

纠正预防措施状态报告  
CAPA Status Report

**Section A** 纠正预防措施通知 (Notification of CAPA due)

纠正预防措施编号 CAPA Ref: \_\_\_\_\_ 预计完成时间 Due Date: \_\_\_\_\_

调查人/制定人 Investigator/Owner: \_\_\_\_\_

以上涉及的纠正预防措施必须在预定的时间内完成、关闭。如制定的纠正预防措施不能按要求在预定时间内实施、关闭，请在期限当天填写下面相关内容，同时提交给 QA。(The CAPA referenced above is due on the date indicated. The referenced CAPA must be completed, closed and submitted to QA by the date listed. If the CAPA will not be closed by the due date, this form must be completed and submitted to QA by the due date listed.)

QA Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Section B** 纠正预防措施状态 CAPA Status

(to be completed by the investigator and/or owner – attach additional sheets as needed)

1. 哪些调查/措施已经按时完成? (What part(s) of the investigation/actions is/are completed?)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. 哪些调查/措施没有按时? (What part(s) of the investigation/actions is/are pending?)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. 为什么调查/措施没有按时完成? (Why is/are the investigation/actions not completed?)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. 何时调查/措施能够完成? (When is the investigation/actions expected to be finished?)

\_\_\_\_\_

调查人/制定人 (Investigator/Owner) : \_\_\_\_\_ Date: \_\_\_\_\_

部门主管 (Depart.Supervisor) : \_\_\_\_\_ Date: \_\_\_\_\_