

PERFORMANCE QUALIFICATION REPORT

FOR

DOUBLE HEAD FULLY AUTOMATIC FILLING, CLOSING AND SEALING MACHINE

FILLING ROOM
Nil



PROTOCOL No.:

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PROTOCOL No.:

1.0 REPORT PRE – APPROVAL:

INITIATED BY:

DESIGNATION	NAME	SIGNATURE	DATE
OFFICER/EXECUTIVE (QUALITY ASSURANCE)			

REVIEWED BY:

DESIGNATION	NAME	SIGNATURE	DATE
HEAD (PRODUCTION)			
HEAD (QUALITY CONTROL)			
HEAD (ENGINEERING)			

APPROVED BY:

DESIGNATION	NAME	SIGNATURE	DATE
HEAD (QUALITY ASSURANCE)			



2.0

PERFORMANCE QUALIFICATION REPORT FOR DOUBLE HEAD FULLY AUTOMATIC FILLING , CLOSING AND SEALING MACHINE

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 scope of this report is limited for qualification of Double head fully Automatic Filling, closing and Sealing Machine installed in Filling room.
- This report provides all the relevant information of the performance qualification activity, In-process observations and analytical data of testing of collected samples.



4.0 **RESPONSIBILITY:**

The Validation Group, comprising of a representative from each of the following departments, shall be responsible for the execution of Performance Qualification Report.

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



EQUIPMENT DETAILS: 5.0

Equipment Name	Double Head Fully Automatic Filling, Closing and Sealing machine
Equipment	
Manufacturer's Name	
Model	
Serial No.	
Supplier's Name	Parle Kovai Technologies pvt. Ltd.
Location of Installation	Filling room

PRE – QUALIFICATION REQUIREMENTS: 6.0

Verification for availability, completeness and approval status of all the required relevant documents shall be done and observations shall be recorded in the performance qualification report.

Verification of Documents: 6.1

Record the observations for documents in the below mentioned table.

S.No.	Document Name	Document/SOP No.	Completed (Yes/No)	Checked By (Engineering) Sign/Date	Verified By (QA) Sign/Date
1.	DQ Protocol approved				
2.	IQ Protocol approved				
3.	OQ Protocol approved				
4.	PQ Protocol approved				
5.	SOP for Operation &				
	Cleaning of Double				
	Head Fully Automatic				
	filling , closing and				
	sealing machine				
6.	SOP for Preventive				
	Maintenance Double				
	Head Fully Automatic				



PROTOCOL No.:

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S.No.	Document Name	Document/SOP No.	Completed (Yes/No)	Checked By (Engineering) Sign/Date	Verified By (QA) Sign/Date
	filling , closing and sealing				
	machine				

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



PROTOCOL No.:

7.0 TESTS AND CHECKS:

7.1 Fill Weight Variation At Full Hopper :

Date of test	
Product Name	
Batch No.	
Standard. Fill Weight	
(Limit: ± % of standard Filled Weight)	
Total Operation Time	

Trial No.:....

TUBE	Low Speed (40 tubes/ min)			Optimum Speed (70 tube / min)			High Speed (100 T/M)		
No.	Gross wt.	Empty wt	Net wt.	Gross wt.	Empty wt	Net wt.	Gros s wt.	Empty wt	Net wt.
1.									
2.									
3.									
4.									
5.									
6.									
7.									
8.									
9.									
10.									
11.									



Gross

wt.

TUBE

12.

13.

14.

15.

No.

Low Speed (40 tubes/min)

Empty

wt

Net

wt.

PERFORMANCE QUALIFICATION REPORT FOR DOUBLE HEAD FULLY AUTOMATIC FILLING , CLOSING AND SEALING MACHINE

Gross

wt.

PROTOCOL No.:

Empty

wt

Net

wt.

Optimum Speed (70 tube/min) High Speed (100 T/M)

Net wt.

Gros

s wt.

Empty

wt

16.					
17.					
18.					
19.					
20.					



PROTOCOL No.:

Leakage Test :

7.2 Leakage Test :							
Date of tes	it			Product Name			
Batch No.				Fill Weight			
Temperatu	ıre			Type of Tube	Lami / Alum	inum	
Trial No.:.	Trial No.:						
Tube No.	Low Speed (4	Low Speed (40 tubes/ min)		peed (70 tube / min)	High Spee	d (100 T/M)	
	Nozzle-01	Nozzle-02	Nozzle-01	Nozzle-02	Nozzle-01	Nozzle-02	
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
RESULTS	The test results	Complies / Not	Complies as p	per Specification.	I		
Checked ByVerified ByProductionQuality AssuranceSign/Date:Sign/Date							
Inference:							
•••••							
•••••	••••••	••••••••••••••••	•••••••••••••••			•••••	
•••••	Reviewed By Manager QA Sign/Date:						



7.3

Date of test

Physical Test:

PERFORMANCE QUALIFICATION REPORT FOR DOUBLE HEAD FULLY AUTOMATIC FILLING, **CLOSING AND SEALING MACHINE**

Product Name

PROTOCOL No.:

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Batch No.				Fill Wei	ght		
Trial No.:		•••••					
Tube No.	Pr	inting matter	Engrav	ving	De	nt	Wrinkle
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
RESULTS:	The test re	sults Complies / Not C	Complies as pe	er Specific	cation.		
Checked By Production Sign/Date: . Inference:						Verified By Quality As Sign/Date.	
•••••	•••••			• • • • • • • • • • • • •		•••••	•••••
•••••	• • • • • • • • • • • • • • •	••••••					
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8.0

PERFORMANCE QUALIFICATION REPORT FOR DOUBLE HEAD FULLY AUTOMATIC FILLING , CLOSING AND SEALING MACHINE

CHECKLIST OF ALL TESTS & CHECKS: This checklist is provided to ensure that all tests or checks required for this protocol have been executed.

Tests or ChecksExecuted
(Yes/No)RemarksVerification of DocumentsIIFill Weight VariationIILeakage TestIIPhysical TestII

Checked B	У
Production	L
Sign/Date:	•••••

Verified By Quality Assurance Sign/Date.....

Inference:

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

PHARMA DEVILS		PERFORMANCE QUALIFICATION REPORT FOR DOUBLE HEAD FULLY AUTOMATIC FILLING , CLOSING AND SEALING MACHINE	PROTOCOL No.:
9.0	DOCUM	ENTS TO BE ATTACHED:	
	• Execut	ed Raw Data.	
	• Any O	ther Relevant Documents.	
	-		
10.0	NON CON	MPLIANCE:	
	•••••		
	•••••		
	•••••		
	•••••		
	•••••	•••••••••••••••••••••••••••••••••••••••	
11.0	DEVIATI	ON FROM PREDEFINED SPECIFICATION IF, ANY:	
		· · · · · · · · · · · · · · · · · · ·	
	•••••		
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12.0	CHANGE	CONTROL, IF ANY:	
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	•••••		
	•••••	•••••••••••••••••••••••••••••••••••••••	
13.0	REVIEW	(INCLUSIVE OF FOLLOW UP ACTION, IF ANY):	
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	•••••		
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14.0 **CONCLUSION:**

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15.0 **RECOMMENDATION:**

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16.0 **ABBREVIATIONS:**

Asst.	:	Assistant
cGMP	:	Current Good Manufacturing Practices
PQ	:	Performance Qualification
Vol.	:	Volume
i.e.	:	That is
SS	:	Stainless steel
Ltr.	:	Litre
Nos.	:	Numbers.
SOP	:	Standard Operating Procedure
SS	:	Stain less Steel
OFS	:	Double Head fully automatic Filling, closing and Sealing machine
WHO	:	World Health Organization



PROTOCOL No.:

17.0 REPORT POST-APPROVAL:

INITIATED BY:

DESIGNATION	NAME	SIGNATURE	DATE
OFFICER/EXECUTIVE (QUALITY ASSURANCE)			

REVIEWED BY:

DESIGNATION	NAME	SIGNATURE	DATE
HEAD (PRODUCTION)			
HEAD (QUALITY CONTROL)			
HEAD (ENGINEERING)			

APPROVED BY:

DESIGNATION	NAME	SIGNATURE	DATE
HEAD (QUALITY ASSURANCE)			