	ALTH AND HUMAN SERVICES UG ADMINISTRATION			
DISTRICT ADDRESS AND PHONE NUMBER 4040 North Central Expressway, Suite 300	DATE(S) OF INSPECTION			
Dallas, TX 75204 (214)253-5200 Fax: (214)253-5314	FEI NUMBER 3015826783			
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED				
Robbie Lee Surratt Jr., Director of Phar	macy Operations			
FIRM NAME	STREET ADDRESS			
Solaris Pharmacy, Inc.	1308 E Old Chico Rd			
CITY, STATE, ZIP CODE, COUNTRY	TYPE ESTABLISHMENT INSPECTED			
Decatur, TX 76234-3405	Producer of Non-Sterile Drugs			
questions, please contact FDA at the phone number and address above. DURING AN INSPECTION OF YOUR FIRM I OBSERVED:				
OBSERVATION #1 Cleaning agents used to disinfect, clean, sanitize equipment and/or production areas of non-sterile drug products are not suitable for use.				
Specifically,				
 a) On February 19, 2020, I observed the firm's non-sterile technician (b) (6) use (b) (4) capsule instrument. The directions for use on the label states that it is "intended for use" on "non-food surfaces". However, your firm routinely produces capsules for oral use. Approximately, batches of drug product capsules were produced since November 1, 2019 for oral administration. b) On February 19, 2020, I observed your firm's non-sterile technician (b) (6) use expired sterile (b) (4) to clean and sanitize the (b) (4) capsule instrument and table in the non-sterile compounding room during the production of Budesonide Inhalation Capsules 320mcg, Lot #1951 with a Beyond Use Date of 08/19/20. 				
OBSERVATION #2				

Non-pharmaceutical grade components are not used in the production of your non sterile drug products.

Specifically,

SEE REVERSE OF THIS PAGE	EMPLOYEE(S) SIGNATURE Patty P Kaewussdangkul,	Investigator	Pathy P Kaewussidangkul Investigator Pathy P. Stynest Schangkul - S. X. Date Signed 02-26-2020 14 08 22	2/26/2020
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district address and phone number 4040 North Central Expressway, Suite 30	0	DATE(S) OF INSPECTION			
	0	DATE(S) OF INSPECTION 2/19/2020-2/26/2020*			
Dallas, TX 75204 (214)253-5200 Fax: (214)253-5314		FEI NUMBER 3015826783			
		And the Analysis and Analysis a			
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED					
Robbie Lee Surratt Jr., Director of Pha	rmacy Opera	ations			
FIRM NAME	STREET ADDRESS				
Solaris Pharmacy, Inc. CITY, STATE, ZIP CODE, COUNTRY	The second secon	1308 E Old Chico Rd TYPE ESTABLISHMENT INSPECTED			
Decatur, TX 76234-3405	Produce	Producer of Non-Sterile Drugs			
Your firm used commercially purchased (b) (4) to make (b) (4) , a component that is used in your non-sterile compounded drugs for oral, topical and mucosal administration. There is no assurance that the store bought (b) (4) purchased is suitable for its intended use. For					
example, the following non sterile drug products for that was made with store bought (b) (4)	r oral use wer :	re produced using (D) (4)			
a) Hydromorphone Oral Concentrate Lot #1362 Lot #1205.	a) Hydromorphone Oral Concentrate Lot #1362 with a Beyond Use Date (BUD) of 3/20/20 with (b) (4)				
b) Morphine Oral Concentrate Lot #1363 with #1205.	h a BUD of 3	3/20/20 with (b) (4) Lot			
 c) Atropine Oral Solution 1% Lot #1387 with #1332. 	c) Atropine Oral Solution 1% Lot #1387 with a BUD of 3/23/20 with (b) (4) Lot #1332.				
*DATES OF INSPECTION 2/19/2020(Wed), 2/20/2020(Thu), 2/21/2020(Fri)), 2/24/2020(1	(Mon), 2/26/2020(Wed)			
SEE REVERSE Patty P Kaewussdangkul, Ir	nvestigator	Patty P Kaewussdangkul investigator p. X Ağevussdangkul 9. X Date Signed 12-26-2020 14-08-22			

INSPECTIONAL OBSERVATIONS

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