



National Quality Control Laboratory

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SAMPLE INFORMATION FORM

Date Sample Submitted: 2015-01-22 Laboratory Reference No: 3COMPONENTS

Product Generic/Brand Name: PANTAZOL 40mg IV INJECTION

Product Chemical Name: PANTOPRAZOLE

Product Description: _____

Product Presentation: _____

Label claim: Each vial contains PANTOPRAZOLE 40mg

Batch/Lot No: 3525 Product License No: 123

Date of manufacture: 2015-01-01 Date of Expiry: 2015-12-31

Name of Client and Chemonics Kenya Pharma LLC

Address: P.o Box 1325 00606 Nairobi, Kenya

Client Reference No: C03/123/456

Manufacturer: MYLAN LABS LTD

Country of Origin: INDIA Samples Issued: 30 Capsules Samples Returned: _____

Test(s) requested:	Limits:	Monograph (specify year and exact page):
a) <u>Identification</u>	_____	U.S.P _____
b) <u>Dissolution</u>	_____	B.P. _____
c) <u>Assay</u>	_____	Ph. Eur. _____
d) <u>Uniformity of Weight</u>	_____	Ph. Intl. _____
e) <u>pH</u>	_____	Other's _____
f) _____	_____	_____

Analyst: Mary Magda Signature: _____ Date: 19-02-2015

Checked by: _____ Signature: _____ Date: _____

Approved by: _____ Signature: _____ Date: _____

UNIFORMITY OF WEIGHT: TABLETS/CAPSULES/SACHETS/VIALS

No.	Tablets/Capsules/ Sachets/Vials (mg)	Empty Capsule/ Sachet/Vial (mg)	Capsule/Sachet/Vial Content (mg)	% Deviation From mean (for deviating tabs/caps)
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
Total:	_____		_____	
Avg:	_____		_____	
Calculation of Deviation Limits:				

Comments: _____

ASSAY DATA FORM

ASSAY

Standard Preparation for Assay:

Sample Preparation for Assay:

DISSOLUTION

Standard Preparation for Dissolution:

Dissolution Conditions

	1 st Run	2 nd Run	3 rd Run
Dissolution Medium:	_____	_____	_____
Volume used:	_____	_____	_____
Apparatus:	_____	_____	_____
Rotations per minute:	_____	_____	_____
Time (min)	_____	_____	_____

Describe below any subsequent dilutions after the dissolution:

CHROMATOGRAPHIC CONDITIONS:**ASSAY**

Column No: _____ Type of Column: _____
Column Temp (°C): _____
Detection λ (nm): _____ Injection Vol (μ L): _____

Mobile Phase: Composition (% v/v) & Ratios

_____ Flow Rate (mL/min): _____
Pump Pressure (bars): _____

DISSOLUTION

Column No: _____ Type of Column: _____
Column Temp (°C): _____
Detection λ (nm): _____ Injection Vol (μ L): _____

Mobile Phase: Composition (% v/v) & Ratios

_____ Flow Rate (mL/min): _____
Pump Pressure (bars): _____

REFERENCE SUBSTANCES:

NO	Reference Substances/Related Substances	NQCL Code/Batch	Purity (%)
1.			
2.			
3.			
4.			
5.			

CHROMATOGRAPHIC CONDITIONS:

ASSAY

Column No: _____ Type of Column: _____
Column Temp (°C): _____
Detection λ (nm): _____ Injection Vol (μ L): _____

Mobile Phase: Composition (% v/v) & Ratios

Flow Rate (mL/min): _____
Pump Pressure (bars): _____

REFERENCE SUBSTANCES:

NO	Reference Substances/Related Substances	NQCL Code/Batch	Purity (%)
1.			
2.			
3.			
4.			
5.			

pH MEASUREMENTS

Outline the Sample Preparation Procedure

Determination of pH :

No.	Sample pH Readings
1.	
2.	
3.	
4.	
	Mean:

pH of the Sample : _____

REAGENTS USED						
	Reagent Name	Manufacturer	Lot/Batch No.	Date Opened	Expiry Date	Remarks
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						

EQUIPMENT USED					
	Equipment Name	NQCL No./Code	Date of Last Calibration	Date of Next Calibration	Remarks
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					

APPENDIX

Describe in Summary the reagent preparation procedures including mobile phase and buffers.

Report any other tests carried out on the sample.

WORKSHEET TRACKING						
No.	ACTIVITY	FROM: OFFICER/ ANALYST	SIGNATURE	TO: OFFICER/ ANALYST	SIGNATURE	DATE
1						
2						
3						
4						
5						
6						
7						