-57) (16-57)		STREET ADDRESS			
Rapid Equin	e Solutions, LLC		31-A Mount Pleasant Dr	ive		
CITY, STATE AN			TYPE OF ESTABLISHMENT INSPECTED			
Aston, PA 1	9014		Producer of sterile and n	on-sterile drug produc	ets	
OBSERVATION: OBSERVATION OBJECTION OF YOU HAVE ANY	S; AND DO NOT REPRESENT A FII OR HAVE IMPLEMENTED, OR F	NAL AGENCY DETERMINATI PLAN TO IMPLEMENT COR SENTATIVE(S) DURING THE DA AT THE PHONE NUMBER	ATIVE(S) DURING THE INSPECTION REGARDING YOUR COMPLIAN RECTIVE ACTION IN RESPONSE INSPECTION OR SUBMIT THIS INFORMATION ADDRESS ABOVE.	CE. IF YOU HAVE AN OBJ TO AN OBSERVATION, Y	ECTION REGARDING AN YOU MAY DISCUSS THE	
OBSERV	ATION 1					
		for distribution do	not include appropriate l	aboratory determin	nation of	
			f each active ingredient p	The state of the s		
euthanized		on 06/05/2019 to c	t#20190509-11, BUD 11 adverse reaction in 3 ho onduct chemical analysis			
Amount to	ltrazuril detected:					
	Average (mg/mL)	Amount Declared	% Declared			
Sub 15a	13.5mg/mL	416mg/mL	3%			
Sub17a	11.2mg/mL	416mg/mL	3%			
Amount py	rimethamine detected:					
Sub	Average (mg/mL)	Amount Declared	d % Declared			
Sub15a	361 mg/mL	17 mg/mL	2122%			
Sub17a	307 mg/mL	17 mg/mL	1808%			
	EMPLOYEE(S) SIGNATURE	AMENI	DMENT 1 EMPLOYEE(S) NAME AND TITLE (F	Print or Type)	DATE ISSUED	
SEE REVERSE	Claring to the	gitally signed by Christina K. Theodorou -S				
OF THIS PAGE	Theodorou -S	gitally signed by Cristina N. Theodorou - S V: C=US, Government, ou=HHS, I=FDA, ou=People, 9.2342.19200300.100.1.1=2001912888, I=Christina K. Theodorou - S ste: 2019.10.18 16:18:58-04'00'	Christina K. Theodorou, Invest	igator	08/09/2019	

j	DEPARTMENT OF HEALTH AND HUMAN SERVICE FOOD AND DRUG ADMINISTRATION	Use this check box to generate the required 483 statement on page 1 for medical device observations.		
DISTRICT OFFICE ADDRESS AND PHONE NUMBER		DATE(S) OF INSPECTION		
US. Custom House 200 Chestnut St, Rm 900	7/22/2019-8/09/2019*			
Philadelphia, PA 19106 215-597-4390	* 1			
Industry Information: www.fda.gov/oc/industry	3006708880			
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT	IS ISSUED			
TO: Jaime Della Paula				
FIRM NAME	STREET ADDRESS			
Rapid Equine Solutions, LLC 31-A Mount Pleasant		Drive		
CITY, STATE AND ZIP CODE	TYPE OF ESTABLISHMENT I	NSPECTED		
Aston, PA 19014	Producer of sterile and	Producer of sterile and non-sterile drug products		

OBSERVATION 2

Buildings used in the manufacture, processing, packing or holding of drug products are not free of infestation by rodents, birds, insects and other vermin.

Specifically, during the walkthrough of your facility on 07/22/2019, approximately three insects where observed in the Laboratory Room which is adjacent to the ISO7 classified anteroom and non-sterile production anteroom. A roll of fly tape was also observed to be hanging from the ceiling near the sinks in the laboratory room. The following drug products were produced on that day: Folic Acid 10 mg/mL (b) (4) Lot#20190722-1, BUD: 01/18/2020, L-Carnitine 200 mg/mL (b) (4) Lot#20190722-4, BUD: 10/20/2019, Omeprazole 2g/15 mL Bismuth Salicylate 3 g/15 mL(b) (4) Paste, Lot#20190722-9, BUD:01/18/2020 and Dantrolene Suspension 100 mg/ml(b) (4) Lot#20190722-11, BUD: 08/21/2019

OBSERVATION 3

Aseptic processing areas are deficient regarding the system for cleaning and disinfecting the room and equipment to product aseptic conditions.

You have not established if the current cleaning method is capable of removing residuals of API, cleaning and sanitizing agents and objectionable organisms from multi-use equipment and utensils used to produce sterile products.

AMENDMENT 1

SEE REVERSE

Christina K. Theodorou -S Cn=Christina K. Theodorou -S Date: 2019.10.18 16:19:33 -04'00'

EMPLOYEE(S) SIGNATURE

Digitally signed by Christina K. Theodorou - S DN: c=US, o=U.S. Government, ou=HHS, ou=FDA, ou=People, 0.9.2342.19200300.100.1.1=2001912888,

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

Christina K. Theodorou, Investigator

DATE ISSUED

08/09/2019

			ALTH AND HUMAN SERVICES RUG ADMINISTRATION	the required 48	box to generate 3 statement on page evice observations.
DISTRICT OFFICE	ADDRESS AND PHONE NUMBER	2	Ţ	DATE(S) OF INSPECTION	The state of the s
US. Custom House 200 Chestnut St, Rm 900			7/22/2019-8/09/2019*		
Philadelphia, PA 19106 215-597-4390			FEI NUMBER		
215-597-4390 Industry Information: www.fda.gov/oc/industry			3006708880		
	OF INDIVIDUAL TO WHOM REPO				
To: Jaime Del	la Paula		<u> </u>		
FIRM NAME			STREET ADDRESS		
Rapid Equine S			31-A Mount Pleasant D		
CITY, STATE AND Z			TYPE OF ESTABLISHMENT IN		held to a
Aston, PA 190	14		Producer of sterile and	non-sterile drug produc	ets
•		t contamination or r	nix-ups are deficient reg	garding operations i	related to aseptic
20190724-2 a the (b) (4) h of drug produ	and Folic Acid 50mg/n ood away from the ISO act after production pro	nL Batch # 201907 O7 HEPA filter. No ocesses have compl		ecur on a stainless-s reportedly used to o	teel table next to cover containers
used to produ Non-sterile fo	serial(b) (4) (used ace drug products are le	ocated in a room that used during (b) (4)	serial (b) (4) serial (b) (4) g products and sterilizing at lacks environmental corocessing and transfer l	and (b) (4 g and depyrogenation controls to prevent of	ng glass vials contamination.
		AMEN	NDMENT 1		
100000	EMPLOYEE(S) SIGNATURE		EMPLOYEE(S) NAME AND TITLE	(Print or Type)	DATE ISSUED
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	D	EPARTMENT OF HE	ALTH AND HUMAN SERVICES	Use this check	box to generate		
		FOOD AND DE	RUG ADMINISTRATION		3 statement on page evice observations.		
	ADDRESS AND PHONE NUMBER			DATE(S) OF INSPECTION			
US. Custom House 200 Chestnut St, Rm 900			7/22/2019-8/09/2019*				
Philadelphia, PA 19106			FEI NUMBER				
215-597-4390 Industry Information: www.fda.gov/oc/industry				3006708880			
	F INDIVIDUAL TO WHOM REPORT IS	SISSUED	26				
TO: Jaime Dell	a Paula						
FIRM NAME	And the state of t		STREET ADDRESS				
Rapid Equine Solutions, LLC 31-A Mount Pleasant			rive				
CITY, STATE AND Z			TYPE OF ESTABLISHMENT IN				
Aston, PA 1901	ston, PA 19014 Producer of sterile and		Producer of sterile and	d non-sterile drug products			
Clothing of personnel engaged in the production of drug products is not appropriate for the duties they perform. Specifically, non-sterile gowning articles are worn by the operators during the cleaning of surfaces and during the production of drug products in the sterile cleanroom. Gowning articles consist of a non-sterile half surgical mask (ear loop style), non-sterile face mask which covers the head and neck, a non-sterile non-shedding knee length frock that snaps closed in the front which is worn over scrubs which are worn off the street. On 07/24/2019, I observed the production of Aspirin 40% (Sodium Salicylate 400mg/mL) Batch # 20190724-2 and Folic Acid 50mg/mL Batch # 20190724-3.							
OBSERVATION 6 The batch production and control records are deficient in that they do not include documentation of the accomplishment of each significant step in manufacturing, processing, packing, and holding. Specifically, your firm uses the (b) (4) computer system to create and maintain production records. Batch templates are printed out and each page is individually placed into plastic zip closure bags for reference during sterile production procedures. Operators record information, processing notes and data(b) (4) (b) (4) test results) with a dry erase marker on the bag near the appropriate section, on the appropriate page of the batch record. At the end of drug production, the operator(b) (4) (4) This could occur on the same day or the next day depending on when operations started. Additionally, there is no second person check of the weights of API and excipients measured before mixing procedures begin.							
		AMEND	MENT 1				
	EMPLOYEE(S) SIGNATURE		EMPLOYEE(S) NAME AND TITLE	(Print or Type)	DATE ISSUED		
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	DEP/	ARTMENT OF HE	ALTH AND HUMAN SERVICES		box to generate	
		FOOD AND DE	RUG ADMINISTRATION		33 statement on page device observations.	
	RESS AND PHONE NUMBER		1	DATE(S) OF INSPECTION		
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	n: www.fda.gov/oc/industry	SUED	23			_
TO: Jaime Della P	aula					
FIRM NAME			STREET ADDRESS			
Rapid Equine Solu	Rapid Equine Solutions, LLC 31-A Mount Pleasant			rive		
CITY, STATE AND ZIP C	TY, STATE AND ZIP CODE TYPE OF ESTABLISHMENT			NSPECTED		
Aston, PA 19014	Aston, PA 19014 Producer of sterile an			non-sterile drug produ	cts	
process and the assurance level. 400mg/mL) Bat	firm has not demonstrate b) (4) process for For example, the firm proch # 20190724-2 and Fol (4) at (b) (4)	or injectable o oduced injecta	drugs, produce drug prod able drugs such as Aspir	ducts with an accepting 40% (Sodium	otable sterility Salicylate	i
followed. Specifically, rev firm is not conductive 2/25/20 BUD: 01/18/202	on 8 ribing the calibration of in iew of the Certificate of A acting cartridge calibration 115, section 8.3.1.2. The in 20, L-Carnitine 200 mg/m ate 400mg/mL) Batch # 2	Analysis for (bon per SOP P- following dru	Cartridge 604 Testing Via the (b) ag products Folic Acid 10 ot#20190722-4, BUD: 1	s lot#(b) (4) rev (4) 0 mg/mL (b) (4) I 0/20/2019, and As	ealed that the System, vo	
CEE	LITTISUITIA N. DN: c=US, o=U.S ou=FDA, ou=Pec	oy Christina K. Theodorou -S Government, ou=HHS,	DMENT 1 EMPLOYEE(S) NAME AND TITLE (Christina K. Theodorou, Inves		DATE ISSUED 08/09/2019	