Technoview Arixtra CON H



Attachment 17

D02600.02

3V41C00.02

REF

5090014-RUO

LOT

3V41C00.02

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2026-05-31

Analytical Procedures		Requirement	Result	
	Cap color	red	confirmed	
visual inspection	Vial type	clear glass vial	confirmed	OF
	Vial label	according to packaging SOP	confirmed	OK
	Vial barcode	according to packaging SOP	confirmed	OK
	Box label	according to packaging SOP	confirmed	OK
	Box barcode	according to packaging SOP	confirmed	Ok
	Package insert	present	confirmed	Ok
	Batch table	present	confirmed	OK
	Appearance before reconstitution	buff colored plug of lyophilized material	confirmed	OK
	Appearance after reconstitution	amber colored liquid	confirmed	OK
	HBsAg / HBsAg	Negative	Negative	
Virology	HIV-Ak / HIV-Ab	Negative	Negative	
	HCV-AK / HCV-Ab	Negative	Negative	OK
The testing methods a	applied were FDA-approved or CE marked.			
Recovery of control		0.97 - 1.61 μg/mL	1.37 µg/ml	OF

Prepared by	LIGHTH CONCZ	2 î. NOV. 2024
		Date
Approved by	MayALAUSCHER	2 9. NOV. 2024
		Date