|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | | | | | |
| Annual QA Tasks | | | | | |
|  | | | | | |
| Task | Planned date | Done | Post-poned | N/A | Comments |
| **Self-inspection** | | | | | |
| Topic 1 | dd.mm.yyyy |  |  |  |  |
| Topic 2 | dd.mm.yyyy |  |  |  |  |
|  | | | | | |
| **PQR Review** |  | | | | |
| Product 1 | dd.mm.yyyy |  |  |  |  |
| Product 2 | dd.mm.yyyy |  |  |  |  |
|  | | | | | |
| **Review of SOPs** | | | | | |
| SOP 1 | dd.mm.yyyy |  |  |  |  |
| SOP 2 | dd.mm.yyyy |  |  |  |  |
|  | | | | | |
| **Annual Trainings** | | | | | |
| QA/GDP Training (re-fresher) | dd.mm.yyyy |  |  |  |  |
| PV Training (re-fresher) | dd.mm.yyyy |  |  |  |  |
| FvP continuing education | dd.mm.yyyy |  |  |  |  |
|  | | | | | |
| **Quality Management Review** |  |  |  |  |  |
| 1st QMR - Interval according to SOP | dd.mm.yyyy |  |  |  |  |
| 2nd QMR - Interval according to SOP | dd.mm.yyyy |  |  |  |  |
|  | | | | | |
| **Mock-Recall** | | | | | |
| Yearly Mock-Recall | dd.mm.yyyy |  |  |  |  |
|  | | | | | |
| **Customer eligibility/**  **Bona fide checks** |  |  |  |  |  |
| Wholesalers - Interval according to SOP | dd.mm.yyyy |  |  |  |  |
| Physicians, hospitals, pharmacies - Interval according to SOP | dd.mm.yyyy |  |  |  |  |
| Customers Liechtenstein - Interval according to SOP | dd.mm.yyyy |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | | | | | |
| **CAPA Review** |  |  |  |  |  |
| Interval according to SOP | dd.mm.yyyy |  |  |  |  |
|  | | | | | |
| **Audits to be conducted** | | | | | |
| 3PL | dd.mm.yyyy |  |  |  |  |
| Third-party manufacturer | dd.mm.yyyy |  |  |  |  |
| Other QA relevant Service providers | dd.mm.yyyy |  |  |  |  |
|  | | | | | |
| **Review of contracts/technical agreements** | | | | | |
| Contractor 1 | dd.mm.yyyy |  |  |  |  |
| Contractor 2 | dd.mm.yyyy |  |  |  |  |
|  | | | | | |
| **Qualification of contractors** | | | | | |
| Contractor 1 | dd.mm.yyyy |  |  |  |  |
| Contractor 2 | dd.mm.yyyy |  |  |  |  |
|  | | | | | |
| **Inspection/Audit preparation** | | | | | |
| Swissmedic | dd.mm.yyyy |  |  |  |  |
| Headquarter | dd.mm.yyyy |  |  |  |  |
| Contractor 1 | dd.mm.yyyy |  |  |  |  |
| Contractor 2 | dd.mm.yyyy |  |  |  |  |
|  | | | | | |
| **Review of job descriptions / Organigram** | | | | | |
| PV responsible person | dd.mm.yyyy |  |  |  |  |
| Responsible person | dd.mm.yyyy |  |  |  |  |
| General Manager | dd.mm.yyyy |  |  |  |  |
| Organigram | dd.mm.yyyy |  |  |  |  |
|  | | | | | |
| **Inventory at pre(wholesaler)** | | | | | |
| Per-wholesaler 1 | dd.mm.yyyy |  |  |  |  |
| Per-wholesaler 2 | dd.mm.yyyy |  |  |  |  |
|  | | | | | |
| **Inspection of sample stock** | | | | | |
| Per-wholesaler 1 | dd.mm.yyyy |  |  |  |  |
| Per-wholesaler 2 | dd.mm.yyyy |  |  |  |  |