Course Registration / Information Form

Pharmaceutical Foreign Particulate: Examination, Isolation and Analysis 2-Day Course

This course provides a framework for the analytical approach used in foreign particulate analysis. It also aims to help students understand what foreign particulate is and why it is important to identify the composition and potential sources. The three primary analytical techniques that will be covered are polarized light microscopy, infrared spectroscopy and scanning electron microscopy with energy dispersive spectrometry. For particle preparation, the course will delve into how to properly examine samples, document details, and efficiently isolate materials without introducing extraneous contaminants. Students will get hands-on training in sample preparations for the three techniques and with the instruments themselves. After the course, students will have developed particle isolation skills and an understanding of the methods used in identifying particulate material.

Class size is limited to 10 people to allow considerable hands-on microscopy experience with the methods. The course is taught by Mary Miller, Rich Brown, Randy Boltin and Ming Zhou of MVA Scientific Consultants, at our laboratory in Duluth, Georgia.

Date: TBD       First class begins at 9:00 am
Tuition is $1,150.00 and includes course manual, all classroom materials and lunches.

Questions? Contact Ming Zhou at 770-662-8509 or mzhou@mvainc.com

Registration for the Pharmaceutical Foreign Particulate Examination, Isolation and Analysis 2-Day Course

Name_____________________________________________Title_________________
Company_______________________________________________________________
Address________________________________________________________________
City _____________________________ State _____ Zip ____________
Phone ___________________________ Fax ______________________________
E-mail ___________________________________________________________________
☐ Payment enclosed (check made out to MVA Scientific Consultants)
Charge my tuition with: ☐Visa    ☐ MasterCard
Card No. ___________________________ Expiration Date___________
Cardholder’s Name ________________________________
Signature  __________________________________________________________________

Please send full payment with the registration form to the attention of Jacquie Slead, by Fax at 770-662-8532, Email to jslead@mvainc.com, or by Mail to MVA Scientific Consultants, 3300 Breckinridge Blvd, Suite 400, Duluth, GA 30096.

Full payment is expected prior to starting the class.