

UALITY ASSURANCE DEPARTMENT

STANDARD OPERATING PROCEDURE			
Department: Quality Assurance	SOP No.:		
Title: Procedure of Preparation, Retrieval & Revision of MRP List	Effective Date:		
Supersedes: Nil	<b>Review Date:</b>		
Issue Date:	Page No.:		

#### 1.0 **OBJECTIVE:**

To lay down a procedure of preparation, retrieval & revision of MRP list.

#### 2.0 **SCOPE:**

This SOP is Applicable for procedure of preparation, retrieval & revision of MRP list at .....

#### 3.0 **RESPONSIBILITY:**

Officer / Executive QA

### 4.0 **ACCOUNTABILITY:**

Head QA

### 5.0 **DEFINITION:**

Not Applicable

#### 6.0 **PROCEDURE:**

6.1 MRP (Maximum retail price) List shall be prepared by QA & shall contain price of all applicable products in alphabetical order.

### 6.2 Header of List shall contain following details:

- **6.2.1** Company Logo with Company Name and annexure title.
- **6.2.2** Effective Date: Date at which the list shall be approved by QA Head. This may be the same date or the maximum next date after approval.
- 6.2.3 Review Date: MRP list shall be updated at every 6 months  $\pm$  15 days. Updation of MRP list as per Annexure – I, means that next version will be given after every six month. In the meantime all updations shall be updated by QA in addendum of list as per Annexure- II.
- 6.2.4 **Revision No.:** indicates total revision in the list. Initially Revision no. shall be given as 00 & updations as 01, 02, 03.....



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**6.2.5** Supersedes No.: indicates last revision no. against which new revision has been taken. For eg: in case of revision no. 01 supersedes no. shall be 00& for 02 revisions no. 01 shall be superseded.

### 6.3 Footer of the list shall contain following details:

- 6.3.1 Prepared By: person Name, Sign with Date & Designation. List shall be prepared by Officer/Executive from QA department.
- 6.3.2 Checked By: List shall be checked by the Head Production with details like Name Sign, & Date.
- **6.3.3** Approved By: List shall be approved by Head QA with all mentioned details in Annexure.

### 6.4 **Updation in List:**

MRP List shall be updated in every six month of effective date with  $\pm 15$  days frequency as

per Annexure –I, In case of any updations before six month updations shall be updated in addendum, as per Annexure II, After 06 months all updations shall be carried to main list from addendum.

Revision History shall contain details of all revisions with QA approval.

### 6.5 **Distribution of List:**

- 6.5.1 MRP list shall be distributed to all concerns viz: Each section of production department, Production planning, FG stores.
- 6.5.2 Photocopy of master copy shall be stamped with controlled stamp with control copy no. & record of distribution shall be maintained in the distribution document.
- 6.5.3 In case of updation in addendum QA person, responsible for MRP list preparation shall update the addendum as per Annexure-II of each control copy from each distribution sites.
- 6.5.4 In case of revision MRP list shall be retrieved from each distribution site by QA & destroyed through shredding.
- 6.5.5 In case of revision revised MRP list shall bear Master copy stamp after QA approval & master copy of last version shall be Sampled with obsolete Stamp shall be Retained by QA document cell.



# PHARMA DEVILS

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### 7.0 **ABBREVIATIONS:**

SOP	Standard Operation Procedure
S. No.	Serial Number
Ltd.	Limited
No.	Number
QA	Quality Assurance
QC	Quality Control
MRP	Maximum retail price

#### 8.0 **ANNEXURES:**

ANNEXURE No.	TITLE OF ANNEXURE	FORMAT No.
Annexure– I	MRP List	
Annexure – II	Addendum	

#### **DISTRIBUTION:** 9.0

- □ Master Copy Quality Assurance Department
- □ Controlled Copy No. 01 Quality Assurance Department.
- $\Box$  Controlled Copy No. 02 Production.

## **10.0 REFERENCE:**

 $\triangleright$ In-house

## **11.0 REVISION HISTORY:**

Revision No.	Change Control No.	Details of Changes	Reason of Changes	Effective Date	Done By
00	Not Applicable	Not Applicable	New SOP		



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## **ANNEXURE- I**

## **MRP** List

S.No.	DOSAGE FORM	COMPANY NAME	NAME OF PRODUCT	PACK SIZE	FINAL MRP	REMARKS



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## **ANNEXURE- II**

### ADDENDUM

S.No.	Dosage Form	Company Name	Name of Product	Pack Size	Final MRP	Effective Batch No.	Remarks

Prepared By QA Officer/Executive Sign & Date Checked By Head production Sign & Date Approved By Head Quality Assurance Sign & Date