Interagency finished pharmaceutical product questionnaire











Interagency finished pharmaceutical product questionnaire

Section 1: Administrative Section	3
1.1 Product identification	3
1.2 Excipients (inactive ingredients)	4
1.3 Packaging	5
1.4 Contact details	5
1.5 Manufacturer identification	6
1.6 Regulatory (licencing) status	7
1.7 Samples for technical evaluation	8
Section 2: Active pharmaceutical ingredients	9
2.1 Details of API used (INN if any)	9
2.2 For sterile API	10
2.3 Certificate of analysis for API manufacturer	10
2. 4 Certificate of suitability (CEP)	10
2.5 Drug master file (DMF)	10
Section 3: Finished pharmaceutical product (FPP)	11
3.1 FPP Manufacturing site GMP status	
3.2 FPP specifications	11
3.3 Certificate of Analysis (CoA) for FPP	12
3.4 Manufacturing process validation	12
3.5 Stability studies	13
Section 4: Safety/efficacy and/or therapeutic equivalence	16
4.1 For innovator products	16
4.2 Therapeutic Equivalence	16
4.3 In vivo bioequivalence studies	16
4.4 Comparative tests	17
4.5 Therapeutic equivalence – commitment	18
Section 5: Signature and Commitment	18
Section 6: Checklist for Annexes and attachments	19

Working document as per WHO TECHNICAL REPORT SERIES, NO. 986 under Annex 3 -Model quality assurance system for procurement agencies -Appendix 6- Interagency finished pharmaceutical product questionnaire based on the model quality assurance system for procurement agencies.

Guidance:

This is an automated PDF form. All data will be extracted and used for the technical evaluation. Please fill in the form in line with following:

- 1) Please fill in ONE separate form for EACH pharmaceutical product
- 2) Save this PDF file locally in the same format (PDF)
- 3) Please fill in ALL relevant fields before returning the form to relevant agency
- a. Section 4 Therapeutic Equivalence is ONLY filled out if applicable for the product
- 4) Return this PDF form in the exact same PDF format: Do NOT print, scan, add pictures, or save in a different format

Interagency finished pharmaceutical product questionnaire

Section 1: Administrative Section

Active pharmaceutical ingredient(s) (use INN if

1.1 Product identification

any):

Generic name of the product:	
Trade (proprietary) name (if any):	
Dosage form, please choose in the dropdown list:	
Other	
1.1.1 Strength per dosage	
Please, indicate the strength per dosage	
1.1.2 Route of administration	
Please choose route of administration:	
Other (Please specify)	

1.1.3 Fixed dose or co-packaged product

Please choose the packaging of the product:				
Fixed-dose combination (FDC)				
Co-packaged				
Other (Please specify)				

Please provide the formulation of the product (complete qualitative and quantitative composition including active ingredient(s), overages if any and excipients) in **Annex A.**

1.2 Excipients (inactive ingredients)

Please list the excipients (inactive ingredients) in the product in below table:

Excipient	Amount per dosage unit	Medical/pharmaceutical relevance (binder, filler, other)	Standard (BP, USP, other)

1.3 Packaging

1.3.1 Primary packaging

Pack size (e.g. blister pack of 10 tablets, or 10 ml ampoule):	
Description of package (bottle, ampoule, other):	
Materials used for primary packing:	

Please add documentation in Annex B.

1.3.2 Secondary packaging

Total pack size (e.g. 100 tablets per box = 10 tablets x 10 blister cards):	
Description of package (box, bag, other):	
Materials used for primary packing:	

Please add documentation in Annex C.

1.4 Contact details

1.4.1 Supplier/Bidder identification

Company name and address	
Email contact details	
Telephone number	
2010 10110 111111100	
Activity (e.g. packaging, quality control testing, final release)	
ilitai release)	

Other (Please specify) 1.5 Manufacturer identification If the Supplier/Bidder identification is the same as Manufacturer, please skip this section. Name of manufacturer, Manufacturing site and address Email contact details Telephone number Activity (e.g. packaging, quality control testing, final release) Note for the applicant: Please note that the information in this questionnaire can be shared confidentially among ICRC, MSF, WHO procurement centre, UNFPA, UNICEF, GDF and TGF for procurement purposes. If you have any objection, please indicate this to the relevant agency that you are dealing with. 1.5.1 Has the dossier been submitted to any of the following:	Please choose the role of bidder below:	
Other (Please specify) 1.5 Manufacturer identification If the Supplier/Bidder identification is the same as Manufacturer, please skip this section. Name of manufacturer, Manufacturing site and address Email contact details Telephone number Activity (e.g. packaging, quality control testing, final release) Note for the applicant: Please note that the information in this questionnaire can be shared confidentially among ICRC, MSF, WHO procurement centre, UNFPA, UNICEF, GDF and TGF for procurement purposes. If you have any objection, please indicate this to the relevant agency that you are dealing with. 1.5.1 Has the dossier been submitted to any of the following:	Marketing Authorisation Holder	Manufacturer
1.5 Manufacturer identification If the Supplier/Bidder identification is the same as Manufacturer, please skip this section. Name of manufacturer, Manufacturing site and address Email contact details Telephone number Activity (e.g. packaging, quality control testing, final release) Note for the applicant: Please note that the information in this questionnaire can be shared confidentially among ICRC, MSF, WHO procurement centre, UNFPA, UNICEF, GDF and TGF for procurement purposes. If you have any objection, please indicate this to the relevant agency that you are dealing with. 1.5.1 Has the dossier been submitted to any of the following:	Distributor/wholesaler	
If the Supplier/Bidder identification is the same as Manufacturer, please skip this section. Name of manufacturer, Manufacturing site and address Email contact details Telephone number Activity (e.g. packaging, quality control testing, final release) Note for the applicant: Please note that the information in this questionnaire can be shared confidentially among ICRC, MSF, WHO procurement centre, UNFPA, UNICEF, GDF and TGF for procurement purposes. If you have any objection, please indicate this to the relevant agency that you are dealing with. 1.5.1 Has the dossier been submitted to any of the following:	Other (Please specify)	
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Telephone number Activity (e.g. packaging, quality control testing, final release) Note for the applicant: Please note that the information in this questionnaire can be shared confidentially among ICRC, MSF, WHO procurement centre, UNFPA, UNICEF, GDF and TGF for procurement purposes. If you have any objection, please indicate this to the relevant agency that you are dealing with. 1.5.1 Has the dossier been submitted to any of the following:		
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1.5.1 Has the dossier been submitted to any of the following:	among ICRC, MSF, WHO procurement centre, U	NFPA, UNICEF, GDF and TGF for procurement purposes.
	If you have any objection, please indicate this to	the relevant agency that you are dealing with.
	1.5.1 Has the dossier been submitted to any	y of the following:
If any chosen above, please provide the date of the	If any chosen above, please provide the date of the	
submission:		

1.4.2 Role regarding the product

1.6 Regulatory (licencing) status

1.6.1 Country of the manufacture

Type of product registration, please choose from dropdownlist:	
Product registered in country	
Competent Authority	
Licence number	

- Please attach a **certificate of pharmaceutical product (CPP)** according to the WHO Certification Scheme (WHO Technical Report Series, No. 863; an earlier version is not acceptable) in **Annex E**.
- Submit recent as well as historical deficiency letters issued by the WHO Prequalification Programme (PQP)/SRA in relation to the specific product dossier in **Annex F**.

If a CPP cannot be obtained from competent	
authority,	
please state the reason and send an equivalent	
document if any:	

1.6.2 Product registration in other countries

List other countries where the product is **registered and is currently marketed** in the table below.

Country	Competent Authority	Licence number

Provide a copy of the licence in **Annex D**.

1.6.3 WHO prequalification status, if applicable

alified by <u>WHO/PQP</u> ?			
submission			
	add the acceptance letter for product do	ssier review,	
	ation (PQP) assessment, please attach th	e acceptance	
cal evaluation			
l product			
	ed for evaluation. Please provide one sai	mple of one of the	
ested sample, please			
label language			
English	French		
ex I.			
1.7.3 Secondary packaging label language			
English	French		
	gualified WHO, please amber, in Annex H. Ider WHO prequalification in Annex G. Cal evaluation I product Information are required are required as ample, please Label language English ex I. Ing label language	qualified WHO, please add the acceptance letter for product documber, in Annex H. der WHO prequalification (PQP) assessment, please attach the my in Annex G. cal evaluation I product information are required for evaluation. Please provide one sar products. dested sample, please label language English French ex I. ing label language	

Please attach a copy in **Annex I.**

1.7.4 Patient information leaflet/Package insert

Bilingual English/French	English	French	
Other (Please specify)			

Please attach a copy in **Annex J.**

Section 2: Active pharmaceutical ingredients

2.1 Details of API used (INN if any)

Please fill in the table below.

	Name (INN)	API manufacturer name, site, address and country	API specifications (BP, USP, Ph. Int., other)	GMP certification country of origin (Annex K)	Last inspection performed by: (1) FPP manufacturer (2) WHO PQ Geneva (3) EDQM (4) US FDA (5) PIC/S (6) Others - specify (7) none of the above	Date and outcome of inspection
API 1						
API 2						
API 3						
API 4						
API 5						

Please attach a copy of the FPP manufacturer internal API specifications in Annex L.

If analytical methods are in-house, different from BP, USP and Ph.Int., please attach a copy of the analytical method and analytical validation data in **Annex M**.

2.2 For sterile API

Please provide the data on valida	tion of the sterile aspects	s including recent med	lia fill validation	data, as
applicable, in Annex N .				

Describe the method of sterilization used when applicable	

2.3 Certificate of analysis for API manufacturer

Please provide a copy of the certificate of analysis of the API from the API manufacturer as well as from the finished pharmaceutical product (FPP) manufacturer in **Annex O**.

2. 4 Certificate of suitability (CEP)

Certificate of suitability to the monograph of the European Pharmacopoeia (CEP) for APIs. Please attach in **Annex P1**, and if available, please fill in the certificate number.

CEP Certificate No	
CEF Certificate No	

2.5 Drug master file (DMF)

Is a Drug Master file (DMF/ASMF) available for this API ?	
Has den DMF been registered/submitted?	
If submitted, please specify which country:	

If DMF is available, please provide a copy in **Annex P2**.

Section 3: Finished pharmaceutical product (FPP)

3.1 FPP Manufacturing site GMP status

GMP inspections carried out by a Competent Authority (CA)

FPP site and Country	GMP Certificate No	Valid until	Name of CA and Country	Other inspection of PIC/S member, WHO PQP, MSF, ICRC

Please attach the recent/valid GMP certificates/letter(s) of compliance in **Annex Q**

Please describe if there is any on-going CAPA plan	

3.2 FPP specifications

Please list the specifications used for finished pharmaceutical product:

Standard (BP, USP, In-house, other analytical method)	Edition and year published

Please attach copies of release and shelf-life specifications for the FPP in **Annex R**. If analytical methods are in-house, different from BP, USP and Ph.Int., attach a copy of the analytical method and analytical validation data in the same in **Annex R**.

3.3 Certificate of Analysis (CoA) for FPP

Please attach a copy of the certificate of analysis for the three last batches released in **Annex S**. Please list the information of **at least 3 batches** in regards of the **Certificate of Analysis (CoA)** in below table:

Batch number	Batch size	Package size and unit (e.g. 100 tablets jar, or 10 ampoules per package)

3.4 Manufacturing process validation

Please provide details of validation process, hereunder specific batch information in the table below:

The batch size in relevant units (tablet, ampoules, sachets, other)	
Batch numbers	
Manufacturing dates	
Reference number for the process validation report	
If processes are yet to be validated, the reference number for the process validation protocol should be indicated	
Provide batch formulae for all proposed batch sizes	

Please provide in **Annex T** a flow diagram and brief narrative describing the manufacturing and control process of this product with relevant parameters.

3.4.1 Additional information for sterile products

Provide the data on validation of the sterile aspects of the product including recent media fill validation data as applicable in **Annex U**.

Please describe the method of sterilization used including conditions such as temperature, time, pressure:	
71	

3.5 Stability studies

3.5.1 Stability of the Finished Pharmaceutical Product (FPP)

	Accelerated study	Long term study	On-going study
Conditions (Celsius/rH%/Climatic zone)			
Duration (months)			
Batch numbers (3 different)			
Batch size of each lot tested			
Container and primary material (e.g. jar of HDPE)			
Microbiological test and standard used (BP, USP, other)			
Study Conclusions			

To document the information listed in the table above, please provide the protocol and the report for accelerated and long-term stability testing in **Annex V**. Also, please attach status report of any on-going stability studies in **Annex X**.

Was the stability testing done on a product of the same formula, same API source, manufactured o the same site and packed in the same packaging material as the product that will be supplied?

Yes	No		
If No, please d	escribe the differences:		

3.5.2 Stability studies of the API sources

Is there a sta	bility study in place	for the API source?		
Yes	No Ongoi	ng		
If No, please	describe further:			
	laration which states sources in Annex V	that stability studies have	been carried out, or are	in progress, with all
3.5.3 Shelf-	life			
Please choose	e the shelf-life as it a	ppears on packaging:		
2 years	3 years	4 years	5 years	
If No, please	describe further:			
Please specify	ove 30 °C – Protect	ns as described on the packfrom light"):	aging and based on sta	ability studies (e.g. "Do
Light				
Humidity				
Storage cond	itions			
Other (specif	y)			
Any special t (specify)	ransport conditions			
3.5.5 Clima		lowing ICH Climatic Zone	s:	
		_		
Zone I	Zone II	ZoneIII	Zone IVa	Zone IVb
Other:				

3.5.6 In-use stability data

In-use stability data (after reconstitution or dilution of product), indicate period (hours/days):	
Please indicate the in-use storage condition:	

For oral powder for suspension, powder for injection, injection for further dilution or multidose containers, please provide in-use stability data and storage conditions after reconstitution and/or dilution in **Annex Y**.

Section 4: Safety/efficacy and/or therapeutic equivalence ONLY fill in Section 4, if relevant for the product

(WHO Technical Report Series (TRS), No. 902, Annex 11/TRS No. 937, Annex 7 or recent version)

4.1 For innovator products

Please attach a summary of pharmacology, toxicology and efficacy of the product in **Annex Z**.

4.2 Therapeutic Equivalence

Demonstrated	Not demonstrated
Not relevant, please explain	

If demonstrated:

- Attach graphic/pictorial representation of summary study results in **Annex AA**.
- Provide a copy of the report of the proof of therapeutic equivalence (BE study) comparative dissolution profile, dissolution tests, and others, if any, in **Annex AB**.
- For bioequivalence studies, indicate the stringent regulatory authority (SRA)/ WHO/PIC/S inspection status of the Contract Research Organisation (CRO) (if the CRO has ever undergone inspections in relation to the current or other studies).
- Attach schematic representation of study design in **Annex AC**
- Attach study protocol summary in **Annex AD**

4.3 In vivo bioequivalence studies

Please specify, if any in vivo bioequivalence studies have been made:	
Study period	

4.3.1 In vivo test - reference product

If No, please specify

Generic name	
Dosage form	
Strength	
Brand/trade name	
Manufacturer name and site	
But land and	
Batch number	
Expiry date	
4.3.2 In vivo test - study protoco	1
Contract research organization (CRO) name:	
Country of study:	
Number of volunteers:	
Study design (describe in detail):	
Bio batch size:	
Bio batch number:	
Bio batch API(s) source(s):	
Study conclusion:	
4.4 Commonative tests	
4.4 Comparative tests	
	ion tests been made according to conditions described in WHO Technical Report Series, No. 937, or later)?
Yes No	200

4.4.1 Reference product - comparative tests

Generic name	
Dosage form	
Strength	
Brand/trade name	
Manufacturer name and site	
Batch number	
Expiry date	
Name and contact details of laboratory performing tests	
Study results	
F2 (similarity factor) value (standard 50–100%)	
F1 (difference factor) value:	
Study conclusion:	

4.5 Therapeutic equivalence – commitment

The product used in the therapeutic equivalence study is essentially the same as the one that will be supplied (same materials from the same suppliers, same formula and same manufacturing method):

If No, explain what the differences are and justify that	
the differences do not have any impact on the	
bioavailability	

Section 5: Signature and Commitment

Please refer to the separate Word file called 'Section 5 – Signature and Commitment'.

Section 6: Checklist for Annexes and attachments

Attachments or Annexes to the questionnaire should be in separate PDF files and should be named the Annex or Attachment name to facilitate review.

Please fill in this checklist, to ensure that all documentation necessary for the evaluation are attached:

- A. Formulation of the product (complete qualitative and quantitative composition including active ingredient(s) and excipients
- B. Description and composition of primary packaging materials including label mock ups
- C. Description and composition of secondary packaging materials
- D. Copy of product registration and market status- Licence No
- E. Certificate of pharmaceutical product (CPP) according to the WHO Certification Scheme (WHO Technical Report Series, No. 863. An earlier version is not acceptable)
- F. Recent as well as historical deficiency/acceptance letters issued by PQP/SRA in relation to the specific product dossier
- G. Copy of the relevant WHO Prequalification acceptance letter signed by your company
- H. WHO acceptance letter for product dossier review mentioning the WHO reference number assigned by WHO for this specific product
- I. Copy of primary and secondary packaging/label
- J. Patient information leaflet/package insert
- K. GMP certificate of the API manufacturer(s) from the country of origin
- L. Copy of the internal API(s) specification(s)
- M. Validated analytical methods if analytical methods for API are in-house analytical method, different from BP, USP and Ph.Int.
- N. Data on validation of the sterile aspects of the product including recent media fill validation data, as applicable
- O. Copy of the certificate(s) of analysis of the API from the API manufacturer as well as from the FPP manufacturer
- P 1. Copy of the certificate of suitability to the European Pharmacopoeia (CEP) and its annexes

- P 2. Attach a copy of the Technical file
- Q. Recent/valid GMP certificates/letter of compliance of the FPP manufacturer
- R. If in-house specification is different from BP, USP and Ph.Int., attach copy of the in-house finished product specifications and also validated analytical methods
- S. Copy of the certificate of analysis for the three last batches released
- T. Flow diagram and brief narrative describing the manufacturing and control process of this product with relevant parameters
- U. Data on validation of the sterile aspects of the product including recent media fill validation data as applicable
- V. Protocol and report for accelerated and long-term stability testing
- W. Declaration that stability studies have been done or are being done with all declared API sources
- X. Status report of any ongoing stability studies
- Y. In-use stability data and storage conditions after reconstitution for oral powder for suspension, powder for injection, or injection that may be further diluted, or multidose containers
- Z. Summary of pharmacology, toxicology and efficacy of the product
- AA. Graphic/pictorial representation of summary study results
- AB. Copy of the report of the proof of therapeutic equivalence (BE study) comparative dissolution profile, dissolution tests, and others if any
- AC. Schematic representation of study design
- AD. Study protocol summary
- AE. Copy of the power of attorney