



**OPERATIONAL QUALIFICATION PROTOCOL CUM  
REPORT  
FOR  
VIAL LABELING MACHINE**

**PROTOCOL No.:**

**OPERATIONAL QUALIFICATION  
PROTOCOL CUM REPORT  
FOR  
VIAL LABELING MACHINE**

<b>EQUIPMENT ID. No.</b>	
<b>LOCATION</b>	<b>Packing Hall</b>
<b>DATE OF QUALIFICATION</b>	
<b>SUPERSEDE PROTOCOL No.</b>	<b>NIL</b>



**OPERATIONAL QUALIFICATION PROTOCOL CUM  
REPORT  
FOR  
VIAL LABELING MACHINE**

**PROTOCOL No.:**

**CONTENTS**

<b>S.No.</b>	<b>TITLE</b>	<b>PAGE No.</b>
<b>1.0</b>	<b>Pre-Approval</b>	<b>3</b>
<b>2.0</b>	<b>Objective</b>	<b>4</b>
<b>3.0</b>	<b>Scope</b>	<b>4</b>
<b>4.0</b>	<b>Responsibility</b>	<b>5</b>
<b>5.0</b>	<b>Equipment Details</b>	<b>6</b>
<b>6.0</b>	<b>Equipment Description</b>	<b>6</b>
<b>7.0</b>	<b>Pre-Qualification Requirements</b>	<b>9</b>
<b>8.0</b>	<b>Critical Variables to be Met</b>	<b>10</b>
<b>9.0</b>	<b>References</b>	<b>18</b>
<b>10.0</b>	<b>Documents to be Attached</b>	<b>18</b>
<b>11.0</b>	<b>Deviation from Pre-Defined Specification, If Any</b>	<b>19</b>
<b>12.0</b>	<b>Change Control, If Any</b>	<b>19</b>
<b>13.0</b>	<b>Review (Inclusive of follow up action, If Any)</b>	<b>19</b>
<b>14.0</b>	<b>Conclusion</b>	<b>20</b>
<b>15.0</b>	<b>Recommendation</b>	<b>20</b>
<b>16.0</b>	<b>Abbreviations</b>	<b>21</b>
<b>17.0</b>	<b>Post Approval</b>	<b>16</b>



**PHARMA DEVILS**

**OPERATIONAL QUALIFICATION PROTOCOL CUM  
REPORT  
FOR  
VIAL LABELING MACHINE**

**PROTOCOL No.:**

**1.0 PRE – APPROVAL:**

**INITIATED BY:**

<b>DESIGNATION</b>	<b>NAME</b>	<b>SIGNATURE</b>	<b>DATE</b>
<b>OFFICER/EXECUTIVE (QUALITY ASSURANCE)</b>			

**REVIEWED BY:**

<b>DESIGNATION</b>	<b>NAME</b>	<b>SIGNATURE</b>	<b>DATE</b>
<b>HEAD (PRODUCTION)</b>			
<b>HEAD (ENGINEERING)</b>			

**APPROVED BY:**

<b>DESIGNATION</b>	<b>NAME</b>	<b>SIGNATURE</b>	<b>DATE</b>
<b>HEAD (QUALITY ASSURANCE)</b>			



PHARMA DEVILS

**OPERATIONAL QUALIFICATION PROTOCOL CUM  
REPORT  
FOR  
VIAL LABELING MACHINE**

**PROTOCOL No.:**

**2.0 OBJECTIVE:**

- To verify that the equipment operates in accordance with the design and user requirements as defined by set Acceptance Criteria and complies with relevant cGMP Requirements.
- To verify the Operational features of Vial Labeling Machine and to ensure that it produces desired Quality & rated output according to manufactures specifications.
- To verify all the Operational features from user point of view of the Equipment, Cleaning Procedure, Start up & Shut down Procedure and Safety Features.

**3.0 SCOPE:**

- The scope of this operational qualification protocol cum report is limited to qualification of **Vial Labeling Machine (Make: Ambica Pharma Machines Pvt. Ltd.)** installed in the **Packing Hall**.
- This Protocol cum Report will define the methods and documentation used to perform OQ activity of Vial Labeling Machine.
- Successful completion of this Protocol will verify that Vial Labeling Machine meet all acceptance criteria and ready for Performance Qualification.



**PHARMA DEVILS**

**OPERATIONAL QUALIFICATION PROTOCOL CUM  
REPORT  
FOR  
VIAL LABELING MACHINE**

**PROTOCOL No.:**

**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:

<b>DEPARTMENTS</b>	<b>RESPONSIBILITIES</b>
<b>Quality Assurance</b>	<ul style="list-style-type: none"><li>• Preparation, Review, Approval and compilation of the operational Qualification Protocol cum Report.</li><li>• Co-ordination with Production and Engineering to carryout Operational Qualification.</li><li>• Monitoring of Operation Process.</li><li>• Post approval of Operational Qualification Protocol cum Report after execution.</li></ul>
<b>Production</b>	<ul style="list-style-type: none"><li>• Review of Operational Qualification Protocol cum Report.</li><li>• To Co-ordinate and support for execution of Operational Qualification study as per Protocol.</li><li>• Post Approval of Operational Qualification Protocol cum Report after Execution.</li></ul>
<b>Engineering</b>	<ul style="list-style-type: none"><li>• Review of Operational Qualification.</li><li>• To co-ordinate and support Operational Qualification Activity.</li><li>• Calibration of Process Instruments.</li><li>• Post approval of Operational Qualification Protocol cum Report after execution.</li></ul>



**PHARMA DEVILS**

**OPERATIONAL QUALIFICATION PROTOCOL CUM  
REPORT  
FOR  
VIAL LABELING MACHINE**

**PROTOCOL No.:**

**5.0 EQUIPMENT DETAILS:**

<b>Equipment Name</b>	Vial Labeling Machine
<b>Equipment ID.</b>	.....
<b>Manufacturer's Name</b>	Ambica Pharma Machines Pvt. Ltd
<b>Supplier's Name</b>	Ambica Pharma Machines Pvt. Ltd
<b>Model</b>	.....
<b>Location of Installation</b>	Packing Hall

**6.0 EQUIPEMENT DESCRIPTION:**

The Equipment means to Label the Round Objects for different size with over printing in single straight line operation.

The filled & sealed containers load on turn table and turn table will feed the containers in signal track to the transport conveyor. Now container convey on conveyor in signal track in a queue position and reaches to the container separator. The separator picks container one by one and releases the container at a specified pitch to the conveyor for labeling operation. When containers are arriving below the product sensor, product sensor gives signal of presence of the container at labeling station and microprocessor will start dispense label and as soon as one label is applied to the container, the label sensor give signal to stop the label. Then the container moves through pressing device for firmly stick the label.



**PHARMA DEVILS**

**OPERATIONAL QUALIFICATION PROTOCOL CUM  
REPORT  
FOR  
VIAL LABELING MACHINE**

**PROTOCOL No.:**

**7.0 PRE - QUALIFICATION REQUIREMENTS:**

**7.1 Verification of Documents:**

- DQ Protocol cum Report.
- IQ Protocol cum Report.
- Draft SOP for Operation & Cleaning of VLM.
- Draft SOP for Preventive Maintenance of VLM.
- Electrical Circuits Diagram.
- Technical specification of equipment.

**7.1.1 Procedure:**

- Verify the above mentioned documents for availability, completeness and approval status.
- If any deviation is observed the same has to be recorded giving reasons for deviation and approved. Deviation should be approved by Authorized person.
- Approved Drawings and supporting documents would form a part of the OQ Protocol cum Report.

**7.1.2 Acceptance Criteria:**

All the documents should be available, complete and approved by respective authorities.



**PHARMA DEVILS**

**OPERATIONAL QUALIFICATION PROTOCOL CUM  
REPORT  
FOR  
VIAL LABELING MACHINE**

**PROTOCOL No.:**

**8.0 CRITICAL VARIABLES TO BE MET:**

**8.1 Verification of documents:**

The results of any tests should meet the limits and acceptance criteria specified in the test documents.

Any deviations or issues should be rectified and documented prior to OQ commencing.

S.No.	Document Name	Document/SOP No.	Completed (Yes/No)	Checked By (Engineering) Sign/Date	Verified By (Quality Assurance) Sign/Date
1.	DQ Protocol cum Report				
2.	IQ Protocol cum Report				
3.	Draft SOP for Operation & Cleaning of Vial Labeling Machine.				
4.	Draft SOP for Preventive Maintenance Vial Labeling Machine				

**Checked By (Production)**  
**Sign/Date:** .....

**Verified By (Quality Assurance)**  
**Sign/Date:** .....

**Inference:**

.....

.....

.....

.....

.....

**Reviewed By (Manager QA)**  
**Sign/Date:** .....





**PHARMA DEVILS**

**OPERATIONAL QUALIFICATION PROTOCOL CUM  
REPORT  
FOR  
VIAL LABELING MACHINE**

**PROTOCOL No.:**

**8.2 Test Equipment Calibration:**

Verify that all critical instruments associated with the system are in a calibrated state. Review the calibration status for the test equipment to be utilised and record the calibration due dates in the table below. All Equipment/Instrumentation must remain within the calibration due date for the duration of OQ test for which the item is used. If a due date potentially occurs during the testing period then the instrument must be recalibrated before it can be utilised.

Equipment/ Instruments Name	Equipment/Instrument I.D.	Calibration On	Due On	Observed By Sign/Date

**Checked By  
(Production)  
Sign/Date: .....**

**Verified By  
(Quality Assurance)  
Sign/Date: .....**

**Inference:**

.....

.....

.....

.....

.....

**Reviewed By  
(Manager QA)  
Sign/Date: .....**



PHARMA DEVILS

OPERATIONAL QUALIFICATION PROTOCOL CUM  
REPORT  
FOR  
VIAL LABELING MACHINE

PROTOCOL No.:

**8.3 Operational and Functional Checks:**

Operate the Vial Labeling Machine as per Manufacturer’s Manual/SOP and Check for the following functions of the Equipment. The Equipment should function as desired.

Component	Acceptance Criteria	Observations	Observed By (Engineering) Sign/Date
<b>Machine ON/OFF Switch</b>			
Turn the Knob ON Position.	Green light will glow on panel.		
Turn the Knob OFF Position	Green light will not glow on panel.		
<b>Function of Conveyor Belt Start/Stop Knob</b>			
Turn the Knob on start Position.	Conveyor Belt will start		
Turn the Knob on stop Position.	Conveyor Belt will stop		
<b>Function of Speed Setting Knob of Conveyor Belt</b>			
Turn the Knob for desired speed.	Speed will Increase / Decrease.		
<b>Function of Label Start / Stop Knob Washing scheme</b>			
Turn the Knob on start Position.	Labeling device will start		
Turn the Knob on stop Position.	Labeling device will stop.		
<b>No Vial No Label Sensor</b>			
If there is no vial on conveyor belt	There should no Label.		

**Checked By**  
**(Production)**  
**Sign/Date:** .....

**Verified By**  
**(Quality Assurance)**  
**Sign/Date:** .....

**Inference:**

.....  
.....  
.....  
.....

**Reviewed By**  
**(Manager QA)**  
**Sign/Date:** .....



**PHARMA DEVILS**

**OPERATIONAL QUALIFICATION PROTOCOL CUM  
REPORT  
FOR  
VIAL LABELING MACHINE**

**PROTOCOL No.:**

**8.4 Power Failure Verification:**

<b>Item</b>	<b>Acceptance Criteria</b>	<b>Observation</b>	<b>Observed By (Engineering) Sign/Date</b>
<b>Main Power Shut Down</b>	Equipment stops in a safe and secure condition.		
<b>Main Power Restored</b>	Equipment can be restarted with no problems or adverse conditions.		

**Checked By  
(Production)  
Sign/Date: .....**

**Verified By  
(Quality Assurance)  
Sign/Date: .....**

**Inference:**

.....

.....

.....

.....

**Reviewed By  
(Manager QA)  
Sign/Date: .....**



**PHARMA DEVILS**

**OPERATIONAL QUALIFICATION PROTOCOL CUM  
REPORT  
FOR  
VIAL LABELING MACHINE**

**PROTOCOL No.:**

**8.5 Emergency Operation Verification:**

<b>Item</b>	<b>Acceptance Criteria</b>	<b>Observation</b>	<b>Observed By (Engineering) (Sign/Date)</b>
ON/OFF Push button • Press Stop Push Button • Release ON Push Button	Equipment should Stop		
	Equipment should Start		
With the OFF button Pressed in, Try to cause movement of an Operating function.	The Equipment will be inoperative.		

**Checked By  
(Production)  
Sign/Date: .....**

**Verified By  
(Quality Assurance)  
Sign/Date: .....**

**Inference:**

.....

.....

.....

.....

**Reviewed By  
(Manager QA)  
Sign/Date: .....**



**PHARMA DEVILS**

**OPERATIONAL QUALIFICATION PROTOCOL CUM  
REPORT  
FOR  
VIAL LABELING MACHINE**

**PROTOCOL No.:**

**9.0 REFERENCES:**

**The Principle Reference is the following:**

- Validation Master Plan.
- Schedule - M – “Good Manufacturing Practices and Requirements of Premises, Plant and Equipment for Pharmaceutical Products.”
- WHO Essential Drugs and Medicines Policy, QA of Pharmaceuticals, Vol-2. Good Manufacturing Practices and Inspection.

**10.0 DOCUMENTS TO BE ATTACHED:**

- Operation and Maintenance Manual.
- Copy of Draft SOPs.
- Any other Relevant Documents.

**11.0 DEVIATION FROM PREDEFINED SPECIFICATION IF, ANY:**

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

**12.0 CHANGE CONTROL, IF ANY:**

.....

.....

.....

.....

.....

.....



**PHARMA DEVILS**

**OPERATIONAL QUALIFICATION PROTOCOL CUM  
REPORT  
FOR  
VIAL LABELING MACHINE**

**PROTOCOL No.:**

**13.0 REVIEW (INCLUSIVE OF FOLLOW UP ACTION, IF ANY ):**

.....  
.....  
.....  
.....  
.....  
.....  
.....

**14.0 CONCLUSION:**

.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....

**15.0 RECOMMENDATION:**

.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....



**PHARMA DEVILS**

**OPERATIONAL QUALIFICATION PROTOCOL CUM  
REPORT  
FOR  
VIAL LABELING MACHINE**

**PROTOCOL No.:**

**16.0 ABBREVIATIONS:**

No.	:	Number
WHO	:	World Health Organization
FDA	:	Food and Drug Administration
CFR	:	Code of Federal Regulations
cGMP	:	Current Good Manufacturing Practices
mm	:	Millimetre
Amp.	:	Ampere
DQ	:	Design Qualification
IQ	:	Installation Qualification
OQ	:	Operational Qualification
MOC	:	Material of Construction
NLT	:	Not Less Than
HP	:	Horse Power
KW	:	Kilo Watt
SS	:	Stainless Steel
ID.	:	Identification
Kg	:	Kilo Gram
Ltrs	:	Liters



**PHARMA DEVILS**

**OPERATIONAL QUALIFICATION PROTOCOL CUM  
REPORT  
FOR  
VIAL LABELING MACHINE**

**PROTOCOL No.:**

**17.0 POST APPROVAL:**

**INITIATED BY:**

<b>DESIGNATION</b>	<b>NAME</b>	<b>SIGNATURE</b>	<b>DATE</b>
<b>OFFICER/EXECUTIVE (QUALITY ASSURANCE)</b>			

**REVIEWED BY:**

<b>DESIGNATION</b>	<b>NAME</b>	<b>SIGNATURE</b>	<b>DATE</b>
<b>HEAD (PRODUCTION)</b>			
<b>HEAD (ENGINEERING)</b>			

**APPROVED BY:**

<b>DESIGNATION</b>	<b>NAME</b>	<b>SIGNATURE</b>	<b>DATE</b>
<b>HEAD (QUALITY ASSURANCE)</b>			