Pearl River, NY 10965

DEPARTMENT	OF HEALTH AND HUMAN	SER\
EOOD	AND DRUG ADMINISTRATIO	N

	LTH AND HUMAN SERV - JG ADMINISTRATION			
DISTRICT OFFICE ADDRESS AND PHONE NUMBER		DATE(S) OF INSPECTION		
158-15 Liberty Ave		8/27/08-10/8/08*		
Jamaica, NY 11433		FEI NUMBER		
718-340-7000		2410662		
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT IS ISSUED				
TO: Michael P. McDermott, Vice President Site	Operations STREET ADDRESS			
FIRM NAME	STREET ADDRESS			
Wyeth Pharmaceutical, Div WyethHolding Corp	401 N. Middleto			
CITY, STATE AND ZIP CODE	TYPE OF ESTABLISHMENT	TYPE OF ESTABLISHMENT INSPECTED		
Pearl River, NY 10965	Mfr of Dietary			
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) (ME) OBSERVED:				
1. Laboratory exam and test methodologies do not appear to be appropriate for their intended use. Specifically, the test method using (b) (4) instruments (b) (4) produced negative trends that report equipment drifts, OOS CV standards and/or invalid results that required a re-test on several mineral lots, but this test method continues to be used, and has not been replaced with a more reliable method.				
2. Failure to use an appropriate scientifical bottles to ensure uniformity of the sealing p method requires testing the integrity of the pressure) over the middle of the seal and vis bottle. No specifications were established fapply or use of measurable tool to evaluate to	process across all seal by applying sually inspecting for the amount of	l plastic bottles. The current pressure (using finger the rim over the mouth of the pressure and dwell time to		
3. Specifications for dietary ingredient(gins (b) (4)) and this monograph requires verificati (tricyclazole) was tested, but COAs for code pesticide, and was not revised to include the responsible for furnishing this information.	on on the supplied (b) (4) do not independent	er's COA that pesticide clude test results for this		
4. In the packaging area, failure to demonstrate all requirements were met. Specifically, as part of Master Packaging Record, specifications for cap adjustments (distance from cap to bottom of sealing head) were established to show proper alignment to the sealer; however adjustments were not documented to support proper set-up. Also, when product changeovers occur bulk materials (to include tablets stored in metal detector challenge bottles) must be removed from the packaging line and destroyed; however there is no evidence that tablets inside metal detector bottles were emptied and removed from the packaging line.				
5. As part of your Master Corrective action posture of the commitment (b) (4) only 4 of 5 corrective action posture action pos				
6. Your hand washing facility does not dispense Specifically, the automatic hand washing sinks floor furnished only cold water.  *DATES OF INSPECTION: 8/27-29/08, 9/3-5, 9-12	s for one side of	men's restroom on the (b) (4)		
		<b>.</b>		
DEVEDOR	JACQUE NAME AND TITLE			

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Warner, CSO

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