

## Corrective/Preventive Action Summary Report

<b>Original Report #:</b>		<b>Follow-Up Report # (if any):</b>		<b>Open Date:</b>	
<b>Department:</b>		<input type="checkbox"/>	<b>Corrective Action</b>	<input type="checkbox"/>	<b>Preventive Action</b>
		<b>Close Date:</b>			
<b>1. Team Leader:</b>  <b>Team Members:</b>		<b>2. Problem Description/ID of Source:</b>			
<b>3. Containment Actions/Initial Corrective Action:</b>				<b>Date Implemented:</b>	<b>Results/ % Effective:</b>
<b>4. Investigate Root Cause(s)/Determine Steps for Action:</b>				<b>Root Cause(s):</b>	
<b>5. Verification of Root Cause(s):</b>				<b>% Contributing to Cause:</b>	
<b>6. Implement Corrective/Preventive Action(s):</b>			<b>Date Implmtd:</b>	<b>How Verified:</b>	<b>% Effective:</b>
<b>7. CA/PA Impact - Can action(s) be applied to other products/processes?</b>					
<b>8. Document Update: (X)</b> (QSP, QWI, QR?) <input type="checkbox"/>		(Control Plan/FMEA?) <input type="checkbox"/>		<b>Implementation Date:</b>	
<b>9. Congratulate Your Team(if appropriate):</b>					