MICROBIAL COUNT

REFERENCE DOCUMENT: SOP NO. BIOL 007

| MICROBIOLO BIOL/00 | | 2016-06-21 13 | | TE TEST SET Jul-2016 | | DATE OF RESULTS 11-Jul-2016 | | | | | | |
|--|---|---------------|-----------------------|-----------------------------------|--|-----------------------------|---------------------|--|--|--|--|--|
| SAMPLE PREPARATION | | | | | | | | | | | | |
| 10ml 1ml 2ml Replicates: 2 100ml Buffered P 1ml Plating | | | | | | | | | | | | |
| | | | 0 | | | 0 | | | | | | |
| RESULTS 0 0 | | | | | | | | | | | | |
| | | | 10 ¹ CFU 0 | 10 ² CF | TU 1 | .03 CFU 0 | Negative Control | | | | | |
| Nutrient Agar | Plate 1 | | | | | | | | | | | |
| | Plate 2 | | 0 | | | 0 | | | | | | |
| | Average (A): CFU (Total Aerobic Microbial Count) | | 0 | | | 0 | | | | | | |
| | | · | 0 | | | 0 | Negative Control | | | | | |
| C-11- | Plate 1 | | _1 | 00 | | 0 | | | | | | |
| Sabourauds Dextrose | Plate 2 | | ٠. | | | ŭ | | | | | | |
| Agar | Average (B): CFU (Total Yeast Microbial Count) | | | | | | | | | | | |
| NB: Acceptance Criteria is interpreted as follows depending on route of administration - 10 ¹ cfu: maximum acceptable count = 20; 10 ² cfu: maximum acceptable count = 200; 10 ³ cfu: maximum acceptable count = 2000; and so forth. | | | | | | | | | | | | |
| CONCLUSION: The Product | | Complies | | | With the requirements of the Microbial Enumeration Test. | | | | | | | |
| | | Does Not Comp | oly | | | | | | | | | |
| Analyst: | | | | ead, Biological Analysis Unit: | | | | | | | | |
| Date: | | | | Date: | | | | | | | | |
| I | Analyst: | | - Signature: | | | | | | | | | |
| | Date: | | | | | | | | | | | |

TEST FOR SPECIFIED MICROORGANISMS

REFERENCE DOCUMENT: SOP NO. BIOL 007
2016-06-21 13:37:00 04-Jul-2016

| BIOL/001/2016 MICROBIOLOGY LAB NO. | | 2016-06-21 13:37:00 DATE RECEIVED | | 04-Jul-2016 DATE TEST SET | 11-Ju | 11-Jul-2016 DATE OF RESULTS | | | | | |
|--|------------|--------------------------------------|---|---------------------------------|-------|--------------------------------|--|--|--|--|--|
| WITCKODIOLOG | T END IVO. | DITTE RECEIVE | | JIIIL ILOI GEI | Dilli | E OT RESCETS | | | | | |
| SAMPLE PREPARATION | | | | | | | | | | | |
| 10ml ———————————————————————————————————— | x | Oml 1ml X ——— nl Buffered P 1ml Pla | | Replicates: 2 | | | | | | | |
| | | | | 0 | 0 | | | | | | |
| | | RESU | JLTS | | | | | | | | |
| Microorganism | Test Media | | Observation | | | Negative | | | | | |
| | | | | 0 | 0 | Control | | | | | |
| | | | | | | | | | | | |
| | | | | 0 | 0 | | | | | | |
| | | | | 0 | 0 | | | | | | |
| | | | | 0 | 0 | | | | | | |
| | | | | <100 | 0 | | | | | | |
| | | | | | | | | | | | |
| Observation - Indicate whether is growth/turbidity/colour change in the test media or Not. | | | | | | | | | | | |
| CONCLUSION: The Product | Complies | | With the requirements of the Test for Specified | | | | | | | | |
| | Does | s Not Comply | Microorganisms. | | | • | | | | | |
| Analyst: | | | I | Head, Biological Analysis Unit: | | | | | | | |
| Date: | | | | Date: | | | | | | | |
| Analyst: | | | Signature: | | | | | | | | |
| Date: | | | | | | | | | | | |