

VISUAL OBSERVATION OF CONTROL SAMPLE FOR INJECTION

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Product Brand/Generic Name: _____

Batch No.: _____

MFG Date: _____ Expiry Date: _____

Observation Year	Defect					Sign and date	Destroyed By	Remarks
	Physical Appearance (OK/Not OK)	Flip off sealing (OK/Not OK)	Foreign Particles/Black Particle/ Crack on vial (Observed/ Not Observed)	Printing/Coding/on vial/ Carton (Observed/Not Observed)	Others			
1st Year: _____								
2 nd Year: _____								
3 rd Year: _____								
4 th Year: _____								
Other								