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Title of IQ	
Reason for this IQ	
new equipment Modification / repair Re-Location	
Others:	

Approvals:

IQ Plan: Signature documents the approval of IQ Plan

	Name	Signature	Date
Author			
Production			
QA/RA			

□ IQ Report: Signature documents the review of results and the approval of IQ Report

	Name	Signature	Date
Author			
Production			
QA/RA			

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1. Introduction

This section must be completed prior to approval of IQ Plan

1.1 Description of equip	ment and location	for installation	
Picture 1			
Ficture			

	Document	Rev# / Status
	SOP Validation	
1.2 Referenced docu-		
ments		

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2. Activities of IQ

This section must be completed prior to approval of IQ Report.

2.1 Description of equipment

Description of activities:

Verify if manufacturer and type is correct. Document the serial number. Verify if equipment is CE-marked.

Acceptance Criteria	Evalu	ation
	yes	no
1. Manufacturer:		
2. Туре:		
3. Serial number:	n/a	
4. CE-mark		

Attachments:			
Results:		accepted	Not accepted (describe actions needed below)
Remarks / actions needed	1		
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Approval:		Date	Signature

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2.2 Manuals from supplier

Description of activities: Verify if all manuals from the manufacturer/supplier are available and document the storage area.

 Acceptance Criteria
 Evaluation

 Yes
 No

 1. Manuals from supplier are available

 Storage:

Attachments:			
Results:		accepted	Not accepted (describe actions needed below)
Remarks / actions needed	:		
Executed by		Date	Signature
		2010	
Approval:		Date	Signature
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2.3 Procedures and training

Description of activities: Verify if all procedures (like work instructions, control plans, ...) are available and trained.

Acceptance Criteria		Evaluation		
	yes	no		
1. xxx is available and trained.				
2. xxx is available and trained.				
3. xxx is available and trained.				
4. xxx is available and trained.				

Attachments:

Training records

Results:	accepted		Not accepted (describe actions needed below)	
----------	----------	--	--	--

Remarks / actions needed:			
Executed by	Date	Signature	

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2.4 Accessories, tools and components

Description of activities: Verify if all accessories, tools and components were delivered and/or added to the work station as needed.

Acceptance Criteria	Evaluation		
	yes	no	
1. all accessories, tools and components were delivered and/or added to the work station, see attachments			
2.			
Attachments: List of accessories, tools and components			

Results:	accepted	Not accepted (describe actions needed below)

Remarks / actions needed:		
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2.5 Supply systems and interfaces

Description of activities: Verify that all supplies needed are available and that the equipment was installed correctly.

Acceptance Criteria		Evaluation		
	yes	No		
1. Equipment was connected to electrical power supply: xxV/xxHz				
 Equipment was connected to compressed air system ≥ xx bar 				

Attachments:			
Results:		accepted	Not accepted (describe actions needed below)
Remarks / actions needed	:		
Executed by		Date	Signature
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Evaluation

No

yes

2.6 Maintenance and cleaning

Description of activities: Verify that requirements for maintenance were determined. Verify that requirements for cleaning were determined. Reference the relevant documents.

Acceptance Criteria

1.	Maintenance	instructions	are defined.	see xxx.

2. Cleaning instructions are defined, see xxx.

Results:	accepted		Not accepted (describe actions needed below)
----------	----------	--	--

Remarks / actions needed:			
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2.7 Drawings and spare parts

Not required, see section 2

Description of activities: Verify that all drawings are collected and listed. Verify that the need for spare parts was determined.

Acceptance Criteria		Evaluation		
	Ja	Nein		
1. Drawings are collected and listed, see attachments				
2. Spare parts and listed, see attachments				

Attachments:

List of drawings and spare parts

Results:	accepted	Not accepted (describe actions needed
		helow)

Remarks / actions needed:			
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2.8 Instruments and calibration

Description of activities: Verify that all instruments are present and calibrated. Verify that calibration labels were added and calibration dates are valid.

Acceptance Criteria	Evalı	Evaluation		
•	Ja	Nein		
1. Instruments are present and calibrated.				
2. Calibration labels were added and calibration dates are valid.				

Attachments:

List of all instruments, evidence of labeling with calibration stickers

Results: accepted below)	Results:	accepted	Not accepted (describe actions needed below)	
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Remarks / actions needed:			
Executed by	Date	Signature	
Executed by	Date	-	
Approval:	Date	Signature	

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2.9 Alarms and controls

Description of activities: Verify that all alarms and controls are present. Perform test on all alarms and controls.

Acceptance Criteria	Evalu	ation
-	yes	No
1. Alarms and controls are present, see attachment		
2. The correct functioning of alarms and controls were tested, see attachments		

List of alarms and controls

Results:	accepted	Not accepted (describe actions needed
		below)

Remarks / actions needed:			
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Approval:	Date	Signature	

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2.10 Environmental conditions

Description of activities: Verify if the supplier/manufacturer of the equipment specified environmental conditions (like temperatures, humidity, vibration, location ...) and if those conditions are adhered to.

Acceptance Criteria		Evaluation		
	yes	No		
1. Conditions are specified as				
2. Conditions are adhered to				

	Not accepted (describe actions needed below)
--	--

Remarks / actions needed:			
	Dete	Signatura	
Executed by	Date	Signature	
Approval:	Date	Signature	

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2.11 Software

Description of activities: Identify the hardware and software installed and their intended use. Verify if backup/reload was planned and/or completed.

Hardware:

Activities	Results / Documentation
1. Verify if the following software is installed:	yes 🗌 🛛 No 🗌 N/A 🗌
	Remarks:
2. is reloading / backup planned / completed?	yes 🗌 🛛 No 🗌 N/A 🗌
	Remarks:
Location of software backup:	
3. Intended use of software:	
4. Is an additional software validation needed?	yes 🗌 🛛 🛛 No 🗌 N/A 🗌 👘
	Justification:

Attachments:			

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		_		
Results:	accepted		Not accepted (describe actions needed	
			below)	

Remarks / actions needed: If additional software validation is needed, describe were this was done / will be done. Executed by Date Signature

Approval:	Date	Signature

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2.12 Functional testing

Description of activities: Verify, if equipment works correctly

Acceptance Criteria	Evalu	uation
	Ja	Nein
1. Equipment works correctly and a test run was conducted as per		
2. Further testing includes		

Results:	accepted	Not accepted (describe actions needed
		below)

Remarks / actions needed:			
Executed by	Date	Signature	
Approval:	Date	Signature	

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3. Results, events and failures

This section must be completed prior to approval of IQ Report.

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4. Summary of results

This section must be completed prior to approval of IQ Report.

Activities	Results					
Activities	passed	Not passed	n.a.			
2.1 Description of equipment						
2.2 Manuals from supplier						
2.3 Procedures and training						
2.4 Accessories, tools and components						
2.5 Supply system and interfaces						
2.6 Maintenance and cleaning						
2.7 Drawings and spare parts						
2.8 Instruments and calibration						
2.9 Alarms and controls						
2.10 Environmental conditions						
2.11 Software						
2.12 Functional testing						

Results are accepted, IQ is considered passed.

Results were not accepted and the following actions are required: