



# Test Procedure Name: Coastal Surface Piercing Profiler Health & Status Monitoring Validation Test Procedure

**Document Control Number: 1158-02024 Rev: 1-00**

<b>Test Plan Document Control Number:</b> <b>1158-02000</b>	<b>Test Plan Revision Number:</b> <b>1-00</b>	<b>Test Date(s):</b> <b>&lt;YYYY-MM-DD&gt;</b>
--	--	---

Test Procedure Approval Signature Block (signed before the test procedure is executed; signature indicates approval of the procedure content)				
Approval Authority (role)	Print Name	Signature	Date (yyyy-mm-dd)	Revision
Chief Systems Engineer	John Pesaturo		2015-mm-dd	1-00

**Test Type(s)** (select all applicable)     Requirements Verification     Developmental     Integration     Interface     Stability     Performance     Validation     Acceptance     Other

**Test Procedure Description**

This procedure contributes to the Validation Testing of the uncabled Coastal Surface Piercing Profiler, which is required for Commissioning. It applies to Coastal Surface Piercing Profilers that are deployed at the Pioneer Inshore, Pioneer Central, Endurance Washington Inshore, Endurance Washington Shelf, and Endurance Oregon Inshore sites. This procedure does not apply to the cabled Coastal Surface Piercing Profiler deployed at the Endurance Oregon Shelf site.

This procedure is the Science Use Case Scenario (Section 4.4.4, Validation Test Plan for OOI Coastal Pioneer and Endurance Arrays – 1153-05000 and 1158-02000).

- Confirm that Data Products are available via OOINET
- Confirm that Data Products are satisfactory

**Test Location**

Platforms will be deployed in their defined locations within the Coastal Pioneer and Endurance Arrays. Testers will be located where they have access (directly, via internet, or via WebEx) to the OOINET.

Test Equipment				
Equipment ID or Serial Number	Calibration Due Date (yyyy-mm-dd)	Equipment Technician (print name)	Certification Signature (indicates that calibration has not expired)	Date (yyyy-mm-dd)
N/A				

Test Software (Including custom and COTS)	
Software Product Name	Software Version
OOINet	<to be filled in at time of test>
Coastal Surface Piercing Profiler Dataset Agent Drivers (see Appendix A, 1158-02000)	<to be filled in at time of test>
Coastal Surface Piercing Profiler Data Product Algorithms (see Appendix A, 1158-02000)	<to be filled in at time of test>

Input Data					
Dataset Name	Dataset Description	Dataset Source (e.g., IOOS, CTD sensor)	Dataset Location (e.g., complete file path and name)	Data Volume	Procedure Step(s) (Where Data is used)

Output Data				
Dataset Name	Dataset Description	Dataset Source	Data Storage Location	Comments



**Test Procedure Name: Coastal Surface Piercing Profiler Health & Status  
Monitoring Validation Test Procedure  
Document Control Number: 1158-02024 Rev: 1-00**

		(e.g., IOOS, CTD sensor)	(e.g., complete file path and name)	(e.g., explain any naming conventions used)

**Test Safety**  
Tests shall be conducted in accordance with the OOI Environmental Health and Safety Plan (1006-00000), and in accordance with institutional operational safety policies.

<b>Preconditions</b>	<b>Test Reports</b>
The platform(s) to undergo Validation Testing must be deployed. The OOINET must be operational with the appropriate Dataset Agent Drivers and Data Product Algorithms integrated.	<i>&lt;Identify the document numbers of any test reports produced from the execution of this procedure&gt;</i>



**Test Procedure Name: Coastal Surface Piercing Profiler Health & Status  
 Monitoring Validation Test Procedure  
 Document Control Number: 1158-02024 Rev: 1-00**

Test Procedure				Test Results				
Step No.	Instructions	Requirement ID (If applicable)	Expected Results	Actual Results (If different than Expected)	Step Completed By (Enter initials, unless test is automated)	Pass/Fail	Notes	Redmine Issues (Identify issues found in this step)
1	List Data Products applicable to the uncabled Coastal Surface Piercing Profiler	N/A						
2	Confirm Data Products are satisfactory Record Test Report DCN for MIP Step 5 applicable to each Data Product or set of Data Products	N/A						

Post-Test Signature Block (Signatures indicate that the test procedure has been completed according to the instructions and results documented above or as noted in comments below.)				
Role (e.g., Test Lead, Test Operator, Systems Engineer, Design Engineer, Safety Engineer, QA/QC Engineer, Witness)	Print Name	Initials	Signature	Date (yyyy-mm-dd)
<Insert rows as needed>				

**Comments:**



**Test Procedure Name: Coastal Surface Piercing Profiler Health & Status  
Monitoring Validation Test Procedure**

**Document Control Number: 1158-02024 Rev: 1-00**

**Document Control Sheet**

<b>Version</b>	<b>Date</b>	<b>Description</b>	<b>Originator</b>
1-00	4/07/2015	Initial Release	J. Fram