	DEPARTMENT OF HEAL FOOD AND DRUG			ES	
DISTRICT ADDRESS AND PHON	ssandphonenumber arklawn Drive, Room 2032		DATE(S) OF INSPECTION 8/27/2018-8/31/2018		
	kville, MD 20857		FEI NUMBER		
			3002809	9586	
NAME AND TITLE OF INDIVIDUA			•		
Mr. Pradipta	Swain, Vice President Operat	STREET ADDRESS			
Sun Pharmaceu	ntical Industries Ltd.	Halol - Baroda Highway			
	nt, 389350 India	Type establishment inspected Drug Manufacturer			
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 INSPEC LABORATORY	TION OF YOUR FIRM WE OBSERVED: SYSTEM				
OBSERVATION 1 Laboratory controls do not include the establishment of scientifically sound and appropriate test procedures designed to assure that drug products conform to appropriate standards of identity, strength, quality and purity.					
For example, electronic data for by (4) mg exhibit batch by (5) (4) for 0-month stability shows: dissolution at buffer stage L1 was conducted on 9/26/15 with results for the sampling time point at 5 hours, to have a minimum of (5) hours, to have a minimum of (6) hours, to have a minimum of (7) hours, to have a minimum of (8) hours, to have a minimu					
OBSERVATION 2 Procedures designed to prevent objectionable microorganisms in drug products not required to be sterile are not followed.					
SEE REVERSE OF THIS PAGE	EMPLOYEE(S) SIGNATURE  Angela E Glenn, Investigator Sarah Ibrahim, FDA Center En Employee of Other Federal Ac	mployee o	r	Sarah Ibrahim FDA Center Employee or Employee of Other Federal Agencies  X Date Signed 06-31-2016 16 46 49	DATE ISSUED 8/31/2018

INSPECTIONAL OBSERVATIONS

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PREVIOUS EDITION OBSOLETE

DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION					
DISTRICT ADDRESS AND PHONE NUMBER	DATE(S) OF INSPECTION				
12420 Parklawn Drive, Room 2032	8/27/2018-8/31/2018				
Rockville, MD 20857	FEI NUMBER				
	3002809586				
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED					
Mr. Pradipta Swain, Vice President Operations					
FIRM NAME	STREET ADDRESS				
Sun Pharmaceutical Industries Ltd.	Halol - Baroda Highway				
CITY, STATE, ZIP CODE, COUNTRY	TYPE ESTABLISHMENT INSPECTED				
Halol, Gujarat, 389350 India	Orug Manufacturer				

To date, no testing for burkholderia cepacia has been performed on 11 of the 12 products identified as having high content. On 3/14/17, you established Raw Material Specification Report WT001-BCC to test utilized as a raw material in the manufacture of drug products for the presence of burkholderia cepacia complex. On 5/1/18, you identified 12 finished drug products as having a high content. To date, you have initiated testing for burkholderia cepacia on product one product - gel %.

## **OBSERVATION 3**

The written stability program for drug products does not include sample size based on statistical criteria for each attribute examined to assure valid estimates of stability.

Specifically, on 8/28/18, we observed unused stability samples stored inside a styrofoam cooler, on top of a stool, located inside stability chamber QCC-380, 25 degrees 60% relative humidity. Your Senior General Manager, Quality Non-Sterile Manufacturing, stated these were extra samples remaining from a completed stability study for product coded as Protocol of tablets, mg strength and they were being held in response to a request from the research and development site under protocol number SP1550 in case additional testing is required.

PRODUCTION SYSTEM

## **OBSERVATION 4**

There are no written procedures for production and process controls designed to assure that the drug products have the identity, strength, quality, and purity they purport or are represented to possess.

SEE REVERSE	EMPLOYEE(S) SIGNATURE Angela E Glenn, Investigator		DATE ISSUED 8/31/2018
-	Sarah Ibrahim, FDA Center Employee or Employee of Other Federal Agencies	Sarah Ibrahim FDA Certer Employee or Employee or Other Federal Agencies Signed By 2001;933,03 Date Signed 08-31-2016 16 46 49	
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		<b>TH AND HUMAN SERVIC</b> GADMINISTRATION	ES		
	ctaddress and phone number 20 Parklawn Drive, Room 2032		DATE(S) OF INSPECTION		
Rockville, MI		FEI NUMBER	8/27/2018-8/31/2018 FEI NUMBER		
,		3002809	9586		
l .					
NAME AND TITLE OF INDIVIDUA	AL TO WHOM REPORT ISSUED				
Mr. Pradipta	Swain, Vice President Operat				
	utical Industries Ltd.	street ADDRESS Halol - Baroda Highway			
CITY, STATE, ZIP CODE, COUN		TYPE ESTABLISHMENT INSPECTED			
Halol, Gujara	at, 389350 India	Drug Manufacturer			
operators. On 8	ere is no line clearance required duri /30/18 we observed capsule filling of	of batch (b) (4) of	(b) (4)		
(b) (4)	capsules USP (b) (4) mg being perfor	_			
less than one ho	our and ten minutes, we observed the	e equipment to be int	ermittently operat	ional. During	
this time, we ob	served production staff perform no	less than three manu	al interventions in	an attempt to	
•	g critical alarm. In between these att	•		_	
	hugh the in-line check weight device				
	ning interventions inside the (b) (4)			_	
21.5.7.45	of his head rather than in an appropr				
	and capsules from inside the filling		•		
	requested assistance from the engin				
<u> </u>	nd your Senior General Manager, Q				
	e weight check, they are not rejecte	•			
_	intervention activities performed by	production operator	rs. The same alarr	n occurred	
during producti	on of the same lot on the (b) (4)				
Filling machine	HC-084 was also utilized to produc	e a characterization	batch of (b) (4)	mg	
(b) (4) On	(1-) (4)				
production of th					
production of the	ing product	<b>3.</b>			
QUALITY SYST	rem				
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SEE REVERSE	EMPLOYEE(S) SIGNATURE Angela E Glenn, Investigator	r	I	8/31/2018	
OF THIS PAGE	Sarah Ibrahim, FDA Center Er		Sarah Ibrahim FDA Center Employee or Employee	0/31/2010	
	Employee of Other Federal Ac	gencies	FDA Center Employee or Employee of Other Federal Agencies Signed By 2001;91303 Date Signed 08-31-2018 16 46 49		
FORM FDA 483 (09/08)	PREVIOUS EDITION OBSOLETE INS	PECTIONAL OBSERVATION	ONS	PAGE 3 of 5 PAGES	

	DEPARTMENT OF HEAL FOOD AND DRUG			ES	
12/120 Parklas	one number awn Drive, Room 2032		DATE(S) OF INSPECTION 8/27/2018-8/31/2018		
Rockville, MI			FEINIMBER 3002809586		
			300200	9300	
Mr. Pradipta	Swain, Vice President Operat	ions			
	utical Industries Ltd.	1	Baroda 1	Highway	
city, state, zip code, coun Halol, Gujara	nt, 389350 India	Drug Mai	MENTINSPECTED nufacture	er	
Written procedures are not for the cleaning and maintenance of equipment, including utensils, used in the manufacture, processing, packing or holding of a drug product.  Specifically,  A) You performed equipment cleaning verification activities for a specific number of batches after you identified as a high risk product. During the cleaning verification you did not perform analyses for the detergent residues nor did you perform bio-burden testing. Your Deputy General Manager Quality Assurance stated that you are no longer performing sampling and testing for equipment utilized in the manufacture of drug products and are awaiting commercialization before completing cleaning validation activities.  B)Your Vice President Operations stated that you did not conduct cleaning validation activities for the used inside the capsule filling equipment to remove capsules and used inside the capsule filling equipment to remove capsules and and consequently ensure no risk of cross contamination between drug products.					
Specifically, yo Non-Sterile Mar trending of criti- filling equipmen	ur Head of Operations, (b) (4) Solid I nufacturing stated that you do not he cal alarms raised during production at ID HC-084 during filling of batch	Dosage and ave proced activities,	your Sent lures in pla such as th of (b) (4)	or General Manag	ger, Quality across batch
SEE REVERSE OF THIS PAGE	EMPLOYEE(S) SIGNATURE  Angela E Glenn, Investigator Sarah Ibrahim, FDA Center Er Employee of Other Federal Ag	mployee o	r	Sarah Izrahim FDA Certer Employee or Employee or Other Federal Agencies Symed By 200195130 Z Datle Signed 08-31-2018 16 46 49	8/31/2018

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PREVIOUS EDITION OBSOLETE

## DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION DISTRICT ADDRESS AND PHONE NUMBER 12420 Parklawn Drive, Room 2032 8/27/2018-8/31/2018 Rockville, MD 20857 3002809586 NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED Mr. Pradipta Swain, Vice President Operations STREET ADDRESS Sun Pharmaceutical Industries Ltd. Halol - Baroda Highway TYPE ESTABLISHMENT INSPECTED CITY, STATE, ZIP CODE, COUNTRY Halol, Gujarat, 389350 India Drug Manufacturer Angela E Glenn Investigator Signed By: Angela E. Glenn -S Date Signed: 08-31-2018 16:47:26

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OF THIS PAGE

EMPLOYEE(S) SIGNATURE

Angela E Glenn, Investigator Sarah Ibrahim, FDA Center Employee or Employee of Other Federal Agencies

Sarah Ibrahim FDA Center Employee or Employee of Other Federal Agencies Signed By 2001:591303 Date Signed 08-31-2018 16 46 49 DATE ISSUED 8/31/2018

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