05/17/2	001 00:37 787-729-6658	DISTRICT ADDRESS AND PHONE NUMBER	PAGE 17
	·	466 Fernandez Juncos Ave.	
DEPART	MENT OF HEALTH AND HUMAN SERVICES	San Juan, PR 00901	,
	PUBLIC HEALTH SERVICE FOOD AND DRUG ADMINISTRATION	(787) 729-6844	
-			:
N.A.	ME OF INDIVIDUAL TO WHOM REPORT ISSUED	PERIOD OF INSPECTION C.F. NUMBER	
	·	11/9-12/14/2000 2650149	
TO: Ileana Quin	ones	TYPE ESTABLISHMENT INSPECTED	
General Manag		Pharmaceutical Manufacturer	
FIRM NAME	,	NAME OF FIRM, BRANCH OR UNIT INSPECTED	: •
	h Products, LLC.	Same	
STREET ADDRES		STREET ADDRESS OF PREMISES INSPECTED Same	
Ruta 686, Km		CITY AND STATE (Zip Code)	- 4.
CITY AND STATE Manati, PR 00		Same	- 11 1
•	CTION OF YOUR FIRM WE OBSERVED:		
I Since	February 1999 all stability testing of batc	hes of Gentocin otic solution (Gentan	nicin Sulfate
(3mg	/ml) w/ Betamethasone Valerate (1mg/ml)) has revealed a contamination of the	product in the form
	unknown peak in the Betamethasone Vale		
	uded, in October 2000, that the product wa		
	of 5,800 ug/bottle (.77mg/ml). They also		
	to adhere the label to the product container		
	sure the safety and efficacy of the Gentoci		_
	the label causing in the contamination. Fu		
	ing may have on other products, including		
		, Caramyom optimismue solution, win	Cit use tabels with the
same	adhesive.		
		A A A' Di	A CARD *
· 1	nanufacturing process for Mometasone Fu	roate Active Pharmaceutical Ingredie	nt (API) is not
valid	ated in that:		
į !	7771		
a.	There is no validation protocol for the sp	pecine process being validated.	
	771	: in 41_4 41_4 manada d a.a.iG	
b.	There were no predetermined specificat		
•	the validation report as being used durin		the validation datches
	listed in the validation report were manu	ufactured.	
:		V	
C.	Discrepancies between the in-process la		
	observation recorded for the appearance		
	not investigated and resolved. The in-pa		
	specification, and the quality control lab	poratory recorded a result that meets the	he specification.
		v – v – v – v – v – v – v – v – v – v –	
d.	There is no scientific or statistical justification	ication for the sampling plan used dur	ing the validation
	effort.	Ÿ	
			* * * * * * * * * * * * * * * * * * *
· c.	The location and size of the analytical s	amples taken during the validation eff	fort to support the
	validation are not described in the validation		
:		•	
	EMPLOYEE(S) SIGNATURE	EMPLOYEE(S) NAME AND TITLE (Primer Type	DATE ISSUED 12/14/2000
EE REVER	SE OF DEWNERSON	Steven B. Barber, Investigator Wanda J. Torres, Investigator	14/14/2000
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	NA	ME OF IN	SIVIDUAL TO WHOM KE	PORT ISSUED		12/14/2000	2650149	· !	
ro: Ile	eana Quif	ones			ı				
TITLE	OF INDIVID	UAL '	,			ESTABLISHMENT IN		•	
	rai Manag	ger		· · · · · · · · · · · · · · · · · · ·	1	OF FIRM, BRANCH		TEN	
FIRM	NAME	h Drodu	ets 11C		Sam		on dan mar ed		
			cts, LLC.			ET ADDRESS OF PRE	MISES INSPECT	EO	
	ET ADDRES 686, K.m				Sam				
	ND STATE	1			ĊſŢŶ	AND STATE (Zip Code))		
Mans	ati, PR 00	674			Sam		· .	•	
1410111	f.	The	sampling thief re	quired by the sar	mplingn	rocedures was	not used by	the operato	rs taking the
,	I.	The	ocess sample or	quired by the sm	them	According to th	e onerators	they used s	small plastic
		ın-pr	ocess sample or	even available to) MCHE 7	secording to di	ic operators,	, they about a	i siriari prastio
		spati	ıla to sample froi	m the top of the c	arum.			1	
		,			_ '				
	g.	30%	of Mometasone	Furoate lots man	ufacture	d in 2000 need	led to be rep	rocessed in	order to meet
		spec	ifications.				<i>j</i>	,	
							_		
2	The i		ation conducted	recording the fai	luce of fi	ve lots of Mon	netasone Fu	roate (MMF	F-E) API to
3.	I ne i	nvestig	MION CONGRETE	regarding the lar	T _4 \(\) 3.4	ACC IC COOL AL	d not meet t	he specifics	tions for
,	meet	specifi	cations has not b	een completed.	TOI O-M	ML-E-0001 m		ne specinea	4
	appe	rance	in March 2000 at	nd was reprocess	ed. Sinc	e March 2000,	tour addition	onal lots did	not meet
	sneci	fication	as and were repro	cessed. The inv	estigatio	n as to why the	process sp	oradically fa	iled to
	apoo.	ca Mo	metasone Furoat	e that meets its s	necificat	ions has not be	en conclude	ed.	
	prou	ICG IVIO	Iticiasono i aroat	,	P-0111				
			re-processing pro	and was for More	otacone.	Furnata (MME	EF) is not v	alidated bec	ange.
	Your	timn's	re-processing pro	ocedure for Mon	ICIASOUC	I WIDAIC (IVIIVA	12) 13 1101 11	u1104104 000	dano, ,
^								:	
	a	there	e is no specific va	alidation protoco	l for the	process being v	validated	••	· -
	ъ.	the s	eneral validation	i protocol used l	ists as th	e acceptance c	riteria "All 1	reprocessed	batches must
i	.	com	nly with the O.C.	specifications for	or the pro	oduct" even the	ough the rep	rocess proce	edure is a
		Juni	ication of a porti	on of the original	l process	that yielded n	roduct that	did not com	oly with the
		aupi	ication of a horn	on of the origina	i process	mut Jioidou p		,	
		Q.C	specifications fo	r the product.					
					_				1
	¢.	there	is no justification	on for the sampli	ng plan u	ised to determi	ne the re-pr	ocessed pro	auct met
			ifications.						* y
		- Speci							
_	A	.	ial Effectiveness	(AE) Mathod Vo	alidation	for Nasonex N	Iasal Spray	(KTL)	and the second second
5.				(VE) Intention As	AII GALLOIA	LOT THEOLIGICAL T			
,	is no	t adequ	atc, as follows:	· ·		;	9 11		, , , , , , , , , , , , , , , , , , ,
		1 .				-	5 • •		
	a. t	here is	no documentatio	n showing the in	clusion	if negative con	trois and a		
	eran	stain o	of the test microo	rganisms as part	of the v	alidation.			5 4.275
	0			-			1		
1							<u>'</u>		
						EMPLOYEE(S) NAME	AND TITLE (Page)	or Type)	DATE ISSUED
		;	EMPLOYEE(S) SIGNAT	UNI		Steven B. Barber,		- 1/2-7	12/14/2000
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,	THIS PA		1/2/1			1	**************************************	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- L. F. J. J. J. J.
)		, · .	1.6		•/	1 . \$1	19 10	4.5	1. 1.
	11 B B B B B B B B B B B B B B B B B B B	veroe;	Topologia continue	MAVEGUEED		INSPECTIONAL O	BSERVATIONS	3	PAGE 2 OF 5 PAGES
FOR	M FDA 48:	(5/8 5).	PREYIOUS EDITION	MUL OF ABERT		7.5		· •	

05/17/2001 00:37 787-729-6658 PUBLIC HEALTH SERVICE FOOD AND DRUG ADMINISTRATION	CB (787) 729-6844	PAGE	19
NAME OF INDIVIDUAL TO WHOM REPORT ISSUED	PERIOD OF INSPECTION C.F. NUMBER 11/9-12/14/2000 2650149	TH V	- // // // / / / / / / / / / / / / / /
TU, []eana Quiñones TITLE OF INDIVIDUAL General Manager	TYPE ESTABLISHMENT INSPECTED Pharmaceutical Manufacturer		
FIRM NAME Schering-Plough Products, LLC.	NAME OF FIRM, BRANCH OR UNIT INSPECTED Same		
STREET ADDRESS Ruta 686, Km 0.5	STREET ADDRESS OF PREMISES INSPECTED Same		
CITY AND STATE (2) Code) Manati, PR 00674	CITY AND STATE (Zip Code) Same		·
b. the test is performed using three media, Dextrose Agar and Trypticase Soy Agar. inocula (positive controls) was performed b	However, the confirmation of the	· ·	

According to the firm, the AE method for the new product Nasonex Unscented Nasal Spray (MAA) is considered validated based on the AE method validation for KTL. This validation was completed on 3/96 according to protocol dated 12/85. On 12/98 the firm approved a new SOP (#947.71.00) for the AE method validation. Even when this new SOP includes the use of negative and positive controls as well as the gram stain of test organisms during the AE method validation, the firm has not revalidated the existing AE method for KTL.

Uniformity of Spray Content assay is not always representative of the lot being tested. For example,

- a. The actuator of one of the units of lot 7-KTL-6 being tested for stability testing at the room temperature 18 month stability interval was replaced with a "control" actuator when the original actuator supplied with the unit did not yield results within specifications.
- b. One of the units of lot 0-KTL-110 being tested for release testing was replaced with another unit when the analyst noticed that the "crimp closure" was not sealed properly causing the actuator to have a "slight inclination." An adequate investigation was not conducted to determine if the improperly sealed container/closure system extended to the rest of the lot and what corrective and preventive actions should be implemented.
- c. One of the units of lot 0-KTL-124 being tested for release testing was replaced with another unit when the analyst noticed a defect in the crimp closure system. The unit was replaced with another unit from the same lot. An investigation was not conducted and corrective actions implemented to ensure other units in the same lot did not have the defect.

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HURM FDA 483 (5/85)	PREVIOUS EDITION MAY BE USED	INSPECTIONAL OBSERVATIONS	PAGE 3 OF 5 PAGES

only in Trypticase Soy Agar

95/17/2001 00:37 787-729-6658 PUBLIC HEALTH SERVICE FOOD AND DRUG ADMINISTRATION	San Juan, PR 00901 (787) 729-6844	PAGE 20
NAME OF INDIVIDUAL TO WHOM REPORT ISSUED TO: Ileana Quiñones	PERIOD OF INSPECTION C.F. NUMBER 11/9-12/14/2000 2650149	
TITLE OF INDIVIDUAL General Manager	TYPE ESTABLISHMENT INSPECTED Pharmaceutical Manufacturer	!
Schering-Plough Products, LLC.	NAME OF FIRM, BRANCH OR UNIT INSPECTED Same	:
STREET ADDRESS Ruta 686, Km 0.5	STREET ADDRESS OF PREMISES INSPECTED Same	
DITY AND STATE (Zip Code) Manati, PR 00674	CITY AND STATE (ZIP Code) Same	

- The analytical laboratory is instructed in Doc. No. 145.188.01, in the event of an Out-of-Specification (OOS) test result for the Uniformity of Spray Content for Nasonex that is attributed to a "possible" clogged actuator, to clean actuator with methanol and water. However, the product insert provided with the product instructs the consumer to clean the actuator with "cold water." For example, the uniformity of spray content at the labeled number of actuations test for lot 7-KTL-6 of Nasonex resulted in an OOS at the 24 month 25°C stability interval. The analyst was instructed to "remove he actuator tip, clean the tip with methanol and water and dry it with a stream of nitrogen. The result of the retest after the cleaning was within specification and was reported as the final result.
- The firm's retest procedure for Uniformity of Spray Content/Uniformity of Spray Content at Labeled number of Actuations, Doc. No. 145.188.01, allows the firm to retest units that generate OOS results without supporting information that reveals an assignable cause, or strong possible cause, for the initial OOS result.
- Your firm did not submit NDA Field Alert Report to the San Juan District Office within three working days, as follows:
- after being aware that Nasonex Nasal Suspension (KTL), batch No. 9-KTL-104 rendered above specification result for the osmolality test during the 15-month stability test interval, and;
- after being aware that lot 8-GMP-N-6002 of Gentamicin Sulfate API, which was used to manufacture. Garamycin Ophthalmic Solution, did not meet impurity specifications at the 24 month stability interval.
- The firm detected an unknown "spot" during the TLC identity testing of eighteen lots of Gentamicin 0. Sulfate received from The firm's first corrective action was to change the TLC specifications from "Sample chromatogram agrees with reference standard chromatogram." to " The intensities and R_f values of the three principle spots obtained from the test solution correspond to those obtained from the Standard solution." Therefore, after this change, the firm could ignore a potential quality problem with the Gentamicin Sulfate even after the firm concluded that the fourth "spot" being detected "...is indicative of manufacturing process inconstancy and/or inadequacy of controls during processing."

SEE REVERSE O THIS PAGE	-:	PLOYEE(S)	//		- A	1	Stever	a B. Barbe	EAND TITLE er, Investiga s, Investigat	tor		DATE ISSUED 12/14/2000	
ORM FDA 483 (5/85)	Pf	REVIOUS E	AM HOLYC	Y BE USED			INSPE	CTIONAL	OBSERVATI	ONGER	1000	20 4 - 24 - 2 6 4 4	

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DEPARTMENT OF HEALTH AND HUMAN SERVICES	San Juan, PR 00901	PAGE 21
PUBLIC HEALTH SERVICE FOOD AND DRUG ADMINISTRATION	(787) 729-6844	
NAME OF INDIVIDUAL TO WHOM REPORT ISSUED	PERIOD OF INSPECTION C.F. NUMBER	
	11/9-12/14/2000 2650149	
: Ileana Quiñones		
LE OF INDIVIDUAL eneral Manager	TYPE ESTABLISHMENT INSPECTED	
M NAME	Pharmaceutical Manufacturer	
hering-Plough Products, LLC.	NAME OF FIRM, BRANCH OR UNIT INSPECTED Same	
REET ADDRESS	STREET ADDRESS OF PREMISES INSPECTED	
ıta 686, Km 0.5	Same	
Y AND STATE (Zip Code) anati, PR 00674	CITY AND STATE (ZIP Code) Same	
The firm's second corrective action to the det	estion of the fourth lienable was to all	41 . 777 . 0
which was detecting the immediate sold the	ection of the fourth "spot" was to enminate	the ILC test
which was detecting the impurity with the on	ly justification being "elimination of a non	-compendial tests"
		· ·
. The firm fails to follow procedure No. 145.14	44. Handling of Stability Samples in that t	he initial tection of
stability samples is not being completed with	in the month scheduled and within the	ne munar resume of
constructed stability sevenies. Engagement	mi the mount scheduled and within two w	eeks of receipt for
accelerated stability samples. For example,		
,		
accelerated stability samples for batch No. 9-KTI	L-5, Nasonex Nasal Spray (15 months, 25°	C) were submitted
to the laboratory for weight loss determination of	on 6-7-00. The samples were weighed on	7-10-00 and final
calculations and verifications of the results were	sonducted on 7-13 00. This lot emi-	to determine the
Therefore the unight loss test comments it is to	c conducted on 7-15-00. This lot expirat	ion date was 5/00.
Therefore, the weight loss test corresponding to	the product's expiration date (15-month	time interval) was
performed and verified approximately two month	s after the batch expired.	
accelerated stability samples for batch No. 0-1	WCA-301, Mometamax Ointment (3 mo	nthe 40°C) were
submitted to the laboratory for weight loss deter	mination on 6 10 00. The complex wares	udb, 70 C), were
hut calculations and final warifications were now		weighed on 7-3-00
but calculations and final verifications were perfo	onned on 8-23-00,	••
stability samples for batch No. 0-FWBA-141, I	ntegrilin Injection (3 months, 25°C), were	e submitted to the
laboratory for stability testing on 10-19-00. Final	verification of the results was conducted of	n 11-29-00.
	, , , , , , , , , , , , , , , , , , , ,	
addition a delay form was not completed for hatal	No OVTL 5 Nagaray Name Comments	45 - 0.50(5)
addition, a delay form was not completed for batch	ino. 9-K.IL-3, Nasonex Nasai Spray (15)	months, 25°C)
d batch No. 0-WCA-301, Mometamax Ointment (2	3 months, 40°C) as required in procedure 1	45.144 revision 1
ffective on 6-19-00). According to the procedure,	every time the stability lead-time is not me	t, a delay form
s to be completed.		
		1
observations 1, 6, 7, 10; under co	nsideration	1 db
DESCRIVATIONS 3,9 COPRECTED	BUT DOT VERIFIED	
OBSERVATIONS 2,4,11: CORRECTION		
Correction	is acomused	
STEERZ VATIONS 5,8 : CORRECTION	5 PROMISED BY 12-22-04	9
ENDI OVOSISI SIGNATIDE	EMPLOYEE(S) NAME AND TITLE (Print or Type)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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		DATE ISSUED
	Steven B. Barber, Investigator	DATE ISSUED 12/14/2000
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