[redacted]

Form 39A [See Rule 150E(f)] Under the Drugs and Cosmetics Act 1940 and the Rules thereunder

Sample Name #	AMOXICILLIN & POTASSIUM CLAVULANATE TABLET I.P 625 mg	Report No.	[redacted]
Mfd. By#	NA	Mfg. Lic. No.#	
Supplied By#	NA	Date of Receipt	16/09/2024
Submitted By Address	MEGHALAYAN MEDICAL DRUGS AND SERVICES NEW COLONY SHILLONG, DHS LAITUMKHRAH, OFFICE OF THE MANAGING DIRECTOR MMSDSL EAST	Sample Qty.#	60 TABLETS
		Batch Size#	NA
		Mfg.Date#	07/2024
Ref. No.#	N/A	Exp.Date#	12/2025
Batch No.#	MMDSL/QC/-0483		

NS

Date of Start of Analysis : 16/09/2024 Date of Completion of Analysis : 25/09/2024

RESULTS OF ANALYSIS

Reference to Protocol : IP-2022

DESCRIPTION : White colour capsule shaped biconvex film coated tablet scored on one side and other side plain.

S.No.	PARAMETERS/TEST	RESULT	SPECIFICATION
1	IDENTIFICATION	Complies	
2	AVERAGE WEIGHT	1089.5 mg	
3	UNIFORMITY OF WEIGHT	Within Limit	± 5.0%
4	DISSOLUTION	.	
	FOR AMOXYCILLIN	89.59% to 93.75%	Q NLT 85%
	FOR POTASSIUM CLAVULANATE	90.45% to 94.51%	Q NLT 80%
5	UNIFORMITY OF CONTENT	.	
	FOR POTASSIUM CLAVULANATE	3.5	NMT 15
6	WATER	3.3%	NMT 10.0%
7	ASSAY	Each film coated tablet contains.	

COMPOSITION	RESULTS	LABEL CLAIM	LIMITS	PROTOCOL
Amoxicillin Trihydrate IP Eq. to Amoxicillin	469.06 mg	500 mg	450mg to 600mg	IP-2022
Potassium Clavulanate IP Eq. to Clvulanic Acid	136.94 mg	125 mg	112.5mg to 150mg	IP-2022

[redacted]

[redacted]

Date of Issue :13/11/2024

Note:-

1. Sample (s) not drawn by us unless otherwise stated.
2. Total liability of our analytical division is limited to the invoiced amount.
3. Sample will be destroyed after one month from the date of issue of test certificate unless otherwise specified.
4. Test certificate in full or parts shall not be use for promotional or publicity purpose.
5. Result given in report in related to sample tested only.

[redacted]

Form 39A [See Rule 150E(f)] Under the Drugs and Cosmetics Act 1940 and the Rules thereunder

Sample Name #	AMOXICILLIN & POTASSIUM CLAVULANATE TABLET I.P 625 mg	Report No.	[redacted]
Mfd. By#	NA	Mfg. Lic. No.#	
Supplied By#	NA	Date of Receipt	16/09/2024
Submitted By Address	MEGHALAYAN MEDICAL DRUGS AND SERVICES NEW COLONY SHILLONG, DHS LAITUMKHRAH, OFFICE OF THE MANAGING DIRECTOR MMSDSL EAST	Sample Qty.#	60 TABLETS
		Batch Size#	NA
		Mfg.Date#	07/2024
Ref. No.#	N/A	Exp.Date#	12/2025
Batch No.#	MMDSL/QC/-0483		

NS

Date of Start of Analysis : 16/09/2024

Date of Completion of Analysis : 25/09/2024

RESULTS OF ANALYSIS

S.No.	PARAMETERS/TEST	RESULT	SPECIFICATION

Remarks : In the opinion of the undersigned,the sample referred above is of standard quality as defined in the Drugs Act 1940 and Rules made their under for the reasons given below as per IP-2022
Sample Consume in testing.

*****END OF REPORT*****

Represents Customer Defined Fields

[redacted]

[redacted]

Date of Issue :13/11/2024

Note:-

1. Sample (s) not drawn by us unless otherwise stated.
2. Total liability of our analytical division is limited to the invoiced amount.
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