

## **VELLINTON HEALTHCARE**

(Earlier Known as Texus Meditech) Village Rampur Jattan, Trilokpur Road, Kala Amb, Dist. Sirmour.

## QUALITY CONTROL DEPARTMENT

## CERTIFICATE OF ANALYSIS

**Product Name** :FRASIX-40 Frusemide Injection IP. Batch No. : GA24D-51A Mfg. Date : 04/2024 **Batch Size** : 24300 Ampoules Exp. Date : 03/2026 Sample Qty. : 50 Ampoules Analytical Report No.: AFP20240177 Date of Receiving: 24/04/2024 Date of Completion: 08/05/2024

Mfg. License No. : N-MB/18/201

S. No.	Tests	Specifications		Observations	Observations		
1.	Description	A clear colourless or almost colorless solution filled in 4 ml amber colour glass ampoule.		A clear colourless or almost colorless solution filled in 4 ml amber colour glass ampoule.			
2.	Identification A (By UV)	When examined in the range 220 nm to 360 nm, the final solution obtained in the assay shows three absorption maxima at about 228 nm, 271 nm and 333 nm.		Complies			
	B (By Chemically)	A red-violet colour is p	roduced	Complies			
3.	Uniformity of filled volume	Not less than nominal volume		Min: 4.0 ml Max: 4.1 ml	P C A I		
4.	Average fill volume	Not less than 4 ml		4.05 ml			
5.	рН	8.0 to 9.30		8.98			
6.	Related Substances						
	Single impurity	NMT 1.0%		Not Detected			
	Total impurities	NMT 1.50%		Not Detected			
7.	Particulate Matter						
	≥ 10µm	NMT 6000 particles/Ar	mpoule	Less than 6000 particles/ Ampoule			
	≥ 25µm	NMT 600 particles/Ampoule		Less than 600 particles/ Ampoule			
8.	Sterility	Should be Sterile		Sterile			
9.	Bacterial Endotoxins	NMT 3.5 Eu/mg of furosemide.		Less than 3.5 Eu/mg			
10.	Assay : Each ml contains						
Composition:		Labeled Claim	Found	% of labeled amount	Limits % of labeled amoun		
Frusemide IP		10.0 mg	10.21 mg	102.10 %	95.0% to 105%		

Remarks: In the opinion of the undersigned the sample submitted comptles/does not complies with the prescribed standard/not standard of quality, as according to I.P. and IHS with respect to the above test only.

Analyzed By QC Officer	Checked By QC Executive		Approved By QC Manager/ In-charge
Signature:- 08 05 29	Signature:- Date:-	Madelois	Cianatura: 4 NV 1 At

Format No.: VH/SOP/QC-062/FT01-00