



PHARMA DEVILS

QUALITY CONTROL DEPARTMENT

ANALYTICAL SPECIFICATION FOR TARTARIC ACID IP

Manufacturer Name:		Supplier Name:	
Manufacturer's Batch No.:		Manufacturer's Batch Size:	
Manufacturing Date:		Expiry Date:	
Quantity received:		Sample Quantity:	
Document No.:	Effective Date.:	Change Control No.:	
Control No./A.R.No.:		Retest Date:	

Reference : IP 1996 Page No: 739

Description : Colourless crystals or white or almost white crystalline powder; free from foreign particles
Complies/ Does Not Comply

Solubility : Very Soluble in water(1 in 1); freely soluble in ethanol (95%) (1 in 1-10).
Complies/Does Not Comply

S.No.	Test	Reference	Result	Specification	Remark
1.	Identification A. B. C. Test for Tartrates.	IP		A) It gradually decomposes giving off an odour resembling that of burnt sugar . B) 10 % w/v Solution in Distilled Water is strongly acidic. C) a) Charring occurs and carbon monoxide,	



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S.No.	Test	Reference	Result	Specification	Remark
1.	Identification C. Test for Tartrates	IP		which burns with a blue flame when ignited, is evolved. b) A transient yellow colour is produced. After the colour has disappeared add 2M Sodium Hydroxide dropwise; an intense blue colour is produced.	
2.	Clarity and Colour of Solution.	IP		Solution is clear and coloured not more intensely than reference solution YS6.	
3.	Specific optical rotation	IP		Between +12° and +12.8°	
4.	Arsenic	IP		Not More Than 2 ppm	
5.	Heavy Metals	IP		Not More Than 10 ppm	
6.	Chloride	IP		Not More Than 125 ppm	
9.	Sulphate	IP		Not More Than 150 ppm	
10	Oxalate	IP		NO opalescence is produced within 20 minutes.	
11.	Sulphated Ash	IP		Not More Than 0.1 %	
12.	Loss on drying	IP		Not More Than 0.2 %	
13.	Assay as C ₄ H ₆ O ₆ (On dried Basis)	IP		Not Less Than 99.5 % and Not More Than 101.0 %	

Raw Data Reference:

Analyst Name :

Analyst Name :

Analyst Name :

Analyst Hard Book No. :

Page No. :



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Analyst Hard Book No. :

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Results: Sample Conforms/Does not Conform to specification

Analyzed By : _____

Date:_____

Checked By : _____

Date:_____

Approved By : _____

Date:_____