

**PHARMACY SECTION LIST OF TESTS, CHARGES, TPOR AND SAMPLE REQUIREMENT**

PHARMACEUTICALS						
TEST CODE	TEST DESCRIPTION	CHARGES	TPOR (CLIENT CHARTER)		TYPE OF SAMPLE	MINIMUM SAMPLE QUANTITY
			No. of Sample(s)	Days		
CPCY-P001	PH	\$20	1-10 >10	5 10	Tablet	30 tablets
CPCY-P002	MELTING POINT	\$40	1-10 >10	5 10		
CPCY-P003	IDENTIFICATION BY FTIR	\$100	1-10 >10	5 10	Cream / Lotion	3 packs
CPCY-P004	UNIFORMITY OF WEIGHT	\$50	1-10 >10	5 10		
CPCY-P005	DISINTEGRATION	\$60	1-2 >2	10 15	Capsule	30 capsules
CPCY-P006	DISSOLUTION	\$400	1-2 >2	10 15		
CPCY-P007	RELATED SUBSTANCE BY HPLC	\$600	1-2 >2	10 15	Eye/ Ear Drops	30ml or 5g
CPCY-P008	ASSAY BY TITRATION	\$100	1-10 >10	5 10		
CPCY-P009	ASSAY BY UV-VIS SPECTROPHOTOMETER	\$120	1-10 >10	5 10	Injection	50ml
CPCY-P010	ASSAY BY HPLC	\$400	1-2 >2	10 15		
CPCY-P011	ASSAY BY AAS (SODIUM AND POTASSIUM ANALYSIS) – IN SOLUTION, PER ELEMENT	\$150	1-10 >10	10 15	Oral Solutions	100ml
CPCY-P012	FRIABILITY TEST	\$40	1-10 >10	5 10		
TRADITIONAL MEDICINES AND HEALTH SUPPLEMENTS						
CPCY-TM001	SCREENING AND CONFIRMATORY TESTING FOR ADULTERANTS IN TMHS SAMPLE- PER SAMPLE	\$800	1-10 >10	10 15	Tablet/ Capsule	30pcs
					Powder	10g
					Liquid	10ml / 10g
					Cream, Lotion Ointment, Oil	10ml / 10g
CPCY-TM002	IDENTIFICATION OF ADULTERANTS IN TMHS SAMPLE- PER SAMPLE PER ADULTERANT	\$120	1-10 >10	5 10	Tablet/ Capsule	30pcs
					Powder	10g
					Liquid	10ml / 10g
					Cream, Lotion Ointment, Oil	10ml / 10g

COSMETICS						
TEST CODE	TEST DESCRIPTION	CHARGES	TPOR (CLIENT CHARTER)		TYPE OF SAMPLE	MINIMUM SAMPLE QUANTITY
			No. of test per sample	Days		
CPCY-C001	SCREENING AND CONFIRMATORY TESTING FOR STEROIDS IN COSMETIC BY HPLC PER SAMPLE	\$700	1-2	10	Cream/ Lotion	5g
			>2	15	Liquid	5g
CPCY-C002	IDENTIFICATION OF STEROIDS IN COSMETICS BY HPLC- PER SAMPLE PER STEROID	\$120	1-2	10	Cream/ Lotion	5g
			>2	15	Liquid	5g
CPCY-C003	IDENTIFICATION OF HYDROQUINONE IN COSMETICS BY HPLC	\$120	1-2	10	Cream/ Lotion	5g
			>2	15	Gel	5g
					Liquid	5g
CPCY-C004	IDENTIFICATION OF TRETINOIN IN COSMETICS BY HPLC	\$120	1-2	10	Cream/ Lotion	12g
			>2	15	Gel	12g
					Liquid	12g
CPCY-C005	DETERMINATION OF LEAD IN COSMETICS BY GFAAS	\$150	1-2	10	Lipstick	6g
			>2	15	Cream/ Lotion	6g
CPCY-C006	DETERMINATION OF MERCURY IN COSMETICS BY CVAAS	\$150	1-2	10	Cream/ Lotion	6g
			>2	15	Liquid	6g
					Lipstick	6g
CPCY-C007	*METHANOL CONTENT IN COSMETICS BY GCFID	\$50	1-10	10	Liquid	6ml
			>10	15	Gel	6g

\*TPOR for CPCY-C007 is according to the number of samples received.

NOTES:

1. CLIENTS TO SUBMIT A COMPLETE **PCY(F)-023 TEST REQUEST FORM AND SAMPLE(S) FOR ANALYSIS** TO THE RECEPTION COUNTER AT PHARMACY SECTION DURING WORKING HOURS ONLY.
2. TPOR (CLIENT CHARTER) REFERS TO THE NUMBER OF WORKING DAYS REQUIRED FOR ANALYSIS.  
(NOTE: DAY ONE IS CONSIDERED AS THE NEXT WORKING DAY AFTER THE SAMPLE IS RECEIVED).
3. CLIENTS ARE HIGHLY RECOMMENDED TO CONSULT WITH PHARMACY SECTION PRIOR TO SENDING THEIR SAMPLES. ACCEPTANCE OF SAMPLES FOR TESTING ARE STRICTLY BASED ON THE TECHNICAL CAPABILITY OF THE SECTION I.E., THE AVAILABILITY OF TEST METHODS, CHEMICAL REAGENTS, REFERENCE MATERIALS, CONSUMABLES ETC.
4. REFER TO ANNEX A FOR LIST OF STEROIDS IN CPCY-C001 AND LIST OF ADULTERANTS IN CPCY-TM001.

ANNEX A.

TEST CODE	TEST DESCRIPTION	TESTS	
CPCY-C001	SCREENING AND CONFIRMATORY TESTING FOR STEROIDS IN COSMETIC BY HPLC PER SAMPLE	<ul style="list-style-type: none"> <li>• Prednisone</li> <li>• Betamethasone</li> <li>• Dexamethasone</li> </ul>	
CPCY-TM001	SCREENING AND CONFIRMATORY TESTING FOR ADULTERANTS IN TMHS SAMPLE	<b>Non-Steroidal Analgesics</b>	<ul style="list-style-type: none"> <li>• Aminopyrine</li> <li>• Dextromethorphan</li> <li>• Diclofenac (as sodium salt)</li> <li>• Dipyron</li> <li>• Ibuprofen</li> <li>• Mefenamic acid</li> <li>• Phenylbutazone</li> <li>• Tramadol</li> </ul>
		<b>Antihistamines</b>	<ul style="list-style-type: none"> <li>• Chlorpheniramine</li> <li>• Cyproheptadine</li> <li>• Diphenhydramine (Benadryl)</li> </ul>
		<b>Corticosteroids</b>	<ul style="list-style-type: none"> <li>• Betamethasone</li> <li>• Dexamethasone</li> <li>• Hydrocortisone</li> <li>• Prednisolone</li> </ul>
		<b>Slimming Agent</b>	<ul style="list-style-type: none"> <li>• Desmethyisibutramine (Sibutramine analogue)</li> <li>• Sibutramine HCl</li> </ul>
		<b>Erectile Dysfunction Drugs</b>	<ul style="list-style-type: none"> <li>• Sildenafil</li> <li>• Tadalafil</li> <li>• Vardenafil</li> <li>• Yohimbine</li> </ul>
		<b>Antihypertensive Drugs:</b>	<ul style="list-style-type: none"> <li>• Amlodipine</li> <li>• Atenolol</li> <li>• Indapamide</li> </ul>
		<b>Other Pharmaceuticals:</b>	<ul style="list-style-type: none"> <li>• Acetaminophen</li> <li>• Acetylsalicylic acid</li> <li>• Atorvastatin</li> <li>• Bromhexine</li> <li>• Clotrimazole</li> <li>• Furosemide</li> <li>• Hydroquinone</li> <li>• Lidocaine</li> <li>• Metformin</li> <li>• Phenolphthalein</li> <li>• Pseudoephedrine</li> <li>• Simvastatin</li> </ul>