

Shelf No-1

Shelf No-2

PHARMA DEVILS QUALITY ASSURANCE DEPARTMENT

	Do	cument Nai	ne: Performance	Qualificat	ion Appendix	3.6.1 for Ly	ophilize	er
Equipn	nent/Syste	m ID:			Document	Number:		
Effectiv	ve Date:-				Version N	umber: 00		
						,	Trial Ru	ın #:
			<u>A</u>	appendix 3	<u> 3.6.1</u>			
			Process Sir	nulation v	vith Mannito	<u>l</u>		
Equipment Equipment		Lyophilize		Content		ION		
D /	ъ.							
Date	Pack Size	Run No	No of Vials load		rials found ohilized	Result Complie Yes/No	es	Checked by
Moisture	e Content	Observation	in Lyophilizati	ion cycle:				
Date	She	lf	Location of V	Vial	Observe Moistur conten	e Com	plies	Checked by



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Document Name: Performance Qualific	ation Appendix 3.6.1 for Lyophilizer
Equipment/System ID:	Document Number:
Effective Date:-	Version Number: 00

Trial	Run #·	
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Date	Shelf	Location of Vial	Observed Moisture content	Result Complies Yes/No	Checked by
	Shelf No-3				
	Shelf No-4				
	OL ICAL C				
	Shelf No-5				
	Shelf No-6				



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Document Name: Performance Qualific	ation Appendix 3.6.1 for Lyophilizer
Equipment/System ID:	Document Number:
Effective Date:-	Version Number: 00

Trial Run #·	

Date	Shelf	Location of Vial	Observed Moisture content	Result Complies Yes/No	Checked by
	Shelf No-7				
	Shelf No-8				
	Shelf No-9				
	Shelf No-10				



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Equipment/System ID:	Document Number:
Effective Date:-	Version Number: 00

Trial Run #

				Trial Ru	n #:
Date	Shelf	Location of Vial	Observed Moisture content	Result Complies Yes/No	Checked by
	Shelf No-11				
	Shelf No-12				
	_				
	Shelf No-13				



PHARMA DEVILS

QUALITY ASSURANCE DEPARTMENT

Equipment/System ID: Effective Date:- Version Number: 00 Trial Run #: Date Shelf Location of Vial Observed Moisture content Yes/No Date Run No Total No of Vial With stopper without Stoppering: Date Run No Total No of Vial Loaded with stopper Stoppering Yes/No Checked by Verified By (Sign. /Date) Checked By (Sign. /Date)	Effective Date: Date Shelf Location of Vial Observed Result Complies Yes/No
Date Shelf Location of Vial Observed Moisture content Complies Yes/No Checked by Oppering: Date Run No Total No of Vials With stopper Without Stoppering Yes/No Checked by Checked By Verified By	Date Shelf Location of Vial Observed Result Complies Yes/No Checked I Oppering: Date Run No Total No of No of vials without Stoppering Yes/No Checked by Stemarks: Checked By Verified By
Date Shelf Location of Vial Observed Result Complies Yes/No Opportung: Date Run No Total No of No of vials With stopper Stoppering Yes/No Checked by Verified By Verified By Verified By	Date Shelf Location of Vial Observed Moisture Complies Yes/No Checked I oppering: Date Run No Total No of No of vials Without Complies Yes/No Checked by Vial Loaded With stopper Stoppering Yes/No Checked by emarks: Checked By Verified By
Moisture content Complies Yes/No	Moisture content Yes/No oppering: Date Run No Total No of Vials without Stoppering Yes/No emarks: Checked By Verified By
Date Run No Total No of Vials with stopper Stoppering Personal Checked by Checked By Verified By	Date Run No Total No of Vials Vial Loaded With stopper Stoppering Stoppering Stoppering Checked by Checked By Verified By
emarks: Checked By Vial Loaded with stopper without Stoppering Yes/No Verified By	emarks: Checked By Vial Loaded with stopper without Stoppering Yes/No Verified By
Checked By Verified By	Checked By Verified By