

# 82304-1:2016 Health software – Part 1: General requirements for product safety SoftwareCPR® Tiered Checklist and Assessment Forms

#### Prepared by Jordan Pate

For training, assessment, or implementation support contact us by leaving a message at www.softwarecpr.com or calling 781-721-2921

#### 1.0 Purpose

This document is intended as a job aide to assessments for conformance to IEC 82304-1. It serves as a checklist and provides space to map the internal process to the standard's requirements. The information collected can be used as a mapping of the internal process to 82304-1 to aide 3<sup>rd</sup> party conformance assessments.

#### 2.0 Usage

- This job aide should only be applied by those who are knowledgeable about 82304-1 and its proper interpretation and have an understanding of software engineering and validation principles. Also, note that the text is not the full or exact text in the standard.
- A tiered approach to conformance assessment is incorporated into these forms. One can assess at several levels:
  - o Are all required processes established?
  - Are all required tasks and activities performed?
  - o Are all documentation requirements met?
  - o Do tasks and deliverables incorporate all required and relevant items (usually by sampling not all in every deliverable)

A group could conform at one or more levels but not be in full conformance. Or a group could completely conform for maintenance or initial development but not both. These forms are intended to highlight the degree of conformance rather then just provide a straight list of items.

The forms provided can be just used as a checklist with notes taken separately for document and procedure references and comments.

DISCLAIMER: These forms should not be used in place of the standard itself and may have unintended omissions or inaccuracies as well as paraphrased verbiage.

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### 3.0 Identification and Conclusion

Company/Division/Department/Group:
Project/Product:
Scope/portion of 82304-1 Assessed: (Indicate 82304-1 included or excluded whichever is the shorter list):
<b>Depth of Assessment</b> (Describe which tiers included and the degree of document review and interviewing)
Performed by:

Analysis and Conclusion: Optional: Normally this would go in a separate report.

State degree of conformance determined using the Tiered method. List:

- Processes Missing
- Tasks and activities omitted (or summarize)
- Documentation requirements omitted (or summarize)
- Required low level tasks and deliverables omitted (or summarize)

## 4. High-level Conformance Evaluation

The Procedure/Plan column is to note where the approach or method for the activity is defined. The deliverable/documents column is to note the output of the activity in terms of documents and other deliverables that provide objective evidence that the process and activity was performed. One procedure, plan or document could be referenced multiple times. If all elements of this table are satisfied, one demonstrates conformance with the processes and activities requirements of IEC 82304-1. Note that IEC 82304-1 also requires specific tasks and these more detailed requirements are not addressed in this table.

The "initially" column indicates whether the initial development was conformant and the "now" column indicates whether the current process is conformant.

Enter NE if the requirement was NOT EVALUATED. Enter NA if it is not applicable. These forms can be just used as a checklist with notes taken separately for document and procedure references and comments.

IEC 82304-1	Initially (Y, N, NE)	Now (Y, N, NE)	Procedure, Plan Titles	Deliverables/documents	Comments
4 Health Software Product Requirements	•				
4.1 General requirements and initial Risk Assessment					
4.2 Health Software Product use requirements					
4.3 Verification of Health Software Product use requirements					
4.4 Updating Health Software Product use requirements					
4.5 System requirements					
4.6 Verification of system requirements					
4.7 Updating health software product system requirements					
5 Health Software – Software life cycle proc	esses				
6 Health Software Product Validation					
6.1 Validation plan					
6.2 Performing validation					
6.3 Validation report					
7 Health Software Product identification and Accompanying Documents					
7.1 Identification					
7.2 Accompanying Documents					
8 Post-market activities for the Health Softw	vare Produ	ct			
8.1 General					

8.2 Software Maintenance			
8.3 Re-Validation			
8.4 Post-market communication on the Heath			
Software Product			
8.5 Decommissioning and disposal of the			
Health Software Product			

## 82304-1 Processes Detailed Section by Section Checklist

For items that are outside the scope of the assessment use  $NE - not \ evaluated -$ and be clear about the scope of the assessment in any summary report or conclusions.

For items that are not relevant use  $NA - not \ applicable -$ and document your rationale.

**NOTE:** This checklist can be used to evaluate if plans and procedures address all relevant items but for a full assessment results of actual development and maintenance should be evaluated to determine if in practice all conformance was achieved with all items.

# **4 Health Software Product requirements**

### 4.1 General requirements and initial Risk Assessment

IEC 82304-1 Conformity Requirement	s Y/ N /NE/ NA	Procedure, Plan, or Document references (If level of detail in section 4 is not considered a sufficient mapping)	Comments
4.1 a – c The manufacturer shall determin	e and docume	ent:	
a. the intended use for the Health Software Product, including the profile and the intended operatio environment;			
b. the characteristics related to the safety and/or security of the Hea Software Product, identification hazards and estimation of the associated risk(s).			
c. the need for risk control measure for estimated risks that are considered unacceptable.	es		

# 4.2 Health Software Product use requirements

Sec	ction Conformity Requirements	Y/N/ NE/ NA	Procedure, Plan, or Document references (If level of detail in section 4 is not considered a sufficient mapping)	Comments
4.2 a –	g The manufacturer shall determine and	l documer	it:	
a.	requirements that address the intended use;			
b.	interface requirements, including user interface requirements where applicable;			
c.	requirements for immunity from or susceptibility to unintended influence by other software using the same hardware resources;			
d.	privacy and security requirements addressing areas such as authorized use, person authentication, health data integrity and authenticity, and protection against malicious intent;			
e.	requirements for accompanying documents such as instructions for use;			(See 7.2.2)
f.	requirements for support:  1. Upgrades from previous versions, including maintaining data integrity, and compatibility with prior versions,			
	2. rollback to the previous version after upgrade,			
	3. timely security patches and updates,			
	4. software distribution mechanism that ensures integrity of installation,			
	<ol> <li>decommissioning, irreversible deletion, transfer and/or retention data;</li> </ol>			

g.	requirements derived from	
	applicable regulation, including	
	rules for protected information.	

# 4.3 Verification of Health Software Product use requirements

Section Conformity Requirements	Y/N/ NE/ NA	Procedure, Plan, or Document references (If level of detail in section 4 is not considered a sufficient mapping)	Comments				
4.3  a - b The manufacturer shall verify that the	4.3 a – b The manufacturer shall verify that the Health Software Product use requirements are:						
Defined and documented as input for system requirements;							
b. Such that the manufacturer is able to meet the defined use requirements.							
The results of the verification shall be recorded.							

# 4.4 Updating Health Software Product use requirements

Section Conformity Requirements	Y/N/ NE/ NA	Procedure, Plan, or Document references (If level of detail in section 4 is not considered a sufficient mapping)	Comments
The manufacturer shall ensure that the Health			
Software Product use requirements are			
updated as appropriate, e.g. as a result of			
Health Software Product use requirements			
verification or as a result of validation.			

# 4.5 System requirements

Section Conformity Requirements  4.5 a – h The manufacturer shall specify and	Y/N/ NE/ NA	Procedure, Plan, or Document references  (If level of detail in section 4 is not considered a sufficient mapping)	Comments
document the system requirements for the			
Health Software Product. These requirements			
shall include the functionality for intended			
use and, as applicable:			
a. inter-operability;			
b. localization and language support;			
c. risk Control measure that have to be implemented in the Health Software Product at system level, based on the initial Risk Assessment of 4.1;			
d. user interface specification;			
e. requirements on the software and hardware platforms for the Health Software Product to function as expected under expected load, and with required performance levels;			
f. features that allow for security compromises to be detected, recognized, logged, timed, and acted upon during normal use;			
g. features that protect essential functions, even when the software security has been compromised;			
h. methods for retention and recovery of product configuration by an authenticated privileged user.			
The Health Software Product system			(See 4.2)
requirements shall meet the Health Software			
Product use requirements			

# 4.6 Verification of system requirements

Sec	ction Conformity Requirements	Y/N/ NE/ NA	Procedure, Plan, or Document references (If level of detail in section 4 is not considered a sufficient mapping)	Comments
4.6 a –	d The manufacturer shall verify that the	system	requirements:	
a.	do not contradict each other;			
b.	are expressed in terms that avoid ambiguity;			
c.	are stated in terms that permit the establishment of test criteria and performance of tests to determine that test criteria have been met; and			
d.	can be uniquely identified.			
The res	ults of the verification shall be d.			

# 4.7 Software System Testing

Section Conformity Requirements	Y/N/	Procedure, Plan, or Document references (If level of detail in section 4 is not considered a sufficient	Comments
	NE/	mapping)	
	NA	mapping)	
The manufacturer shall ensure that the Health			
Software Product system requirements are			
updated as appropriate, e.g. as a result of			
modification on the Health Software Product			
use requirements, as a result of system			
requirement Verification (see 4.6), or as a			
result of applying 5.2 of IEC 62304:2006 and			
IEC 62304:2006/AMD1:2015			

# **5 Health Software – Software life cycle processes**

Section Conformity Requirements	Y/N/ NE/	Procedure, Plan, or Document references (If level of detail in section 4 is not considered a sufficient	Comments
	NA	mapping)	
The system requirements for the Health			
Software Product established in 4.5 shall be			
used as primary design input for the life cycle			
process of the Health Software Product.			
The requirements in 4.2, 4.3, Clause 5, Clause			
6, Clause 7, Clause 8, and Clause 9 of IEC			
62304:2006 and IEC 62304:2006/AMD1:2015			
shall apply to the Health Software in addition			
to the other requirements of this document.			
IEC 62304:2006 and IEC 62304:2006 and IEC			
62304:2006/AMD1:2015 normatively			
references ISO 14971:2007. It is recognized			
that the manufacturer might not be able to			
follow all the process steps identified in ISO			
14971:2007 for each constituent component of			
the Health Software, such as proprietary			
components, subsystems of non-healthcare			
origin, and legacy software. In this case, the			
manufacturer shall take account of the residual			
risks and implement risk controls around those			
found to be unacceptable.			

### **6 Health Software Product Validation**

#### 6.1 Validation Plan

Section Conformity Requirements	Y/N/ NE/ NA	Procedure, Plan, or Document references (If level of detail in section 4 is not considered a sufficient mapping)	Comments
The manufacturer shall establish a validation plan addressing all Health Software Product use requirements established in 4.2.			
In the validation plan, the manufacturer shall:  a. identify the validation scope and the corresponding validation activities;			
<ul> <li>identify the constraints that potentially limit the feasibility of validation activities;</li> </ul>			
<ul> <li>select appropriate validation methods, input information, and associated acceptance criteria for successful validation.</li> </ul>			
d. Identify the enabling systems or services such as operating environment(s), including hardware and software platforms, needed to support validation;			
e. Specify the required qualification of the validation personnel; where training is required, this shall be completed before starting the validation;			
f. Define the appropriate level of independence of the validation team from the design team.			

# 6.2 Performing Validation

Section Conformity Requirements	Y/N /NE /NA	Procedure, Plan, or Document references (If level of detail in section 4 is not considered a sufficient mapping)	Comments
The manufacturer shall confirm readiness for validation once:  a. the validation plan has been established;			
b. The validation team has been set up with the approprriately qualified personnel; and			
c. As appropriate, development life cycle phases as required by Clause 5 have been completed for those parts of the Health Software Product subject to validation.			
The validation team shall perform the validation activities in the intended operational environment(s) according to the validation plan of 6.1. Where deviations from the validation plan are deemed necessary, they shall be justified in the validation report.			
When anomalies are found in the Health Software Product during validation, these shall be resolved through a problem resolution process according to Clause 9 of IEC 62304/AMD1:2015. Where this problem resolution process results in modification of the Health Software Product, the affected part of the Validation shall be repeated, taking into account the extent of the modification.			

# 6.3 Validation report

Section Conformity Requirements	Y/N/ NE/ NA	Procedure, Plan, or Document references (If level of detail in section 4 is not considered a sufficient mapping)	Comments
The validation team shall develop the validation report for the Health Software Product subject to validation.			
The validation report shall provide evidence that:  a. the validation results are traceable to the Health Software Product use requirements, taken as input;			
b. The Health Software Product meets the use requirements established in 4.2; and			
c. the residual risk of the Health Software Product remains acceptable.			
The validation report shall document the validation conditions and the results of the validation activities. If, during validation, anomalies were identified in the Health Software Product, these shall be listed in the validation report.			
The validation report shall list the members of the validation team (name, affiliation, function).			
The validation report shall include a summary of the validation results, and the conclusion that the Health Software Product is validated for the intended use, based on the use requirements.			

# 7 Health Software Product identification and accompanying documents

#### 7.1 Identification

Section Conformity Requirements	Y/N/ NE/ NA	Procedure, Plan, or Document references (If level of detail in section 4 is not considered a sufficient mapping)	Comments
A Health Software Product shall be identified			
with the name or trademark of the			
manufacturer, a product name, or type			
reference, and a unique version identifier such			
as a revision level or date of release/issue.			
The identification of the Health Software			
Product shall be accessible to the user when			
using the Health Software.			

# 7.2 Accompanying Documents

#### 7.2.1 General

Section Conformity Requirements	Y/N/ NE/ NA	Procedure, Plan, or Document references (If level of detail in section 4 is not considered a sufficient mapping)	Comments
The manufacturer shall make available accompanying documents for the Health Software to allow the user and/or responsible organization to implement and use the Health Software Product as intended.			
The accompanying documents shall include:  a. The name and contact information, including the website, of the manufacturer;			
b. the Health Software Product identification (see (7.1)			

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c. the version identifier(s) of the Health	
Software Product(s) such as revision	
level(s) or date(s) of release/issue,	
necessary to identify the Health	
Software Product(s) to which it	
applies;	
d. the version identifier of the	
accompanying documents such as	
revision level or date of release/issue;	
e. the instructions for use (see 7.2.2);	
and	
f. the technical description (see 7.2.3).	
The accompanying documents may include	
software release notes and an indication of	
typical installatino environments.	
The accompanying documents shall specify	
any special skills, training and knowledge	
required of the intended user or the	
responsible organization, any restrictions on	
locations or environments in which the Health	
Software Product can be used, and, as	
applicable, any system interface, software	
platforms and tools, and hardware	
requirements or restrictions.	
The accompanying documents shall be	
provided at a level consistent with the	
education, training and nay special needs of	
the person(s) for whom they are intended.	

#### 7.2.2 Instructions for use

Section Conformity Requirements	Y/N/ NE/ NA	Procedure, Plan, or Document references (If level of detail in section 4 is not considered a sufficient mapping)	Comments
7.2.2.1 General  The instructions for use shall document all that is necessary for proper operation of the Health Software Product, including installation instructions where appropriate.			
If applicable, the instructions for use shall specify restrictions on an IT-NETWORK on which the Health Software Product is intended to be used (see 7.2.3.2).			
7.2.2.2 Health Software description  The instructions for use shall contain:  a. the intended use of the Health Software Product as defined by the manufacturer;			
b. a brief description of the Health Software Product, including the essential functions of the Health Software Product;			
c. any operational security options for the use of the Health Software; and			
d. any known technical issues, limitations, disclaimer, or contraindication(s) to the use of the Health Software Product.			

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7.2.2.3 Warnings and notices for safety	
and/or security	
The instructions for use shall list all warnings	
and notices for safety and/or security related to	
the use of the Health Software Product and	
explain or expand them when they are not	
self-explanatory.	
General warnings and notices for safety and/or	
security should be placed in a specifically	
identified section of the instructions for use. A	
warning or a notice for safety or for security	
that applies only to a specific instruction or	
action should precede the instruction to which	
it applies.	
7.2.2.4 Installation	
The instructions for use shall contain:	
a. a statement whether the installation	
can be done by the user or shall be	
done by or with the assistance of the	
manufacturer, or by an authorized	
person;	
b. the system requirements for the	
software and hardware platforms	
intended to execute the Health	
Software;	
c. operational security options for the	
Health Software to be set at	
installation time;	
d. any critical dependencies on other	
applications;	
e. the configuration requirements;	
3,	
f. the system interface requirements	
(both required and optional);	
(John required and optional),	
g. the details of the supported software	
g. the details of the supported software platforms; and	
piationis, and	

h. the installation instructions or a	
reference to where the installation	
instructions are to be found.	
7.2.2.5 Start-up procedure	
The instructions for use shall contain the	
necessary information for the user to bring the	
Health Software into operation	
7.2.2.6 Shutdown procedure	
The instructions for use shall contain the	
necessary information for the user to safely	
shut down the operation of the Health	
Software.	
7.2.2.7 Operating instructions	
The instructions for use shall contain all	
information necessary to operate the Health	
Software. This shall include explanation of the	
function of controls, displays and signals and	
the sequence of operation.	
The instructions for use shall explain the	
meanings of figures, symbols, warning	
statements and abbreviations.	
7.2.2.8 Messages	
The instructions for use shall list all system	
messages, error messages and fault messages	
that are generated, unless these messages are	
self-explanatory.	

The list shall include an explanation of	
messages including important causes, and	
possible action(s) by the user, if any, that are	
necessary to resolve the situation indicated by	
the message.	
7.2.2.9 Decommissioning and disposal of	
Health Software	
The instructions for use shall contain all	
information necessary for the user or the	
responsible organization to safely	
decommission and dispose of the Health	
Software. This shall include, where	
appropriate, safeguarding personal and health-	
related data in connection with security and	
privacy.	
7.2.2.10 Reference to the technical	
description	
The instructions for use shall contain the	
technical description (see 7.2.3) or a reference	
to where the technical description can be	
found.	

# 7.2.3 Technical description

Section Conformity Requirements	Y/N/ NE/ NA	Procedure, Plan, or Document references (If level of detail in section 4 is not considered a sufficient mapping)	Comments
7.2.3.1 General  The technical description shall provide all data that is essential for safe and secure operation, transport and storage, and measures or conditions necessary for installing the Health Software, and preparing it for use. This shall include:  a. the system requirements for the software and hardware platforms intended to execute the Health Software;			

b.	the details of the supported software platforms;		
c.	the permissible environmental conditions for transport and storage of the media containing the Health Software.		
d.	all characteristics of the Health Software, including range(s), accuracy, and precision of the displayed values or an indication where they can be found;		
e.	any special installation requirements or restrictions;		
f.	any maintenance requirements, such as log files to be checked and possibly cleared, database maintenance, and change of storage media;		
g.	any technical security options that can be configured within the Health Software Product, and that are available to the responsible organization. Such security may include:  1. configuration options, e.g. minimum list of network ports and computer services that are required.  2. software options, e.g. turn on encryption settings, change default login credentials.  3. operational options, e.g. auditing and logging management settings.		
h.	a description of what the software does when a failure to maintain security is detected. The description shall include any impact to patient care, data, or clinical workflow.		

The manufacturer shall provide instructions in	
the technical description for the user and/or	
the responsible organization on how to deal	
with changes of the hardware and software	
platforms (e.g., with patches /updates of	
antivirus/firewall software, system libraries,	
firmware, and others), and how to select	
appropriate platform settings to support the	
security goals and security capabilities.	
7.2.3.2 Health Software intended to be used	
in an IT-Network	
The scope of the IT-Network may include	
supporting IT infrastructure or systems not	
explicitly intended to be used in a healthcare	
setting. See 3.9.	
If the Health Software is intended to be used	
in an IT-Network that is outside the control of	
the Health Software Manufacturer, the	
manufacturer shall provide, as part of the	
technical description, instructions necessary	
for this use, including but not limited to the	
following:	
a. the characteristics and configuration	
of the IT-Network required for the	
Health Software to achieve its	
purpose;	
b. the technical specifications of the IT-	
Network necessary for the Health	
Software to achieve its purpose,	
including security specifications and	
protection against malware (short for	
malicious software) or similar;	
c. the intended information flow	
between the Health Software and	
other software or systems using the	
IT-Network.	

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	rer shall include in the	
	iption a list of the hazardous	
	ting from a failure of the IT-	
	ovide the characteristics and	
	ed for the purpose of the Health	
	using that IT-Network.	
	l description, the manufacturer	
shall inform the	e responsible organization that:	
	tion of the Health Software on a	
	twork could result in	
previo	ously unidentified risks to	
patient	ts, users or third parties;	
b. the res	sponsible organization is	
advise	ed to identify, analyze, evaluate,	
and co	ontrol these risks;	
c. subsec	quent changes to the IT-	
Netwo	ork could introduce new risks	
and re	equire additional analysis; and	
d. change	es to the IT-Network include:	
1.	. changes in IT-Network	
	configuration;	
2.	. addition of items (hardware	
	and/or software platforms or	
	software applications) to the	
	IT-Network;	
3.	. removal of items from the	
	IT-Network;	
4.	update of hardware and/or	
	software platforms or	
	software applications on the	
	IT-Network; and	
5	upgrade of hardware and/or	
]	software platforms or	
	software applications on the	
	IT-Network.	
	II-INCLWOIK.	

# 8 Post-market activities for the Health Software Product

### 8.1 General

Section Conformity Requirements	Y/N/ NE/ NA	Procedure, Plan, or Document references (If level of deail in section 4 is not considered a sufficient mapping)	Comments
According to clause 1, this document covers			
the entire life cycle of health software. Within			
its life cycle, health software is likely to			
undergo software maintenance and, at the end,			
decommissioning and disposal. Subclause 4.2			
addresses use requirements to be			
implemented and validated prior to making the			
product available for use; those requirements			
include decommissioning and disposal of a			
health software product. When this document			
is used for compliance purposes, only the			
post-market aspects that relate to product			
design and development apply.			

### 8.2 Software Maintenance

Section Conformity Requirements	Y/N/ NE/ NA	Procedure, Plan, or Document references (If level of deail in section 4 is not considered a sufficient mapping)	Comments
Where the manufacturer decides that software			
maintenance is relevant or necessary, for			
instance, due to detected errors that can have			
an impact on safety and/or security, the			
manufacturer shall develop the modification of			
the Health Software Product in compliance			
with this document (see Clause 5).			

### 8.3 Re-validation

Section Conformity Requirements	Y/N/ NE/ NA	Procedure, Plan, or Document references (If level of deail in section 4 is not considered a sufficient mapping)	Comments
The manufacturer shall ensure re-validation			
takes place of the parts of the health			
software product that have been affected by			
the software maintenance, taking into			
account the extent of the modification. The			
manufacturer shall update the validation plan			
accordingly.			
The manufacturer shall ensure that the			
modified version of the health software			
functions with any hardware and software			
platform that is claimed to be supported.			

# 8.4 Post-market communication on the Health Software Product

Section Conformity Requirements	Y/N/ NE/ NA	Procedure, Plan, or Document references (If level of deail in section 4 is not considered a sufficient mapping)	Comments
The manufacturer shall inform users of the health software product and impacted responsible organizations about security vulnerabilities the manufacturer has become aware of, and of changes in regulatory requirements that impact the use of the Health Software Product.			
In the case of software maintenance, the manufacturer shall make information available to users and to the responsible organizations of the availability of the updated version of the Health Software Product, and provide information about the following, where appropriate:  a. new features;			
b. corrected errors or faults;			
c. any impact on safety and/or security of the modified software;			
d. updates in the Health Software identification;			
e. updates in the accompanying documents.			

The decision of the user or the responsible	
organization whether to install the modified	
version of the health software should be based	
on safety and/or security impacts of the	
modifications. Where the modified health	
software product has a positive impact on the	
safety and/or security of the health software,	
manufacturer may advise the users and	
the responsible organizations to replace their	
version in the short term.	

# 8.5 Decommissioning and disposal of the Health Software Product

Section Conformity Requirements	Y/N/ NE/ NA	Procedure, Plan, or Document references (If level of deail in section 4 is not considered a sufficient mapping)	Comments
The user or the responsible organization shall			
be able to safely decommission and dispose			
of the health software product at the end of its			
useful life, including, where appropriate,			
safeguarding personal and health-related data			
in connection with security and privacy. The			
health software shall provide this function			
consistent with the applicable use			
requirements as specified in 4.2.			

# 9 Software Problem Resolution Process (all are for all classes)

Section Conformity Requirements	Y/N/	Procedure, Plan, or Document references	Comments
	NE/	(If level of deail in section 4 is not considered a sufficient	
	NA	mapping)	
9.1 Problem reports exist for each problem			
detected in the software and include a			
statement of criticality (effecton performance,			
safety or security) as well as other information			
that may aid in resolution (for example,			
devices affected, supported accessories			
affected).			

9.2 Problem are investigated a) to determine the cause, b) evaluate the problem's relevance to safety c) investigation results are documented d) change requests are created for actions needing correct or and rationales for taking no action are documented	
9.3 Relevant parties are advised of the existence of the problem, as appropriate.	
9.4 Change requests are approved observing the requirements of the change control process. <b>NOTE:</b> a special process may exist for emergencies and their appropriateness and overuse checked. If none exists consider if the company is prepared to handle an emergency related to the risk of the device.  9.5 Records of problem reports and their resolution and verification are kept. The Risk Management file is updated as appropriate.  9.6 Problem reports are analyzed for trends not just individually	
9.7 Resolutions of problems are verified to determine whether: a) problems are resolved and the problem report closed b) adverse trends have been reversed c) change requests have been implemented in all relevant software items and associated documents d) additional problems have been introduced by the changes.	

9.8 Testing and regression testing			_	•
documentation following a fix, includes:				
a. Test results				
b. Anomalies found				
c. Software version tested				
d. Relevant hardware and software test				
configurations				
e. Relevant test tools				
f. Date tested				
g Identification of the tester				

#### **END OF CHECKLIST**

REMEMBER TO REFER TO THE STANDARD ITSELF, AS THIS CHECKLIST IS NOT INTENDED TO BE USED IN ISOLATION FROM THE STANDARD OR KNOWLEDGE AND TRAINING IN PROPER INTERPRETATION OF THE STANDARD.

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A few services of interest are listed below.

- 1. IEC 62304 and IEC 82304-1 training, assessments, audits, and hands-on development of tailored software development processes, including various lifecycles (e.g., spiral, Agile, etc.).
- 2. ISO 14971 Medical Device and Software Risk Analysis training, assessments, audits, and hands-on support for both system level and software risk analysis (in concert with IEC/TR 80002-1).
- 3. FDA Human Factors evaluations, formative and summative, to support regulatory submissions. IEC 62366 training, assessments, audits, and hands-on support for formative evaluations, summative studies, and Use Error risk analysis.
- 4. FDA QSR and ISO 13485 Quality System mock-audits, assessments and assistance with inspections and audits.
- 5. Cybersecurity training, assessments, penetration testing, and process evaluation.
- 6. Wireless Coexistence test planning, protocol development, and hands-on "day of" testing support.
- 7. Regulatory submission preparation with particular expertise with software, cybersecurity, and usability documentation.
  - Articulation in FDA Terminology
  - Planning and reviewing
  - FDA interaction and negotiation inspections, submissions, injunctions, and consent decrees
  - Deciding when to submit a new 510(k)
  - MDR evaluations, Field Corrections and Recalls
- 8. Full range of V&V services including test planning and protocol development for both manual and automated test assets. We can jump-start entry into automated test assets providing training, test asset development, and coaching.

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