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### 1.0 PROTOCOL APPROVAL:

Signing of this approval page of Protocol indicates agreement with the qualification approach described in this document. If modification to the qualification approach becomes necessary, an addendum shall be prepared and approved .The protocol cannot be used for execution unless approved by the following authorities.

This Installation Qualification protocol of Medicament Mixing unit has been reviewed and approved by the following persons:

FUNCTION	NAME	DESIGNATION	DEPARTMENT	SIGNATURE	DATE
PREPARED BY			QUALITY		
			ASSURANCE		
			QUALITY		
			ASSURANCE		
REVIEWED BY			ENGINEERING		
			PRODUCTION		
			HEAD		
APPROVED BY			OPERATION		
			QUALITY		
			ASSURANCE		

PHARMA DEVILS

### INSTALLATION QUALIFICATION FOR MEDICAMENT MIXING UNIT

PROTOCOL No.:

#### 2.0 OVERVIEW:

### 2.1 **OBJECTIVE:**

The objective of developing and executing this protocol is to collect sufficient data pertaining to the Medicament Mixing Unit and define the installation qualification requirements and acceptance criteria for the Storage Tank. Successful completion of these installation qualification requirements will provide assurance that the Medicament Mixing Vessel was installed as required in the manufacturing area.

The Qualification of Medicament Mixing Unit performed in view of Soft gel medicament preparation area of manufacturing facility.

#### 2.2 PURPOSE:

The purpose of this protocol is to establish documentary evidence to ensure that the Medicament Mixing Unit received matches the Design specification and also to ensure that it is properly and safely installed.

#### 2.3 SCOPE:

This Protocol is applicable to installation of Medicament Mixing Unit in soft gel medicament preparation area of the manufacturing facility.

#### 2.4 **RESPONSIBILITY:**

In accordance with protocol, following functions shall be responsible for the qualification of system.

Execution Team (Comprising members from Production, Engineering and Quality Assurance) and their responsibilities are following:

- > Prepares the qualification protocol.
- > Ensures that the protocol is in compliance with current policies and procedures on system Qualification.
- ➤ Distributes the finalized protocol for review and approval signatures.
- > Execution of Qualification protocol.
- Review of protocol, the completed qualification data package, and the final report.



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- The installation checks, operational checks, calibration, SOP identification, identification features, identification of utility supply shall be carried out by engineering persons
  - > The production operator / supervisor shall carry out the cleaning and operation of machine.

### **Head – Production/ Engineering:**

- > Review of protocol, the completed qualification data package, and the final report.
- Assist in the resolution of validation deficiencies.

### **Head – Operation and Quality Assurance:**

➤ Review and approval of protocol, the completed qualification data package, and the final report.

### 2.5 EXECUTION TEAM:

The satisfactory installation of the Medicament Mixing Vessel shall be verified by executing the qualification studies described in this protocol. The successfully executed protocol documents that the Medicament Mixing Unit is installed satisfactorily.

Execution team is responsible for the execution of installation of Medicament Mixing Unit. Execution team comprises of:

NAME	DESIGNATION	DEPARTMENT	SIGNATURE	DATE



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### 3.0 ACCEPTANCE CRITERIA:

- 3.1 The Medicament Mixing Unit shall meet the system description given in design qualification.
- 3.2 The Medicament Mixing Unit shall meet with the acceptance criteria mentioned under the topic "Identification of major components"
- 3.3 All material of constructions of the contact parts to be checked as per the specifications.

### **4.0 REQUALIFICATION CRITERIA:**

The machine shall be requalified if

- There are any major changes in system components which affect the performance of the system
- After major breakdown maintenance is carried out.
- As per revalidation date and schedule



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### 5.0 INSTALLATION QUALIFICATION PROCEDURE:

5.1 SYSTEM DESCRIPTION:

1 Equipment Name . Medicament Mixing Unit

2 Supplier/Manufacturer . Bectochem Consultants & & Engineers Pvt. Ltd.

Model : NA
 Serial no. : NA

5 Location . Medicament preparation room

The Medicament Mixing Vessel (650 Liters) consists of Following Components:

1. Medicament Mixer (with hydraulic lifting system)

#### 2. Control Panel

- Medicament mixer having lifting device for cleaning purpose.
- ➤ Power pack assembly with SS304 tank, oil filter, solenoid valve, DCV, FCV, RLF, pressure gauge, level indicator.
- ➤ 10 HP electrical motor direct connected to hydraulic pump.
- Hydraulic cylinder having lifting capacity 2500 kg.
- Unit duly supported on 3 Nos. SS pipes with 3 Nos. castor wheels of 4" diameter.

### Note:

- 1. All rotating part will be covered with guard.
- 2. No sharp edges, easy to clean.
- 3. All glasses will be toughed glass.
- 4. Control panel should be wall mounted with speed control device.



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### 5.2 INSTRUCTION FOR FILLING THE CHECKLIST

- 5.2.1 In case of identification of major component actual observation should be written in specified location.
- 5.2.2 In case of the compliance of the test actual observation should be written in specified location.
- 5.2.3 For identification of utilities actual observation should be written in specified location.
- 5.2.4 Give the detailed information in the summary and conclusion part of the installation Qualification report.
- 5.2.5 Actual observation of the component should be written in specified location.
- 5.2.6 Whichever column is blank or not used 'NA' shall be used.



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### 5.3 INSTALLATION CHECKLIST:

Installation checklist is as follows:

S.No.	Statement	Method Of Verification	Actual Observation	Checked By Sign/Date
1	Verify purchase order copy	Visually/		
	and write down P.O. number	Documental		
2	Verify that the "As Built"	Visually/		
	drawing is complete and	Physically		
	represents the design concept.			
3	Verify that there is no	Physically		
	observable physical damage			
4	Examine All access ports are	Physically		
	cleared of any debris.			
5	Verify that all components are	Physically		
	properly assembled, securely			
	anchored and shock proof.			
6	Verify that all electrical	Physically		
	connections are properly done			
	and safe			
7	Verify that the equipment is	Physically		
	properly earthed			
8	Verify that utility line is	Physically		
	properly connected			
9	Verify the proper leveling of	Physically		
	equipment			
10	Verify that there is sufficient	Physically		
	space provided for operation,			
	cleaning, preventive			
	maintenance			



S.No.	Statement	Method Of Verification	Actual Observation	Checked By Sign/Date
11	Equipment/system identification no. Is visible	Physically		
12	Any sharp or rough edges	Visually		

Remark:	
Reviewed	by (Sign/Date)



PROTOCOL No.:

### 5.4 IDENTIFICATION OF MAJOR COMPONENTS:

Describe each critical component and check them and fill the inspection checklist.

Name of System Component	Design	n Specification	Method Of Verification	Observation	Verified By Sign/Date
•	1	MIX	ING UNIT		
Motor	Make	Bharat Bijlee	Physically		
	Spec.	10 HP, 1450 RPM, NON FLP	Physically		
	Sr. No.	To be recorded	Physically		
Gear Box	Make	NORD	Physically		
	Spec.	SK 9042.1 AF IEC 132 Ratio- 40.54	Physically		
Lobe Pump	Make	BELKO	Physically		
Motor	Spec.	2 HP, 1440 RPM	Physically		
	Sr. No.	To be recorded	Physically		
VFD for Motor	Make	ABB	Physically		
	Model	To be recorded	Physically/ Technical Specification		
	Spec.	7.5 – 5.5 KW	Physically/ Technical Specification		
	Sr. No.	To be recorded	Physically/ Technical Specification		
VFD for Lobe	Make	ABB	Physically		
Pump Motor	Model	To be recorded	Physically/ Technical Specification		
	Spec.	1.5-1.1 KW	Physically/ Technical Specification		
	Sr. No.	To be recorded	Physically/ Technical Specification		
Mechanical Seal	Make	Hi-Fab	Physically/ Technical Specification		



Name of System Component	Desig	n Specification	Method Of Verification	Observation	Verified By Sign/Date
•	Spec.	SSDB E1	Physically/		- 0
			Technical		
			Specification		
	Sr. No.	To be recorded	Physically		
Anchor Shaft	Make	BCEPL	Physically/		
			Technical		
			Specification		
	Size	Ø80	Physically/		
			Technical		
			Specification		
Anchor Sweep	Make	BCEPL	Physically/		
			Technical		
			Specification		
	Size	1500 X 10 Thk.	Physically/		
			Technical		
			Specification		
Lifting Lug	Make	BCEPL	Physically/		
			Technical		
			Specification		
	Size	20 Thk.	Physically/		
			Technical		
7.10.1 1 11	3.5.1	5. 5	Specification		
Lift hydraulic	Make	Bharat Bijlee	Physically		
system motor	Model	MA09L45590L	Physically		
	Sr. No.	To be recorded	Physically		
Lift position	Make	Inductive	Physically		
sensor (upper and lower	Model	STIM18	Physically		
position)	Qty.	02	Physically		
Pressure gauge with safety	Make	Baumer	Physically		
valve & needle	Spec.	4" Dial, ½"	Physically/		
		BSP, 0-7	Technical		
valve		Kg/cm <sup>2</sup>	Specification		
Temperature	Make	Eureka	Physically/		
-			Technical		
Sensor for			Specification		
Jacket	Model	PT-100	Physically/		
			Technical		
			Specification		
			Nozzles		



Name of System Component	Design	Specification	Method Of Verification	Observation	Verified By Sign/Date
N1	Location	Hand hole	Physically		
	Size	6 Thk.	Physically/ Technical Specification		
N2	Location	Sight Glass	Physically		
	Size	Ø 100	Physically/ Technical Specification		
N3	Location	Material Inlet	Physically		
	Size	Ø 75 x 14 SWG	Physically/ Technical Specification		
N4	Location	Safety Valve	Physically		
	Size	Ø 38 x 14 SWG	Physically/ Technical Specification		
N5	Location	Water inlet	Physically		
	Size	Ø 38 x 14 SWG	Physically/ Technical Specification		
N6	Location	Spare	Physically		
	Size	Ø 38 x 14 SWG	Physically/ Technical Specification		
N7	Location	Spare	Physically		
	Size	Ø 38 x 14 SWG	Physically/ Technical Specification		
INL	NE HOM	OGENIZER (I	EQUIPMENT N	O.:EQI/SGD/ILH/00	1)
	Make	Bharat Bijlee	Visually / Physically		
Motor	Spec.	15/20 KW/ HP, 2920 RPM, 337-450 V	Visually / Physically		
	Sr. No.	To be recorded	Visually / Physically		
V Belt	Make	Neoprene	Physically		



Name of System Component	Design	n Specification	Method Of Verification	Observation	Verified By Sign/Date
	Spec.	A-49/1280LP	Physically		
	Qty.	5 Nos	Physically		
	Make	Swiss Engineers	Physically		
Castor wheel	Spec.	2"	Physically		
	Qty.	4 Nos	Physically		
MEDICA	MENT H	OLDING VESSE	L (EQUIPMENT	Γ NO.: EQI/SGD/M	HV/001)
Medicament Holding Vessel	Make	BCEPL	Physically/ Technical		
	Qty.	01 No.	Specification Visually / Physically		
	Gross Capacity	650 ltrs.	Physically/ Technical		
	Working	600 ltrs.	Specification Physically/		_
	Capacity		Technical Specification		
Main Shell	Make	BCEPL	Physically/ Technical Specification		
	Size	6 Thk.	Physically/ Technical Specification		
Top Dish End	Make	BCEPL	Physically/ Technical		
	Size	6 Thk.	Specification Physically/ Technical Specification		
Bottom Dish End (Bowl)	Make	BCEPL	Physically/ Technical Specification		
	Size	6 Thk.	Physically/ Technical Specification		
Body Flange	Make	BCEPL	Physically/ Technical Specification		
	Size	25 mm	Physically/ Technical Specification		



Name of System Component	Design	1 Specification	Method Of Verification	Observation	Verified By Sign/Date
Jacket Shell	Make	BCEPL	Physically/		
			Technical		
			Specification		
	Size	5 Thk.	Physically/		
			Technical		
			Specification		
Jacket Dish	Make	BCEPL	Physically/		
(Bowl)			Technical		
	Size	6 Thk.	Specification		_
	Size	o ink.	Physically/ Technical		
			Specification		
Insulation	Make	BCEPL	Physically/		
	Wake	DCLI L	Technical		
Shell/ Dish			Specification		
	Size	2 Thk.	Physically/		
	Size	2 111.	Technical		
			Specification		
		l	Nozzles		
N1	Location	Thermowell	Physically		
	Size	1" NB X SCH	Physically/		
		40	Technical		
		40	Specification		
N2	Location	Jacket Vent	Physically		
	Size	½" NB X SCH	Physically/		
		40	Technical		
		40	Specification		
N3	Location	Bottom Outlet	Physically		
	Size	Ø50	Physically/		
		,	Technical		
			Specification		
N4	Location	Jacket Inlet	Physically		
	Size	25 NB X SCH	Physically/		
		40	Technical		
			Specification		
N5	Location	Jacket Outlet	Physically		
	Size	25 NB X SCH	Physically/		
		40	Technical		
		40	Specification		
N6	Location	Jacket Drain	Physically		



Name of System Component	Design	n Specification	Method Of Verification	Observation	Verified By Sign/Date
	Size	½" NB X SCH	Physically/		
		40	Technical		
		40	Specification		
MEDICA	MENT H	OLDING VESSE	-	T NO.: EQI/SGD/MF	IV/002)
Medicament	Make	BCEPL	Physically/		
Holding Vessel			Technical		
Tiolanig vesser			Specification		
	Qty.	01 No.	Visually / Physically		
	Gross	650 ltrs.	Physically/		1
	Capacity		Technical		
			Specification		
	Working	600 ltrs.	Physically/		
	Capacity		Technical		
3.6 1 01 11		D CEDI	Specification		
Main Shell	Make	BCEPL	Physically/		
			Technical		
	Size	6 Thk.	Specification Physically/		_
	Size	O TIIK.	Physically/ Technical		
			Specification		
Top Dish End	Make	BCEPL	Physically/		
Top Bish End	TYTUTE	Belle	Technical		
			Specification		
	Size	6 Thk.	Physically/		
			Technical		
			Specification		
Bottom Dish	Make	BCEPL	Physically/		
End (Bowl)			Technical		
Zna (Bown)			Specification		_
	Size	6 Thk.	Physically/		
			Technical		
Body Flange	Make	BCEPL	Specification Physically/		
Body Flalige	Make	BCEFL	Physically/ Technical		
			Specification		
	Size	25 mm	Physically/		†
			Technical		
			Specification		
Jacket Shell	Make	BCEPL	Physically/		
			Technical		
			Specification		
	Size	5 Thk.	Physically/		
			Technical		
			Specification		



Name of System Component	Design	Specification	Method Of Verification	Observation	Verified By Sign/Date
Jacket Dish	Make	BCEPL	Physically/		
(Bowl)			Technical		
(DOWI)			Specification		
	Size	6 Thk.	Physically/		
			Technical		
			Specification		
Insulation	Make	BCEPL	Physically/		
Shell/ Dish			Technical		
	G:	2 TL1-	Specification		4
	Size	2 Thk.	Physically/ Technical		
			Specification		
			Nozzles		
N1	Location	Bottom Outlet	Physically		
	Size	Ø50	Physically/		
		,	Technical		
			Specification		
N2	Location	Jacket Inlet	Physically		
	Size	25 NB X SCH	Physically/		
		40	Technical		
			Specification		
N3	Location	Jacket Outlet	Physically		
	Size	25 NB X SCH	Physically/		
		40	Technical		
			Specification		
N4	Location	Jacket Drain	Physically		
	Size	½" NB X SCH	Physically/		
		40	Technical		
			Specification		
N5	Location	Jacket Vent	Physically		
	Size	½" NB X SCH	Physically/		
		40	Technical		
		10	Specification		
N6	Location	Thermowell	Physically		
	Size	½" NB X SCH	Physically/		7
			Technical		
		40	Specification		



Name of System Component	Design	n Specification	Method Of Verification	Observation	Verified By Sign/Date
Medicament	Make	BCEPL	Physically/		
Holding Vessel			Technical		
8	0.	01.37	Specification		_
	Qty.	01 No.	Visually /		
	Gross	650 ltrs.	Physically Physically/		+
	Capacity	050 108.	Technical		
	Cupacity		Specification		
	Working	600 ltrs.	Physically/		
	Capacity		Technical		
			Specification		
Main Shell	Make	BCEPL	Physically/		
			Technical		
			Specification		
	Size	6 Thk.	Physically/		
			Technical		
			Specification		
Top Dish End	Make	BCEPL	Physically/		
-			Technical		
			Specification		
	Size	6 Thk.	Physically/		
			Technical		
			Specification		
Bottom Dish	Make	BCEPL	Physically/		
			Technical		
End (Bowl)			Specification		
	Size	6 Thk.	Physically/		_
			Technical		
			Specification		
Body Flange	Make	BCEPL	Physically/		
Dody I lange	With	BCEI E	Technical		
			Specification		
	Size	25 mm	Physically/		$\dashv$
	Size	23 11111	Technical		
			Specification		
Jacket Shell	Make	BCEPL			
Jacket Shell	iviake	DCLFL	Physically/ Technical		
	Cica	5 This	Specification		_
	Size	5 Thk.	Physically/		
			Technical		
			Specification		



Name of System Component	Design	Specification	Method Of Verification	Observation	Verified By Sign/Date
Jacket Dish	Make	BCEPL	Physically/		
(Bowl)			Technical		
(= 3)			Specification		
	Size	6 Thk.	Physically/		]
			Technical		
			Specification		
Insulation	Make	BCEPL	Physically/		
Shell/ Dish			Technical		
			Specification		
	Size	2 Thk.	Physically/		
			Technical		
h.			Specification		
			Nozzles		_
N1	Location	Bottom Outlet	Physically		
	Size	Ø50	Physically/		
			Technical		
NO	T 4:	I1 - 4 I - 1 - 4	Specification		
N2	Location	Jacket Inlet	Physically		
	Size	25 NB X SCH	Physically/		
		40	Technical		
		10	Specification		
N3	Location	Jacket Outlet	Physically		
	Size	25NB X SCH 40	Physically/		_
			Technical		
			Specification		
N4	Location	Jacket Drain	Physically		
	Size	½" NB X SCH	Physically/		-
		40	Technical		
			Specification		
N5	Location	Jacket Vent	Physically		
	Size	½" NB X SCH	Physically/		
		40	Technical		
			Specification		
N6	Location	Thermowell	Physically		
	Size	½" NB X SCH	Physically/		-
		40	Technical		
			Specification		



Reviewed by (Sign/Date)

## INSTALLATION QUALIFICATION FOR MEDICAMENT MIXING UNIT

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	ĸ			,,	. ,		171	I).	1

Remark:				
Reviewed by (Sign/Dat	e)			
5.5 VERIFICATION	N OF MATERIA	AL OF CONSTRUCTI	ON:	
				Verified
Name of Components	Material of Construction	Method of Verification	Observation	By Sign/Date
Main Shell	SS 316 L	By Molybdenum		
		Kit/ Test Certificate		
Top Dish End	SS 316 L	By Molybdenum		
		Kit/ Test Certificate		
Bottom Dish End	SS 316 L	By Molybdenum		
(Bowl)		Kit/ Test Certificate		
Body Flange	SS 316	By Molybdenum		
, ,		Kit/ Test Certificate		
Jacket Shell	SS 304	By Molybdenum		
		Kit/ Test Certificate		
Jacket Dish (Bowl)	SS 304	By Molybdenum		
		Kit/ Test Certificate		
Insulation Shell/Dish	SS 304	By Molybdenum		
		Kit/ Test Certificate		
Mechanical Seal	SS 316	By Molybdenum		
		Kit/ Test Certificate		
Anchor Shaft	SS 316L	By Molybdenum		
		Kit/ Test Certificate		
Anchor Sweep	SS 316L	By Molybdenum		
		Kit/ Test Certificate		
Lifting Lug	SS 304	By Molybdenum		
		Kit/ Test Certificate		
Remark:				



P	R	N	Т	O	C	OL	. N	[N	•
L	1/	v	1	v	$\mathbf{v}$	$\mathbf{v}_{\mathbf{L}}$	/ I 7	· U·	•

### 5.6 IDENTIFICATION OF SUPPORTING UTILITIES:

S.No.	Utility	Method Of Verification	Observation	Checked By Sign & Date
1	Electricity: 415 V/ 3 Ph/ 50 Hz	Physically with clamp meter		
2	Water	Visually		
3	Steam	Visually		
4	Vacuum	Visually		

4	vaci	uum	visuany				
Remar	k:						
Review	red by (Sig	gn/Date)					
I			OF SAFETY FEA		any) and the	ir function	n in following
_	Features ription	I	<b>Function</b>	Method of verification	Observa	ation	Checked By Sign & Date
Earthing	of motor		he accident due to e of current.	Visually			
Safety v	alve		he accident due to sure in the jacket				
Remar	<b>k</b> :						

Reviewed by (Sign/Date)



PROTOCOL No.:

#### **5.8** IDENTIFICATION OF COMPONENT TO BE CALIBRATED

Name of Components	Range	Make	ID	Location	Identified By Sign/Date
Remark:					


Reviewed by (Sign/Date)



PROTOCOL No.:

### 5.9 IDENTIFICATION OF STANDARD OPERATING PROCEDURE (SOP)

The following Standard Operating Procedures were identified as important for effective performance of Medicament Mixing Unit operation.

S.No.	SOP Title	Verified By Sign/ Date
Remark:		
Reviewed	by (Sign/Date)	
5.10	VERIFICATION OF DRAWING AND DOCUMENTS:	
	Following documents are reviewed and attached as listed below:	

S.No.	Drawing And Document Detail	Verified By Sign/Date



PROTOCOL No.:

Rema	Remark:							
 Revie	wed by (Sign/Date)							
5.11	ABBREVIATIONS							
	Following Abbreviations are used in the installation qualification protocol of Medicament							
	Mixing Unit.							
	MOC: Material of construction							
	V : Volts							
	HZ : Hertz							
	mm : Millimeter							
	Spec. : Specification							
	Qty. : Quantity							
	ltrs. : Liters							
	BCEPL: Bectochem Consultants & Engineers Pvt. Ltd.							
	NA: Not applicable							
	Thk.: Thickness							

GMP: Good manufacturing Practice



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### **5.12 DEFICIENCY AND CORRECTIVE ACTION (S) REPORT (S)**

Following	deficiency	was	verified	and	corrective	actions	taken	in	consultation	with	the
Engineerin	g Departmei	nt.									

**Description of deficiency:** 

**Corrective action(s) taken:** 

Deviation accepted by (Sign/Date)

Deviation Approved by (Sign/Date)



PROTOCOL No.:

5.13 A	Annexure	<b>(S)</b>
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<b>Annexure</b>	No.
Aimexure	INU.

**Details Of Annexure** 

Remarks (if any):			

Done By & Date:

Verified By & Date:



MIA DI	EVILS	
6.0	INSTALLATION QUALIFICATION FIN	NAL REPORT:
6.1	SUMMARY:	
6.2	CONCLUSION:	
Prepa	red By	Checked By
Sign/	Date	Sign/ Date



PROTOCOL No.:

#### 6.3 FINAL REPORT APPROVAL

It has been verified that all tests required by this protocol are completed, reconciled and attached to this protocol or included in the qualification summary report. All amendments and discrepancies are documented, approved and attached to this protocol. If applicable, Signature in the block below indicates that all items in this qualification report of Medicament Mixing Unit have been reviewed and found to be acceptable and that all variations or discrepancies have been satisfactorily resolved. After the successful installation qualification of the Medicament Mixing Unit the equipment can be taken for operational qualification.

FUNCTION	NAME	DESIGNATION	DEPARTMENT	SIGNATURE	DATE
			QUALITY ASSURANCE		
REVIEWED BY			ENGINEERING		
			PRODUCTION		
APPROVED			HEAD OPERATION		
ВҮ			QUALITY ASSURANCE		