


Chlorpheniramine Maleate (Klorfeniramin Maleat)			
No. : RPB 165	Rev : 07	Eff. date : 18 03 23	Sign : 

- 1 **Quality** : Farmakope Indonesia V, 2014
- 2 **Additional Requirements**
 - 2.1 Arrival Date : NMT. 6 months from manufacturing date
- 3 **Certificate of Analysis from Manufacturer**

To be stated on the certificate

 - 3.1 Manufacturer name and address
 - 3.2 Product name, batch/lot number
 - 3.3 Results of test and assays
 - 3.4 Compliance with Quality
 - 3.5 Quality designation
 - 3.6 Date of manufacturing, expiration (year-month) and date of released (year- month-day)
 - 3.7 Approval/signature of QA/QC responsibility
- 4 **Attached update Good Manufacture Practice Certificate**
- 5 **Package**

Cardboard drum @ 25 kg double plastic PE with original seal (inside and outside) from manufacture
To be stated on goods, label original from manufacture at primary and secondary package each
Preserve in tight, light resistant containers.
- 6 **Labeling**

To be stated on goods **label original from manufacturer**, packing list and invoice :

 - 6.1 Name of manufacturer and address
 - 6.2 Product name, batch/lot number, manufacturing and expiration date
 - 6.3 Quality designation
 - 6.4 Gross/net weight
 - 6.5 Number of packages
- 7 **Reference Documents**

Farmakope Indonesia V, 2014
- 8 **History**

Purchasing spesification is revision of RPB 165 revision 06 with change in the quality and format document.
- 9 **Review**

This specification will be reviewed every 2 years or less (if necessary) by the Quality Control Manager, Research & Development Manager and Quality Assurance Manager.

Chlorpheniramine Maleate (Klorfeniramin Maleat)			
No. : RPB 165	Rev : 07	Eff. date : 18 03 23	Sign : <i>B</i>

10 Distribution

In general, a copy of this specification is distributed to :

10.1 Procurement Dept.

10.2 Quality Control Dept

11 Approval

Preparation steps	Position	Code	Signature	Date
Prepared by	Starting and Packaging Material Testing Assistant Manager	AM	<i>P.L.</i>	180323
Checked by	Analytical Method Assistant Manager	LB	<i>P.</i>	180323
Approved by	Quality Control Manager	AM	<i>an. P.L.</i>	180323
	Research & Development Manager	LB	<i>[Signature]</i>	180323
	Quality Assurance Manager	PM	<i>Ehri</i>	180323

12 Review

No.	Position	Date	Signature	Recommendation
1	Quality Control Manager			
	Research & Development Manager			
	Quality Assurance Manager			
2	Quality Control Manager			
	Research & Development Manager			
	Quality Assurance Manager			