	DEPARTMENT OF HEAI FOOD AND DRU	LTH AND HUMA IG ADMINISTRAT		
12420 Parklav	istrict ADDRESS AND PHONE NUMBER 2420 Parklawn Drive, Room 2032 Rockville, MD 20857		DATE(S) OF INSPECTION 11/4/2022-15/4/2022 FEI NUMBER 3013166187	
NAME AND TITLE OF INDIVIDUA	L TO WHAT DEPOST INCLES			
Dr. Yon-Lian				
FIRM NAME SUNNY PHARMTI		Longtan District, 255 Longyuan 1st Rd.; Longtan Dist.		
Taoyuan City,	rry , 32542 Taiwan	TYPE ESTABLISHMENT INSPECTED  Drug & API Manufacturer		
observations, and do observation, or have action with the FDA	observations made by the FDA representative(s not represent a final Agency determination reg implemented, or plan to implement, corrective representative(s) during the inspection or subm ntact FDA at the phone number and address abo	garding your con action in respon nit this informat	mpliance. If you have an object nse to an observation, you may	tion regarding an discuss the objection or
OBSERVATIO	gned to prevent objectionable micro	oorganisms	in drug products not re	quired to be sterile
	s used as an ingredient in pending ctured in February of 2020), and du			solution (exhibit dosage
Your quality unit	approved for production <sup>(b) (4)</sup>	from your	system that is not fit for	use as follows:
	om UDR 2020006, dated February of m, to include a point of use, (b) (4)	2020, ultima stage.	ately identified the prese	nce of B. cepacia in
SEE REVERSE OF THIS PAGE	Bryan L Mcguckin, Investiga	tor		DATE ISSUED 15/4/2022
FORM FDA 483 (09/08)	PREVIOUS EDITION OBSOLETE IN	SPECTIONAL (	DBSERVATIONS	

	DEPARTMENT OF HEAL	TH AND HUMA G ADMINISTRATI		S		
DISTRICT ADDRESS AND PHON	IE NUMBER	G ADMINISTRATI	DATE(S) OF INSE			
12420 Parklas Rockville, MI	awn Drive, Room 2032			)22-15/4/2022		
ROCKVIIIe, M	20037		3013166	5187		
NAME AND TITLE OF INDIVIDUA	AL TO WHOM REPORT ISSUED					
Dr. Yon-Lian	Wu, CEO					
FIRM NAME		STREET ADDRESS		055 -		
SUNNY PHARMTI	ECH INC			, 255 Longyuan	Ist Rd.;	
CITY, STATE, ZIP CODE, COUN	TRY	Longtan Dist. TYPE ESTABLISHMENT INSPECTED				
Taoyuan City	, 32542 Taiwan	Drug & API Manufacturer				
-Your firm does not speciate during (b) (4) testing unless action limits are exceeded. As such, points of use were not sampled going forward to ensure B. cepacia had been removed from your system.  -Your (b) (4) sampling procedures use a (b) (4) step which is not clearly indicated during dispensing of production.  -Initial qualification of your (b) (4) system failed shortly after in 2018, at numerous points of use with microorganisms "to numerous to count (TNTC)". Your only corrective action thus far has been treatment of your (b) (4) system via (b) (4) with (b) (4) water, which is not sufficient to remove biofilm. Your firm failed to requalify the (b) (4) system in a manner that adequately justified resolution of said failure.						
OBSERVATION 2 Equipment and utensils are not cleaned, maintained and sanitized at appropriate intervals to prevent contamination that would alter the safety, identity, strength, quality or purity of the drug product.						
Specifically,						
	BMPLOYEE(S) SIGNATURE				DATE ISSUED	
SEE REVERSE	Bryan L Mcguckin, Investigat	tor			15/4/2022	
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FORM FDA 483 (09/08)	PREVIOUS EDITION OBSOLETE INS	SPECTIONAL O	BSERVATIO	ONS		

FORM FDA 483 (09/08)

	1	DEPARTMENT OF HEAL FOOD AND DRUG			ES	
DISTRICT ADDRESS AND PHONE NUMBER 12420 Parklawn Drive, Room 2032				DATE(S) OF INSPECTION 11/4/2022-15/4/2022		
Rockville, MI		. 2032		FEI NUMBER		
				301316	0187	
Dr. Yon-Lian						
FIRM NAME	•		STREET ADDRESS			
SUNNY PHARMTECH INC		Longtan District, 255 Longyuan 1st Rd.; Longtan Dist.  Type ESTABLISHMENT INSPECTED				
Taoyuan City	<sub>rry</sub> , 32542 Taiwan	1	Drug & API Manufacturer			
1			5 1.		<u> </u>	
During visual inspection of your production line and equipment, used for submission batches and commercial batches, it was explained that a '(b) (4) Hose (b) mm x (b) mm" is used to transfer product from the (b) (l) (l) (l) (l) (l) (l) (l) (l) (l) (l						
This tubing line is not identified in your cleaning validation and is used as a non-dedicated piece of equipment. Cleaning description of this equipment line by your quality unit is inadequate and can not be assured to be free of contamination.						
OBSERVATION 3 Batch production and control records do not include the identity of individual major lines used for each batch of drug product produced.						
Specifically,						
The '(b) (4) Hose (b) mm x (b) mm" used to transfer product from the (b) (4) L (b) (4) (ID EM2202) to the (b) (b) (4) filtration housing (ID CFL2901 or ID CFL2902) is not identified.						
The (b) (4) lines used to transfer (b) (4) during production from distribution point (b) (4) and (b) (4) were not identified at the time of visual inspection on 04/12/2022.						
	EMPLOYEE(S) SIGNATURE					DATE ISSUED
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INSPECTIONAL OBSERVATIONS

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PREVIOUS EDITION OBSOLETE

		ENT OF HEALTH AND HUM OOD AND DRUG ADMINISTRAT			
DISTRICT ADDRESS AND PHON 12420 Parklav Rockville, MI	wn Drive, Room 2032		DATE(S) OF INSPECTION 11/4/2022-15/4/2022 FEI NUMBER 3013166187		
NAME AND TITLE OF INDIVIDUAL Dr. Yon-Lian					
FIRM NAME SUNNY PHARMTI		Longtan	Longtan District, 255 Longyuan 1st Rd. Longtan Dist.		
Taoyuan City,	nry , 32542 Taiwan		TYPE ESTABLISHMENT INSPECTED  Drug & API Manufacturer		
adequate pressu	ion of your (b) (4) re throughout the (b) (4) en pressure gauges were la	system, are no	ved that pressure gauges used tregularly calibrated. Request for ovided.		
SEE REVERSE OF THIS PAGE	EMPLOYEE(S) SIGNATURE Bryan L Mcguckin, I	nvestigator		E ISSUED 6/4/2022	
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