

PROTOCOL No.:

EQUIPMENT ID. No.	
LOCATION	Ointment Section
DATE OF QUALIFICATION	
SUPERSEDES PROTOCOL No.	NIL



PROTOCOL No.:

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#### 1.0 REPORT PRE – APPROVAL:

PREPARED BY:

DESIGNATION	NAME	SIGNATURE	DATE
OFFICER/EXECUTIVE (QUALITY ASSURANCE)			

#### **REVIEWED BY:**

DESIGNATION	NAME	SIGNATURE	DATE
OPERATING MANAGER (QUALITY ASSURANCE)			
HEAD (ENGINEERING)			

### **APPROVED BY:**

DESIGNATION	NAME	SIGNATURE	DATE
HEAD (PRODUCTION)			



PROTOCOL No.:

#### **2.0 OBJECTIVE:**

- To provide documented evidence that the Equipment is performing consistently, repeatedly and reproducibly within its established operating range and the results of all the test parameters meet the pre-defined acceptance criteria.
- To confirm the suitability of the Standard Operating Procedures for all routine activities associated with the system.

#### 3.0 SCOPE:

- The score of this report is limited for qualification of Check Weigher Machine installed in Ointment section.
- This report provides all the relevant information of the performance qualification activity, In-process observations write in Report



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### 4.0 **RESPONSIBILITY:**

The Validation Group, comprising of a representative from each of the following departments, shall be responsible for the overall compliance of this Protocol cum Report:

DEPARTMENTS	RESPONSIBILITIES				
	Preparation, Review Authorization and Compilation of the Performance				
	Qualification Report.				
Quality Assurance	Co-ordination with Quality Control, Engineering and Engineering to				
Quanty Assurance	carryout Performance Qualification Activity.				
	Monitoring of Performance Qualification.				
	Post Authorization after the Compilation.				
	Approval of Performance Qualification Report.				
Production	To co-ordinate and support Performance Qualification Activity.				
	Post Approval of Performance Qualification Report After Execution.				
	Reviewing of qualification protocol for correctness, completeness and				
Engineering	technical excellence				
Lugmeering	Responsible for trouble shooting (if occurred during execution).				
	Maintenance & preventive maintenance as per schedule.				



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### **5.0 EQUIPMENT DETAILS:**

Equipment Name Check Weigher Machine	
Equipment	
Manufacturer's Name	A & D Instruments Pvt. Ltd.
Supplier Name	A & D Instruments Pvt. Ltd.
Machine Serial No.	
Model	
<b>Location of Installation</b>	Ointment Section



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6.0	PRE -	DUALIFICATION REQUIREMENTS	
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- **6.1 Training**: The Training for the entire concerned person shall be provided and record shall be attached with the qualification report.
- **6.2** Verification of Documents:

Record the observations for documents in the below mentioned table.

S.No.	Document Name	Completed (Yes/No)	Checked By (Production) Sign/Date	Verified By (QA) Sign/Date
1.	Executed and approved Design Qualification document			
2.	Executed and approved Installation Qualification document			
3.	Executed and approved Operational Qualification document			
4.	Approved Performance Qualification Protocol			
5.	SOP for operating & Cleaning of Check Weigher Machine			
6.	SOP for Preventive Maintenance Of Check Weigher Machine			

Inference:	
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	Reviewed By
	Manager QA
	Manager QA Sign/Date:



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7.0	TESTS	AND	<b>CHECKS</b> :
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#### 7.1 TEST OF WEIGHT VERIFICATION:

#### 7.1.1 FIRST BATCH AT MINIMUM SPEED:

Date of test		<b>Equipment ID</b>		
<b>Product Name</b>		Batch No.		
Std. Filled weight		Weight	Lower Limit	
		variation	<b>Upper Limit</b>	
Type of Tube		Speed of conveyer		

Nozzle No.	Tube No.	Initial (Challenge Tube Weight in gm)	Middle (Challenge Tube Weight in gm)	End (Challenge Tube Weight in gm)
	1			
	2			
	3			
	4			
1.	5			
	6			
	7			
	8			
	9			
	10			
	1			
	2			
	3			
	4			
2.	5			
	6			
	7			
	8			
	9			
	10			

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	Manager QA
	Sign/Date:



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7.1.2 AT OPTIMUM S	SPEED:
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Date of test	<b>Equipment ID</b>		
<b>Product Name</b>	Batch No.		
C44 E31-4	Weight	Lower Limit	
Std. Filled weight	variation	<b>Upper Limit</b>	
Type of Tube	Speed of conve		

Nozzle No.	Tube No.	Initial (Challenge Tube Weight in gm)	Middle (Challenge Tube Weight in gm)	End (Challenge Tube Weight in gm)
	1			
	2			
	3			
	4			
1.	5			
	6			
	7			
	8			
	9			
	10			
	1			
	2			
	3			
	4			
2.	5			
	6			
	7			
	8			
	9			
	10			

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	Reviewed By Manager QA Sign/Date:



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7.	1.3	AT	MAX	<b>IMUM</b>	<b>SPEED:</b>

Date of test	<b>Equipment ID</b>		
<b>Product Name</b>	Batch No.		
Std Filled weight	Weight	Lower Limit	
Std. Filled weight	variation	<b>Upper Limit</b>	
Type of Tube	Speed of conve		

Nozzle No.	Tube No.	Initial (Challenge Tube Weight in gm)	Middle (Challenge Tube Weight in gm)	End (Challenge Tube Weight in gm)
	1			
	2			
	3			
	4			
1.	5			
	6			
	7			
	8			
	9			
	10			
	1			
	2			
	3			
	4			
2.	5			
	6			
	7			
	8			
	9			
	10			

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	Reviewed By Manager QA Sign/Date:



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7.2	<b>SECOND</b>	<b>BATCH:</b>

### **7.2.1 AT MINIMUM SPEED:**

Date of test	<b>Equipment ID</b>		
<b>Product Name</b>	Batch No.		
Std Filled weight	Weight	Lower Limit	
Std. Filled weight	variation	Upper Limit	
Type of Tube	Speed of conve		

Nozzle No.	Tube No.	Initial (Challenge Tube Weight in gm)	Middle (Challenge Tube Weight in gm)	End (Challenge Tube Weight in gm)
	1	- 6 6 /	0 /	- 0 0 /
	2			
	3			
	4			
1	5			
	6			
	7			
	8			
	9			
	10			
	1			
	2			
	3			
	4			
2	5			
	6			
	7			
	8			
	9			
	10			

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7.2.2 AT OPTIMUM SPEED	7.2.2	ΑT	OPTIN	MUM	<b>SPEED</b>
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Date of test	<b>Equipment ID</b>		
<b>Product Name</b>	Batch No.		
Ctd Filled weight	Weight	Lower Limit	
Std. Filled weight	variation	<b>Upper Limit</b>	
Type of Tube	Speed of conve		

Nozzle No.	Tube No.	Initial (Challenge Tube Weight in gm)	Middle (Challenge Tube Weight in gm)	End (Challenge Tube Weight in gm)
	1	<i>G G</i> ,		
	2			
	3			
	4			
1.	5			
	6			
	7			
	8			
	9			
	10			
	1			
	2			
	3			
	4			
2.	5			
	6			
	7			
	8			
	9			
	10			

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7.2.3	$\mathbf{AT}$	MA	XIM	UM	<b>SPEED</b>	:

Date of test	Equipment ID No.		
<b>Product Name</b>	Batch No.		
Std Filled weight	Weight	Lower Limit	
Std. Filled weight	variation	<b>Upper Limit</b>	
Type of Tube	Speed of conveyer		

Nozzle No.	Tube No.	Initial (Challenge Tube Weight in gm)	Middle (Challenge Tube Weight in gm)	End (Challenge Tube Weight in gm)
	1			
	2			
	3			
	4			
1.	5			
	6			
	7			
	8			
	9			
	10			
	1			
	2			
	3			
	4			
2.	5			
	6			
	7			
	8			
	9			
	10			

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	Reviewed By Manager QA Sign/Date:



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7.3	THIRD	<b>BATCH:</b>
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### 7.3.1 AT MINIMUM SPEED:

Date of test		Equipment ID No.		
<b>Product Name</b>		Batch No.		
Std. Filled weight		Weight	Lower Limit	
		variation	<b>Upper Limit</b>	
Type of Tube		Speed of conveyer		

Nozzle No.	Tube No.	Initial (Challenge Tube Weight in gm)	Middle (Challenge Tube Weight in gm)	End (Challenge Tube Weight in gm)
	1	7	8 /	
	2			
	3			
	4			
1.	5			
	6			
	7			
	8			
	9			
	10			
	1			
	2			
	3			
	4			
2.	5			
	6			
	7			
	8			
	9			
	10			

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Production	Quality Assurance		
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	Reviewed By		
	Manager QA		
	Sign/Date:		



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7.3.2	$\mathbf{AT}$	OPTIN	MUM	<b>SPEED:</b>

Date of test	<b>Equipment ID</b>		
<b>Product Name</b>	Batch No.		
Std. Filled weight	Weight	Lower Limit	
	variation	<b>Upper Limit</b>	
Type of Tube	Speed of conve		

Nozzle No.	Tube No.	Initial (Challenge Tube Weight in gm)	Middle (Challenge Tube Weight in gm)	End (Challenge Tube Weight in gm)
	1			
	2			
	3			
	4			
1.	5			
	6			
	7			
	8			
	9			
	10			
	1			
	2			
	3			
	4			
2.	5			
	6			
	7			
	8			
	9			
	10			

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Date of test	<b>Equipment ID</b>		
<b>Product Name</b>	Batch No.		
Std. Filled weight	Weight	Lower Limit	
	variation	<b>Upper Limit</b>	
Type of Tube	Speed of conve		

Nozzle No.	Tube No.	Initial (Challenge Tube Weight in gm)	Middle (Challenge Tube Weight in gm)	End (Challenge Tube Weight in gm)
	1			
	2			
	3			
	4			
1.	5			
	6			
	7			
	8			
	9			
	10			
	1			
	2			
	3			
	4			
2.	5			
	6			
	7			
	8			
	9			
	10			

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	Reviewed By Manager QA Sign/Date:		



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7.4	Chall	enge	<b>Tube</b>

### **7.4.1** Type I-A:

Date of Test	<b>Challenge Tube Weight</b>	
<b>Product Name</b>	Belt Speed	
Batch No.	Delay Time	
<b>Equipment ID</b>	Hold Time	
Range	Target Weight	

Challenge Tube from Nozzle-01	Observation of Weight (gm)	Machine Response	Challenge Tube from Nozzle-02	Observation of Weight (gm)	Machine Response
1			1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Correct			1		1
Weight Tube					

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	Reviewed By
	Manager QA



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<b>7.4.2</b> Type I-B	
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Date of Test	<b>Challenge Tube Weight</b>	
<b>Product Name</b>	Belt Speed	
Batch No.	Delay Time	
<b>Equipment ID</b>	Hold Time	
Range	Target Weight	

Challenge Tube from Nozzle-01	Observation of Weight (gm)	Machine Response	Challenge Tube from Nozzle-02	Observation of Weight (gm)	Machine Response
1			1	<u> </u>	
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Correct Weight Tube					.1

Checked By	Verified By
Production	<b>Quality Assurance</b>
Sign/Date:	Sign/Date:
Inference:	
	Reviewed Rv

Manager QA

Sign/Date: .....



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7.4.3	Type I-C	•
/ <b>.T.</b> J	I ypc I-C	

Date of Test	<b>Challenge Tube Weight</b>	
<b>Product Name</b>	Belt Speed	
Batch No.	Delay Time	
<b>Equipment ID</b>	Hold Time	
Range	Target Weight	

Challenge Tube from Nozzle-01	Observation of Weight (gm)	Machine Response	Challenge Tube from Nozzle-02	Observation of Weight (gm)	Machine Response
1			1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Correct Weight Tube					

Checked By	Verified By
Production	Quality Assurance
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	Reviewed By
	Manager QA
	Sign/Date:



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7.4.4	Type II-A	:
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Date of Test	<b>Challenge Tube Weight</b>	
<b>Product Name</b>	Belt Speed	
Batch No.	Delay Time	
<b>Equipment ID</b>	Hold Time	
Range	Target Weight	

Challenge	Observation	Machine	Challenge	Observation	Machine
Tube from	of	Response	Tube from	of	Response
Nozzle-01	Weight (gm)		Nozzle-02	Weight (gm)	
1			1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Correct					
Weight Tube					

Checked By
Production
Quality Assurance
Sign/Date:

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Reviewed By

Manager QA

**Sign/Date: .....** 



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7.4.5	Type	II-B:
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Date of Test	<b>Challenge Tube Weight</b>	
<b>Product Name</b>	Belt Speed	
Batch No.	Delay Time	
<b>Equipment ID</b>	Hold Time	
Range	Target Weight	

Challenge	Observation	Machine	Challenge	Observation	Machine
Tube from	of	Response	Tube from	of	Response
Nozzle-01	Weight (gm)		Nozzle-02	Weight (gm)	
1			1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Correct					1
Weight Tube					

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Reviewed By
Manager QA
Sign/Date: .....



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7.4.6	Type II-C	
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Date of Test	<b>Challenge Tube Weight</b>	
<b>Product Name</b>	Belt Speed	
Batch No.	Delay Time	
<b>Equipment ID</b>	Hold Time	
Range	Target Weight	

Challenge Tube from	Observation of	Machine Posponso	Challenge Tube from	Observation of	Machine
Nozzle-01	Weight (gm)	Response	Nozzle-02		Response
	weight (gm)			Weight (gm)	
1			1		
2			2		
3	+		3		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Correct					I
Veight Tube					

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Quality Assurance
Sign/Date:

Inference:

Verified By
Quality Assurance
Sign/Date:

Sign/Date:

Reviewed By Manager QA Sign/Date:

Sign/Date: .....



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### **8.0** CHECKLIST OF ALL TESTS AND CHECKS:

TESTS OR CHECKS

This checklist is provided to ensure that all tests or checks required for this report have been executed.

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W. 1. W. 1. C. 70. 10. 17		
Weight Variation for 5.0 gm, 10, gm, 15 gm,		
20.0 gm, & 30 gm Tube		
Challenge Test		
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Checked By	Verified By
Production Sign / Date:	Quality Assurance
Sign/Date:	Sign/Date:
Inference:	
	Reviewed By
	Manager QA
	Sign/Date:



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9.0	DOCUMENTS TO BE ATTACHED:
	Any Other Relevant Documents.
10.0	NON COMPLIANCE:
11.0	DEVIATION FROM PREDEFINED SPECIFICATION IF, ANY:
12.0	CHANGE CONTROL, IF ANY:
13.0	REVIEW (INCLUSIVE OF FOLLOW UP ACTION, IF ANY ):
14.0	CONCLUSION:



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15.0	RECOMMENDATION:

#### **16.0 ABBREVIATIONS:**

CWM : Check Weigher Machine

ID. : Identification Number

Ltd. : Limited

Gm : Gram

No. : Number

PPQ : Performance Qualification Protocol

RPQ : Performance Qualification Report

SOP : Standard Operating Procedure

Vol. : Volume



PROTOCOL No	١.	
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#### 17.0 REPORT POST – APPROVAL:

### PREPARED BY:

DESIGNATION	NAME	SIGNATURE	DATE
OFFICER/EXECUTIVE (QUALITY ASSURANCE)			

#### **REVIEWED BY:**

DESIGNATION	NAME	SIGNATURE	DATE
OPERATING MANAGER (QUALITY ASSURANCE)			
HEAD (ENGINEERING)			

### **APPROVED BY:**

DESIGNATION	NAME	SIGNATURE	DATE
HEAD (PRODUCTION)			