| Format | | | UMEDICA LABORATORIES PVT. LTD. |
|---|---|---|---|
| **Format Name** | **SPECIFICATION FOR ARTWORK APPROVAL** | | |
| **Format Number** | **FM/PDD/002-01-07** | **SOP Number** | **PDD/002** |

**New Artwork Code No. :** 205569 **Old Artwork Code No.:** NA **Artwork Effective Date:**

**Product Name** : SYNERRV ROSUVASTATIN 10 (Rosuvastatin Film-Coated Tablets USP 10 mg) **Company Name/Country** : Synerrv / Malaysia

**Component Type** : Carton **Pack Style** : 3×10T - Alu Alu Blister Pack

**Description** : New Development Carton Artwork as per Export-Order/Malaysia Country requirement, as per Change Control No. CC/PDD24/056.

**Specifications : L×W×H** **Layout/Drawing No.:** (24-25-CTN-AUG-17) **Site :** Umedica **Artwork Language:** English - Malay

| | | | |
|---|---|---|---|
| ~~Full Size /~~ Size | : 99×44×22 MM | Type ~~/ Blister / Strip Size / Adhesive / Tube Type~~ | : Tuck In Flap |
| Size - Catch Cover / Foil / BOPP | : NA | Sachet Size/Pocket Size/Fold Size/Release Paper | : NA |
| Space between Labels | : NA | Transparent Paper Thickness | : NA |
| GSM of Paper ~~/ GSM of Aluminum Foil~~ | : 300 GSM | Type of Paper ~~/ GSM~~ | : ITC Cyber XL Pac-GC1/JK Tuff Coated |
| Thickness/Thickness of Foil | : NA | Type of Foil / Fold / Coating GSM | : — |
| Cylinder | : NA | ~~Lamination /~~ Varnish ~~/ Material Grade~~ | : UV Coated [Window Cut] |
| Repeat/Tolerence | : NA | Partition / Plate Size / Total GSM / | : NA |
| | | Sealing / Embossing / Core Diameter | : NA |
| GSM/BF of Printed Shipper | : NA | Paper Grade / Flute Type / PLY of Shipper | : NA |
| (Top/Middle/Bottom and Flute layer | : NA | | |

**Printing Colour** : P-1777 C [Light Coral (Pink) Shade] | P-485 C [Red Shade] | Black | or as per Sample

**Approved by Export/Marketing** : [Approval attached with ADF]

**CHECKLIST FOR CHECKING ARTWORK & SPECIFICATION**

| Brand Name and Generic Name(As per IP/BP/USP/ In-house Pharma-copeia) | Dosage Form and strength | Prefix Rx/ XRx | Mfg. Lic. No. / Neutral Code | Regulatory Agency Approval | Packing (Qty.) / Presentation | Dosage details if required | Size / Design | Composition /label claim/ Formulation | Schedule 'H','H1','G' or 'X' etc warning for local product / Red line for oral products | Item Code | QR Code/ Barcode (1D /2D)/ Pharma code as per requirement | Material and printing colours specifica-tion | Storage Condition as per pharmaco-peia/Buyer requirement/ Registration | Registration No. / Other requirement | Mfg. Name and Address, (Tel. No. and e-mail in the insert) | Marketed by/Distributors Name/Manufacturer Name | Route of Admin. [in case of Inj./ Multidose Vial matter | Adequate Space (Batch details/2D barcode/ Embossing for Overprinting | Artwork Approved by Sign with Date | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | | | | | | | | | Prepared by PDD Department | Approved by PDD Department |
| | | | | | | | | | | | | | | | | | | | PPIC Department | Production Packing Department |
| | | | | | | | | | | | | | | | | | | | QC Department | |
| | | | | | | | | | | | | | | | | | | | RA Department | |
| | | | | | | | | | | | | | | | | | | | QA Department | |

**Note to Printer:**

- After receive the CDR File, Submit the print proof for approval.
- The overprinting area should be unvarnished.
- Machine proof must be verified against the approved hard copy in Light, Standard and Dark shade should be certified and signed by an authorized person.
- Any deviation must be brought to the notice of the Packaging Development Department immediately in the writing.
- For any clarification, please contact Packaging Development Department.