APOSTILLE

(Convention de La Haye du 5 octobre 1961)

1. Country: Sweden
This public document

- 2. has been signed by Sofie Persson
- acting in the capacity of Pharmaceutical Handling Officer
- bears the seal/stamp of Swedish Medical Products Agency

Certified

5. at Stockholm

- **6. the** 2023-08-17
- 7. by Gabriel Rudbeck
 Notary Public
- 8. No 3107
- 9. Seal/stamp:

10. Signature:







Certificate of a Pharmaceutical Product¹

This certificate conforms, in general, to the format recommended by the World Health Organisation. (Explanatory notes are attached).

INO. O	Certificate: 5.8.1-2023-62044				
Expor	ting (certifying) country: Sweden				
Impor	ting (requesting) country: Chile				
1.	Name, dosage form and strength of the medicinal produ	ıct in Swed	en:		
1.1	Active ingredient(s) ² and amount(s) per unit dose: ³				
	sulfasalazine		500 mg		
	For complete qualitative composition including excipients, see attached.4				
1.2	Is this product authorised to be placed on the market for country? ⁵	r use in the	exporting		
		✓Yes	□No		
1.3	Is this product actually on the market in the exporting country?6				
		 ✓Yes	□No		
2A.1	Marketing Authorisation number:7 3017				
	Date of Marketing Authorisation: 27 September 1945				
2A.2	Marketing Authorisation Holder (name and address): Pfizer AB 113 63 Stockholm Sweden				
2A.3	Status of the Marketing Authorisation Holder:8				
	☐a ☐b ☐c ☑d (key in appropriate category as defined in note 8)				



DEC:	The categories b, c and d the name and address of the cosage form are:9	e manufactur	ing site producing	
	Facipharm Uppsala AB			
	Biorkgatan 30			
	751 82 Uppsala Sweden			
	Sweden			
29.4	Is Summary Basis of Approval appended? ¹⁰			
			✓No	
24.5	e attached, officially approved product information complete and consonant with Marketing Authorisation? ¹¹			
		✓Yes	☐Not provided	
	The applicant assumes the whole responsibility fo translation of the text from Swedish into English.	r the accura	acy of the	
2A.6	Applicant for certificate if different from the Marketing Authorisation Holder (name and address):12			
	Pfizer UK			
	Discovery Park			
	Ramsgate RD			
	Sandwich CT13 9ND United Kingdom			
	Sinta Kingdom			
3.	Does the certifying authority arrange for periodic insperiod in Sweden in which the dosage form is produced? ¹³	ection of the	manufacturing site	
		✓Yes	□n/a	
	If not applicable proceed to question 4.			
3.1	Periodicity of routine inspections:	Every 2-	3 years	
3.2	2 Has the manufacture of this type of dosage form been inspected?			
		Yes		
3.3	Do the facilities and operations in Sweden conform to GMP in the European Community. (The Commission: Guide to Good Manufacturing Practice for Medicinal Products in the European Community and directives 2003/94/EC and 91/412/EEC) and as recommended by the World Health Organisation? ¹⁴			
		Yes	□No	



Does the information submitted by the applicant satisfy the certifying authority on all aspects of the manufacture of the product?¹⁵

☑Yes □No

If no, explain:



certifying authority:

Medical Products Agency

mammarskjölds väg 42

13 Uppsala

eden

echone number: +46 (0)18 17 46 00, e-mail: registrator@lakemedelsverket.se

Chibehalf of the Swedish Medical Products Agency

gnature:

Sofie Persson

Pharmaceutical Handling Officer

Stamp and date: 18 July 2023