Levvel Health

Quality Manual

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The signature indicates that this document has been prepared in accordance with the company Quality Policy and that Good Documentation Practices has been followed.

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Document History

Version	Author	Date (DD-MMM-YYYY)	Comments
1.0	Kenn Milton	30-Jun-2022	This is the first approved version of this document.
2.0	Kenn Milton	See Approval Page for Last Signature	Updated Section 1.0 Regulatory Basis - Added year of release for ISO standards - Added statement for regular updates Section 3.0 Scope - Added ISO Out Of Scope Out of Scope – due to delivery of Software Solution - Contamination Control - Cleanliness

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1 Regulatory Basis and External Guidelines

Ref no	ID	Title	Reference
1	ISO 13485:2016	Quality Management Systems – Requirements	https://www.iso.org
2	ISO 14971:2019	Medical Devices – Application of Risk Management	https://www.iso.org
3	QSR 820	Medical Devices – Quality Systems Regulation	https://www.accessdata.fda.gov/
4	MDR	Medical Devices – Regulation (EU) 2017/745	https://eur-lex.europa.eu/
5	IEC 62304:2006	Medical Device Software	https://www.iso.org
6	IEC 82304-1:2016	Health Software	https://www.iso.org

Table 1: Regulatory Basis and External Guidelines

Regulatory Basis and External Guidelines (documents of external origin) must be reviewed on predefined frequency to ensure that the external references and documentation are up to date (Identified and their distribution Controlled) . Please find the frequency for monitoring in the Measurement Analysis Improvement procedure.

2 Purpose

The purpose of this document is to describe how the Quality Management System (QMS) will be implemented, utilized, and maintained in The Company. This Quality Manual will also serve to:

- implement The Company's quality policy into the company
- introduce the minimum expectations for management responsibilities and requirements for quality and compliance for products and services developed and delivered to the patients.

The QMS is based on a life cycle concept for the development and subsequent support of products and services. The QMS includes formal processes covering the activities that support device development such as:

- Training of Personnel
- Document Management
- Risk Management
- Design and Development
- Post-Market Surveillance
- Planned reviews of the QMS and internal inspections and audits
- Approach to continuous improvement of the QMS and its use

The adoption of a Quality Management System is a strategic decision of the company.

This document promotes the adoption of a process approach when developing, implementing, and improving the effectiveness of a Quality Management System, to enhance customer satisfaction by meeting customer requirements. The QMS emphasizes the importance of:

- Understanding and meeting requirements
- Monitoring results of process performance and effectiveness
- Continuous improvement of processes based on objective measurement.

Monitoring of patient safety and device performance requires the evaluation of information relating to device users and patient's perception as to whether the company has met the customer requirements and the expected product and services quality.

3 Scope

3.1 In Scope

Scope of the QMS is:

- Design and development,
- Production,
- Sales, and
- Distribution

of medical device.

This Quality Manual describes the QMS for the company. The scope is for:

- **Internal use** - to communicate to staff (internal employees and external consultants) the Company quality policy and quality objectives, to make the staff familiar with the processes used to achieve harmonization, standardization, and compliance with quality requirements. This will allow effective communication and control of quality related activities and a documented base for quality system audits.
- **External use -** to inform the Company's customers and/or external partners about the expectation set in place by the company quality policy regarding implementation of solutions and services and the commitment to continuous measure and improve compliance with the quality objectives.

3.2 Out of Scope

Where any requirement(s) of this document cannot be applied due to the nature of the company and its product, this can be considered for exclusion. Such exclusions must not affect the company's ability, or responsibility, to provide products that meet customer and applicable legal and regulatory requirements.

ISO 13485 Out of Scope due to delivery of Software Solution

6.4.2 – Contamination Control
7.5.2 – Cleanliness of Products
7.5.5 – Particular Requirements for Sterile Medical Devices
7.5.7 – Particular Requirements for Validation of Processes for Sterilization and Sterile Barrier Systems
7.6 – Control and Monitoring and Measuring Equipment

3.3 Prerequisite

- Quality Policy [R01]
- Quality Objectives [R02]

3.4 Training of this Document

Medical Devices must be developed, operated, maintained, and administered by qualified personnel. This means, individuals (both employees and contractors) must have a combination of education, experience, and training, which will enable them to carry out the role of their assigned Job Description.

This document must be Read & Understood (R&U) by the following roles:

- All individuals of the Quality and Governance company
- All individuals in management functions

Authors and Approvers of this document do not need to perform an additional R&U training.

4 Procedures

4.1 Quality Management System

4.1.1 General Requirements

The company establishes, documents, implements, and maintains a QMS and continuously improve its effectiveness.

The company:

- Identify the processes needed to implement the QMS throughout the company
- Identify the sequence and interfaces to these processes
- Identify criteria and methods to ensure usage and control of these processes are effective
- Ensure the availability of resources to support the usage and monitoring of these processes
- Monitor, measure where applicable, and analyze these processes
- Implement actions necessary to achieve planned results and continuous improvement of these processes

If the company chooses to outsource any process that affects products or systems conformity to requirements, the company must ensure control over such processes. The type and extent of control to be applied to these outsourced processes must be defined within this QMS.

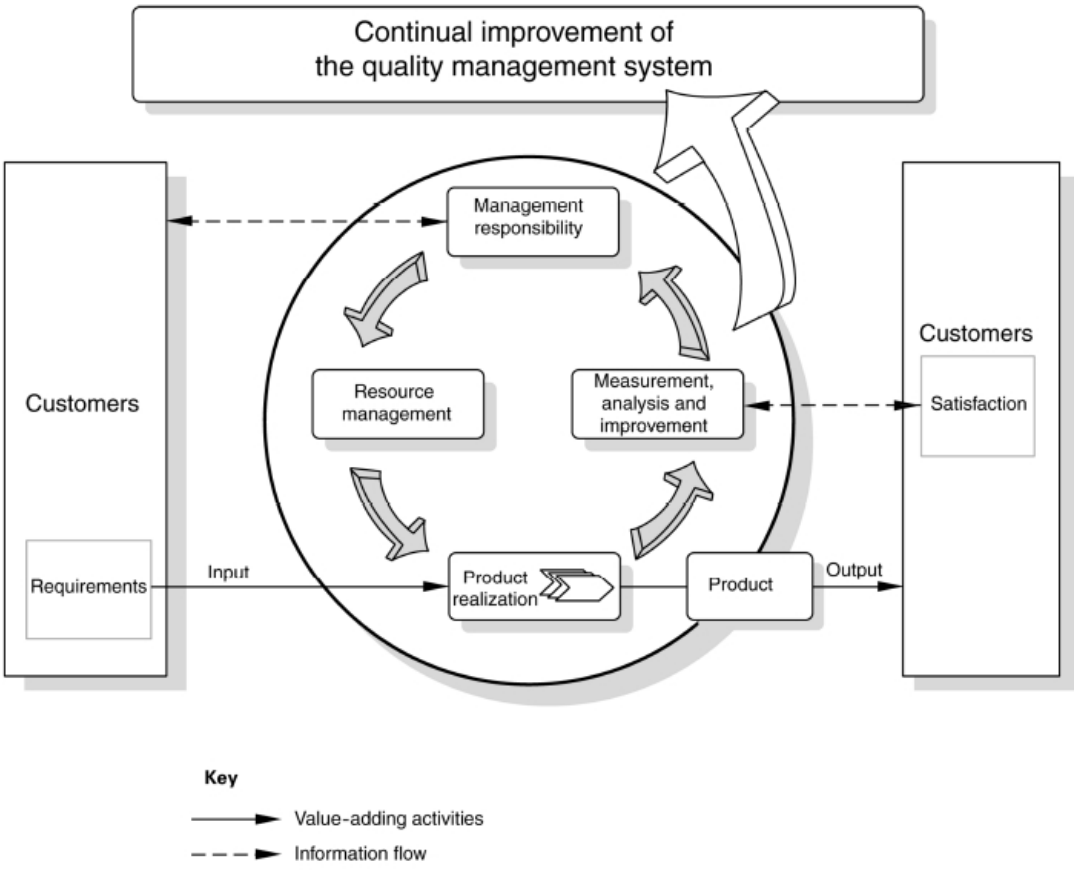

Figure 1: Model of a Process-Based Quality Management System

The model of a QMS shown in Figure 1 – 'Model of a process-based quality management system' illustrates the process linkages Customer Requirements are input to the product or system Realization. When the product or system is delivered to the customer (End-User) the post-market processes for continuous improvement is started. Measurement, analysis, and improvement are initiated considering customer satisfaction as a primary end-goal. Management is responsible to make the resources available to run these processes and implement improvements. The company management has an ongoing responsibility and commitment to its customers to keep meeting and exceed customer quality expectations. Resources management regarding personnel qualification, time, costs, or work environment must be optimized and never compromised in the goal of delivering quality solutions and services to the customers. The illustration above shows that customers play a significant role in defining requirements as inputs, and ongoing valuable satisfaction feedback.

4.2 Management Responsibilities

4.2.1 Executive Management

The Executive Management is foreseen to be structured in accordance with the illustration below. It is important that company quality expectations and the company's ability to meet these expectations are made available to Executive Management. The person responsible for regulatory compliance (PRRC) of the company reports directly into the Chief Executive Officer, CEO. In the case where the CEO is not available to sign documents, as the Management Representative in the Quality Management System, the CEO can appoint a Management Representative (MR). The Management Representative must report directly to the CEO.

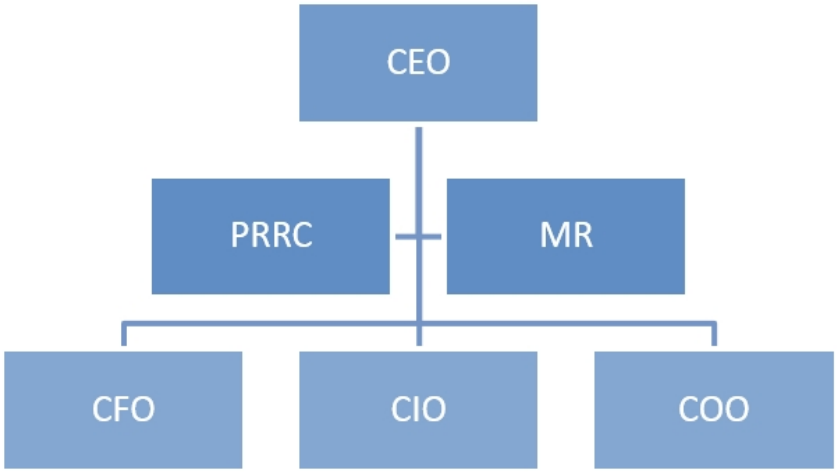

Figure 2: Organizational Chart - Executive Management

The Organizational Chart, with names of applicable individuals for each job role, is managed outside of the Quality Manual.

4.2.2 Management Commitment

Executive management provides evidence of its commitment to the development and implementation of the QMS and continuously improve its effectiveness by:

- Communicating to the company the importance of meeting customer, legal and regulatory requirements
- Establish a quality strategy
- Ensuring that quality objectives are established
- Conducting review of the QMS
- Ensuring the availability of resources

4.2.3 Customer Focus

Executive management ensures that customer requirements are defined and are met with the goal of enhancing customer satisfaction.

4.2.4 Quality Policy

Executive management ensures that the quality strategy:

- is appropriate to the purpose of the company
- is communicated and understood within the company
- includes commitment to comply with customer, legal and regulatory requirements
- continuously improves the effectiveness of the QMS
- is periodically reviewed for continuing suitability

4.2.5 Responsibility, Authority and Communication

4.2.5.1 Responsibility and Authority

Executive management ensures that responsibilities and authorities are defined and communicated within the internal company, to external consultants and to the company's customers.

4.2.5.2 Management Representative

The Management Representative (MR) is authorized by the CEO. The Management Representative for QMS has obligations according to statement, document QMS_003_QM_F01_MBL - Statement for Management Representative.

The Person Responsible for Regulatory Compliance (PRRC) is authorized by the CEO. The PRRC has obligations according to statement, document QMS_003_QM_F02_MBL - Statement for PRRC.

4.3 Planning

4.3.1 Quality Objectives

Executive management ensures that quality objectives are established at relevant functions and levels within the company. The quality objectives need to have objectives related to regulatory requirements and requirements for medical product. The quality objectives must be measurable and consistent with the quality strategy.

4.3.2 Quality Management System Planning

Executive management ensures that:

- the planning of the QMS the quality objectives and
- the integrity of the QMS is maintained.

4.3.3 Internal Communication

Communication is of outmost importance internally in the company. Executive management ensures that appropriate communication processes are established within the company and that communication takes place regarding the effectiveness of the QMS.

4.4 Resource Management

4.4.1 Resources

The Executive Management identifies and provide the resources needed:

- To implement and maintain the QMS and continually improve its effectiveness
- To enhance customer satisfaction by meeting customer requirements

4.4.2 Personnel

Personnel performing work affecting conformity to solution and service requirements must be competent and qualified to do the activities within their assigned job role on the basis of appropriate education, training, skills, and experience.

4.4.3 Competence, Training and Awareness

The company personnel must be made aware of the relevance and importance of their activities and how they contribute to the achievement of the quality objectives. The company must:

- Identify the necessary competence for personnel performing work affecting conformity to solution and service requirements,
- Provide training to achieve the necessary competence,
- Maintain appropriate records of education, training, skills, and experience,
- Evaluate the effectiveness of the actions taken

4.4.4 Infrastructure

The Executive management ensures that the infrastructure to achieve conformity to solution and service requirements is available, as needed. Infrastructure includes, as applicable:

- Buildings, workspace, and associated utilities
- Equipment (both hardware and software)
- Suitable IT solutions which support the QMS
- Supporting services (such as transport, communication, or information systems).

The company must identify all the infrastructure that can affect product quality, that needs to be maintained, including the interval of performing the maintenance activities. The MR is responsible for preparing and maintaining an Infrastructure Log file or MyBlueLabel Inventory. CEO and COO assign the persons who are responsible for conducting maintenance. The person responsible for maintenance needs to ensure that the infrastructure is maintained properly and at defined timelines. The data for conducting maintenance are kept in the Infrastructure Log. The person responsible for maintenance defines maintaining method and frequency of maintenance. The MR checks the Infrastructure Log [F02] or MyBlueLabel Inventory to see the status of maintenance of the Infrastructure. If everything is alright MR signs the performed maintaining activity and put the status "Finished" on the Infrastructure Log. The frequency must follow the monitoring frequency defined in Monitoring, Analysis, and Improvements procedure. When the company needs to conduct correction maintenance (reparation of infrastructure) then it will engage an outsourced supplier for performing this activity. The outsourced supplier for the maintenance of infrastructure needs to be approved before cooperation starts.

4.4.5 Work Environment

The company manages the work environment needed to achieve conformity to solution and service requirements.

- Transparent and open communication
- Individual training and personal development focus
- Strong company culture and team spirit

The requirements for health, cleanliness, disinfection, personnel, work conditions, facilities, equipment, and materials must be documented.

4.4.6 Contamination Control

Out of Scope – due to delivery of Software Solution

4.4.7 Documentation

The QMS documentation must include:

1 Quality Policy, Quality Objectives
2 Quality Manual
3 Standard Operating Procedures and Records
4 Guidelines or Work Instructions

The Quality Policy, Quality Objectives, Quality Manual, SOPs, Guidelines, Work Instructions and Records are implemented by the company's Executive Management. The usage and compliance to this manual and procedures are mandatory. In the company's functional levels, where more details are required, or a step-by-step guide can be beneficial for effective planning, operations, or control of processes, it might be appropriate to introduce Guidelines and Work Instructions.

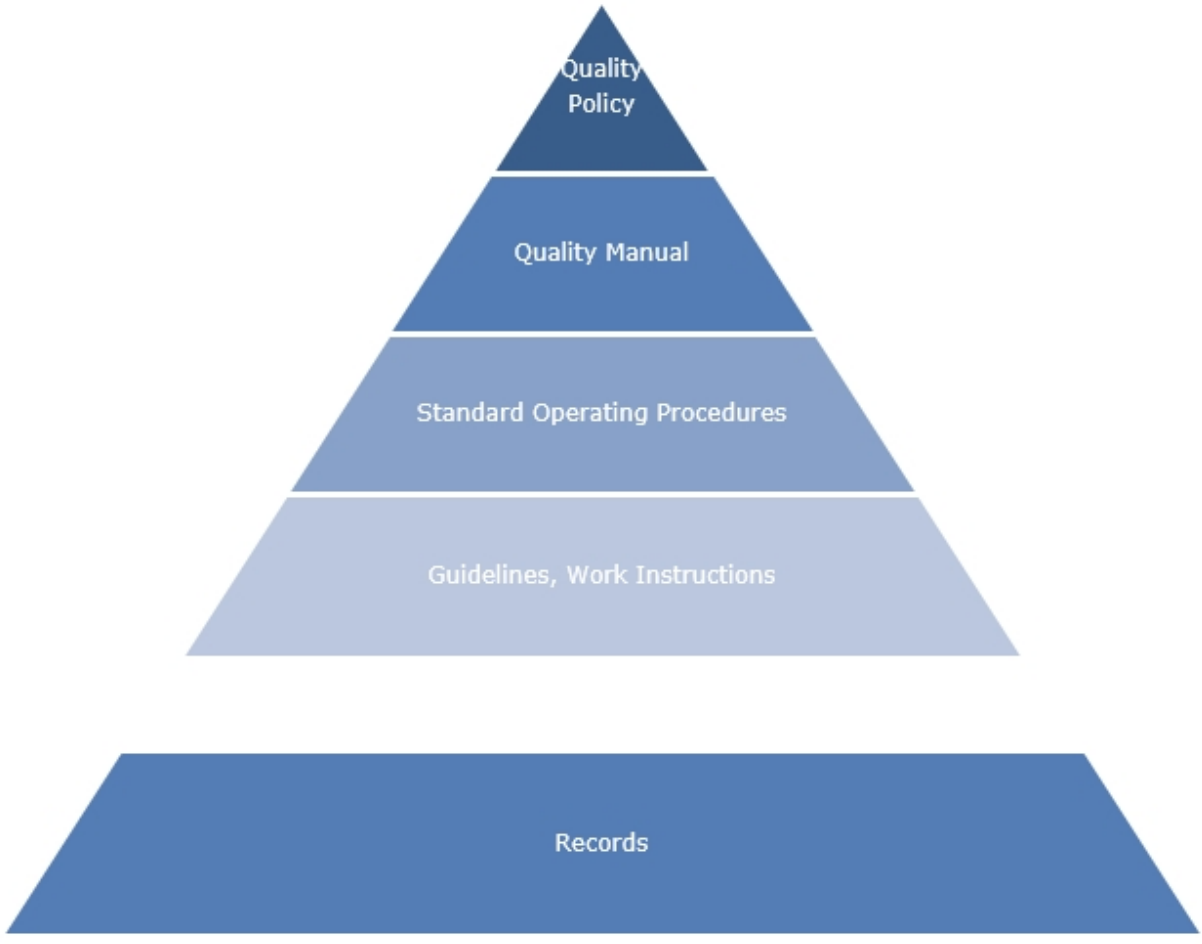

Figure 3: Documentation Implementation Levels

4.4.7.1 Level 1: Quality Policy

The Quality Policy [R01] contains documented statements of the company quality strategy and quality objectives. It describes the overall strategy and direction of the company related to quality. It is defined by the quality company and approved by the CEO of the company. This policy must be communicated and understood by all personnel at all levels in the company. It must be reviewed periodically and influence in company culture must be monitored.

4.4.7.2 Level 2: Quality Manual

The Quality Manual, this document, must be establish and maintained. It must include:

- The scope of the quality management system, QMS
- The documented procedures established for the QMS, or reference to them
- A description of the interfaces between the processes of the QMS.

The Quality Manual defines the minimum mandatory quality requirements and standards to be implemented throughout the company. Furthermore, it defines the management responsibilities for implementation of these standards. It forms the basis for the compliance auditing programs and personal training. The Quality Manual must be signed by the Quality function (Person Responsible for Regulatory Compliance).

4.4.7.3 Level 3: Standard Operating Procedures

The third level of the QMS consists of Standard Operating Procedures including related Forms and Templates. These procedures are applicable to all organizations in the company. These documents are defined, controlled, and approved by the Quality function (Person Responsible For Regulatory Compliance). It must be encouraged to keep a simplified, harmonized, and standard approach across the company. Compliance to the company QMS must be implemented through references to SOPs.

4.4.7.4 Level 4: Guidelines, Work Instructions

Guidelines, Work Instructions and related forms and templates are documents which can be defined, controlled, and approved by functions *outside* the company quality function. These documents are not mandatory and will not be subject to inspections and audits. It is a quality expectation for everyone to produce outcomes and deliverables that continuously meet the QMS.

Updating External Documentation.

Regulatory Basis and External Guidelines (documents of external origin) must be reviewed on predefined frequency to ensure that the external references and documentation are up to date (Identified and their distribution Controlled) . Please find the frequency for monitoring in the Measurement Analysis Improvement Procedure.

4.4.7.5 Records (Technical Documentation)

For each Medical Device type or family, there must exist a design and development file (technical documentation). This File must contain references to documents generated to demonstrate conformity to the requirement of ISO 13485 and compliance with applicable regulatory requirements (EU MDR and FDA).

The content of the technical file:

- Device Description, Product Specification, Intended Purpose
- Labeling, IFU and Packaging
- Design and Manufacturer Information
- General Safety and Performance Requirements
- Risk Management File
- Product Verification and Validation
- Pre-clinical Data and Clinical Evaluation
- Declaration of Conformity
- Technical Documentation on Post-Market Surveillance
- Existing Approvals and Certificates.

4.4.7.6 Control of Documents

Documents required by the QMS must be controlled. A documented procedure must be established to define the controls needed to:

- approve documents prior to usage
- review and update as necessary and re-approve documents
- ensure that changes and the current version status of documents are identified
- ensure that relevant versions of applicable documents are available at the time of use
- ensure that documents remain available, detectable, and readable
- ensure that documents of external origin determined by the organization are identified and their distribution are controlled
- prevent deterioration or loss of documents
- prevent the unintended use of obsolete and withdrawn documents
- train the required personnel on their use

4.4.7.7 Control of Records

Training, Clinical Evaluation and Investigation and other records established to provide evidence of conformity to requirements and of the effective operation of the quality management system must be controlled. The company must establish a documented procedure to define the controls needed for the identification, storage, protection, retrieval, retention, and disposition of records. Records must remain legible, readily identifiable, and retrievable.

4.5 Product Realization

4.5.1 Planning of Product and Services Development

The company must plan and develop the processes needed for product development. Planning of product development must be consistent with the requirements specified within the QMS and its processes. When planning for product development, the company must identify the following, as appropriate:

- The quality objectives and requirements for the product
- The supporting processes and procedures
- The required documents deliverables
- Identify the appropriate resources
- The required verification, test, and validation activities
- The objective evidence that the development and resulting product meet the requirements
- Criteria for product acceptance

The company must implement a Risk Management Process which is related to product realization and medical product. Records of risk management activities will be maintained for each product or product family.

4.5.1.1 Customer Communication

The company must identify and implement effective activities for communicating with customers in relation to:

- Product information
- Enquiries, contracts, or order handling, including amendments
- Customer feedback, including customer complaints and advisory notices.

The company needs to communicate with regulatory authorities in accordance with applicable regulatory requirements. That communication will be done according to procedures Post-Market Surveillance and Vigilance, Adverse Events, Incident Management.

4.5.1.2 Determining the Requirements

For identification of requirements related to the product the company must define:

- Requirements specified by the customer, including the requirements for delivery
- Post-delivery activities, like services and support
- Legal and regulatory requirements applicable to the product
- Any additional requirements considered necessary by the company.

4.5.1.3 Review of Requirements

The company must review the requirements related to the product. This review must be conducted prior to the company's commitment to supply a product to the customer or usage of QMS computerized system internally. Records of the results of the review and actions arising from the review must be maintained. Where the customer provides no documented statement of requirement, the customer requirements must be confirmed by the company before acceptance. Where product requirements are changed, the company must ensure that relevant documents are amended and that relevant personnel are made aware of the changed requirements.

4.5.2 Design and Development

4.5.2.1 Planning

The company must plan and control the design and development of the product. During the design and development planning, the company must identify:

- The design and development phases
- The review, verification and validation that are appropriate to each design and development Phase
- The responsibilities and authorities for design and development, and the resources needed, including necessary competence of personnel
- The methods to ensure traceability of design and development outputs to design and development inputs.

The company must manage the interfaces between different teams involved in design and development to ensure effective communication and clear assignment of responsibility. Planning output must be updated, as appropriate, as the design and development progresses.

4.5.2.2 Inputs

Inputs relating to product requirements must be identified and records maintained. These inputs must include:

- Introduction and solution description including processes
- Business and functional, usability and safety requirements, according to the intended use
- Applicable outputs of risk management,
- Regulatory requirements
- Performance and environment requirements
- Other requirements essential for design and development of the product and processes.

The inputs must be reviewed for adequacy. Requirements must be complete, unambiguous, and unique identified.

4.5.2.3 Outputs

The outputs of design and development must be in a form suitable for verification against the design and development input and must be approved prior to system release. Design and development outputs must:

- Document evidence that input requirements for design and development are met
- Provide appropriate information (Device master record) as for leveraging third party manufacturing and information on product acceptance criteria
- A list of all documentation approved during the implementation
- A statement of product that are essential for its safe and proper use

4.5.2.4 Design and Development Review

Periodically systematic reviews of design and development must be performed in accordance with planned activities:

- To evaluate the ability of the results of design and development to meet requirements
- To identify any problems and propose necessary actions.

Participants in such reviews must include representatives of functions concerned with the design and development phase(s) being reviewed. Records of the results of the reviews and any necessary actions must be maintained.

4.5.2.5 Verification

Verification must be performed in accordance with planned activities to ensure that the design and development outputs have met the design and development input requirements. Records of the results of the verification and any necessary actions must be maintained.

4.5.2.6 Validation

Design and development validation must be performed in accordance with planned activities to ensure that the resulting product is capable of meeting the requirements for the specified product and intended use. Validation must be completed on representative product. Representative product includes initial production units, batches, or their equivalents. Records of the results of validation and any necessary actions must be maintained.

4.5.2.7 Transfer

The transfer of design and development outputs to manufacturing must be verified as suitable for manufacturing before they are used as large volume final production specifications and that production capability can meet product requirements.

4.5.2.8 Changes

Design and development changes must be identified, and document deliverables maintained. The changes must be reviewed, verified, and validated, as appropriate, and approved before implementation. The review of design and development changes must include evaluation of the effect of the changes on constituent parts and product already delivered. Records of the results of the review of changes and any necessary actions must be maintained.

4.5.2.9 Design and Development Files (DMR)

All design and development files related to the company medical product type or product family are maintained through project documentation according to device master record, design, and development records, change records and technical file for any medical product. These files include or reference records generated to demonstrate conformity to requirements for design and development.

The constitutive part of the Design and Development File is Device Master Record (DMR). DMR must be developed for all developed and manufactured medical products. Generating one DMR per product or product family after clearly identifying the constituents of the product family and identifying the various part numbers that comprise a product family is a mandatory activity.

For different markets the company may have different configurations for medical products, in that case, the Project Manager with the cooperation of the MR needs to identify specific configurations for that markets. These specific configurations need to be found in DMR.
The Project Manager with the cooperation of the MR shall identify in DMR all specifications and full descriptions on how to manufacture, test, pack, and label, install and service the product, and support activities. Information in the DMR includes or makes reference to the following documentation, as applicable to the device:

- Device specifications including drawings, compositions, formulation, component, and software specifications.
- Production process specification including equipment specifications, processes, specifications, production methods, production procedures, and production environment.
- Quality assurance procedures and specifications including acceptance criteria, test methods and the quality assurance equipment to be used.
- Packaging and labeling specifications including processes used.
- Installation, maintenance and service procedures and methods.

The Project Manager is responsible for the fill-in DMR Index which is a controlled document, and it will be identified with a document number and revision level. Changes to the DMR must be processed through the Change Management procedure. Project Manager with the cooperation of the MR is responsible for updating of DMR Index according to outputs from processes Design and Development, Complaint Handling, Handling of Nonconformity, and Corrective & Preventive Actions. If according to these outputs the company identifies needed changes for specific configurations for some markets, these changes need to be implemented in DMR Index. Outsourced manufacturers and if applicable distributors for specific markets need to be informed about changes in the DMR.

4.5.3 External Provided Processes, Product and Services

4.5.3.1 Process

The company must ensure that purchased product or services (Servicing activities) conforms to specified purchase requirements. The type and extent of control applied to the supplier and the purchased product or service must be dependent upon the effect of the purchased product or service on subsequent product realization or the final product. The company must evaluate and select suppliers based on their ability to supply product in accordance with the company's requirements. Criteria for selection, evaluation and re-evaluation must be established. Records of the results of evaluations and any necessary actions arising from the evaluation must be maintained.

4.5.3.2 Information

Purchasing information must describe the product to be purchased, including, where appropriate:

- Requirements for approval of product, procedures, processes, and equipment
- Requirements for qualification of personnel
- QMS requirements.

The company must ensure the adequacy of specified purchase requirements prior to their communication to the supplier.

4.5.3.3 Verification of External Product

The company must establish and implement the inspection or other activities necessary for ensuring that purchased product meets specified purchase requirements. Where the company or its customer intends to perform verification at the supplier's premises, the company must state the intended verification activities and method of product release in the purchasing information.

4.5.4 Production and Support Services

4.5.4.1 Control of Production and Support Services

The company must plan and carry out production and support services (Servicing activities) under controlled conditions. Controlled conditions must include, as applicable:

- Information that describes the characteristics of the product
- Procedure and work instructions for production, and labelling and packaging of product, as necessary
- Suitable equipment
- Monitoring and measurement of product and service performance
- The implementation of product release, delivery, and post-delivery activities.

The company must establish and maintain a record (Device History Record) for each medical device or batch of medical devices that provides traceability and identifies the amount manufactured and amount approved for distribution. The record shall be verified and approved. Each Device History Record (DHR) will contain production/quality records that are traceable by lot/serial numbers (as defined) to the production batch/unit.

A DHR is required for each manufactured product that will include the following information:

- Product UDI, serial number, lot number,
- Traceable control numbers (work order number, etc.,),
- Dates of manufacture,
- Quantity manufactured,
- Quantity released to finished goods (including amount scrapped or rejected),
- Labeling – a copy of labelling (or reference to labelling) used for the production batch/unit,
- Final acceptance records must be signed and dated by an authorized individual.

If needed, following information about the product can be included or referenced in the DHR:

- Production records,
- Label verification and checks,
- Test and/or inspection results,
- Any applicable change control or deviation records applicable to the product,
- Any special instructions or methods for that specific lot of product.

A DHR must be prepared for any products manufactured and packaged by an outside contract manufacturer. DHR content must be controlled and must be identified with a document number and revision level. Changes to the DHR are processed according to the Document Management procedure.

Production Manager is responsible for maintaining Device History Record. MR/PRRC reviews all data and records associated with the production of a given lot of medical devices and compere they with DHR Index. MR/PRRC must check:

- That the data correct
- All records are filled in and sign correctly
- All nonconformities are resolved
- All changes are implemented correctly

If everything is correct, then MR/PRRC sign DHR Index.

4.5.4.2 Cleanliness

Out of Scope – due to delivery of Software Solution

4.5.4.3 Installation

If the Medical Device needs to be installed at the customer site before initial usage, the company must document the Medical Device installation and acceptance criteria. Activities of the installation and verification must be documented and maintained.

4.5.4.4 Validation of Processes

Validation must demonstrate the ability of these processes to achieve planned results. The company must establish activities for these processes including, as applicable:

- Defined criteria for review and approval of the processes
- Approval of equipment and qualification of personnel
- Use of specific methods and procedures
- Requirements for records
- Periodic Review
- Revalidation, if required.

4.5.4.5 Identification and Traceability

The company must uniquely identify the product throughout the entire product's lifecycle. All requirements of the solution, specifications, testing must be uniquely identified to ensure traceability of full coverage. All actions related to implementation and changes to the solution must be uniquely identified to track individuals, approvals, and releases for operational usage. Documentation must have a unique ID and version control to ensure documented history of the solution throughout its lifecycle.

4.5.4.6 Protection of Product

Handling of product is handled in a manner to prevent mix-up of medical device and constituent parts during processing, storage, handling, and distribution. Packaging and Labeling process is performed in accordance with procedure Packaging, labelling and UDI of medical devices. Regarding protection, if necessary, parts and final products are protected from work environmental conditions.

4.5.4.7 Control of Monitoring and Measuring Resources

The company ensures control of monitoring and measuring equipment according to the procedure Control of Monitoring and Measuring Resources.

The company ensures valid results, measuring equipment must be:

- Calibrated or verified, or both at specified intervals, or prior to use and basis used for calibration or verification shall be recorded,
- Adjusted or re-adjusted as necessary, and be recorded,
- Identified to determine its calibration status,
- Be safeguarded from adjustments that would invalidate measurements results,
- Be protected from damage and deterioration during handling, maintenance, and storage.

When applying computer software for monitoring and measuring requirements, the company must use a procedure for validation of application of software. Such software application shall be validated prior to initial use and if appropriate after any change to the software or its application. The specific approach and activities associated with software validation and re-validation shall be proportionate to the risk associated with the use of the software, including the effect on the ability of the product to conform specification. Records of the results and conclusion of validation and necessary actions from validation will be maintained.

All equipment used for monitoring, which is in use, must be indicated and entered into the registry. All equipment utilized in processes has to be properly labeled and easily identifiable. The company is responsible for keeping track of measuring equipment use and maintenance, as well as keeping records of the relevant activities according to procedure Control of Inspection, Measuring, and Test Equipment. This responsibility for control of monitoring and measuring equipment used in outsourced production is documented in the supplier contract and control of the outsourced production ability to manage the monitoring and measuring equipment is part of the supplier audit process (according to procedure Supplier Management).

4.5.4.8 Control of Non-conforming Product

The company must ensure that product which does not conform to product requirements is identified and controlled to prevent its unintended use or delivery (according to procedure Handling of Nonconformity). Where applicable, the company must deal with nonconforming product by one or more of the following ways:

- By taking action to eliminate the detected nonconformity
- By authorizing its use, release, or acceptance under concession by a relevant authority and, where applicable, by the customer
- By taking action to return to its original intended use or application
- By taking action appropriate to the effects, or potential effects, of the nonconformity when nonconforming product is detected after delivery or use has started.

When nonconforming product is corrected it must be subject to re-verification to demonstrate conformity to the requirements, unless otherwise specified or justified. Records of the nature of nonconformities and any subsequent actions taken, including concessions obtained, must be maintained. In the case of product safety incidents detected after delivery the company acts according to procedure Incident Reporting. If there is a need for rework of product, the company performs rework according to procedure Handling of Nonconformity.

4.6 Performance Evaluation

4.6.1 Measurement, Analysis, and Improvement

The company must plan and implement the monitoring, measurement, analysis, and improvement processes needed:

- To demonstrate conformity to product requirements
- To ensure conformity of the QMS
- To continuously improve the effectiveness of the QMS.

4.6.1.1 Customer Satisfaction

As one of the measurements of the performance of the QMS, the company must monitor information relating to customer perception as to whether the company has met customer requirements. The methods for obtaining and using this information must be determined.

4.6.1.2 Analysis and Evaluation

The company must identify, collect, and analyze appropriate data to demonstrate the suitability and effectiveness of the QMS and to evaluate where continuously improvement of the effectiveness of the QMS can be made. This must include data generated as a result of monitoring and measurement and from other relevant sources.

The analysis of data must provide information relating to:

- Customer satisfaction
- Conformity to product requirements
- Characteristics and trends of processes and products, including opportunities for preventive action
- Suppliers.

4.6.2 Internal Audit

The company must conduct internal audits (inspections) at planned intervals to determine whether the QMS:

- Conforms to the planned activities and to the QMS requirements established by the company
- Is effectively implemented and maintained.

An internal inspection program must be planned, taking into consideration the status and importance of the processes and areas to be inspected, as well as the results of previous inspections. The inspection criteria, scope, frequency, and methods must be defined. The selection of inspectors and conduction of inspections must ensure objectivity and independence of the inspection process. Inspectors must not inspect their own work. Inspectors must be qualified.

A documented procedure must be established to define the responsibilities and requirements for planning and conducting inspections, establishing records and reporting results. Records of the inspections and their results must be maintained. The management responsible for the area being inspected must ensure that any necessary corrections and corrective actions are taken without undue delay to eliminate detected nonconformities and their causes. Follow-up activities must include the verification of the actions taken and the reporting of verification results.

4.6.2.1 Monitoring and Measurement of Processes

The company must apply suitable methods for monitoring and, where applicable, measurement of the QMS processes. These methods must demonstrate the ability of the processes to achieve planned results. When planned results are not achieved, correction and corrective action must be taken, as appropriate.

4.6.2.2 Monitoring and Measurement of Product

The company must monitor and measure the characteristics of the product to verify that product requirements have been met. This must be carried out at appropriate stages of the product realization process in accordance with the planned activities. Evidence of conformity with the acceptance criteria must be maintained. Records must indicate the person(s) authorizing release of product for delivery to the customer. The release of product and delivery of service to the customer must not proceed until the planned activities have been satisfactorily completed, unless otherwise approved by a relevant authority and, where applicable, by the customer.

4.6.3 Management Review

Executive management must review the company's QMS, at planned intervals, to ensure its continuing suitability, adequacy, and effectiveness. This review must include assessing opportunities for improvement and the need for changes to the quality management system, including the quality strategy and quality objectives. Management reviews of the QMS must be documented.

4.6.3.1 Review Input

The input to management review must include information on:

- Customer feedback
- Complaint handling
- Reporting to regulatory authorities
- Results of internal and external audits
- QMS implementation feedback
- Process performance and product conformity
- Performance of external providers
- Status of preventive and corrective actions
- Adequacy of resources
- Effectiveness of actions taken to address risks and benefits
- Applicable new or revised regulatory requirements
- Changes that could affect the QMS
- Recommendations for improvement
- Follow-up actions from previous management reviews.

4.6.3.2 Review Output

The output from the management review must include any decisions and actions related to:

- Improvement of the effectiveness, suitability, and adequacy of the QMS and its processes
- Improvement of product quality, based on customer feedback
- Changes needed of product related to applicable new or revised regulatory requirements
- Resource needs

4.7 Improvement

4.7.1 Continuously Improvement

The company must continuously improve the effectiveness of the QMS through the use of the quality strategy, quality objectives, audit results, analysis of data, corrective and preventive actions and management review.

4.7.2 Corrective Action

The company must take action to eliminate the causes of nonconformities in order to prevent recurrence. Corrective actions must be appropriate to the effects of the nonconformities encountered. A documented procedure must be established to define requirements for:

- Reviewing nonconformities (including customer complaints)
- Determining the causes of nonconformities
- Evaluating the need for action to ensure that nonconformities do not recur
- Determining and implementing action needed
- Records of the results of action taken
- Reviewing the effectiveness of the corrective action taken

4.7.3 Preventive Action

The company must identify action to eliminate the causes of potential nonconformities in order to prevent their occurrence. Preventive actions must be appropriate to the effects of the potential problems. A documented procedure must be established to define requirements for:

- Determining potential nonconformities and their causes
- Evaluating the need for action to prevent occurrence of nonconformities
- Determining and implementing action needed
- Records of results of action taken
- Reviewing the effectiveness of the preventive action taken.

4.8 Quality and Compliance Implementation

4.8.1 Training, Qualification and Certification of Personnel

Medical Devices must be developed, operated, maintained, and administered by qualified personnel. This means individuals (both employees and contractors) must have a combination of education, experience, and training, which will enable them to carry out the role of their assigned Job Description. The procedure must include, at least, the following information.

- Curriculum Vitae (CV)
- CV evaluation
- On boarding
- Job Description
- Individual Training Plan (based on a Role-specific Training Curricula)
- Training Curriculum
- Continuous Training
- Annual Training
- Qualification
- Training Documentation
- Off boarding

4.8.2 Document and Record Management

Documentation is part of Medical Device verification to provide 'objective evidence' that the particular requirements for a specific intended use can be consistently fulfilled. The purpose of this document is to ensure that a controlled and consistent process is followed when creating, reviewing, and approving of documentation during the system lifecycle. Document Management Procedure must cover, at least, the following topics:

- Naming Convention
- Document Lifecycle
- Document Version
- Document Storage, Periodic Review and Retention
- Migrating of 'Paper Based Records' to Electronic Records
- Approval and signatures
- Segregation of duties, and Delegation of duties
- Good Documentation Practice

When writing SOPs, the Document Management Procedure can also be known as 'SOP on SOPs'.

4.8.3 Risk Management

Risk Management is a systematic process for the assessment, control, and review of risks. First the risk is identified, analyzed, and evaluated. Then the risk must be reduced to an acceptable level. Ongoing reviews must be made to manage the risk scenarios during the entire system lifecycle. A procedure must be in place where the risk classification and risk prioritization are further defined.

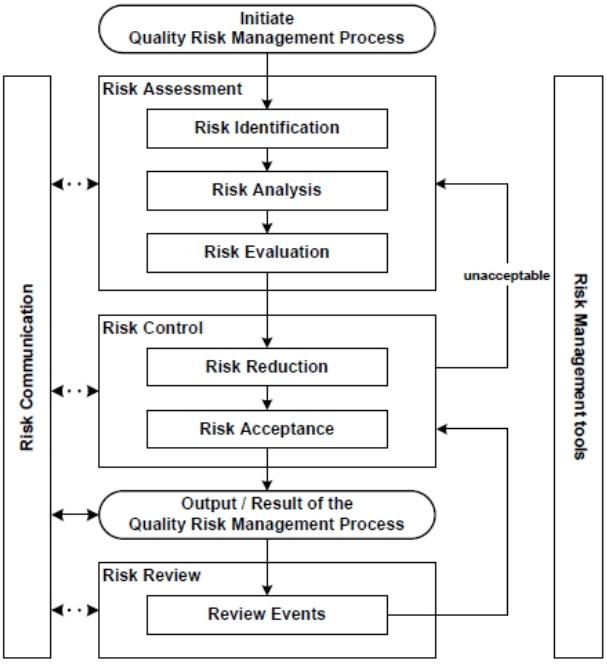

Figure 4: Overview of a Quality Risk Management Process

Risk Assessment: All risk management activities must be planned and documented. The assessment must include identification of hazards (potential harm), source and impact in the business process. The hazards must be analyzed and evaluated for Risk (Severity and Probability) and detectability to Device Safety and Performance Requirements.

Risk Controls: Risk controls should be put in place to mitigate or reduce the risk to an acceptable level. Risk controls include technical controls (device), procedural controls (Information for Use) and administrative controls (Operational SOPs). The controls should focus on the source of the identified hazard issue.

Risk Review: Risk *assessment* must be periodically reviewed, either by event or by schedule (Period Safety Review). New knowledge and experience must be taking into account for risk *management* throughout the device lifecycle.

Risk Communication: Output and result of the quality risk management process must be communicated to relevant stakeholders.

Risk Management Tools: Appropriate tools i.e. excel template, can be selected to help identify, list, and prioritize the quality risks. The main focus should be on the high-risk impact to Patient Safety and Product Quality (suggestion Severity High (Patient

Safety/Product Quality), Probability High (Process step with is likely to fail, should be improved) and Detectability High (Issues that cannot easily be discovered, should have more focused controls).

Risk Based Approach

The approach to Medical Device implementation must be risk based. It must be an iterative approach used throughout the entire lifecycle of the medical device. Risks must be remediated to an acceptable level or justified why the risk is tolerable. The following life cycle risk and processes must be considered:

- Early Risk Management
  - Requirements
  - Manufacturing
- Safety
  - Patient Safety
  - Product Quality
- Performance
  - Novelty
  - Complexity
- Transfer
  - Import
  - Distribution
  - Transportation and Storage
- Human Factor
  - Instruction for Use
  - Cleanliness

4.8.4 Change Management

The purpose of this document is to ensure that proposed changes are appropriately reviewed and impact and risk of implementing the change is assessed. Any Parts/Components in a Medical Device must be subject to change management. This is to avoid unintentional or unauthorized change to the device. Changes must be introduced without compromising quality, with a minimum disruption to the product or service. All changes must be assessed, processed, documented, and released in a controlled way. Change Control procedures must cover the following:

- Change and Release Management
  - Planned Changes
  - Emergency Changes
  - Release Strategy
- Configuration Management
  - Parts/Components Identification
  - Control
  - Status
  - Evaluation

4.8.5 Supplier Management

The company is ultimately accountable for ensuring processes are in place to ensure control of contractors, suppliers, and outsourced activities. A QMS Review (Assessment) by an official function in the company including Change Control, Deviations, Investigations, Stability, and Complaint Handling to ensure system effectiveness, adequacy and maintenance must be completed. Review of regulatory inspections results and findings, regulatory commitments, audits, self-inspections, and risk assessments. Review of outsourced activities (sub-outsourced e.g. data centers). A contract including an SLA must be in place, where contractors, suppliers and outsourced activities are not working under the QMS of the company. The contract must describe clearly who is responsible for each step of the outsourced activity e.g. subcontracting, infrastructure qualification, validation and tools utilized during the lifecycle of the contract. Formal communication must happen between the supplier and the company if changes to the current contractual information are changing. A report must be provided for changes to critical components like data centers. All contractors and suppliers must sign a Non-Disclosure Agreement, before provided any information by the company. Written approval must be given to allow the contractors and suppliers to provide any information about the company to third party. In addition to above mentioned topics, the contract must contain and not be limited to:

- Definitions
- Scope of Work
- Fees for project work / task
- Penalties
- Ownership/rights to intellectual properties
- QMS and maintenance
- Qualification of personnel
- Facilities, software, and equipment used
- The company's right to audit the contracts operations, scheduled and for-cause
- Notification in case the contractors is being audited by regulatory agencies

4.8.6 Service Level Agreement

When suppliers are used to provide a service, there should be a formal agreement including a clear statement about the responsibilities of that supplier. In this context, supplier is interpreted as meaning both external third parties and internal departments managed under different authority. The process for establishing and managing support services ensures that support services (whether internal or external) are appropriately specified and managed. This is often managed through the use of Service Level Agreements (SLA). An SLA is an agreement between a service provider and a customer. The SLA describes the Service, documents the Service Level Targets, and specifies the responsibilities of the Service Provider and the Customer. The SLA should be agreed, understood, and approved by the system owner, service provider and QA when applicable.

4.8.7 Inventory List

An Inventory list must be created and maintained of all the Medical Devices in scope of the company Quality Management System. The list must include and not limited to the following information.

- Device Name
- Device Reference ID
- Purpose / Intended use
- Device Risk Classification
- Compliance Status (CE-Marking)
- Last and Scheduled Activities

The Inventory List must be kept current annually.

4.8.8 Incident Management

An 'incident' means any malfunction or deterioration in the characteristics or performance of a device made available on the market, including use-error due to ergonomic features, as well as any inadequacy in the information supplied by the manufacturer and any undesirable side-effect. Incident/problem management ensures that all incidents and problems - including security and privacy related incidents - are recorded and resolved in a timely and effective manner in accordance with best practices while fulfilling legal and regulatory requirements. The company needs to report to regulatory authorities all reportable incidents according to procedures Incident Reporting. MR and PRRC are responsible for reporting to all regulatory authorities.

An incident is an abnormality from the normal usage of the medical device for its intended purpose which causes or may cause a decrease in the expected safety or performance requirements. Examples of incidents are

- Failures in the operations of a Medical Device
- Errors in software
- Anything other which results in abnormality of using the medical device

The following information must be captured for incidents:

- Unique identifier
- Date of Incident
- Reported By
- Description of the incident
- Incident category
- Incidents are prioritized
- Solution
- Link to Change requests raised by incidents
- Status
- Investigate incident patterns that may indicate a problem (see problem management).

Problem management is the process of identifying and handling recurring incidents and aims at optimizing the operations of an IT system to decrease the overall number of incidents. Also, for resolution for a single incident problem management might be applied.

'Incidents' and 'Problems' are registered in the operational environment. During the Design & Development phase and device implementation 'Risks' and 'Issues' are raised, tracked, and closed.

4.8.9 Adverse Event

An 'Adverse Event' means any inconvenient medical occurrence, unintended disease or injury or any clinical signs, including an abnormal laboratory finding, in subjects, users or other persons, in the context of a clinical investigation, whether or not related to the investigational device. A formal report must be authored and must contain Investigation and Root Cause Analysis (RCA) any immediate actions suggested to get return to a state of control. The company needs to report to regulatory authorities all reportable adverse events, or issuance of advisory notices according to procedure Field Safety and Adverse Events Management. MR and PRRC are responsible for reporting to all regulatory authorities.

Also, deviations from specification i.e. not all specified requirements are met must be recorded and justified. If such deviation is accepted, the specification must be updated as a corrective action to reflect the current state of the solution. In addition to the report, the deviations must be logged and contain the following information.

- Unique ID
- Adverse Event Title
- Adverse Event Type
- Device
- Source ID (Incident)
- Date Occurred
- Date Observed
- Date Reported
- CAPA ID
- Event Status

4.8.10CAPA Management

CAPA management is triggered internally trough Incident Management, Adverse Events Management or externally by Audit observations / findings or Customer Technical Complaints.

Corrective actions: are put in place to correct any occurrences of incidents or deviations.

Preventive actions: are put in place to avoid any re-occurrences of incidents or deviations.

Both corrective actions and preventative actions must be tracked to closure. The minimum details of CAPA Management:

- Unique ID
- Link to Incident or Adverse Event (Parent)
- Action (Corrective or Preventive) (Child)
- Responsible person
- Due Date
- Status

Adverse Events must remain open until all CAPAs are closed out.

4.8.11 Product Release

Release of a product and services the following information must be documented:

- Date
- Version number
- Software Platform, if applicable
- Release Notes
- Evaluation Status
- Instruction for Use
- SLA
- Contract

4.8.12 Post-Market Surveillance

When 'placing a Medical Device on the market', the pre-market data (objective evidence) is typically collected during design and development and pre-clinical (none-human) tests and clinical data which is selected according to the approved device risk-benefit profile. Therefore, the pre-market data is based on a dataset which is determined to be an acceptable to prove safety and performance compliance within intended use and indications for use. Despite properly designed clinical investigations in accordance with the clinical development plan and intensive work to identify all possible risks in all process steps from development to patient usage, a complete mapping of all risks may not always be possible or practical in the pre-market phase. I addition, the lifespan of the device may extend beyond the time frame of the pre-market clinical investigation and may not reflect potential incidents or adverse information that would arise over longer periods of time and in an extended patient group i.e. during the post-market phase.

Therefore, a Post-Market Surveillance system must be established to *actively* and systematically collect, analyzing and evaluate relevant data related to the quality, performance, and safety of a device throughout its entire lifetime. This information must be used to take appropriate actions, if applicable, to either, update the clinical evaluation, update the benefit-risk determination, update the instructions for use and the labelling, in order to continuously improve the usability, performance and safety of the device. The Post-Market Surveillance system will be performed according to procedure Post-Market Surveillance.

4.8.13 Handling of Customer Technical Complaints

All customer complaints received must be logged. All personnel in all departments that may potentially receive complaints must be aware of the requirements to forward all complaints to the appropriate QA unit. All investigators must be qualified. The complaint must include and not limited to:

- Name of the complainant and contact information
- Date of occurrence
- Date complaint was received
- Product or service identifiers, version number
- Identification and categorization of complaints
- Documentation of communication with the customer

The Customer Technical Complaint must trigger the internal Incident Management process. Evaluation of complaint must happen within two calendar days. Investigation must be initiated within two days and completed within five days. If Customer Technical Complaint is not investigated, justification shall be documented. Any correction or corrective action resulting from the complaint handling process shall be documented. Following the quality management process, the incident management process might trigger a deviation if the complaint is valid or a change request if the complaint will trigger an enhancement. The deviation will trigger a CAPA to be created and tracked to closure. The CAPA Management process might trigger the Change Request process. The Change Request will be assessed, implemented tested and approved. A Complaint Report must be completed and approved. If the compliant is not closed out with the following timeline it must be considered overdue:

- Critical = 30 days
- Non-Critical = 60 days
- Medical Device = 90 days

Communication with the customer is essential in the process of resolving the customer technical complaint. The customer must be informed about the internal unique Complaint ID and expected resolution date. The customer must be informed when the complaint is closed out. In cases where the complaint requires longer time than the expected resolution date, the customer must be notified. Daily communication must be provided until the complaint is closed, or as agreed with the customer.

Customer technical complaints have priority over other internal activities.

4.8.14Self-Inspection (Internal Auditing)

Self-inspection or internal audits must be conducted in order to monitor the implementation and compliance with this QMS and to propose necessary corrective measures. Medical Devices including personnel and documentation must be examined at intervals following a pre-arranged program in order to verify their conformity with this QMS. Self-inspections must be conducted in an independent and detailed way by designated competent individuals from the company. Internal audits must be recorded. Reports must be containing all the observations made during the inspections and where applicable, proposals for the corrective measures. Statements on the actions subsequently taken must also be recorded.

4.8.15Data Verification, Sampling Size and Quality Acceptance Level

In situations where the data migration effort is so great that it is not possible to make a 100% data verification is not feasible. Sampling size can be considered. There are several statistical methods which can be used for this activity.

- Statistical Based Sample, Square Root(N) + 1
- ANSI/ASQ Z1.4 - Sampling Procedures and Tables for Inspection by Attributes
- **ISO 2859-10:2006 - Sampling procedures for inspection by attributes**

The sampling size method in The Company ApS is chosen to be the ISO 2859, with a combination of risk-based record criticality. Below table is a summary of the sample size code letters and single sampling plan master table.

Total data load			Quality Acceptance Level		General Inspection Level / Sample Size					
			Acceptance	Rejection	(I) Low Risk		(II) Medium Risk		(III) High Risk	
2	to	8	0	1	A	2	A	2	B	3
9	to	15	0	1	A	2	B	3	C	5
16	to	25	0	1	B	3	C	5	D	8
26	to	50	0	1	C	5	D	8	E	13
51	to	90	0	1	C	5	E	13	F	20
91	to	150	0	1	D	8	F	20	G	32
151	to	280	0	1	E	13	G	32	H	50
281	to	500	0	1	F	20	H	50	J	80
501	to	1.200	0	1	G	32	J	80	K	125
1.201	to	3.200	0	1	H	50	K	125	L	200
3.201	to	10.000	0	1	J	80	L	200	M	315
10.001	to	35.000	0	1	K	125	M	315	N	500
35.001	to	150.000	0	1	L	200	N	500	P	800
150.001	to	500.000	0	1	M	315	P	800	Q	1250
500.001	and	more	0	1	N	500	Q	1250	R	2000

Table 2: Sample Size Code Letters and Single Sampling Plan

Based on the data record criticality different inspection levels can be considered:

- Low risk (I)
- Medium risk (II)
- High Risk (III)

The default data record criticality must be determined to be medium. In example if a data set is counted to be 20.000 records (between '10.001 to 35.000') in a quantitative verification, the sample size for the data amount is 315. This means that a qualitative verification (see Data Migration Plan/Report) must be made on a random selected set of 315 records. The data load size and samples must be determined per record type i.e. change requests, training material. Data failure tolerance when using sample sizing is zero. Where data sampling verification fails 100% data set must be investigated, corrective actions applied, and a new verification must be initiated. Based on a 100% quality verification and based on risk the exact failed records must be identified and appropriate actions must be determined to allow further progress.

4.8.16External Quality Audits and Internal Inspections

Auditing and inspection activities must be described in an approved procedure that defines the objectives, responsibilities, scope, and audit process from planning to completion. Auditors must be qualified. Auditors must not have direct responsibility for the area being audited. Request for assessment and audits must be evaluated with the auditing group. No later than 30 days before the audit a formal agenda must be sent to the group being audited. The agenda must include:

- Scope and Purpose
- Applicable regulations and internal references
- Dates
- Time schedule
- If applicable, a list of required documentation to be reviewed
- Distribution to key stakeholders

The audit report must be prepared no longer than 30 calendar days after completion of the audit. The report must be written in a factual, objective manner and be limited to the scope of the audit. The report must state:

- Company / Company / Solution
- Scope and Purpose
- Identified observations
- Overall audit outcome "Good", "Satisfactory", "At Risk - Action Required"
- The report must be labeled Confidential.

Written response to observations must be issued by the auditee no longer than 15 days for critical finding and no more than 30 days for other findings. The CAPA plan must be reviewed and approved by the lead auditor and the person responsible for tracking the CAPA implementation. CAPAs incomplete, inappropriate, overdue, or ineffective must be immediately escalated to management. Escalations are defined after 30 days (company quality function) / 60 days (company global quality function) / 90 days (company CEO).

4.8.17 Management of Regulatory Inspections

The company requires that the relationship with regulatory authorities is based upon integrity, honesty, and cooperation. All personnel or contracted employees during a regulatory inspection must reflect this requirement. Personnel must accept all inspections and provide documents requested. All inspectors must be escorted at all times by assigned associate. All internal audit reports are not designed for external audience and requests to review samples of audit reports must be respectfully refused. Also requests to see other external authorities audit observations should be refused. A history of files and documentation provided during an inspection must be kept and archived. All copies or documents provided to regulatory authorities must be marked "Copy" or "Confidential". Should the inspection result in observations or findings a response must be submitted to the regulatory agency within 15 days. CAPA Plans resulting from regulatory inspections must be captured, maintained, and tracked to closure.

4.8.18Escalations

All personal must inform their supervisor of any observation or real potential for an incident, that may adversely affect Patient Safety, Product quality or Data Integrity (Quality, Safety, Identity, Strength, Purity, Availability or Efficiency of a product or service which may compromise the company's reputation. The supervisor is responsible to resolve or escalate until appropriate conclusion or resolution of the incident/observation.

- Escalation Level 1
  Notify Device Owner and Device QA (escalation form)
- Escalation Level 2
  Notify Company QA Head (escalation form)
- Escalation Level 3
  Notify the CQO and CEO

Escalation Timelines

Category	System Level (1)	Organizational (2)	Company Level (3)
Minor	According to Operational Procedure	Routine Reporting	No Action
Major	Notified (48h)	Notified (48h)	Routine Reporting
Critical	Notified (Immediately)	Notified (Immediately)	Notified (immediately)

Table 3: Escalation Timelines

The escalation must contain and not be limited to:

- Name, contact details and position of the person notifying and the person(s) notified
- Date
- Description of area impacted
- Description of issue
- Summary of investigations, assessments and action taken
- Conclusion and recommendations
- Potential authorities to be contacted
- Confirmation of receipt

Notification should be sent via email to the relevant people and in case of a critical observation be followed up with a phone call.

4.9 Sequencing of Events

Sequencing of events is essential to a controlled device implementation. Device implementations must be done according to predefined procedures. Procedures must be established before activities are initiated. The below illustration shows which procedures are expected and when they must be established an applied during and throughout a Quality Management System life cycle.

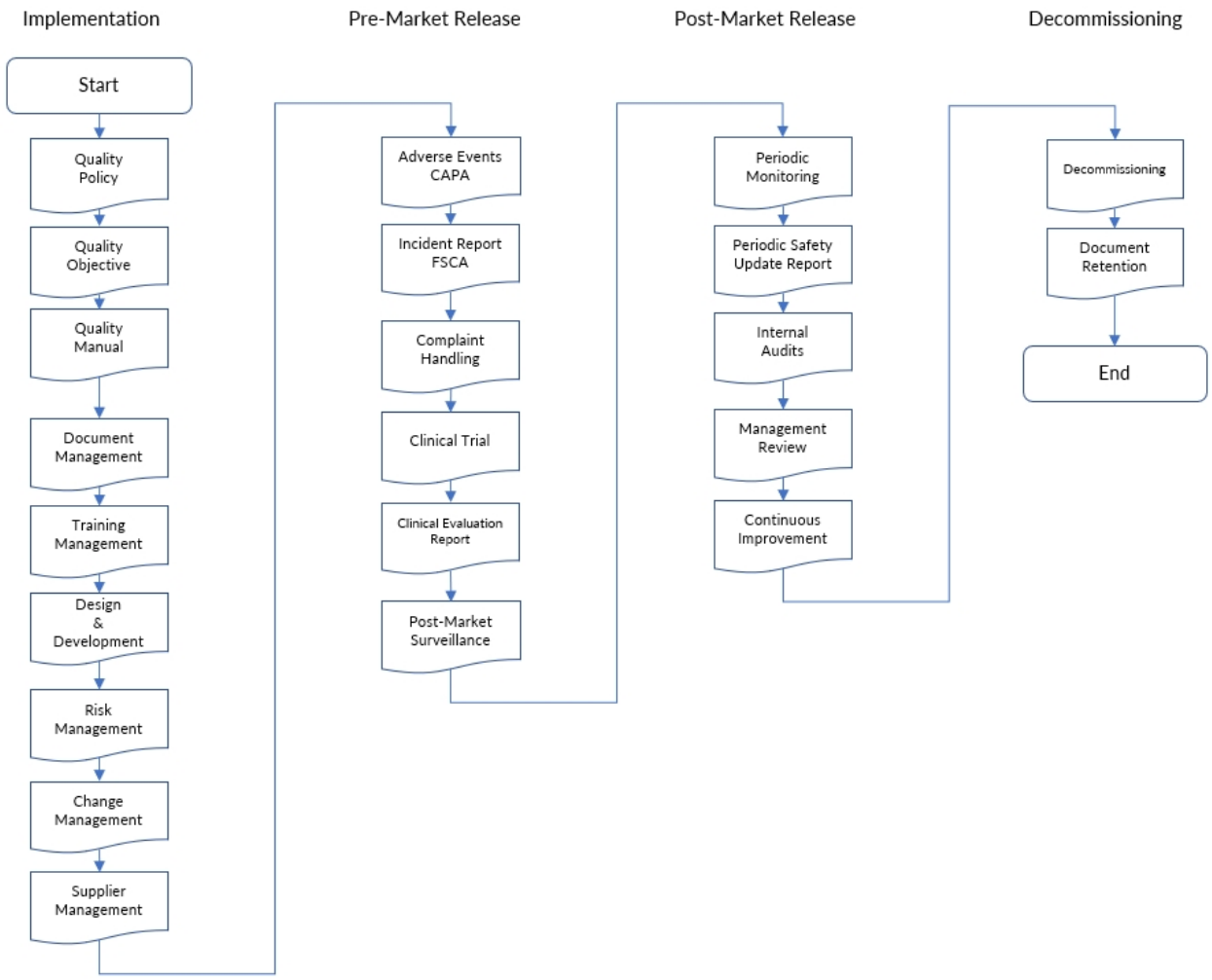

Figure 5: Sequencing of Events – Procedural Introduction

5 Roles and Responsibilities

Role	Responsibilities
Chief Executive Officer	• Authors the Quality Policy • Authors this Quality Manual • Accountable for the overall management of the company
Chief Quality Officer	• Review and Approve this Quality Manual • Accountable for the overall quality of the company
Quality Assurance	• Review and Approve this Quality Manual • Responsible for implementing the Quality Manual in the company
Device Owner	• Accountable for the verification & validation of the device
Process Owner	• Verifies the solution and process is working as intended
Project Manager	• Responsible for Project Schedule, Cost and Device Implementation
Quality Manager	• Responsible for the verification & validation of the device
Quality Assurance	• Review and Approve life cycle documentation
SME	• Contribute to updating the documentation

Table 4: Roles and Responsibilities

6 Updates and additional information

Chg. no	Change
N/A	N/A

7 References, Abbreviations and Storage

7.1 References

Ref no	Document ID	Document Title	Storage Location
R01	QMS_001_QP_MBL	Quality Policy	MyBlueLabel
R02	QMS_002_QO_MBL	Quality Objectives	MyBlueLabel

7.2 Abbreviations

Abbreviation	Full Name
AQL	Acceptance Quality Level
CAPA	Corrective Action, Corrective Action
CEO	Chief Executive Officer
CFO	Chief Financial Officer
CFR	Code of Federal Regulations
CIO	Chief Information Officer
COO	Chief Operation Officer
CQO	Chief Quality Officer
EMA	European Medicines Agency
FDA	Food and Drug Administration
FS	Functional Specification
GAMP	Good Automated Manufacturing Practices
GxP	Good 'x' Practices (Laboratory, Manufacturing, Clinical)
ICH	International Conference on Harmonization
ISO	International Company for Standardization
QA	Quality Assurance
QMS	Quality Management System
R&U	Read and Understand
RCA	Root Cause Analysis
SIPOC	Supplier, Input, Process, Output, Customer
SLA	Service Level Agreement
SME	Subject Matter Expert
SOP	Standard Operating Procedure
URS	User Requirements Specification

7.3 Attachments

Att no	Attachment ID	Attachment Title
F01	QMS_003_QM_F01_MBL	Statement for Management Representative
F02	QMS_003_QM_F02_MBL	Statement for Person Responsible for Regulatory Compliance

7.4 Storage Location

The original of this document is stored in the GxP repository: MyBlueLabel
Any print-out of this document or a document stored in different location is considered an "Uncontrolled Copy".