



PHARMADEVILS
IT DEPARTMENT

Appendix 3- Template of Computerized System Periodic Review Log

Title: Computerized System Periodic Review Log

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Unit Name:

Revision No.

S.No.	System Name/ Instrument Name/ Equipment Name	System ID./ Instrument ID./ Equipment ID.	Initial Validation (Date)	Revalidation (If Done) (Date)	1 st Periodic Review (Date)	2 nd Periodic Review (Date)	Remarks
1.							

Prepared By (Sign & Date)	Reviewed By (Sign & Date)	Reviewed By (Sign & Date)	Approved By (Sign & Date)

Note: 1. Signing table can be changed as per required.

2. Revalidation Column and Periodic Review Column can be added as per requirement.

3. Revision No. will start from 01 for preparing the document initially and will be 02, 03... when it revised.