

REFERENCE:

Interstellar Testing Centre Pvt. Ltd.

QUALITY CONTROL DEPARTMENT

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BOOKING CODE:

ANNEXURE-4

BLANK TEST DATA SHEET(FOR TABLETS AND CAPSULES)

FOR CHEMICAL ANYALYSIS

SAMPLE NAME:

CUSTOMER B. NO.:	
DATE OF ANALYSIS:	DATE OF COMPLETION:
Description	
Description:	
Analysed By	Checked By
Sign / Date	Sign / Date
Identification:	
identification.	
Analysed By	Checked By
Sign / Date	Sign / Date
	o.g., Date
Average Wt.:	
Calculation:	
outoutation.	
Analysed By	Checked By
Sign / Date	Sign / Date



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Since 1988	ANNEXURE-4							
ITC Labs	BLANK TEST DATA SHEET(FOR TABLETS AND CAPSULES)							
Assuring Integrity, Trust & Confidence	FOR CHEMICAL ANYALYSIS							
	SAMPLE NAME:							
REFERENCE:	BOOKING C	ODE						
CUSTOMER B. NO	.:							

DATE OF ANALYSIS:	DATE OF COMPLETION:							
Hardness Test:								
Analysed By Sign / Date	Checked By Sign / Date							
Uniformity of Wt. Variation:								
Calculation:								
Analysed By Sign / Date	Checked By Sign / Date							
Disintegration Test :								
Analysed By Sign / Date	Checked By Sign / Date							
p H Test :								
<u> </u>								
Analysed By	Checked By							
Sign / Date	Sign / Date							
Assay: (Titrimetric analysis / Potentiometrically / U.V. / Condensation	n Method)							



QUALITY CONTROL DEPARTMENT

ANNEXURE-4

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BLANK TEST DATA SHEET(FOR TABLETS AND CAPSULES)

FOR CHEMICAL ANYALYSIS

SAMPLE NAME:

REFERENCE:	BOOKING CODE:							
CUSTOMER B. NO.: DATE OF ANALYSIS:								
DATE OF ANALYSIS:	DATE OF COMPLETION:							
Calculation:								
Analysed By	5 1							
Sign / Date	Checked By							
	Sign / Date							



MICROBIOLOGY DEPARTMENT

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ANNEXURE-7

OBERVATION RECORD FOR STERILITY TEST DIRECT INOULATION

	322111111111111111111111111111111111111							
Sample Code N	No.:	Received On:						
Name of the Sa	ample:							
Commenced o	n:	Sample Storage At:						
Completed On		Sample condition:						
Reported on:		Sample subject to analysis:						

Method of Inoculation: Direct Inoculation

Date of Obervation				oe 2							1		1		l		1	e 9	וו	e	Observed By
Sample	S C M	F T M	S C M	F T	S C M	F T M															
-																					
	-		-																		
			\vdash									\vdash	\vdash						\vdash		



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MICROBIOLOGY DEPARTMENT

ANNEXURE-7

OBERVATION RECORD FOR STERILITY TEST DIRECT INOULATION

Sample Code No.:	Received On:
Name of the Sample:	
Commenced on:	Sample Storage At:
Completed On:	Sample condition:
Reported on:	Sample subject to analysis:

Media Control											
Positive Control											
Air Monitoring in LAF											

Details of Positive control	
Bacterial Culuture for FTM	Fungal Culuture for SCM
Name of the Culture	Name of the Culture
ATCC/NCIM/MTCC	ATCC/NCIM/MTCC

Note

:

- No growth & + Growth

FTM : Fluid Thioglycollate Medium

SCM : Soya bean Casein Digest Medium

Result: The above-mentioned sample Complies/does not Complies with IP/BP/US

Analysed By Sign / Date

Checked By Sign / Date



MICROBIOLOGY DEPARTMENT

ANNEXURE-7

OBERVATION RECORD FOR STERILITY TEST DIRECT INOULATION

Sample Code No.:	Received On:
Name of the Sample:	
Commenced on:	Sample Storage At:
Completed On:	Sample condition:
Reported on:	Sample subject to analysis:

Method of Inoculation: Direct Inoculation

Date of Ob	ervation														
Days	Media	1 St	2 nd	3 rd	4 th	5 th	6 th	7 th	8 th	9 th	10 th	11 th	12 th	13 th	14 th
	FTGM (30-35?)														
Sample	SCDM (20- 25?)														
	FTGM (30 - 35?)														
	B.subtilis / S.aureus														
Positive Control	P.aeruginosa														
Control	SCDM (20- 25?)														
	C.albicans / A.niger														
Madia	FTGM (30-35?)														
Media Control	SCDM (20- 25?)														
Air monitoring	FTGM (30-35?)														
control in LAF	SCDM (20- 25?)														
Oberved by	y Signature														

- No growth & + Growth

FTGM : Fluid Thioglycollate Medium

SCDM: Soya bean Casein Digest Medium

Result: The above-mentioned sample Complies/does not Complies with IP/BP/US

Analysed By Sign / Date

Checked By Sign / Date

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QUALITY CONTROL DEPARTMENT

ANNEXURE-9

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BLANK TEST DATA SHEET

FOR MICROBIOLOGICAL LIMIT TEST

SAMPLE NAME:

REFERENCE : BOOKING CODE : CUSTOMER B.NO. : DATE OF ANALYSIS : DATE OF COMPLETION :

Microbiological Limit Test											
Description:											
Sr. No.	Parameters Total Aerobic Count Including	Result	Limit								
1	a. Yeast & Mould b. Total Bacterial Count										
2	Staphylococcus aureus										
3	Pseudomonas aeruginosa										
4	Candida albicans										
5	Salmonella typhosa										
6	Streptococcus faecalis										
7	Enteronacteriaceae										
8	Clostridia species										
9	Escherichia coli										
10	Coliforms										
11	Shigella										



QUALITY CONTROL DEPARTMENT

ANNEXURE-9

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BLANK TEST DATA SHEET

FOR MICROBIOLOGICAL LIMIT TEST

SAMPLE NAME:

REFERENCE	:	BOOKING CODE	:
CUSTOMER B.NO.	:		
DATE OF ANALYSIS	:	DATE OF COMPLETION:	

Calculation :					
(a)	Total Bacterial Count	=			
	Number of Colonies	=			
	Number of Plates	=			
	Dilution Factor	=			
	CFU/mlgm	=	No. of colonies x dilution factor No. of Plates		
(b)	Total Yeast & Mould Count	=			
	Number of Colonies	=			
	Number of Plates	=			
	Dilution Factor	=			
	CFU/mlgm	=	No. of colonies x dilution factor No. of Plates		
	Therefore		TAMC = TBC + TYMC		
	alysed By n / Date			Checked By Sign / Date	