



PHARMA DEVILS
QUALITY ASSURANCE DEPARTMENT

Operational Qualification for Open Front Containment Station

Pre – Execution Approval

	Name	Designation	Signature	Date
Prepared By				
Reviewed By				
Reviewed By				
Reviewed By				
Approved By				



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1.0 OBJECTIVE:

To determine that the Open fronted Containment Facility Equipment operates according to specifications, and to record all relevant information and data to demonstrate its functions.

2.0 SCOPE:

Scope is limited to the following

Equipment / System Name	Open Fronted Containment Facility
ID Number	S/001
Location	RM Dispensing Area

3.0 CHECKLIST FOR OPERATIONAL VERIFICATION:

S.No.	Operating Parameters	Acceptance Criteria	Actual Observation	Remarks
Operational verification				
1.	Switch ON Power Button	Power indicator shall be glow.		
2.	Switch ON the Florescent Light	Florescent Lights will be glow		



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S.No.	Operating Parameters	Acceptance Criteria	Actual Observation	Remarks
3.	Switch ON Air Flow Button	Air flow indicator shall glow. Operation hold indicator shall glow Clean down digital timer shall be ON		
4.	Blower tripping	On the time of blower tripping. Blower trip indicator shall glow & alarm shall be ON.		
5.	Differential Pressure	Differential pressure on megnehelic gauge shall be between 10-15 mm for across HEPA & 2-4 mm across HEPA.		



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7.0 ANNEXURE:

S.No.	Title	Annexure No.

8.0 ABBREVIATIONS:

- RM : Raw Material
- SOP : Standard Operating Procedure
- mm : Millimeter
- HEPA: High Efficiency Particulate Air Filter



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