**REPORT NO: 1675 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | M. Chandra Rao, Kakinada (Urban). |
| **2.** | **Serial Number & date of Inspector’s memorandum** | SA/26/DI/EG/KKD/U/2017, Dated: 19/09/2017 |
| 3. | **Number of sample** | 965/T/2017 |
| 4. | **Date of Receipt** | 22/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | Deflazo 6  (Deflazacort Tablets 6mg) |
|  |  | B.NO: TLT 17135, M.D:08/2017, E.D: 07/2019 |
|  |  | **Mfd by:** Tulip Laboratories 71-72, Industrial Area,  Meherpur-174315, Dist: Una(H.P). |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x06x10 | -- | -- | -- |
| **Description** | White coloured, circular, biconvex tablet with a score on one side. | | | Complies |
| **Identification** | Positive for  Deflazacort as per S.T.P | -- | -- | Complies |
| **Average Weight** | 0.1686gm | -- | -- | Complies |
| **Uniformity of Weight** | Complies as per I.P | -- | -- | Complies |
| **Assay for**  **Deflazacort** | 5.72mg | 6mg | 5.4 – 6.6mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**P. VENKATESWARLU**, M.Sc.,

To: **Government Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Kakinada (Urban). VIJAYAWADA-520 008

**REPORT NO: 1676 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | M. Srinivas Rao, Bobbili. |
| **2.** | **Serial Number & date of Inspector’s memorandum** | SA/17/DI/BBL/2017, Dated: 18/09/2017 |
| 3. | **Number of sample** | 957/T/2017 |
| 4. | **Date of Receipt** | 22/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | Calpol 120mg Suspension |
|  |  | B.NO: KB 262, M.D:01/2017, E.D: 12/2018 |
|  |  | **Mfd by:** Glaxosmithkline Pharmaceuticals Ltd.  At 34th km, Tumkur Road, Teppada Begur,  Nelamangala, Bangalore Rural -562123. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x60ml | -- | -- | -- |
| **Description** | Pink coloured, uniform suspension. | | | Complies |
| **Identification** | Positive for  Paracetamol as per I.P | -- | -- | Complies |
| **Assay for Paracetamol** | 121.10mg | 120mg | 108 – 132mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**P. VENKATESWARLU**, M.Sc.,

To: **Government Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Bobbili. VIJAYAWADA-520 008

**REPORT NO: 1678 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | M. Murali, Nellore. |
| 2. | **Serial Number & date of Inspector’s memorandum** | 170903/T/MK/DI/NLR/2017, Dated: 20/09/2017 |
| 3. | **Number of sample** | 987/T/2017 |
| 4. | **Date of Receipt** | 23/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | P-250 Suspension  (Paracetamol Paediatric Oral Suspension) |
|  |  | B.NO: PTS7163, M.D:08/2017, E.D: 07/2020 |
|  |  | **Mfd by:** M/s. Apex Laboratories Private Limited,  510, Kunnam Village & Post,  (Via) Thenneri, Sriperumbudur Taluk,  Kancheepuram Dist – 631604, Tamil Nadu. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x01x60ml | -- | -- | -- |
| **Description** | Pink colour suspension. | | | Complies |
| **Identification** | Positive for  Paracetamol as per S.T.P | -- | -- | Complies |
| **Assay for Paracetamol** | 258.56mg | 250mg | 225 – 275mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**K. GOVINDA KRISHNA,** M.Sc,

Senior Scientific Officer &

To: **Government** **Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Nellore. VIJAYAWADA-08

**REPORT NO: 1679 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | M. Jayalakshmi, Jangareddygudem. |
| 2. | **Serial Number & date of Inspector’s memorandum** | 29/17/MJL/DI/JRG/WG/AP-2017, Dated: 19/09/2017 |
| 3. | **Number of sample** | 969/T/2017 |
| 4. | **Date of Receipt** | 22/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | HYDROFLOX FORTE 100gm  (Ciprofloxacin and Tinidazole Powder) |
|  |  | B.NO: DHF-1610, M.D:01/2017, E.D: 12/2018 |
|  |  | **Mfd by:** Doctor’s vet – Pharma Pvt. Ltd, Survey No:263/1,  264/1, P.R.Gudem(V), Kovvur(M), SPSR Nellore Dist.,  AP-524137, INDIA. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x100gm | -- | -- | -- |
| **Description** | Off-white powder. | | | Complies |
| **Identification** | Positive for  Ciprofloxacin and Tinidazole as per S.T.P | -- | -- | Complies |
| **Assay for**  **Ciprofloxacin**  **Tinidazole** | 9.03%w/w  11.67%w/w | 10%w/w  12%w/w | 9 – 1.1%w/w  10.8 – 13.2%w/w | Complies  Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**K. GOVINDA KRISHNA,** M.Sc,

Senior Scientific Officer &

To: **Government** **Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Jangareddygudem. VIJAYAWADA-08

**REPORT NO: 1680 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | M. Ruthu, Chittoor. |
| 2. | **Serial Number & date of Inspector’s memorandum** | 18/DI/CTR/T/2017, Dated: 21/08/2017 |
| 3. | **Number of sample** | 852/T/2017 |
| 4. | **Date of Receipt** | 26/08/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | Finegard O  (Cefixime and Ofloxacin Tablets) |
|  |  | B.NO: FNVB-464, M.D:12/2016, E.D: 11/2018 |
|  |  | **Mfd by:** Bonn Schtering Bio Sciences, Plot No.64 & 65,  1st floor, Electronic Park, Thirubuvanai,  Mannadipet Commune, Puducherry-605 107. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x5x10 | -- | -- | -- |
| **Description** | Off-white, circular, biconvex, coated, uniform tablets. | | | Complies |
| **Identification** | Positive for  Cefixime and Ofloxacin as per S.T.P | -- | -- | Complies |
| **Average Weight** | 0.6504gm | -- | -- | Complies |
| **Uniformity of Weight** | Complies as per I.P | -- | -- | Complies |
| **Assay for**  **Cefixime**  **Ofloxacin** | 217.01mg  194.38mg | 200mg  200mg | 180 – 220mg  180 – 220mg | Complies  Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**K. GOVINDA KRISHNA,** M.Sc,

Senior Scientific Officer &

To: **Government** **Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Chittoor. VIJAYAWADA-08

**REPORT NO: 1681 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | B. Srinivasa Rao, Machilipatnam. |
| 2. | **Serial Number & date of Inspector’s memorandum** | 24/BSR/DI/MTM/2017, Dated: 21/09/2017 |
| 3. | **Number of sample** | 961/T/2017 |
| 4. | **Date of Receipt** | 22/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | COLDIMAC-DS  (Paracetamol, Phenylephrine HCL, Chlorpheniramine Maleate, Sodium Citrate, Menthol) |
|  |  | B.NO: 1601, M.D:12/2016, E.D: 11/2018 |
|  |  | **Mfd by:** DM PHARMA  Vill. Bhud, NH-21 A, Baddi,  Distt. Solan (H.P.) 173 205 |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x60ml | -- | -- | -- |
| **Description** | Pink coloured, clear and uniform suspension. | | | Complies |
| **Identification** | Positive for  Paracetamol, Phenylephrine HCL, Chlorpheniramine Maleate and Sodium Citrate as per S.T.P | -- | -- | Complies |
| **Assay for**  **Paracetamol**  **Phenylephrine HCL**  **Chlorpheniramine Maleate** | 244.54mg  5.27mg  2.11mg | 250mg  5mg  2mg | 225 – 275mg  4.5 – 5.5mg  1.8 – 2.2mg | Complies  Complies  Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**K. GOVINDA KRISHNA,** M.Sc,

Senior Scientific Officer &

To: **Government** **Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Machilipatnam. VIJAYAWADA-08

**REPORT NO: 1682 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | P.N.V.V.S.Kalyani, Anakapalli. |
| 2. | **Serial Number & date of Inspector’s memorandum** | 23/S/PK/DI/AKP/2017, Dated: 20/09/2017 |
| 3. | **Number of sample** | 975/T/2017 |
| 4. | **Date of Receipt** | 23/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | Parazen – DS Suspension |
|  |  | B.NO: LD6064D, M.D:04/2016, E.D: 03/2018 |
|  |  | **Mfd by:** M/s Navkar Life Sciences,  GMP Certified Company, Plot No. 76,  Lodhi Majra Industrial Area, Baddi, Distt. Solan (H.P.) |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x60ml | -- | -- | -- |
| **Description** | Pink coloured, uniform suspension. | | | Complies |
| **Identification** | Positive for  Paracetamol as per S.T.P | -- | -- | Complies |
| **Assay for Paracetamol** | 229.76mg | 250mg | 225 – 275mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**K. GOVINDA KRISHNA,** M.Sc,

Senior Scientific Officer &

To: **Government** **Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Anakapalli. VIJAYAWADA-08

**REPORT NO: 1683 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | B. Srinivasa Rao, Machilipatnam. |
| 2. | **Serial Number & date of Inspector’s memorandum** | 26/BSR/DI/MTM/2017, Dated: 22/09/2017 |
| 3. | **Number of sample** | 422/H/2017 |
| 4. | **Date of Receipt** | 23/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | Bupivacaine Hydrochloride in Dextrose Injection USP |
|  |  | B.NO: IBPVA2609, M.D:08/2016, E.D: 07/2018 |
|  |  | **Mfd by:** SAMARTH Life sciences Pvt.Ltd., Unit – II,  Plot No.2, Industrial Area, Lodhimajra, Baddi,  Himachal Pradesh- 173205, India. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 10x1x4ml Ampoules | -- | -- | -- |
| **Description** | Clear, colourless, uniform liquid. | | | Complies |
| **Identification** | Positive for  Bupivacaine Hcl as per S.T.P | -- | -- | Complies |
| **Assay for Bupivacaine Hcl** | 5.22mg | 5mg | 4.65 – 5.35mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**K. GOVINDA KRISHNA,** M.Sc,

Senior Scientific Officer &

To: **Government** **Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Machilipatnam. VIJAYAWADA-08

**REPORT NO: 1684 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | DR J. BALU MD, Vijayawada (Zone-II). |
| 2. | **Serial Number & date of Inspector’s memorandum** | 30/SEPT/JB/DI/Z-II/VJA/17, Dated: 23/09/2017 |
| 3. | **Number of sample** | 421/H/2017 |
| 4. | **Date of Receipt** | 23/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | NANOPAN  (Px Pantoparazole Tablets I.P) |
|  |  | B.NO: 1246, M.D:06/2017, E.D: 05/2019 |
|  |  | **Mfd by:** M/s Veras Pharmaceuticals Pvt. Ltd.,  Servey No : 56/11 to 14,  Chelavuru – 535005. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x05x10 | -- | -- | -- |
| **Description** | Blue coloured, circular, biconvex, coated and uniform tablets. | | | Complies |
| **Identification** | Positive for  Pantoprazole as per S.T.P | -- | -- | Complies |
| **Average Weight** | 0.1806gm | -- | -- | Complies |
| **Uniformity of Weight** | Complies as per I.P | -- | -- | Complies |
| **Dissolution test** | Complies as per I.P | -- | NLT 80% | Complies |
| **Assay for Pantoprazole** | 39.90mg | 40mg | 36 – 44mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**K. GOVINDA KRISHNA,** M.Sc,

Senior Scientific Officer &

To: **Government** **Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Vijayawada (Zone-II). VIJAYAWADA-08

**REPORT NO: 1685 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | B. Srinivasa Rao, Machilipatnam. |
| 2. | **Serial Number & date of Inspector’s memorandum** | 29/BSR/DI/MTM/2017, Dated: 22/09/2017 |
| 3. | **Number of sample** | 425/H/2017 |
| 4. | **Date of Receipt** | 23/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | CHLORPHENIRAMINE MALEATE TABLETS IP 150 mg |
|  |  | B.NO: 1608112, M.D:08/2016, E.D: 07/2018 |
|  |  | **Mfd by:** ADROIT PHARMACEUTICALS PVT. LTD.,  46, Garoba Maidan, Nagpur-8 |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x10x10 | -- | -- | -- |
| **Description** | White, circular, biconvex with one side score and monogram on G/G and uniform tablets. | | | Complies |
| **Identification** | Positive for  Chlorpheniramine Maleate as per S.T.P | -- | -- | Complies |
| **Average Weight** | 0.0632gm | -- | -- | Complies |
| **Uniformity of content** | Complies as per S.T.P | -- | -- | Complies |
| **Assay for**  **Chlorpheniramine Maleate** | 4.11mg | 4mg | 3.8 – 4.2mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**K. GOVINDA KRISHNA,** M.Sc,

Senior Scientific Officer &

To: **Government** **Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Machilipatnam. VIJAYAWADA-08

**REPORT NO: 1686 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | R. Lalita, Narsipatnam. |
| 2. | **Serial Number & date of Inspector’s memorandum** | 27/SA/T/DI/DCA/NRPM/2017, Dated: 20/09/2017 |
| 3. | **Number of sample** | 970/T/2017 |
| 4. | **Date of Receipt** | 23/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | (BIODOXI-100)  Doxycycline Hydrochloride Capsules I.P |
|  |  | B.NO: NA2173508, M.D:06/2017, E.D: 05/2019 |
|  |  | **Mfd by:** Biochem Pharmaceutical Industries Ltd,  Acleruti Star, Unit No. 103, MIDC,  Andheri (E), Mumbai – 400093. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x06x10 | -- | -- | -- |
| **Description** | Capsule consists of Pale pink colour, BIODOXI as a monogram, red colour cap & BIOCHEM as a monogram with yellow colour powder. | | | Complies |
| **Identification** | Positive for  Doxycycline as per S.T.P | -- | -- | Complies |
| **Average Weight** | 0.2424gm | -- | -- | Complies |
| **Uniformity of Weight** | Complies as per I.P | -- | -- | Complies |
| **Loss on Drying** | Complies as per I.P | -- | NMT 8.5% | Complies |
| **Assay for**  **Doxycycline** | 101.11mg | 100mg | 90 – 120mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**K. GOVINDA KRISHNA,** M.Sc,

Senior Scientific Officer &

To: **Government** **Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Narsipatnam. VIJAYAWADA-08

**REPORT NO: 1687 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | T. Venkata Krishna, Proddatur (FAC). |
| 2. | **Serial Number & date of Inspector’s memorandum** | 22/TVK/DI/PDTR/2017, Dated: 20/09/2017 |
| 3. | **Number of sample** | 993/T/2017 |
| 4. | **Date of Receipt** | 23/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | RABRAX DM Tablets  (Rabeprazole and Domperidone Tablets) |
|  |  | B.NO: AT1704133, M.D:04/2017, E.D: 03/2019 |
|  |  | **Mfd by:** M/s ACCURA CARE PHARMACEUTICALS PVT. LTD.  Vill.Moginannd, Nahan road,  Kala Amb, Sirmour (Dist),  173030, (H.P). |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x05x10 | -- | -- | -- |
| **Description** | Brown circular, biconvex and coated tablets. | | | Complies |
| **Identification** | Positive for  Rabeprazole sodium and Domperidone as per S.T.P | -- | -- | Complies |
| **Average Weight** | 0.2021gm | -- | -- | Complies |
| **Uniformity of Weight** | Complies as per I.P | -- | -- | Complies |
| **Assay for**  **Domperidone** | 9.97mg | 10mg | 9 – 11mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**K. GOVINDA KRISHNA,** M.Sc,

Senior Scientific Officer &

To: **Government** **Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Proddatur (FAC). VIJAYAWADA-08

**REPORT NO: 1688 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | M. MURALI, Nellore. |
| 2. | **Serial Number & date of Inspector’s memorandum** | 170902/T/MK/DI/NLR/2017, Dated: 20/09/2017 |
| 3. | **Number of sample** | 986/T/2017 |
| 4. | **Date of Receipt** | 23/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | CLAMP Suspension  (Amoxycillin and Potassium Clavulanate oral suspension I.P) |
|  |  | B.NO: ARCLS7024, M.D:07/2017, E.D: 12/2018 |
|  |  | **Mfd by:** M/s Ankur Drugs and Pharma Limited,  Vill. Manakpur, PO Lodhimajra,  Nalagarh, Dist. Solan (HP) – 174 101. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per I.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x02x6.6g/30ml’s of CLAMP Suspension | -- | -- | -- |
| **Description** | Off-white suspension formed after reconstitution with given sterile water. | | | Complies |
| **Identification** | Positive for  Amoxycillin trihydrate and Potassium clavulanate as per I.P | -- | -- | Complies |
| **PH** | 5.4 | -- | 3.8 – 6.6 | Complies |
| **Assay for**  **Amoxycillin**  **Clavulanic acid** | 225.27mg  31.88mg | 200mg  28.5mg | 180 – 240mg  25.65 – 35.625mg | Complies  Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**K. GOVINDA KRISHNA,** M.Sc,

Senior Scientific Officer &

To: **Government** **Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Nellore. VIJAYAWADA-08

**REPORT NO: 1689 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | M. MURALI, Nellore. |
| 2. | **Serial Number & date of Inspector’s memorandum** | 170802/T/MK/DI/NLR/2017, Dated: 31/08/2017 |
| 3. | **Number of sample** | 890/T/2017 |
| 4. | **Date of Receipt** | 04/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | FORMIN-ER Tablets  (Metformin Hcl Sustained Release Tablets I.P) |
|  |  | B.NO: FM-170201, M.D:02/2017, E.D: 01/2019 |
|  |  | **Mfd by:** M/s Raffles Pharmaceuticals,  Plot.No.33/A, IDA, Gajulamandyam, A.P.-517 520. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per I.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x05x10 | -- | -- | -- |
| **Description** | White, elongated and biconvex tablets with a score on one side. | | | Complies |
| **Identification** | Positive for  Metformin Hcl as per I.P | -- | -- | Complies |
| **Average Weight** | 0.7032gm | -- | -- | Complies |
| **Uniformity of Weight** | Complies as per I.P | -- | -- | Complies |
| **Assay for**  **Metformin Hcl** | 467.13mg | 500mg | 450 – 550mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**K. GOVINDA KRISHNA,** M.Sc,

Senior Scientific Officer &

To: **Government** **Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Nellore. VIJAYAWADA-08

**REPORT NO: 1690 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | M. Srinivas Rao, Bobbili. |
| 2. | **Serial Number & date of Inspector’s memorandum** | SA/18/DI/BBL/2017, Dated: 18/09/2017 |
| 3. | **Number of sample** | 958/T/2017 |
| 4. | **Date of Receipt** | 22/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | A.C. 125  (Acetaminophen Oral Suspension I.P) |
|  |  | B.NO: HC1704, M.D:05/2017, E.D: 04/2019 |
|  |  | **Mfd by:** Hippo Labs Pvt. Ltd, Plot No: 17,  R.G. Nagar, I.D.A, Prashantinagar,  Kukatpally, Hyd – 72. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x60ml | -- | -- | -- |
| **Description** | Pink colour suspension. | | | Complies |
| **Identification** | Positive for  Acetaminophen as per S.T.P | -- | -- | Complies |
| **Assay for**  **Acetaminophen** | 128.5mg | 125mg | 118.75 – 131.25mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**P. VENKATESWARLU**, M.Sc.,

To: **Government Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Bobbili. VIJAYAWADA-520 008

**REPORT NO: 1691 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | A. Lavanya, Tekkali. |
| 2. | **Serial Number & date of Inspector’s memorandum** | 27/09/AL/DI/TKL/2017, Dated: 20/09/2017 |
| 3. | **Number of sample** | 1039/T/2017 |
| 4. | **Date of Receipt** | 25/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | DOLODART DS SUSPENSION  (Paracetamol Oral Suspension I.P) |
|  |  | B.NO: 1705002, M.D:05/2017, E.D: 04/2019 |
|  |  | **Mfd by:** M/s Juggat Pharma  (Pharma Division of Jagdale Industries Pvt. Ltd.,), 47/1, 20th Km., Mysore Road, Bangalore – 560 074. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x60ml | -- | -- | -- |
| **Description** | Pink colour suspension. | | | Complies |
| **Identification** | Positive for  Paracetamol as per I.P | -- | -- | Complies |
| **Assay for**  **Paracetamol** | 244.1mg | 250mg | 237.5 – 262.5mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**P. VENKATESWARLU**, M.Sc.,

To: **Government Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Tekkali. VIJAYAWADA-520 008

**REPORT NO: 1692 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | Parveen Sultana Shaik, Ongole. |
| 2. | **Serial Number & date of Inspector’s memorandum** | SA/32/DI/OGL/2017, Dated: 22/09/2017 |
| 3. | **Number of sample** | 428/H/2017 |
| 4. | **Date of Receipt** | 25/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | Paracetamol Syrup IP 125mg/ 5ml |
|  |  | B.NO:PK16072, M.D:08/2016, E.D: 07/2018 |
|  |  | **Mfd by:** Baader Schulz laboratories Pharma Division,  Plot no:J-6, OIDC, Mahatma Gandhi Udyog Nagar,  Dabhel, Daman – 396210.U.T, INDIA. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x02x60ml | -- | -- | -- |
| **Description** | Orange coloured solution. | | | Complies |
| **Identification** | Positive for  Paracetamol as per I.P | -- | -- | Complies |
| **Assay for**  **Paracetamol** | 129.28mg | 125mg | 118.75 – 131.25mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**P. VENKATESWARLU**, M.Sc.,

To: **Government Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Ongole. VIJAYAWADA-520 008

**REPORT NO: 1693 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | DR J. BALU, Vijayawada (Zone-II). |
| 2. | **Serial Number & date of Inspector’s memorandum** | 27/SEPT/JB/DI/Z-II/VJA/17, Dated: 23/09/2017 |
| 3. | **Number of sample** | 418/H/2017 |
| 4. | **Date of Receipt** | 23/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | Claw-TZ  (Ciprofloxacin Hcl and Tinidazole Tablets) |
|  |  | B.NO:TH7008A, M.D:08/2017, E.D: 07/2019 |
|  |  | **Mfd by:** M/s Navakar Lifesciences,  Plot No. 76, Industrial Area,  Lodhi majra, Baddi dist. Solan (H.P) |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x05x10 | -- | -- | -- |
| **Description** | Yellow coloured, elongated and biconvex tablet with a score on one side. | | | Complies |
| **Identification** | Positive for  Ciprofloxacin and Tinidazole as per S.T.P | -- | -- | Complies |
| **Average Weight** | 0.7147gm | -- | -- | Complies |
| **Uniformity of Weight** | Complies as per I.P | -- | -- | Complies |
| **Assay for**  **Ciprofloxacin**  **Tinidazole** | 241.01mg  296.71mg | 250mg  300mg | 225 – 275mg  270 – 330mg | Complies  Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**P. VENKATESWARLU**, M.Sc.,

To: **Government Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Vijayawada (Zone-II). VIJAYAWADA-520 008

**REPORT NO: 1694 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | P.N.V.V.S.Kalyani, Anakapalli. |
| 2. | **Serial Number & date of Inspector’s memorandum** | 22/S/PK/DI/AKP/2017, Dated: 20/09/2017 |
| 3. | **Number of sample** | 974/T/2017 |
| 4. | **Date of Receipt** | 23/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | Cefaxime-O 200DT  (Cefixime Dispersible Tablets) |
|  |  | B.NO:FTB-170702, M.D:07/2017, E.D: 06/2019 |
|  |  | **Mfd by:** M/s Fizark Healthcare  (An ISO 9001:2008 & GMP Certified Co.)  Khasra No:192, 193, 194 & 214  Salempur, Roorkee-247667. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x05x10 | -- | -- | -- |
| **Description** | Off white coloured, oval shaped, biconvex tablet with a score on one side. | | | Complies |
| **Identification** | Positive for  Cefixime as per S.T.P | -- | -- | Complies |
| **Average Weight** | 0.7408gm | -- | -- | Complies |
| **Uniformity of Weight** | Complies as per I.P | -- | -- | Complies |
| **Assay for**  **Cefixime** | 182.25mg | 200mg | 180 – 220mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**P. VENKATESWARLU**, M.Sc.,

To: **Government Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Anakapalli. VIJAYAWADA-520 008

**REPORT NO: 1695 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | DR J. BALU, Vijayawada (Zone-II) |
| 2. | **Serial Number & date of Inspector’s memorandum** | 28/SEPT/JB/DI/Z-II/VJA/17, Dated: 23/09/2017 |
| 3. | **Number of sample** | 419/H/2017 |
| 4. | **Date of Receipt** | 23/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | CEPHALEXIN Capsules I.P 500mg |
|  |  | B.NO: 4901417, M.D:05/2017, E.D: 04/2019 |
|  |  | **Mfd by:** M/s Karnataka Antibiotics & Pharmaceuticals Ltd.,  (Govt. of India Enterprises)  Plot No. 14, II Phase, Peenya, Bangalure- 560058. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x05x10 | -- | -- | -- |
| **Description** | Pale yellow colour cap and body. | | | Complies |
| **Identification** | Positive for  Cephalexin as per I.P | -- | -- | Complies |
| **Average Weight** | 0.5775gm | -- | -- | Complies |
| **Uniformity of Weight** | Complies as per I.P | -- | -- | Complies |
| **Dissolution test** | Complies as per I.P | -- | NLT 75% | Complies |
| **Assay for**  **Cephalexin** | 509.01mg | 500mg | 450 – 550mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**P. VENKATESWARLU**, M.Sc.,

To: **Government Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Vijayawada (Zone-II). VIJAYAWADA-520 008

**REPORT NO: 1696 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | B. Srinivasa Rao, Machilipatnam. |
| 2. | **Serial Number & date of Inspector’s memorandum** | 23/BSR/DI/MTM/2017, Dated: 21/09/2017 |
| 3. | **Number of sample** | 960/T/2017 |
| 4. | **Date of Receipt** | 22/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | DISNEE TABLETS  (Nimesulide and Caffeine Dispersible Tablets) |
|  |  | B.NO: TD-17133, M.D:04/2017, E.D: 03/2019 |
|  |  | **Mfd by:** Horizon Bioceuticals Pvt. Ltd.,  (A group company of Curewell D.P.P.L)  Plot No: 3A, Ind. Area,  Kala Amb, Distt. Sirmour (H.P.) |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x05x10 | -- | -- | -- |
| **Description** | White colour, circular, break line on one side flat tablet. | | | Complies |
| **Identification** | Positive for  Nimesulide as per S.T.P and Caffeine as per I.P | -- | -- | Complies |
| **Average Weight** | 0.6210gm | -- | -- | Complies |
| **Uniformity of Weight** | Complies as per I.P | -- | -- | Complies |
| **Assay for**  **Nimesulide**  **Caffeine** | 98.1mg  27.6mg | 100mg  30mg | 90 - 110mg  27 – 33mg | Complies  Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**P. VENKATESWARLU**, M.Sc.,

To: **Government Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Machilipatnam. VIJAYAWADA-520 008

**REPORT NO: 1697 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | M. Jayalakshmi, Jangareddygudem. |
| 2. | **Serial Number & date of Inspector’s memorandum** | 27/17/MJL/DI/JRG/WG/AP-2017, Dated: 19/09/2017 |
| 3. | **Number of sample** | 967/T/2017 |
| 4. | **Date of Receipt** | 22/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | INSTACEF-200  (Cefpodoxime Tablets I.P) |
|  |  | B.NO:CT170520, M.D:06/2017, E.D: 11/2018 |
|  |  | **Mfd by:** Theon Pharmaceuticals Ltd. Vill. Saini Majra,  Tehsil Nalagarh, Distt. Solan (HP) |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x06x10 | -- | -- | -- |
| **Description** | White colour, elongated, flat tablet. | | | Complies |
| **Identification** | Positive for  Cefpodoxime as per I.P | -- | -- | Complies |
| **Average Weight** | 0.5423gm | -- | -- | Complies |
| **Uniformity of Weight** | Complies as per I.P | -- | -- | Complies |
| **Dissolution test** | Complies as per I.P | -- | NLT 70% | Complies |
| **Assay for**  **Cefpodoxime** | 191.9mg | 200mg | 180 - 220mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**P. VENKATESWARLU**, M.Sc.,

To: **Government Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Jangareddygudem. VIJAYAWADA-520 008

**REPORT NO: 1698 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | A. Krishna, Srikakulam. |
| 2. | **Serial Number & date of Inspector’s memorandum** | 27/09/AK/DI/SKL/2017, Dated: 21/09/2017 |
| 3. | **Number of sample** | 980/T/2017 |
| 4. | **Date of Receipt** | 23/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | FEPANIL  (Paracetamol Tablets I.P) |
|  |  | B.NO: FTV7E014, M.D:05/2017, E.D: 04/2020 |
|  |  | **Mfd by:** M/s Vital Therapeutics & Formulations Pvt. Ltd.,  Plot No.47B/2, Street No.4, phase-I, IDA,  Cherlapally, Hyderabad – 500 084. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per I.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x04x15 | -- | -- | -- |
| **Description** | White, circular, flat tablets with a score on one side. | | | Complies |
| **Identification** | Positive for  Paracetamol as per I.P | -- | -- | Complies |
| **Average Weight** | 0.5777gm | -- | -- | Complies |
| **Uniformity of Weight** | Complies as per I.P | -- | -- | Complies |
| **Dissolution test** | Complies as per I.P | -- | NLT 85% | Complies |
| **Assay for**  **Paracetamol** | 517.64mg | 500mg | 475 - 525mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**P. VENKATESWARLU**, M.Sc.,

To: **Government Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Srikakulam. VIJAYAWADA-520 008

**REPORT NO: 1699 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | B. Srinivasa Rao, Machilipatnam. |
| 2. | **Serial Number & date of Inspector’s memorandum** | 28/BSR/DI/MTM/2017, Dated: 22/09/2017 |
| 3. | **Number of sample** | 424/H/2017 |
| 4. | **Date of Receipt** | 23/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | CETRIZINE TABLETS I.P 10mg |
|  |  | B.NO: APCT-103, M.D:03/2017, E.D: 02/2020 |
|  |  | **Mfd by:** Radico remedies,  123, Mandhain, Barotiwala,  Distt.Solan, 174103 (H.P) |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per I.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x05x10 | -- | -- | -- |
| **Description** | White, circular, biconvex tablets. | | | Complies |
| **Identification** | Positive for  Cetirizine as per I.P | -- | -- | Complies |
| **Average Weight** | 0.1517gm | -- | -- | Complies |
| **Uniformity of content** | Complies as per I.P | -- | -- | Complies |
| **Dissolution test** | Complies as per I.P | -- | NLT 80% | Complies |
| **Assay for**  **Cetirizine** | 9.61mg | 10mg | 9 - 10mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**P. VENKATESWARLU**, M.Sc.,

To: **Government Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Machilipatnam. VIJAYAWADA-520 008

**REPORT NO: 1700 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | M. MURALI, Nellore. |
| 2. | **Serial Number & date of Inspector’s memorandum** | 170905/T/MK/DI/NLR/2017, Dated: 21/09/2017 |
| 3. | **Number of sample** | 989/T/2017 |
| 4. | **Date of Receipt** | 23/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | MAXTRA SYRUP  (Phenylephrine Hydrochloride and Chlorpheniramine Maleate Syrup) |
|  |  | B.NO: ZLKAH17025, M.D:06/2017, E.D: 05/2019 |
|  |  | **Mfd by:** M/s Zuventus Healthcare Ltd.,  A Joint Venture of Emcure 5119,  Oberoi Garden Estates, D-Wing,  Chandivali, Andheri (E), Mumbai 400 072.  At: Plot No.3, MIDC, Shiroli, Kolhapur 416 122. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x01x60ml | -- | -- | -- |
| **Description** | Orange coloured liquid. | | | Complies |
| **Identification** | Positive for  Phenylephrine Hydrochloride and Chlorpheniramine Maleate as per S.T.P | -- | -- | Complies |
| **Assay for**  **Phenylephrine Hydrochloride**  **Chlorpheniramine Maleate** | 5.01mg  1.98mg | 5mg  2mg | 4.5 – 5.5mg  1.8 – 2.2mg | Complies  Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**P. VENKATESWARLU**, M.Sc.,

To: **Government Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Nellore. VIJAYAWADA-520 008

**REPORT NO: 1701 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | N. Kalyani, Vijayawada (Zone-III). |
| 2. | **Serial Number & date of Inspector’s memorandum** | 27/SA/NK/DI/Z-III/VJA/17, Dated: 18/09/2017 |
| 3. | **Number of sample** | 946/T/2017 |
| 4. | **Date of Receipt** | 18/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | HEPAMERZ  (L-Ornithine-L-Aspartate Tablets.) |
|  |  | B.NO: PE0507, M.D:05/2017, E.D: 04/2019 |
|  |  | **Mfd by:** M/s. G.S. Pharmbutor Pvt Ltd,  Plot No: 58,59,66 & 67, Sector 3, I.I.E.,  Pantanagar, Rudrapur – 263 153,  Distt. Udham Singh Nagar, Uttarakhand, India. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per I.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x5x10 | -- | -- | -- |
| **Description** | Brown coloured, circular, biconvex, coated and uniform tablets. | | | Complies |
| **Identification** | Positive for  L-Ornithine-L-Aspartate as per I.P | -- | -- | Complies |
| **Average Weight** | 0.4061gm | -- | -- | Complies |

In the opinion of the undersigned the sample referred to above is **QUALITATIVELY** **STANDARD**.

Complies for the tests conducted as described above.

Date: /10/2017

**K. GOVINDA KRISHNA,** M.Sc,

Senior Scientific Officer &

To: **Government** **Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Vijayawada (Zone-III). VIJAYAWADA-08

**REPORT NO: 1702 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | P. Sri Rama Murthy, Piduguralla (FAC). |
| 2. | **Serial Number & date of Inspector’s memorandum** | 1809-05/DI/PGRL/2017, Dated: 18/09/2017 |
| 3. | **Number of sample** | 955/T/2017 |
| 4. | **Date of Receipt** | 20/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | FLOMET  (Folic Acid Tablets I.P) |
|  |  | B.NO: NFT 1295, M.D:06/2017, E.D: 05/2019 |
|  |  | **Mfd by:** M/s NOUVEAU MEDICAMENT (P) Ltd.  Plot No 9-13,  Golden Jubilee Bio-Tech Park,  Siruseri – 603 103. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x06x10 | -- | -- | -- |
| **Description** | Orange coloured, circular, biconvex, coated and uniform tablets. | | | Complies |
| **Identification** | Positive for  Folic acid as per S.T.P | -- | -- | Complies |
| **Uniformity of Weight** | Complies as per I.P | -- | -- | Complies |
| **Uniformity of Content** | Complies as per I.P | -- | -- | Complies |
| **Assay for**  **Folic Acid** | 531.86mcg | 500mcg | 450 – 575mcg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**K. GOVINDA KRISHNA,** M.Sc,

Senior Scientific Officer &

To: **Government** **Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Piduguralla (FAC). VIJAYAWADA-08

**REPORT NO: 1703 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | K.V. Bhupesu, Gajuwaka (Sales). |
| 2. | **Serial Number & date of Inspector’s memorandum** | SA/34/DI/GWK/VSP/2017, Dated: 20/09/2017 |
| 3. | **Number of sample** | 972/T/2017 |
| 4. | **Date of Receipt** | 23/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | Ashycloflam Plus  (Aceclofenac and Paracetamol Tablets) |
|  |  | B.NO: CNK612003, M.D:12/2016, E.D: 11/2018 |
|  |  | **Mfd by:** M/s Celebrity Biopharma Ltd,  Village-Panga, Via-Jharmajri, Hill Top-estate,  Barotiwala, Dist. Solan (H.P) – 174103. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x05x10 | -- | -- | -- |
| **Description** | Orange, elongated and biconvex tablet with a score on one side. | | | Complies |
| **Identification** | Positive for  Aceclofenac and Paracetamol as per S.T.P | -- | -- | Complies |
| **Average Weight** | 0.7586gm | -- | -- | Complies |
| **Uniformity of Weight** | Complies as per I.P | -- | -- | Complies |
| **Assay for**  **Aceclofenac**  **Paracetamol** | 95.80mg  325.85mg | 100mg  325mg | 90 – 110mg  292.5 – 357.5mg | Complies  Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**K. GOVINDA KRISHNA,** M.Sc,

Senior Scientific Officer &

To: **Government** **Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Gajuwaka (Sales). VIJAYAWADA-08

**REPORT NO: 1704 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | T. Venkata Krishna, Pulivendula (FAC). |
| 2. | **Serial Number & date of Inspector’s memorandum** | 01-09/TVK/DI/PVL/2017, Dated: 20/09/2017 |
| 3. | **Number of sample** | 982/T/2017 |
| 4. | **Date of Receipt** | 23/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | Levcet-5 Tablets  (Levocetirizine Hcl Tablets I.P) |
|  |  | B.NO:FVCT-002, M.D:11/2015, E.D: 10/2018 |
|  |  | **Mfd by:** M/s LABORATE PHARMACEUTICALS INDIA. LTD.  #31, Rajban road,  Nariwala, Paonta Sahib, (H.P). |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x05x10 | -- | -- | -- |
| **Description** | White, oral, biconvex, coated and uniform tablets. | | | Complies |
| **Identification** | Positive for  Levocetirizine Hcl as per S.T.P | -- | -- | Complies |
| **Average Weight** | 0.2372gm | -- | -- | Complies |
| **Uniformity of Content** | Complies as per I.P | -- | -- | Complies |
| **Dissolution test** | Complies as per I.P | -- | NLT 75% | Complies |
| **Assay for levocetirizine** | 4.90mg | 5mg | 4.5 – 5.5mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**K. GOVINDA KRISHNA,** M.Sc,

Senior Scientific Officer &

To: **Government** **Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Pulivendula (FAC). VIJAYAWADA-08

**REPORT NO: 1705 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | A. Krishna, Srikakulam. |
| 2. | **Serial Number & date of Inspector’s memorandum** | 28/09/AK/DI/SKL/2017, Dated: 21/09/2017 |
| 3. | **Number of sample** | 981/T/2017 |
| 4. | **Date of Receipt** | 23/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | CEFILAB-200  (Cefixime Tablets I.P 200mg) |
|  |  | B.NO:BC31031, M.D:10/2016, E.D: 09/2018 |
|  |  | **Mfd by:** M/s Ozone Pharmaceuticals Ltd.,  Katha, Baddi – 173 205, Himachal Pradesh. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x05x10 | -- | -- | -- |
| **Description** | Circular, biconvex, pale yellow colour Tablets. | | | Complies |
| **Identification** | Positive for  Cefixime as per S.T.P | -- | -- | Complies |
| **Average Weight** | 0.3202gm | -- | -- | Complies |
| **Uniformity of Weight** | Complies as per I.P | -- | -- | Complies |
| **Dissolution test** | Complies as per I.P | -- | NLT 80% | Complies |
| **Assay for**  **Cefixime** | 187.43mg | 200mg | 180 – 220mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**K. GOVINDA KRISHNA,** M.Sc,

Senior Scientific Officer &

To: **Government** **Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Srikakulam. VIJAYAWADA-08

**REPORT NO: 1706 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | N. Yugandhar Rao, Vizianagaram. |
| 2. | **Serial Number & date of Inspector’s memorandum** | SA/26/NYR/DI/VZM/2017, Dated: 21/09/2017 |
| 3. | **Number of sample** | 991/T/2017 |
| 4. | **Date of Receipt** | 23/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | Lanol 650  (Paracetamol Tablets I.P 650mg) |
|  |  | B.NO: HE7004, M.D:03/2017, E.D: 02/2020 |
|  |  | **Mfd by:** M/s HSN Inetrnational,  Plot No.54-55, Sector-6A, Sidcul,  Haridwar, Uttarakhand. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x05x10 | -- | -- | -- |
| **Description** | White colour, uniform, oval shaped, biconvex tablets with break line at one side. | | | Complies |
| **Identification** | Positive for  Paracetamol as per S.T.P | -- | -- | Complies |
| **Average Weight** | 0.7455gm | -- | -- | Complies |
| **Uniformity of Weight** | Complies as per I.P | -- | -- | Complies |
| **Dissolution test** | Complies as per I.P | -- | NLT 80% | Complies |
| **Assay for**  **Paracetamol** | 679.45mg | 650mg | 617.5 – 682.5mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**K. GOVINDA KRISHNA,** M.Sc,

Senior Scientific Officer &

To: **Government** **Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Vizianagaram. VIJAYAWADA-08

**REPORT NO: 1707 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | P. Mallikarjuna Rao, Amalapuram. |
| 2. | **Serial Number & date of Inspector’s memorandum** | 23/DI/AMP/PMKR/EG/2017, Dated: 29/08/2017 |
| 3. | **Number of sample** | 866/T/2017 |
| 4. | **Date of Receipt** | 01/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | MITMOX-CV 625  (Amoxycillin & Potassium Clavulanate with Lactic Acid Bacillus Tab) |
|  |  | B.NO:JUB-17069, M.D:06/2017, E.D: 11/2018 |
|  |  | **Mfd by:** M/s SUPERMAX LABORATORIES,  Plot No: 40, Pharma City, Salaqui Industrial Area,  Dehradun – 248 001. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x09x06 | -- | -- | -- |
| **Description** | White coloured, elongated, biconvex tablet. | | | Complies |
| **Identification** | Positive for  Amoxycillin and Potassium Clavulanate as per I.P | -- | -- | Complies |
| **Average Weight** | 1.1037gm | -- | -- | Complies |
| **Uniformity of Weight** | Complies as per I.P | -- | -- | Complies |
| **Dissolution test for**  **Amoxycillin**  **Potassium Clavulanate** | Complies as per I.P  Complies as per I.P | --  -- | NLT 85%  NLT 80% | Complies  Complies |
| **Assay for**  **Amoxycillin** | 490.3mg | 500mg | 450 – 550mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**P. VENKATESWARLU**, M.Sc.,

To: **Government Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Amalapuram. VIJAYAWADA-520 008

**REPORT NO: 1708 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | K. Kalyani, Palakonda. |
| 2. | **Serial Number & date of Inspector’s memorandum** | 27/09/KK/DI/PLK/2017, Dated: 21/09/2017 |
| 3. | **Number of sample** | 978/T/2017 |
| 4. | **Date of Receipt** | 23/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | XYKAA Rapid  (Paracetamol Tablets IP 500mg) |
|  |  | B.NO: X12736, M.D:10/2016, E.D: 09/2019 |
|  |  | **Mfd by:** M/s Troikaa Pharmaceuticals Ltd,  Sara Industrial Estate, Selaqui, Dehradun-248197,  Uttarakhand, India. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x05x10 | -- | -- | -- |
| **Description** | White coloured, square shaped, flat tablet with monogram “X” on one side. | | | Complies |
| **Identification** | Positive for  Paracetamol as per S.T.P | -- | -- | Complies |
| **Average Weight** | 0.5432gm | -- | -- | Complies |
| **Uniformity of Weight** | Complies as per I.P | -- | -- | Complies |
| **Dissolution test** | Complies as per I.P | -- | NLT 80% | Complies |
| **Assay for**  **Paracetamol** | 490.4mg | 500mg | 475 – 525gm | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**P. VENKATESWARLU**, M.Sc.,

To: **Government Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Palakonda. VIJAYAWADA-520 008

**REPORT NO: 1709 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | K. Kalyani, Palakonda. |
| 2. | **Serial Number & date of Inspector’s memorandum** | 28/09/KK/DI/PLK/2017, Dated: 21/09/2017 |
| 3. | **Number of sample** | 979/T/2017 |
| 4. | **Date of Receipt** | 23/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | FLOXIP-500  (Ciprofloxacin Tablets IP) |
|  |  | B.NO: S017260, M.D:04/2017, E.D: 03/2020 |
|  |  | **Mfd by:** M/s Scott-Edil Pharmacia Ltd, 56,  E.P.I.P.Phase-I, Jharmajri-173205, Baddi, India. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x05x10 | -- | -- | -- |
| **Description** | White colour, oval shape, biconvex tablet with monogram “500mg” on one side and another side “floxip”. | | | Complies |
| **Identification** | Positive for  Ciprofloxacin as per I.P | -- | -- | Complies |
| **Average Weight** | 0.7226gm | -- | -- | Complies |
| **Uniformity of Weight** | Complies as per I.P | -- | -- | Complies |
| **Dissolution Test** | Complies as per I.P | -- | NLT 80% | Complies |
| **Assay for**  **Ciprofloxacin** | 496.1mg | 500mg | 450 – 550mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**P. VENKATESWARLU**, M.Sc.,

To: **Government Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Palakonda. VIJAYAWADA-520 008

**REPORT NO: 1710 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | A. Lavanya, Tekkali. |
| 2. | **Serial Number & date of Inspector’s memorandum** | 26/09/AL/DI/TKL/2017, Dated: 20/09/2017 |
| 3. | **Number of sample** | 432/H/2017 |
| 4. | **Date of Receipt** | 25/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | SYNFLOX  (Ofloxacin Oral suspension) |
|  |  | B.NO: 616205, M.D:09/2016, E.D: 08/2018 |
|  |  | **Mfd by:** M/s Syndicate Pharma, 188, Sector F,  Sanwer Road, Indore, MP-452015. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x60ml | -- | -- | -- |
| **Description** | Orange coloured liquid. | | | Complies |
| **Identification** | Positive for  Ofloxacin as per S.T.P | -- | -- | Complies |
| **Assay for**  **Ofloxacin** | 47.69mg | 50mg | 45 – 55mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**P. VENKATESWARLU**, M.Sc.,

To: **Government Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Tekkali. VIJAYAWADA-520 008

**REPORT NO: 1711 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | S. Jaya Ramudu, Markapur. |
| 2. | **Serial Number & date of Inspector’s memorandum** | SA/29/DI/MKP/2017, Dated: 18/09/2017 |
| 3. | **Number of sample** | 414/H/2017 |
| 4. | **Date of Receipt** | 20/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | GLIMEPIRIDE TABLETS IP 1 MG |
|  |  | B.NO: GLM16-005, M.D:02/2017, E.D: 01/2019 |
|  |  | **Mfd by:** GREENLAND ORGANICS, 6-174-1,  Industrial Area, Surampalli-521212. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x05x10 | -- | -- | -- |
| **Description** | White coloured, circular, biconvex tablet. | | | Complies |
| **Identification** | Positive for  Glimepiride as per I.P | -- | -- | Complies |
| **Average Weight** | 0.10345gm | -- | -- | Complies |
| **Uniformity of Content** | Complies as per S.T.P | -- | -- | Complies |
| **Assay for**  **Glimepiride** | 1.056mg | 1mg | 0.9 – 1.1mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**P. VENKATESWARLU**, M.Sc.,

To: **Government Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Markapur. VIJAYAWADA-520 008

**REPORT NO: 1712 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | M. Srinivas Rao, Bobbili. |
| 2. | **Serial Number & date of Inspector’s memorandum** | SA/21/DI/BBL /2017, Dated: 20/09/2017 |
| 3. | **Number of sample** | 977/T/2017 |
| 4. | **Date of Receipt** | 23/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | Phexin(R)  (Cephalexin Suspension 125 mg/5 ml) |
|  |  | B.NO: P182, M.D:08/2017, E.D: 01/2019 |
|  |  | **Mfd by:** Glaxosmithkline Pharmaceuticals Ltd,  At Plot No: B-77, SIDCO Industrial Estate,  Alathur-603110. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x60ml | -- | -- | -- |
| **Description** | Pale yellow colour suspension. | | | Complies |
| **Identification** | Positive for  Cephalexin as per S.T.P | -- | -- | Complies |
| **Assay for**  **Cephalexin** | 126.98mg | 125mg | 118.75 – 131.25mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**P. VENKATESWARLU**, M.Sc.,

To: **Government Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Bobbili. VIJAYAWADA-520 008

**REPORT NO: 1713 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | M. Chandra Rao, Kakinda (Urban). |
| 2. | **Serial Number & date of Inspector’s memorandum** | SA/25/DI/EG/KKD/U/2017, Dated: 19/09/2017 |
| 3. | **Number of sample** | 964/T/2017 |
| 4. | **Date of Receipt** | 22/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | SETRIDE Tablets  (Cetirizine Dihydrochloride Tablets I.P) |
|  |  | B.NO: WPE1723, M.D:06/2017, E.D: 05/2020 |
|  |  | **Mfd by:** Prochem Pharmaceuticals Pvt. Ltd, 140-141,  Makkanpur, Bhagwanpur, Roorkee, Distt: Haridwar,  Uttarakhand-247661. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x06x10 | -- | -- | -- |
| **Description** | White colour, elongated, biconvex tablet with score on one side. | | | Complies |
| **Identification** | Positive for  Cetirizine as per I.P | -- | -- | Complies |
| **Average Weight** | 0.1829mg | -- | -- | Complies |
| **Uniformity of Content** | Complies as per I.P | -- | -- | Complies |
| **Dissolution Test** | Complies as per I.P | -- | NLT 75% | Complies |
| **Assay for**  **Cetirizine** | 10.19mg | 10mg | 9 – 11mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**P. VENKATESWARLU**, M.Sc.,

To: **Government Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Kakinada (Urban). VIJAYAWADA-520 008

**REPORT NO: 1714 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | N. Yugandhar Rao, Vizianagaram. |
| 2. | **Serial Number & date of Inspector’s memorandum** | SA/27/NYR/DI/VZM/2017, Dated: 21/09/2017 |
| 3. | **Number of sample** | 992/T/2017 |
| 4. | **Date of Receipt** | 23/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | GERMOX-500  (Amoxycillin Capsules I.P) |
|  |  | B.NO: ZQH0004, M.D:06/2016, E.D: 05/2018 |
|  |  | **Mfd by:** M/s Preet Remedies Pvt. Ltd.,  At: Plot No.86A, EPIP, Phase-II,  Thana, Baddi, Distt. Solan (H.P) |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x05x10 | -- | -- | -- |
| **Description** | Yellow colour capsule with monogram “GERMOX” on cap and 500 on body with white crystalline powder inside. | | | Complies |
| **Identification** | Positive for  Amoxycillin as per I.P | -- | -- | Complies |
| **Average Weight** | 0.5882gm | -- | -- | Complies |
| **Uniformity of Weight** | Complies as per I.P | -- | -- | Complies |
| **Dissolution Test** | Complies as per I.P | -- | NLT 80% | Complies |
| **Assay for**  **Amoxycillin** | 507.28mg | 500mg | 450 – 550mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**P. VENKATESWARLU**, M.Sc.,

To: **Government Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Vizianagaram. VIJAYAWADA-520 008

**REPORT NO: 1715 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | P. Sri Rama Murthy, Piduguralla (FAC). |
| 2. | **Serial Number & date of Inspector’s memorandum** | 1809-03/DI/PGRL/2017, Dated: 18/09/2017 |
| 3. | **Number of sample** | 953/T/2017 |
| 4. | **Date of Receipt** | 20/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | OMPREST-D  (Omeprazole & Domperidone Capsules) |
|  |  | B.NO: BPLC-620, M.D:01/2017, E.D: 12/2018 |
|  |  | **Mfd by:** M/s BENNET PHARMACEUTICALS LTD.  Village Chanal Majra, Nr. Manpura, Baddi,  Tal. Nalagarh, Distt. Solan (H.P) - 173205. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per I.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x06x10 | -- | -- | -- |
| **Description** | Transparent red colour cap and colourless body with white colour granules inside. | | | Complies |
| **Identification** | Positive for  Omeprazole and Domperidone as per I.P | -- | -- | Complies |
| **Average Weight** | 0.2924gm | -- | -- | Complies |
| **Uniformity of Weight** | Complies as per I.P | -- | -- | Complies |
| **Assay for**  **Omeprazole**  **Domperidone** | 19.89mg  10.77mg | 20mg  10mg | 18 – 22mg  9 – 11mg | Complies  Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**P. VENKATESWARLU**, M.Sc.,

To: **Government Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Piduguralla (FAC). VIJAYAWADA-520 008

**REPORT NO: 1716 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | T. Venkata Krishna, Kadapa. |
| 2. | **Serial Number & date of Inspector’s memorandum** | SA/36/DI/KDP/2017, Dated: 06/09/2017 |
| 3. | **Number of sample** | 918/T/2017 |
| 4. | **Date of Receipt** | 08/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | AUGUKA 625 |
|  |  | B.NO:DT17DO66-1, M.D:04/2017, E.D: 09/2018 |
|  |  | **Mfd by:** M/s Medicef Pharma,  Plot No.28, Phase-I,  EPIP Jharmajri, Baddi, Distt. Solan(H.P) |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per I.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x10x06 | -- | -- | -- |
| **Description** | White, elongated, biconvex, plain tablet. | | | Complies |
| **Identification** | Positive for  Amoxycillin and Clavulanic acid as per I.P | -- | -- | Complies |
| **Average Weight** | 1.03756gm | -- | -- | Complies |
| **Uniformity of Weight** | Complies as per I.P | -- | -- | Complies |
| **Dissolution Test for**  **Amoxycillin**  **Clavulanic Acid** | Complies as per I.P  Complies as per I.P | --  -- | NLT 85%  NLT 80% | Complies  Complies |
| **Assay for**  **Amoxycillin**  **Clavulanic Acid** | 473.82mg  120.21mg | 500mg  125mg | 450 - 550mg  112.5 – 137.5mg | Complies  Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**P. VENKATESWARLU**, M.Sc.,

To: **Government Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Kadapa. VIJAYAWADA-520 008

**REPORT NO: 1717 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | DR J. BALU, Vijayawada (Zone-II). |
| 2. | **Serial Number & date of Inspector’s memorandum** | 29/SEPT/JB/DI/Z-II/VJA/17, Dated: 23/09/2017 |
| 3. | **Number of sample** | 420/H/2017 |
| 4. | **Date of Receipt** | 23/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | Asmol-650  (Paracetamol Tablets IP 650mg) |
|  |  | B.NO: TPT - 170314, M.D:03/2017, E.D: 02/2020 |
|  |  | **Mfd by:** M/s Talwar Pharma,  Kurbi, Jhabrera road, Manglour,  Roorkee – 247656 (U.K) |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per I.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x05x10 | -- | -- | -- |
| **Description** | White, oval, biconvex tablet with score on one side. | | | Complies |
| **Identification** | Positive for  Paracetamol as per I.P | -- | -- | Complies |
| **Average Weight** | 0.7348gm | -- | -- | Complies |
| **Uniformity of Weight** | Complies as per I.P | -- | -- | Complies |
| **Dissolution Test** | Complies as per I.P | -- | NLT 80% | Complies |
| **Assay for**  **Paracetamol** | 638.33mg | 650mg | 617.5 – 682.5mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**P. VENKATESWARLU**, M.Sc.,

To: **Government Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Vijayawada (Zone-II). VIJAYAWADA-520 008

**REPORT NO: 1718 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | M. Srinivas Rao, Bobbili. |
| 2. | **Serial Number & date of Inspector’s memorandum** | SA/20/DI/BBL/2017, Dated: 20/09/2017 |
| 3. | **Number of sample** | 976/T/2017 |
| 4. | **Date of Receipt** | 23/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | CALPOL-250mg Suspension. |
|  |  | B.NO: KB218, M.D:05/2017, E.D: 04/2019 |
|  |  | **Mfd by:** Glaxosmithkline Pharmaceuticals Ltd,  At 34th Km, Tumkur Road, Nelamangala,  Bangalore (Rural) – 562123. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x60ml | -- | -- | -- |
| **Description** | Pink coloured syrup. | | | Complies |
| **Identification** | Positive for  Paracetamol as per Clarck | -- | -- | Complies |
| **Assay for**  **Paracetamol** | 252.44mg | 250mg | 237.5 – 262.5mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**P. VENKATESWARLU**, M.Sc.,

To: **Government Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Bobbili. VIJAYAWADA-520 008

**REPORT NO: 1719 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | R. Lalita, Narsipatnam. |
| 2. | **Serial Number & date of Inspector’s memorandum** | 26/SA/G/DI/DCA/NRPM/2017, Dated: 13/09/2017 |
| 3. | **Number of sample** | 412/H/2017 |
| 4. | **Date of Receipt** | 19/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | ZINC SULPHATE DISPERSIBLE TABLETS IP 20 MG |
|  |  | B.NO:ZNT-001, M.D:06/2016, E.D: 05/2018 |
|  |  | **Mfd by:** Radico Remedies,  Barotiwala, Distt. Solan (H.P) |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per I.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x06x10 | -- | -- | -- |
| **Description** | White, circular, biconvex, plain tablet. | | | Complies |
| **Identification** | Positive for  Elemental Zinc as per I.P | -- | -- | Complies |
| **Average Weight** | 0.1535gm | -- | -- | Complies |
| **Uniformity of Weight** | Complies as per I.P | -- | -- | Complies |
| **Assay for**  **Elemental Zinc** | 20.12mg | 20mg | 18 – 22mg | Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**P. VENKATESWARLU**, M.Sc.,

To: **Government Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Narsipatnam. VIJAYAWADA-520 008

**REPORT NO: 1720 /APDCL/2017**

**FORM – 13**

**(See Rule-46)**

**DRUGS AND COSMETICS RULES, 1945**

**CERTIFICATE OF TEST OR ANALYSIS BY GOVERNMENT ANALYST**

**UNDER SECTION 25(1) OF DRUGS AND COSMETICS ACT, 1940**

|  |  |  |
| --- | --- | --- |
| 1. | **Name of the Inspector from whom received** | R. Lalita, Narsipatnam. |
| 2. | **Serial Number & date of Inspector’s memorandum** | 28/SA/T/DI/DCA/NRPM/2017, Dated: 20/09/2017 |
| 3. | **Number of sample** | 971/T/2017 |
| 4. | **Date of Receipt** | 23/09/17 |
| 5. | **Name of drugs purporting to be contained in the sample** | PYRIN-C  (Parcetamol, Phenylephrine Hcl & Chlorpheniramine Maleate Tablets) |
|  |  | B.NO: 63TPN011, M.D:11/2016, E.D: 10/2018 |
|  |  | **Mfd by:** Swiss Garnier Genexiaa Sciences,  Plot No. 54 & 78, Mamring Bhasti,  Rangpo Post, South Sikkim – 737 132. |
| 6. | **Conditions of seals on the package** | SEALS INTACT AND IDENTICAL WITH THE SPECIMEN SEAL. |
| 7. | **Result of test or analysis with protocols of the test applied** | As per S.T.P |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TESTS DONE** | **FOUND** | **CLAIM** | **LIMITS** | **Complies/ Not Complies** |
| **Quantity Received** | 01x06x10 | -- | -- | -- |
| **Description** | Yellow colour, circular, flat tablets with score on one side. | | | Complies |
| **Identification** | Positive for  Parcetamol, Phenylephrine Hcl & Chlorphenaramine Maleate as per S.T.P | -- | -- | Complies |
| **Average Weight** | 0.7311gm | -- | -- | Complies |
| **Uniformity of Weight** | Complies as per I.P | -- | -- | Complies |
| **Assay for**  **Paracetamol**  **Chlorphenaramine**  **Phenylephrine** | 498.02mg  4.18mg  9.86mg | 500mg  4mg  10mg | 450 – 550mg  3.6 – 4.4mg  9 – 11mg | Complies  Complies  Complies |

In the opinion of the undersigned the sample referred to above is of **STANDARD QUALITY** as defined

in the Drugs and Cosmetics Act, 1940 and rules there under for the reasons given below.

Complies for the Tests Conducted as described above.

Date: /10/2017

**P. VENKATESWARLU**, M.Sc.,

To: **Government Analyst**

The Drugs Inspector, DRUGS CONTROL LABORATORY

Narsipatnam. VIJAYAWADA-520 008