INSTALLATION QUALIFICATION OF COMPUTER SYSTEM

Department: Information Technology	Protocol No.
Title: Installation Qualification of Computer System	Effective Date:

Installation Qualification Report
For
Personal Computer

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1.0 Introduction:

1.1 **Purpose:** The purpose of this document is to provide documentary evidence to ensure that the Installation qualification completed successfully.

1.2 **Scope:** The scope of this document is to provide summary and details of attachments of the Performed installation qualification for PC use in Warehouse.

1.3 **Reference Documents:** SOP "Validation of GxP Computerized System"**.**

2.0 System Description:

The system is a PC that provides server based security and interface to the use of software connected to an analytical instrument to execute their function.

In Installation Qualification, the system is used to check proper installation of components (Hardware & Software) of the system with proper utility.

3.0 Roles & Responsibilities:

The following department personal involving in activity shall be responsible:

Roles	Responsibilities
QC/IT (Executive/Officer)	Preparation of this report
QC (Operating Manager)	Review of this report
QA (Operating Manager)	Review of this report
QA (Head)	Approval of this report

4.0 General Instruction:

4.1 Good documentation practices shall be followed during documentation.

4.2 Do not leave any blank spaces. Use NA where ever applicable.

5.0 Pre-requisite:

5.1 Annexure I "Installation Qualification Test Script for PC" should be executed.

5.2 All attachments related to execute document should be available.

6.0 Installation Qualification Strategy:

NA

7.0 Installation Qualification Procedure:

NA

	PHARMA DEVILS	
	QUALITY ASSURANCE DEPARTMENT	

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8.0 Installation Qualification Error/Incident Reporting:

    8.1 The installation qualification for PC has been successfully executed and no discrepancy found during execution. All tests have been executed and evidence is captured and attached.

    8.2 Overall Test Status: Pass.

9.0 Error/Incident Log:

S.No.	Test Script Number	Incident/Deviation	Description of the Incident/Deviation	Incident/Deviation Number	Status (Open/Closed)
NA	NA	NA	NA	NA	NA

10.0 Attachment/Annexure:

Attachment No.	Title
Attachment 1	Installation Qualification Test Script for PC
Attachment 2	Installation Qualification Test Script for PC

11.0 Revision History:

Revision	Revised by	Revised on	Reason for Change
00	**NA**	**NA**	**NA**

	PHARMA DEVILS
	QUALITY ASSURANCE DEPARTMENT

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12.0 Approval & Authorization:

Prepared By:

Signature indicates that this document is accurate and complete and it complies with current standards and regulatory requirement and adequately address the intended purpose and scope.

QC/IT Officer/Executive			
	Name, Designation	**Signature**	**Date**

Reviewed by:

Signature indicates that this document has been reviewed and it is accurate, complete and contains the necessary degree of detail to accomplish the intended purpose.

QC Operating Manager			
	Name, Designation	**Signature**	**Date**
QA Operating Manager			
	Name, Designation	**Signature**	**Date**

Approved by:

Signature indicates that this document complies with the computer system validation policy; and that the documentation and information contained herein complies with applicable regulatory requirements.

Head QA			
	Name, Designation	**Signature**	**Date**

13.0   Abbreviations:

Gxp	: Good "x" Practice, "x" means
GEP	: Good Engineering Practice
GMP	: Good Manufacturing Practice
GLP	: Good Laboratory Practice
GCP	: Good Clinical Practices
GDP	: Good Distribution / Documentation Practice
GCLP	: Good Control Laboratory Practice
GCSVP	: Good Computer System Validation Practice
GSP	: Good Storage Practice
GTP	: Good Transportation Practice
GAMP	: Good Automated Manufacturing Practice