

**CERTIFICATE OF ANALYSIS**  
**Imidazole Buffer 90 mL**



Attachment 12      DQ910A.02

Temp.: TFO326.07

9J43CE0.02

REF	5410012-RUO
LOT	9J43CE0.02
⌚	2029-10-31

Analytical Procedures		Requirement	Result	
visual inspection	Cap color	white	confirmed	OK
	Vial type	white plastic vial	confirmed	OK
	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
	Appearance	clear liquid	confirmed	OK
Recovery of controls Fibrinogen	<b>Control N</b> LOT 1P31C01	2.67 - 4.01 g/L	3.19 g/L	OK
	<b>Control A</b> LOT 3P42C00	0.93 - 1.39 g/L	1.24 g/L	OK

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11. DEZ. 2024  
 Date

Approved by LUCAS HOLDOVICZ  
*Lucas Holdovicz*

12. DEZ. 2024  
 Date