

## **INSTALLATION QUALIFICATION REPORT**

for

**STERICOOOL** Hydrogen Peroxide Plasma Sterilizer Range

A160S, A160D, A160SF, A160DF, A110S, A110D, A110SF, A110DF

### **GOA Teknoloji A.S**

Ivedik OSB 1436.Sok No:14

Ostim Yenimahalle 06378– ANKARA TURKEY

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## IQ – Device Origin and Identification

<b>Device Series and Model:</b>	.....
<b>Serial Number:</b>	.....
<b>Device Description:</b>	.....
<b>Manufacturer</b>	GOA TEKNOLOJI A.S Ivedik OSB 1436.Sok No:14 Ostim Yenimahalle 06378 Ankara, TURKEY
<b>Service Contract</b>	.....
<b>Condition:</b>	.....
<b>Date Received / Installed:</b>	.....
<b>Installed Location:</b>	.....
<b>Purchase Order Number:</b>	.....
<b>Identification / Asset Number:</b>	.....

## IQ – Device Specification

DEVICE PARAMETER	ACCEPTABLE
Chamber Size 110Lt / 160lt	YES / NO
Single Door / Double door	YES / NO
Front Loaded / Side loaded	YES / NO
240ml / 30ml Cartridge	YES / NO
Stainless / Aluminum Chamber	YES / NO
RFID / Barcode Sterilant reader	YES / NO
Mobility Wheels / Feet	YES / NO
Other Technical Specs	YES / NO

## IQ – Environment and Site Check

OPERATING PARAMETERS	SPECIFIED RANGE	CONDITIONS MET
<b>Air Exchanges</b>	10 per Hour	YES / NO
<b>Operating Temperature: Storage Temperature:</b>	18°C–35°C -29°C–70°C	YES / NO
<b>Heat Generation</b>	Max at Advance cycles 10 KW	YES / NO
<b>Maximum Relative Humidity</b>	80% up to 30°C, decreasing linearly to 70% at 40°C non-condensing	YES / NO
<b>Maximum Altitude</b>	3000m	YES / NO
<b>Supply Voltage &amp; Frequency</b>	Single Phase 220-240V@ 50/60H Phase 220-240V@ 50/60H	YES / NO
<b>Maximum Current</b>	16Amp	YES / NO
<b>Earth Leakage protection</b>	Yes and Max difference between live and earth 0.5V	YES / NO

## IQ – Device Delivery and Documentation

### Packaging Crate Inspection

Is there any damage to the packaging crate?

Yes/No?

If Yes, please circle the appropriate location:

The diagram shows a rectangular outline representing a packaging crate. The top portion is a large, empty rectangle. Below this, the bottom edge is divided into three smaller, empty rectangular sections of approximately equal width, intended for marking specific damage locations.

Comments:

Packaging List	PRESENT	MISSING
2x Trays		
Caster Wheels (2x with lock 2x without Lock)		
Oil Return Valves/Solenoids		
Catalytic Converter (Trap)		
Gate Valve		
Thermal Printer Paper		
Vacuum Pump Oil		
<b>Independent Monitoring System (IMS):</b> For compliance with ISO 14937. The Independent Monitoring System (IMS) is an optional feature that may be purchased and installed on the sterilizer. It is an independent data collection system that can be used for system validation or requalification. Madge Temp sensor and T Junction with Edwards pressure sensor and reader.		

**Is there any damage to the Device or accessories: YES / NO?**

**If yes: Description of damage:**

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**Corrective action:**

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<b>Documentation Checklist</b>	<b>PRESENTED</b>	<b>MISSING</b>
<b>User Manual</b>	YES / NO	YES / NO
<b>Quick Guide Wall Poster</b>	YES / NO	YES / NO
<b>Installation Manual</b>	YES / NO	YES / NO
<b>Certificate of Conformity</b>	YES / NO	YES / NO
<b>Warranty Document</b>	YES / NO	YES / NO
<b>ADDITIONAL DOCUMENTATION</b>	<b>REQUESTED</b>	<b>PRESENT</b>
<b>Production OQ/PQ Test Certificate</b>	YES / NO	YES / NO
<b>Service Manual</b>	YES / NO	YES / NO

## IQ – Device Safety

MANUFACTURER SAFETY RECOMENDATIONS	CONFIRMATION
<b>Allow enough space for the Device</b> (See installation Manual)	YES / NO
<b>Position on level Surface</b>	YES / NO
<b>Heavy load surface indoor to carry 450Kg</b>	YES / NO
<b>Mobility on Wheels</b>	YES / NO
<b>Water supply accessible in case of emergency?</b>	YES / NO
<b>Read User Manual before operating</b>	YES / NO
<b>Comments:</b>	



## IQ – Assembly and Installation

<b>Assembled and Installed By Trained Technician/ Engineer? Yes / No</b>		
<b>Name of the Engineer or Technician:</b>		
<b>Installation Procedure</b>	<b>STATUS</b>	<b>Discrepancy</b>
<b>Unpack and retain Packing</b>	YES / NO	
<b>Assembly done as per the Installation Manual?</b>	YES / NO	
<b>Connected to Power supply?</b>	YES / NO	
<b>Quick Guide poster and User manual available by the sterilizer?</b>	YES / NO	
<b>Comments:</b>		

# Installation Qualification Summary Report

<b>Device:</b>		<b>Manufacturer:</b>
<b>Assessment of Complete Installation Qualification:</b> <b>Is there a Deviation? YES / NO</b> IF YES LIST THE DEVIATIONS BELOW		
<b>Deviation</b>	<b>Impact on Operation</b>	<b>Justification for acceptance</b>
Successful completion of the preceding activities and checks indicates that this Device has been satisfactorily delivered and installed. The Device has passed the Installation Qualification procedure and may now be submitted for Operational Qualification		
<b>IQ Completed By:</b>		<b>Date:</b>
<b>Deviations Approved By:</b>		<b>Date:</b>
<b>IQ Approved By:</b>		<b>Date:</b>