TWO DAYS TRAINING PROGRAMME
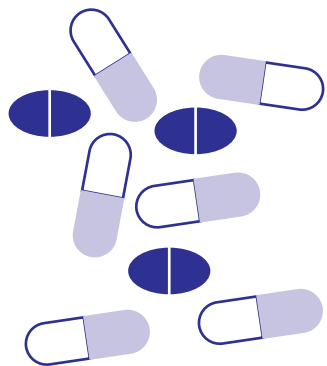## (NON RESIDENTIAL)
ON
CROSS CONTAMINATION :
SOURCE AND PREVENTION

Faculty : Dr. Milind Pathak

PARTICIPATION FOR PROGRESS

अस्पृद्यन्याय सहभागिता

Organized By:

QUALITY CIRCLE FORUM OF INDIA

Ankleshwar Chapter & Surat Sub Chapter.

Opp. State Bank of India (Main Branch)
Station Road, ANKLESHWAR - 393 001
E-mail : qcfi.ank@gmail.com
Tel. : 02646 - 247461
Mobile : 9974062641 (Mr. Suresh Sharma)
Mobile : 93774 34079 (Dr. Milind Pathak)

:: Venue
Hotel Lords Plaza,
Station Road, Surat.

22nd - 23rd, APRIL - 2016
Time : 9:00 A.M. to 5.00 P.M.

INTRODUCTION :

Mix-up, contamination and cross contamination has been considered critical and most objectionable incident in food, chemicals, agro products ,APIs and formulation manufacturing industries .

Historical events are evident to claim hundreds of fetal incidents due to occurrence of mix-up,contamination and cross contamination.

Food and Drugs authorities are always keen to evaluate adequacy of system implemented to prevent mix up, contamination and cross contamination as any failure for its prevention to occur may cause severe impacts in accordance with safety and quality.

OBJECTIVE :

Objective of this training programme is to guide participants to design strategy for prevention of contamination and cross-contamination to focus identify sources of contamination and to prevent its occurrence.

CERTIFICATE :

Certificate will be awarded to the participants after successful compliance of the test at the end of the training programme.

METHODOLOGY :

Cross-Contamination, its source and prevention will be explained in details. It will be a participatory session and followed by an evaluation on second day.

SCHEDULE :

DAY-1

9.00 AM	Registration
9.30 AM	Inauguration / Prayer
10.00 AM	Introduction
10.30 AM	What is Mix-up and Contamination
	What is Cross-Contamination
	Source of Cross-Contamination
11.30 AM	Tea Break
11.45 AM	* Impact during regulatory audits and steps taken by authorities.
	* Tools recommended by regulatory authorities.
1.00 PM	Lunch Break
2.00 PM	* Recommendations of Schedule M.
	* Expectations of ICH Q7
3.30 PM	Tea Break
3.45 PM	After effects of mix-up, contamination and cross contamination.
5.00 PM	Day Off

DAY-2

9.00 AM	Tools to prevent cross-contamination.
	* Good House Keeping
	* Segregation of Materials
11.00 AM	Tea Break
11.15 AM	* Maintenance of Environment
	* Line Clearance
	* Cleaning
	* Personnel Health
1.00 PM	Lunch
1.45 PM	* Risk Management
	* AHU
	* SOP
	* Training
3.00 PM	Tea
3.15 PM	Evaluation Test
4.15 PM	Valedictory Function
5.00 PM	Closure

FACULTY

Dr. Milind Pathak - (M) 9377434079

* Having 29 years of experience in reputed APIs manufacturing industries at various capacities in QA and Regulatory Department.

DATE & TIME :

22nd - 23rd, April - 2016 : 9.00 A.M. to 5.00 P.M.

FEES :

Rs. 4000/- per participant + Service Tax @ 14.00 + 0.5 % SBC = Rs. 4580/- Course Fee includes training material, Tea / Snacks and working Lunch.

DISCOUNT

10% Discount for QCFI-Life Members. 5% Discount for 3 or more participants from QCFI - Institutional Member organizations.

VENUE   Hotel Lords Plaza, Station Road, Surat., Gujarat.

ENROLLMENT

Please e-mail the list of names of participants along with local cheque/Demand Draft in favour of **"Quality Circle Forum of India"** at

Mr. Suresh Sharma, QCFI, Surat sub Chapter: Mo. 9974062641, E-mail : suresh_sharmas@rediffmail.com

Dr.Milind Pathak, Joint Secretary & Faculty, QCFI, Ankleshwar Chapter: Mo.9377434079, E-mail : niketan35@yahoo.co.in

QCFI, Ankleshwar Chapter: Ph.02646 - 247461, E-mail : qcfi.ank@gmail.com

Last Date For Registration : 9**th April - 2016**

REGISTRATION FORM

CROSS-CONTAMINATION : SOURCE AND PREVENTION

22nd - 23 rd APRIL - 2016

The Honorary Secretary
Quality Circle Forum of India, Ankleshwar Chapter
Opp. State Bank of India (Main Branch) Station Road, ANKLESHWAR - 393 001
Tel. : 02646 - 247461 Mobile : 9377434079 / 9974062641

Sr.No.	Name	Designation	Mobile

(NON RESIDENTIAL)

Name of Organization : ....

Address : ....

....

Tel. .... Fax :....................... E-mail :...

Cheque/Demand Draft No. .... Date :........................

Amount .... Rs. (in words) :...

Bank : ....

Branch :...

Name : ....

Designation : ....

Date : .... Signature :...............................