	LTH AND HUMAN SERVICES IG ADMINISTRATION		
DISTRICT ADDRESS AND PHONE NUMBER	DATE(S) OF INSPECTION		
6751 Steger Drive	8/20/2018-10/24/2018*		
Cincinnati, OH 45237-3097 (513)679-2700 Fax:(513)679-2772	FEI NUMBER 3012315020		
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED			
Jeremy S. Delk, CEO/Owner			
FIRM NAME	STREET ADDRESS		
Tailor Made Compounding, LLC	200 Moore Drive		
CITY, STATE, ZIP CODE, COUNTRY	TYPE ESTABLISHMENT INSPECTED		
Nicholasville, KY 40356-8512	512 Producer of Sterile Drugs		

This document lists observations made by the FDA representative(s) during the inspection of your facility. They are inspectional observations, and do not represent a final Agency determination regarding your compliance. If you have an objection regarding an observation, or have implemented, or plan to implement, corrective action in response to an observation, you may discuss the objection or action with the FDA representative(s) during the inspection or submit this information to FDA at the address above. If you have any questions, please contact FDA at the phone number and address above.

## DURING AN INSPECTION OF YOUR FIRM WE OBSERVED: **OBSERVATION 1**

Investigations of an unexplained discrepancy and a failure of a batch or any of its components to meet any of its specifications did not extend to other batches of the same drug product and other drug products that may have been associated with the specific failure or discrepancy.

Specifically, your firm has documented 5 sterility failures since January 2016 to present. The following products were not dispensed to patients:

Date Compounded	Product	Lot Number	Sterility Failure Date
11/1/17	Thymosin Alpha	1101201705	11/15/17
10/30/17	IGF-1	10301704	11/15/17
12/20/17	IGF-1 LR3	12201709	1/10/18
1/24/18	BPC-157	01241805	2/13/18
1/24/18	HCG-4000	01241804	2/13/18

Your firm does not evaluate other products that were produced in the same time-period in which the sterility failure occurred. Per firm management, your firm performs a cleaning after a sterility failure, however, there is no written documentation that this additional cleaning of your ISO 5 and ISO 7 areas is performed.

#### **AMENDMENT 2**

SEE REVERSE OF THIS PAGE	Michael P Sheehan, Nicholas L Paulin,	3	Nicholen L. Paulin Investigator Stand By Nicholes L. Paulin - S X Date Signed: 10-24-2016 12:52:36	10/24/2018
FORM FDA 483 (09/08)	PREVIOUS EDITION OBSOLETE	INSPECTIONAL OBSERVAT	IONS	PAGE 1 of 8 PAGES

D HUMAN SERVICES DISTRATION
DATE(S) OF INSPECTION
8/20/2018-10/24/2018*
FEI NUMBER 3012315020
ADDRESS
Moore Drive
TABLISHMENT INSPECTED
ducer of Sterile Drugs
1

## **OBSERVATION 2**

Procedures designed to prevent microbiological contamination of drug products purporting to be sterile are not established, written and followed.

- a.) Your firm does not have any hold time studies for how long stoppers, vials and seals (caps) can be stored after being (b) (4) prior to being used in sterile operations. On 8/21/18, we observed your pharmacy technician using the (b) (4) in sterile operations while producing Thymosin Beta Injectable (lot# 0821201806), by (b) (4) with their gloved hands.
- b.) Media fills do not simulate your sterile operations process under normal operating conditions. Your media fills are not performed under worst case aseptic processing conditions, for example, your firm produces batches that consists of (b) (4) of vials during normal sterile operations under the ISO 5 hood, whereas your media fill consists of only vials being filled and does not incorporate any interventions that may occur during sterile operations.
- c.) Your firm does not include the (b) (4) into the media fill program. No media fills are performed on the(b) (4) process. For example, your firm produces the following two (b) (4) products at your facility: Tesamorelin and HCG.

#### **OBSERVATION 3**

Protective apparel is not worn as necessary to protect drug products from contamination.

Specifically, on 8/21/18, while observing sterile operations, we observed a pharmacy technician enter the ISO 7 room, which your firm identifies as the USP 797 room. This room contains the ISO 5 hood. We observed your pharmacy technician enter your USP 797 room from your ISO 7 Ante room with

### **AMENDMENT 2**

	EMPLOYEE(S) SIGNATURE Michael P Sheehan, Nicholas L Paulin,		Nicotokas L.Patidrin ternestigatis Nichokas L. Patidri -S. Silpani Syr. Nichokas L. Patidri -S. Dulle Systems: 10-24-2018 12:52:36	10/24/2018
FORM FDA 483 (09/08)	PREVIOUS EDITION OBSOLETE	INSPECTIONAL OBSERVATION	NS	PAGE 2 of 8 PAGES

	DEPAI	TIMENT OF HEALTH AND HUN			
DISTRICT ADDRESS AND PHO	NE NUMBER	FOOD AND DRUG ADMINISTRA	DATE(S) OF INSPECTION		
6751 Steger			8/20/2018-10/24/2	2018*	
	ОН 45237-3097	241	FEI NUMBER 3012315020		
(513) 679-270	0 Fax: (513) 679-27	/2			
NAME AND TITLE OF INDIVIDU	AL TO WHOM REPORT ISSUED		Andrew - I all the		
Jeremy S. De	lk, CEO/Owner				
FIRM NAME	64	STREET ADDRES			
	Compounding, LLC	Processor Sylvens	200 Moore Drive		
CITY, STATE, ZIP CODE, COUN			MENT INSPECTED		
Nicholasvill	e, KY 40356-8512	Produce	r of Sterile Drugs		
OBSERVATION Aseptic process the aseptic condition a.) Specifically, studies were personal smoke studies. firm's smoke st	ing areas are deficien litions.  smoke studies are conformed on (b) (4) Your firm does not pludies and they were b	nducted every (b) (4)  Prior to Nove erform smoke studies unrief and had no descripti	by a third-party. Your tember 2017 your firm der dynamic conditions on of what action was be	firm's smoke lid not perform s. We reviewed your being performed.	
	rm does not include t	oke studies, it was diffic he (b) (4) process	in your smoke studies		
		n and HCG using a (b) (4	The same of the sa	e ISO 5 hood. The	
process include	•	vial, (b) (4)	vials from th	e(b) (4) and	
(b) (4)	vial (b) (4)	from the (b) (4)		S 7 S 2 7	
	and frequencial and the second of the first of the second and	der static conditions and o evaluate the efficiency		THE RESIDENCE OF THE PARTY OF T	
OBSERVATIO	ON 5	AMENDMENT 2			
		AMILINDIVILINI Z			
SEE REVERSE OF THIS PAGE	employee(s)sknature Michael P Sheeha Nicholas L Pauli		Nachciae L Petulin treeslighter Signed By Arbodae L Date Signed: 10-24-20	DATE ISSUED 10/24/2018 18 12:52:36	
FORM FDA 483 (09/08)	PREVIOUS EDITION OBSOLETS	INSPECTIONAL	OBSERVATIONS	PAGE 3 of 8 PAGES	

		TH AND HUMAN SERVICE ADMINISTRATION	CES	
	NE NUMBER	DATE(S) OF IN	018-10/24/2018	*
	IAL TO WHOM REPORT ISSUED			
Jeremy S. De	lk, CEO/Owner	STREET ADDRESS		
	Compounding, LLC	200 Moore Drive		
CITY, STATE, ZIP CODE, COUN		TYPE ESTABLISHMENT INSPECTED		
Nicholasvill	e, KY 40356-8512	Producer of Ste	rile Drugs	
equipment to pr	sing areas are deficient regarding the roduce aseptic conditions.  our firm's bactericidal agent (b) (4)  for cleaning the ISO 5 hood, ISO	used for cle	aning is not sterile	
a.) Specifically, performs sterile monitoring. You sterile operation consists of finge operators.  b.) Your firm do	your firm only conducts personnel operations. No other personnel more firm does not document the time of as, during sterile operations or after ser tips only. No other areas such as forces not have alarms connected to your fing production. Furthermore, your fing production.	monitoring every (be nitoring is performed when personnel more sterile operations). You conceive the magnehelic gauge firm only records the	on each ind besides this (b) (4) anitoring is perform Your firm's person thest are monitored es to monitor pressures in the compressures in the compressure in the com	dividual that  (i.e. before nel monitoring for the sure net aseptic
	als issued for a batch were not caref ed in the master or batch production		lentity and confort	nity to the
SEE REVERSE OF THIS PAGE	EMPLOYEE(S)SIGNATURE Michael P Sheehan, Investiga Nicholas L Paulin, Investiga		Muholes L. Paulai Investigate Signed By: Nicholas L. Paula - S Oale Signed: 10-24-2018 12/52/36	DATE ISSUED 10/24/2018

INSPECTIONAL OBSERVATIONS

FORM FDA 483 (09/08)

PREVIOUS EDITION OBSOLETE

PAGE 4 of 8 PAGES

	TH AND HUMAN SERVICES G ADMINISTRATION
DISTRICT ADDRESS AND PHONE NUMBER	DATE(S) OF INSPECTION
6751 Steger Drive	8/20/2018-10/24/2018*
Cincinnati, OH 45237-3097	FEI NUMBER
(513)679-2700 Fax: (513)679-2772	3012315020
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED	
Jeremy S. Delk, CEO/Owner	
FIRM NAME	STREET ADDRESS
Tailor Made Compounding, LLC	200 Moore Drive
City, STATE, ZIP CODE, COUNTRY	TYPE ESTABLISHMENT INSPECTED
Nicholasville, KY 40356-8512	Producer of Sterile Drugs

Specifically, on 9/11/18, we observed (b) (4) vials of Tesamorelin 1 mg subcutaneous injection (batch 07161804; BUD Date 07/19) stored in the refrigerator in your pharmacy. The Beyond Use Date (BUD) on each of the (b) (4) Tesamorelin vial labels of this lot contained an incorrect one-year BUD date, while the correct BUD date for Tesamorelin is 180 days.

Your firm began using a new computer program called(b) (4) (b) (4) on or about 7/6/18 for printing labels to be affixed to finished product vials. When this issue was brought to your management's attention, your firm conducted an investigation which identified that any Tesamorelin product produced and shipped between 7/6/18 to 9/11/18 contains the incorrect one year BUD date, due to an installation error of the new computer program.

Furthermore, these labels are reviewed by a pharmacist prior to releasing the product and this incorrect BUD date on the vial label and/or computer system for Tesamorelin 1 mg subcutaneous injection was not observed. As a result of the investigation, your firm initiated a voluntary recall in September 2018.

# **OBSERVATION 8**

Testing and release of drug product for distribution do not include appropriate laboratory determination of satisfactory conformance to the identity and strength of each active ingredient prior to release.

Specifically, your firm performs potency testing at various random intervals on products produced. However, there is no set schedule or frequency for when potency testing will be performed. Your firm's specification for potency is(b) (4)% tc(b) (4)%. Your firm released 3 products to patients with Out-of-Specification (OOS) potency results.

Product	Lot Number	BUD Date	Sterile/ Non- Sterile	Date Produced	Test Date	Test Result	Released to patients
		AN	NENDMENT	. 2			
	EMPLOYEE(S) SIGNATURE Michael P Sheehan, Nicholas L Paulin,		-		Nichofas L P Iaweit juston Signed By Onle Signed	aufin Akholas L. Paufin -S 10-24-2016 12:52:35	DATE ISSUED 10/24/2018

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

FOOD AND DRUG ADMINISTRATION

DISTRICT ADDRESS AND PHONE NUMBER

6751 Steger Drive

Cincinnati, OH 45237-3097

(513) 679-2700 Fax: (513) 679-2772

8/20/2018-10/24/2018\*

3012315020

NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED

Jeremy S. Delk, CEO/Owner

FIRM NAME Tailor Made Compounding, LLC CITY, STATE, ZIP CODE, COUNTRY

Nicholasville, KY 40356-8512

STREET ADDRESS

200 Moore Drive

TYPE ESTABLISHMENT INSPECTED

Producer of Sterile Drugs

Glutathione 200mg Injection	12191702	90 Days	Sterile	12/19/17	1/10/18 2/12/18	92.5% 88.0%	Yes (*)(4)
DHEA 75 mg capsules	09081701	180 Days	Non- Sterile	9/8/17	9/20/17	86.1%	Yes(b) (4) patients
Alprostadil/Paparerine/Phe ntolamine Injection 60meg, 30 mg, 3 mg	11141713	60 Days	Sterile	11/14/17	11/27/17	95.2% 83.2%	Yes (0)4 patient

### OBSERVATION 9

Drug product component testing is deficient in that at least one specific test to verify the identity of each component is not performed.

- a.) Specifically, your firm does not perform any identity testing on incoming raw materials.
- b.) Your firm does not audit any of your raw material suppliers.

#### OBSERVATION 10

There is no written testing program designed to assess the stability characteristics of drug products.

Specifically, there is no written stability program designed to assess the stability characteristics of drug products. For example, Glutathione 200mg Injection (lot 12191702) was not within its BUD date with a 88.0% potency result on 2/12/18 and Alprostadil/Paparerine/Phentolamine Injection 60mcg, 30 mg, 3 mg (lot 11141713) was not within its BUD date with a 83.2% potency result on 12/26/17.

Product	<u>Lot</u> Number	BUD Date	Sterile/Non- Sterile	Date Produced	Test Date	Test Result	Released to patients
Glutathione 200mg Injection	12191702	90 Days	Sterile	12/19/17	1/10/18 2/12/18	92.5% 88.0%	Yes patient
Alprostadil/Paparerine/	11141713	60	Sterile	11/14/17	11/27/17	95.2%	Yes (b) (4)

#### **AMENDMENT 2**

EMPLOYEE(S) SIGNATURE SEE REVERSE | Michael P Sheehan, Investigator OF THIS PAGE | Nicholas L Paulin, Investigator

DATE ISSUED 10/24/2018

FORM FDA 483 (09/08)

PREVIOUS EDITION OBSOLETE

INSPECTIONAL OBSERVATIONS

PAGE 6 of 8 PAGES

	D	EPARTMENT OF H	EALTH AND HUMA DRUG ADMINISTRATI				
DISTRICT ADDRESS AND PHO		TOOD AND	2oo romingi kari	DATE(S) OF INSPECTION			
6751 Steger				8/20/2018-10/24/2018* FEI NUMBER			
	incinnati, OH 45237-3097 513)679-2700 Fax:(513)679-2772			3012315020			
NAME AND TITLE OF INDIVIDU	IAL TO WHOM REPORT ISSUED						
	lk, CEO/Owner						
FIRM NAME	Compounding, L	T.C.	200 Moore	Deimo			
CITY, STATE, ZIP CODE, COUR		il.	TYPE ESTABLISHME				
Nicholasvill	e, KY 40356-85	12	Producer	of Sterile Dr	ıgs		
Phentolamine I	niection	Days			patient		
60mcg, 30 mg		Days		12/26/17	83.2% patient		
Specific sterile o	perations can be s nore, your firm ha	stored before us	e after being de	pyrogenated in th	glassware used for ne (b) (4) eduction is achieved for		
a.) Specifically, (non-sterile to sused for perform pressure gauge not receive a Ceb.) Equipment to	tion of equipment ance.  your firm uses (to terile products). The ming the (b) (4) has been used sing ertificate of Analy	(poses for (b) (4)  rations are not one	for sterile op Temp press st sterile operat gan operations used on a calibration	erations of all hig ure gauge (Serial ions) has never be in January 2016. for sterile operat program to be ca			
			1ENDMENT 2	,	S F		
				- reniver - Sine-			
SEE REVERSE OF THIS PAGE	EMPLOYEE(S) SIGNATURE Michael P She Nicholas L Pa			Nictrolas I. P. Investrya lot Sayand diy. M. Call e Signed	DATE ISSUED 10/24/2018 10/24/2018 10/24/2018		
FORM FDA 483 (09/08)	PREVIOUS IDITION O	PSSCH_LTTF(	INSPECTIONAL OF	BSERVATIONS	PAGE 7 of 8 PAGES		

\*

DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION					
			DATE(S) OF INSPECTION 8/20/2018-10/24/ FEI NUMBER 3012315020	2018*	
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED					
Jeremy S. De	lk, CEO/Owner	STREET ADDRESS			
Tailor Made			oore Drive		
CITY, STATE, ZIP CODE, COUR Nicholasvill	e, KY 40356-8512	Producer of Sterile Drugs			
in January 2016: (b) (4) s, incubators, and (b) (4) Your(b) (4) scale (model #: (b) (4) serial number: (b) (4) used for weighing materials for sterile operations is past due for calibration. On 8/21/18, we observed this scale had a due date sticker of 7/31/18.					
c.) The digital temperature recorder of your refrigerator (b) (4) ; model # (b) (4) ; serial #:  (b) (4) ) used for storing finished drug product has never been calibrated. Your firm has been using this refrigerator in your pharmacy since January 2016.					
d.) Your firm has not qualified your (b) (4) (b) (4) and(b) (4) used for producing sterile drugs at your facility.					
8/30/2018(Thu)	), 8/21/2018(Tue), 8/22/2018(Wed), 9, 8/31/2018(Fri), 9/05/2018(Wed), 9, 10/02/2018(Tue), 10/03/2018(Wed)	9/06/2018(T	hu), 9/07/2018(Fri), 9		
AMENDMENT 2					
SEE REVERSE OF THIS PAGE	EMPLOYEE(S) SIGNATURE  Michael P Sheehan, Investiga  Nicholas L Paulin, Investiga		Wicholas L. Paulin Investigator Styred Sy. Necholas L. X. Dale Signed, 19-24-20	DATE ISSUED 10/24/2018	

INSPECTIONAL OBSERVATIONS

FORM FDA 483 (69/08)

PREVIOUS EDITION OBSOLETE

PAGE 8 of 8 PAGES