DISTRICT ADDRESS AND PHO		UG ADMINISTRATION			
1201 Harbor		DATE(S) OF INSPECTION 5/2/2022-5/20/2022*			
1201 Harbor H Alameda, CA		FEI NUMBER			
	Fax: (510) 337-6702	3022076307			
•	na n				
NAME AND TITLE OF INDIVIDU	AL TO WHOM REPORT ISSUED				
Lisa C. Brent	t, Owner				
		STREET ADDRESS			
Be Well Natu: CITY, STATE, ZIP CODE, COUN	New The Second Contract of Con	655 Redwood Hwy Frontage Rd Ste 200			
Mill Valley,	CA 94941-3055	Producer of Sterile Drugs			
observations, and do observation, or have action with the FDA questions, please cor	not represent a final Agency determination reg implemented, or plan to implement, corrective	s) during the inspection of your facility. They are inspectional garding your compliance. If you have an objection regarding a e action in response to an observation, you may discuss the ob- mit this information to FDA at the address above. If you have ove.	n jection o		
OBSERVATIO					
		ocated within a non-classified room (segregate	d		
production area).				
~					
Specifically,					
 Ceiling Vacuum Cardboa Paperwood 	air vent located above the workstat cleaner located adjacent to the wo rd boxes located on room shelving	orkstation			
On 05/02/2022 - Porous o - Texture - Carpet f - Fabric c - Fabric p	we observed that the room contain- ceiling tiles d walls looring overed chair	ed the following difficult to clean surfaces: ation, of the (b) (4) Laminar Flow			
On 05/02/2022 - Porous o - Texture - Carpet f - Fabric c - Fabric p	we observed that the room contain- ceiling tiles d walls looring overed chair illows				
On 05/02/2022 - Porous o - Texture - Carpet f - Fabric c - Fabric p	we observed that the room contain- ceiling tiles d walls looring overed chair illows	ation, of the (b) (4) Laminar Flow	ер /2022		

	DEPARTMENT OF HEALTH AND HUMAN SERVICES						
FOOD AND DRUG ADMINISTRATION DISTRICT ADDRESS AND PHONE NUMBER DATE(S) OF INSPECTION							
	1201 Harbor Bay Parkway Alameda, CA 94502-7070		5/2/202 FEI NUMBER	2-5/20/2022*			
	Fax: (510) 337-6702		3022076	5307			
NAME AND TITLE OF INDIVIDU							
Lisa C. Brent FIRM NAME	c, Owner	STREET ADDRESS					
Be Well Natur				ood Hwy Frontage Rd Ste 200			
	CA 94941-3055	TYPE ESTABLISHMENT INSPECTED Producer of Sterile Drugs					
Workstation to environment.	assure the equipment meets operat	ting standard	ls and mai	ntains an ISO 5 cl	lassified		
OBSERVATIO				20k 81 <u>2</u> 5			
Personnel engag	ged in aseptic processing were obse	erved wearin	ig non-ste	rile gloves.			
Specifically, on	05/04/2022 we observed during pr	reparation of	f sterile dr	ug IV solution, H	igh Dose 50		
gm Vitamin C i	nfusion 250 ml, that personnel wor	re (b) (4)	medical	scrubs and non-st	terile gloves.		
Personnel also I	acked gowning that covered wrists	, hair, and n	nouth duri	ng sterile drug pre	paration.		
OBSERVATIO			2	27			
Materials or sup	oplies were not disinfected prior to	entering the	aseptic pr	rocessing areas.			
Specifically, on	Specifically, on 05/04/2022 during preparation of sterile drug IV solution, High Dose 50 gm Vitamin C						
infusion 250 ml, we observed an IV solution bag, syringes, needles, and containers of sterile drug							
	on non-sterile absorbent cloths wi		(b) (4)	Laminar Flo			
	e observed storage of uncovered al se in the workstation.	DSOIDent Cio	ths on ope	in snerving in the	unciassineu		
room pror to use in the workstution.							
OBSERVATION 4							
	ts were not used in your facility's c	leanrooms a	nd/or ISO	5 classified asept	ic processing		
area.							
Specifically on	05/02/2022 personnel responsible	for(b)(4) = 1	onning of	(h) (4) Lamin	(h)(4)		
Specifically, on 05/02/2022 personnel, responsible for ^{(b) (4)} cleaning of (b) (4) Laminar (b) (4) Flow Workstation, stated that they used non-sterile ready-to-use spray cleaner, (b) (4)							
(b) (4) and sterile (b) (4) , to clean the workstation. These cleaning agents do							
not contain sporicidal agents.							
	EMPLOYEE(S) SIGNATURE	2	2		DATE ISSUED		
SEE REVERSE OF THIS PAGE	Jolanna A Norton, Investiga Dustin M James, Investigato			Jolanna A Norton Investigator	5/20/2022		
				Signed By Jolanna A. Norton -6 Date Signed 05-20-2022 X 08 40 53			
					-		
FORM FDA 483 (09/08)	DEEVIOUS EDITION OBSOLETE IN	SPECTIONAL (DESERVATIO	NS	PAGE 2 of 3 PAGES		

INSPECTIONAL OBSERVATIONS

FORM FDA 483 (09/08)

PREVIOUS EDITION OBSOLETE

DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION						
DISTRICT ADDRESS AND PHONE NUMBER	DATE(S) OF INSPECTION					
1201 Harbor Bay Parkway	5/2/2022-5/20/2022*					
Alameda, CA 94502-7070	FEI NUMBER 3022076307					
(510) 337-6700 Fax: (510) 337-6702						
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT ISSUED						
Lisa C. Brent, Owner						
FIRM NAME	STREET ADDRESS					
Be Well Natural Medicine	655 Redwood Hwy Frontage Rd Ste 200					
CITY, STATE, ZIP CODE, COUNTRY	TYPE ESTABLISHMENT INSPECTED					
Mill Valley, CA 94941-3055 Producer of Sterile Drugs						

***DATES OF INSPECTION**

5/02/2022(Mon), 5/04/2022(Wed), 5/09/2022(Mon), 5/11/2022(Wed), 5/13/2022(Fri), 5/18/2022(Wed), 5/20/2022(Fri)

Dustin M James Investigator Signed By: Dustin M. James -S Date Signed: 05-20-2022 08:41:26

SEE REVERSE OF THIS PAGE			DATE ISSUED 5/20/2022	
FORM FDA 483 (09/08)	PREVIOUS EDITION OBSOLETE	INSPECTIONAL OBSERVATIONS	8	PAGE 3 of 3 PAGES

The observations of objectionable conditions and practices listed on the front of this form are reported:

- 1. Pursuant to Section 704(b) of the Federal Food, Drug and Cosmetic Act, or
- 2. To assist firms inspected in complying with the Acts and regulations enforced by the Food and Drug Administration.

Section 704(b) of the Federal Food, Drug, and Cosmetic Act (21 USC 374(b)) provides:

"Upon completion of any such inspection of a factory, warehouse, consulting laboratory, or other establishment, and prior to leaving the premises, the officer or employee making the inspection shall give to the owner, operator, or agent in charge a report in writing setting forth any conditions or practices observed by him which, in his judgment, indicate that any food, drug, device, or cosmetic in such establishment (1) consists in whole or in part of any filthy, putrid, or decomposed substance, or (2) has been prepared, packed, or held under insanitary conditions whereby it may have become contaminated with filth, or whereby it may have been rendered injurious to health. A copy of such report shall be sent promptly to the Secretary."