		OF HEALTH AND HUMAN S	SERVICES		
	TADDRESS AND PHONE NUMBER Eighth Street NE		DATE(S) OF INSPECTION 6/19/2017-6/26/2017*		
Atlanta, GA		FEI	FEINUMBER 3012384835		
NAME AND TITLE OF INDIVIDUA	L TO WHOM REPORT ISSUED				
(F)	J Malkin , Chief Executi				
FIRM NAME Sincerus Flor	rida LLC	STREET ADDRESS 3265 W McNa	ah Rd		
CITY, STATE, ZIP CODE, COUN			TYPE ESTABLISHMENT INSPECTED		
Pompano Beach	n, FL 33069-4807	503B Outsou	503B Outsourcing Facility		
observations, and do observation, or have action with the FDA	observations made by the FDA represent not represent a final Agency determining implemented, or plan to implement, con- representative(s) during the inspection tact FDA at the phone number and add	ation regarding your complia prrective action in response t or submit this information t	ance. If you have an objection to an observation, you may dis	regarding an cuss the objection or	
DURING AN INSPEC	TION OF YOUR FIRM I OBSERVED:				
	gned to prevent microbiologi	ical contamination of	drug products purport	ing to be sterile	
are not followed	l.				
Specifically,					
Specifically, yo 5 laminar air flo	ing areas are deficient regard ur monitoring program for cl w hood and ISO 7 (b) (4) roo non-viable air and surface mo on activities.	assified areas within om used to produce st	the (b) (4) , in the the the (b) (4) , in the term of term	cluding the ISO	
(b). Personnel n (b) (4)	nonitoring is not conducted d as part of a sterile operator			ng only includes	
	-	· · · · · ·	· · · · · · · · · · · · · · · · · · ·		
(c). The effective demonstrated the	rough routine (b		s within the cleanroon cleaning process.	i have not been	
OBSERVATIO Procedures desi are not written a	gned to assure that correct la	beling and packaging	materials are used for	drug products	
	EMPLOYEE(S) SIGNATURE			T	
SEE REVERSE OF THIS PAGE	Bonita S Chester, Inve	stigator	6/26 X Bonita 5 Chester Boots 5 Chester Investigator Searce by: Boota 5. Chester -5	DATE ISSUED 6/26/2017	

DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION						
DISTRICT ADDRESS AND PHONE NUMBER	DATE(S) OF INSPECTION					
60 Eighth Street NE	6/19/2017-6/26/2017*					
Atlanta, GA 30309	FEI NUMBER					
(404)253-1161 Fax: (404)253-1202	3012384835					
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED						
Dr. Spencer J Malkin , Chief Executive Officer						
FIRM NAME	STREET ADDRESS					
Sincerus Florida, LLC	3265 W McNab Rd					
CITY, STATE, ZIP CODE, COUNTRY	TYPE ESTABLISHMENT INSPECTED					
Pompano Beach, FL 33069-4807	503B Outsourcing Facility					

Specifically, packaging and labeling procedures that describe the receipt, examination, issuance, and storage of labeling; that describe the operations involved in the packaging and labeling of drug products produced and distributed by your firm have not been established.

OBSERVATION 3

The labels of your outsourcing facility's drug products are deficient.

Specifically,

The correct dosage form is not stated on your product label for Magnesium Sulfate Solution/50ml, as required by section 503B(a)(10)(A).

***DATES OF INSPECTION**

6/19/2017(Mon),6/20/2017(Tue),6/21/2017(Wed),6/22/2017(Thu),6/23/2017(Fri),6/26/2017(Mon)

SEE REVERSE OF THIS PAGE	EMPLOYEE(S)SIGNATURE Bonita S Chester, In	Vestigator 6/26/201 X Bonita S Chester Borita S Chester Investigator Second by: Boota S. Chester -S	DATE ISSUED 6/26/2017			
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