Docsie Free Template | Medical Devices

Design Validation Report

> Use this template to report validating [device_name] meets user needs and intended use.

Template Metadata

Field	Details
Category	Medical Devices
Owner	[Team or owner]
Version	[Version number]
Effective Date	[Date]
Review Cycle	[Monthly / Quarterly / Annual / Event-based]
Status	[Draft / In Review / Approved]

Validation Objective

State the intended use, user groups, environments, and validation question.

Item	Details	Owner	Status
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]

Notes

[Add context, assumptions, exceptions, evidence links, screenshots, calculations, or reviewer comments.]

Device Configuration

Identify validated model, software, accessories, labeling, packaging, and production-equivalent status.

Item	Details	Owner	Status
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]

Notes

[Add context, assumptions, exceptions, evidence links, screenshots, calculations, or reviewer comments.]

User Needs Traceability

Map user needs and risk controls to validation activities and evidence.

Item	Details	Owner	Status
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]

Notes

[Add context, assumptions, exceptions, evidence links, screenshots, calculations, or reviewer comments.]

Study Summary

Describe simulated-use, clinical, usability, or production validation methods, participants, and conditions.

Item	Details	Owner	Status
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]

Notes

[Add context, assumptions, exceptions, evidence links, screenshots, calculations, or reviewer comments.]

Results

Summarize pass/fail outcomes, observed use errors, adverse findings, and protocol deviations.

Item	Details	Owner	Status
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]

Notes

[Add context, assumptions, exceptions, evidence links, screenshots, calculations, or reviewer comments.]

Risk and Labeling Impact

Assess whether results affect the risk file, IFU, training, claims, or residual risk acceptability.

Item	Details	Owner	Status
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]

Notes

[Add context, assumptions, exceptions, evidence links, screenshots, calculations, or reviewer comments.]

Conclusion

State whether the device meets user needs and intended use, with required follow-up actions. Use objective report language and trace claims to controlled records.

Item	Details	Owner	Status
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]
[Item or requirement]	[Describe the relevant detail, evidence, or decision]	[Owner]	[Open / Complete]

Notes

[Add context, assumptions, exceptions, evidence links, screenshots, calculations, or reviewer comments.]

Review and Signoff

Document review conclusions, approvals, unresolved items, and next review date.

Role	Name	Date	Notes
Preparer	[Name]	[Date]	[Notes]
Reviewer	[Name]	[Date]	[Notes]
Approver	[Name]	[Date]	[Notes]