

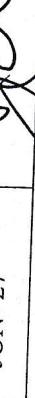
**DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH**

OGDA logo featuring a stylized 'G' and 'D' intertwined.

Authorized Personnel Only

Annexure - 2

FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.
NRA-MA-003/F02-01	01	JUN' 22	JUN 27		29.05.22	1 of 38

General Information

- 1) Changes in the name of the antigen**

a) Changes in the name of the antigen (Note: This change generally applies only to influenza vaccines)

- ## 2. Changes to an antigen manufacturing facility

- a) Replacement or addition of a manufacturing facility for the antigen bulk, or any intermediate of the antigen

- b) Deletion of a manufacturing facility or manufacturer of an antigen intermediate, or antigen bulk

1. 5 & 6 from Annexure-1

Submitted By (Sign & Seal)

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH

Authorized Personnel Only

30 MAY 2022

Annexure – 2

FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.
NRA-MA-013/F02-01	01	JUN' 22	JUN' 27		29.05.22	2 of 38

Section	Supporting Documents	Submitted?	Conditions	Met?	DGDA Screening			Assessment Outcome
		Yes			Yes	No	NA	

Manufacture

3. Change to the antigen fermentation, viral propagation or cellular propagation process

- a) A critical change (a change with high potential to have an impact on the quality of the antigen or final product) (for example, incorporation of disposable bioreactor technology)

1. 1, 2, 3, 4, 6, 7, 9 & 11 from Annexure-1 None

- b) A change with moderate potential to have an impact on the quality of the antigen or final product (for example, extension of the in vitro cell age beyond validated parameters)

1. 1, 2, 3, 4, 5, 6, 8 & 10 from Annexure-1 2 & 4 from Annexure-1

- c) A noncritical change with minimal potential to have an impact on the quality of the antigen or final product (for example, a change in harvesting and/or pooling procedures which does not affect the method of manufacture, recovery, intermediate storage conditions, sensitivity of detection of adventitious agents or production scale; or duplication of a fermentation train)

1. 1, 2, 3 & 4 from Annexure-1 1, 2, 3, 4, 5, 6, 9, 10 & 11 from Annexure-1

Submitted By (Sign & Seal)



30 MAY 2022

**DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH**

Authorized Personnel Only

Annexure - 2

FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27		29.05.22	3 of 38 

Manufacture

4. Change to the antigen purification process involving

- a) A critical change (a change with high potential to have an impact on the quality of the antigen or final product) (for example, a change that could potentially have an impact on the viral clearance capacity of the process or the impurity profile of the antigen)

b) A change with moderate potential to have an impact on the quality of the antigen or final product (for example, a change in the chemical separation method, such as from ion-exchange HPLC to reverse phase HPLC)

1. <input type="checkbox"/> 1, 2, 5-7, 10, 11 from Annexure-1 c) A noncritical change with minimal potential to have an impact on the quality of the antigen or final product (for example, addition of an in-line filtration step equivalent to the approved filtration step)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
1. <input type="checkbox"/> 1 & 2 from Annexure-1	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Submitted By (Sign & Seal)

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH



30 MAY 2022

Authorized Personnel Only

COPY

Annexure – 2

FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27		29.05.22	4 of 38

Section	Supporting Documents	Submitted?	Conditions	Met?	DGDA Screening		
					Yes	No	NA

Manufacture

5. Change in scale of the manufacturing process

- a) at the fermentation, viral propagation or cellular propagation stage

1.	2, 3, 5-7, 9, 11 from Annexure-1	<input type="checkbox"/>					
----	----------------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

- b) at the purification stage

1.	2, 5-7, 9, 11 from Annexure-1	<input type="checkbox"/>					
----	-------------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

6. Change in supplier of raw materials of biological origin (for example, fetal calf serum, human serum albumin, trypsin)

1. 4, 8, 12, 13 from Annexure-1

1.	4, 7, 12, 13 from Annexure-1	<input type="checkbox"/>					
1.	8, 10, 11, 14 from Annexure-1	<input type="checkbox"/>					

Submitted By (Sign & Seal)

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH



30 MAY 2022

Authorized Personnel Only

4000

Annexure - 2

FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines					
Form No.	Version No.	Effective Date	Review Date	Authorized by	Date
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27		29.05.22
Ministry of Health & Family Welfare		DGDA		Page No. 5 of 36	
ADMINISTRATIVE INFORMATION		ISSUED BY:		ISSUE DATE:	
Supporting Documents		Submitted?		Met?	
		Yes	No	NA	
				DGDA Screening	
				Assessment Outcome	
Manufacture					
9. Change to the cell banks					
a) generation of a new MCB					
1. 1, 2, 5 7 – 9 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					
b) generation of a new working cell bank (WCB)					
1. 1 & 2 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 2 – 4 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					
c) change in cell bank storage site					
1. 10 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 7 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					
10. Change to the seed lots					
a) generation of a new MSL					
1. 1, 5 – 9, 11 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					
b) generation of a new working seed lot (WSL)					
1. 5 – 9, 11 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 2 – 4 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					
Submitted By (Sign & Seal)					

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH



0 MAY 2022
 DGDA * 2022
 MINISTRY OF HEALTH AND FAMILY WELFARE
 DIRECTORATE GENERAL OF DRUG ADMINISTRATION
 Authorised Personnel Only

Annexure – 2

FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27	<i>M. Hossain</i>	29-05-22	6 of 38

Section	Supporting Documents	Submitted?			Met?	DGDA Screening	Assessment Outcome
		Yes	No	NA			
Manufacture							
c)	generation of a new WSL by extending the passage level of an existing WSL beyond an approved level						
1.	5 – 7, 11 from Annexure-1	<input type="checkbox"/>					
d)	change in seed lot storage site						
1.	10 from Annexure-1	<input type="checkbox"/>					
11. Change in cell bank/seed lot testing/storage site							
1.	10 from Annexure-1	<input type="checkbox"/>					
12. Change in cell bank/seed lot qualification protocol							
1.	3 & 4 from Annexure-1	<input type="checkbox"/>					
Submitted By (Sign & Seal)							

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH



30 MAY 2022
 DGDA

Authorized Personnel Only



Annexure – 2

FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27		29.05.22

Section	Supporting Documents	Submitted?	Conditions	Met?	DGDA Screening		
					Yes	No	NA
Manufacture							

13. Change in equipment used in the antigen manufacturing process

- a) introduction of new equipment with different operating principles and different product contact material

1.	1 – 6 from Annexure-1	<input type="checkbox"/>					
b)	introduction of new equipment with the same operating principles but different product contact material						
1.	1, 3 – 6 from Annexure-1	<input type="checkbox"/>					
c)	introduction of new equipment with different operating principles but the same product contact material						
1.	1 – 3, 5, 6 from Annexure-1	<input type="checkbox"/>					
d)	replacement of equipment with equivalent equipment (including filter)						
1.	1, 5 – 7 from Annexure-1	<input type="checkbox"/>					
Submitted By (Sign & Seal)							

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH



Authorized Personnel Only

Annexure – 2

FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27		29.05.22	8 of 38

Section	Supporting Documents	Submitted?			Met?	DGDA Screening
		Yes	No	NA		
						Assessment Outcome

Manufacture

14. Change in specifications for the materials

- a) raw materials/intermediates: widening of the approved specification limits for starting materials/intermediates, which may have a significant effect on the overall quality of the antigen and/or final product and are not changes to the cell banks or seed lots

1.	1,3 – 6, 8, 11 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
----	--------------------------------	--------------------------	--------------------------	--------------------------	------	--------------------------	--------------------------	--------------------------

- b) raw materials/intermediates: narrowing of the approved specification limits for starting materials/intermediates

1.	1, 3 – 7 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1-4 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
----	--------------------------	--------------------------	--------------------------	--------------------------	---------------------	--------------------------	--------------------------	--------------------------

Submitted By (Sign & Seal)

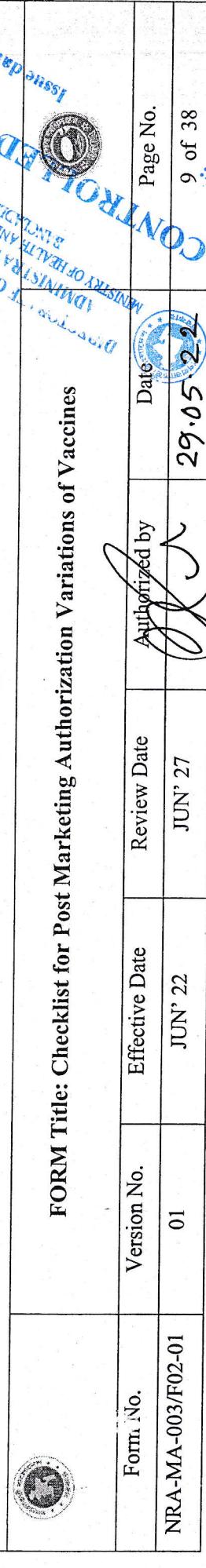
CONTROLD DOCUMENT
ISSUED DATE: 20 MAY 2022
ADMINISTRATIVE BUREAU
DEPARTMENT OF PHARMACEUTICALS
MINISTRY OF HEALTH AND FAMILY WELFARE
DRUGS, MEDICAL DEVICES & COSMETICS

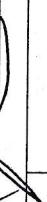
DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH

30 MAY 2022

	
<i>FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines</i>	

Annexure - 2

	
ISSUE DATE: 29.05.2022	
EXPIRY DATE: 29.05.2022	
CONTROLD COPY	
MINISTRY OF HEALTH AND FAMILY WELFARE	
MINISTRY OF DRUG ADMINISTRATION	
Authorized Personnel Only	

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27		29.05.22	9 of 38

Section	Supporting Documents	Submitted?	Conditions	Met?	DGDA Screening		
					Yes	No	NA
15. Change to in-process tests and/or acceptance criteria applied during manufacture of the antigen							
a) narrowing of in-process limits	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 3, 5, 8, 9 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						
b) addition of new in-process test and limits	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 4, 5, 10, 11 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						
c) deletion of a non-significant in-process test	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 4-6 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						
d) widening of the approved in-process limits	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 2 - 6, 8, 10, 11 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						
e) deletion of an in-process test which may have a significant effect on the overall quality of the antigen	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> None <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						
f) addition or replacement of an in-process test as a result of a safety or quality issue	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> None <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						
16. Change in in-process controls testing site							
1. 12 from Annexure-1	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 3 - 5, 7, 8 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						
Submitted By (Sign & Seal)							

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH

30 MAY 2022
 Issue date:
 AUTHORIZED PERSONNEL ONLY

Annexure – 2

FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27		29.05.22	10 of 38

Section	Supporting Documents	Submitted?	Conditions	Met?	DGDA Screening		
					Yes	No	NA

Control of Antigen

17. Change affecting the quality control (QC) (release and stability) testing of the antigen

- a) transfer of the QC testing activities for a non-pharmacopeial assay to a new company not approved in the current MA or license

1. 1 & 2 from Annexure-1 1 – 3 Annexure-1

- b) transfer of the QC testing activities for a pharmacopeial assay to a new company not approved in the current MA or license

1. 1 & 2 from Annexure-1 1 from Annexure-1

18. Change in the specification used to release the antigen

45. deletion of a test

1. 1, 5, 8 from Annexure-1 None

46. addition of a test

1. 1 – 3, 5 from Annexure-1 1 – 3 from Annexure-1

c) replacement of an analytical procedure

1. 1 – 5 from Annexure-1 None

Submitted By (Sign & Seal)

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH



30 MAY 2022

Authorized Personnel Only

Annexure – 2

FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27		29-05-22	11 of 38

Section	Supporting Documents	Submitted?	Conditions	Met?	DGDA Screening		
					Yes	No	NA

Control of Antigen

d) change in animal species/strains for a test (for example, new species/strains, animals of different age, new supplier where genotype of the animal cannot be confirmed)

1. 6 & 7 from Annexure-1 None

e) minor changes to an approved analytical procedure

1. 1, 4, 5 from Annexure-1 4 – 7 from Annexure-1

f) change from an in-house analytical procedure to a recognized compendial/pharmacopoeial analytical procedure

1. 1 – 3 from Annexure-1 4, 7 from Annexure-1

g) widening of an acceptance criterion

1. 1, 5, 8 from Annexure-1 None

h) narrowing of an acceptance criterion

1. 1 from Annexure-1 1, 8, 9 from Annexure-1

Submitted By (Sign & Seal)

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH



30 MAY 2022
 Authorized Personnel Only

Annexure - 2

FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27		29.05.22	12 of 38

Section	Supporting Documents	Submitted?	Conditions	Met?	Assessment Outcome		
					Yes	No	NA

Reference Standards or Materials

19. Qualification of a new reference standard against a new primary international standard

1.	1 & 2 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
----	-----------------------	--------------------------	--------------------------	--------------------------	------	--------------------------	--------------------------	--------------------------

20. Change in the reference standard from in-house (no relationship with international standard) to pharmacopoeial or international standard

1.	1 & 2 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
----	-----------------------	--------------------------	--------------------------	--------------------------	------	--------------------------	--------------------------	--------------------------

21. Qualification of a new lot of reference standard against the approved reference standard (including qualification of a new lot of a secondary reference standard against the approved primary standard)

1.	1, 2 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
----	----------------------	--------------------------	--------------------------	--------------------------	-------------------	--------------------------	--------------------------	--------------------------

22. Change to reference standard qualification protocol

1.	3, 4 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
----	----------------------	--------------------------	--------------------------	--------------------------	------	--------------------------	--------------------------	--------------------------

23. Extension of reference standard shelf-life

1.	5 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
----	-------------------	--------------------------	--------------------------	--------------------------	-------------------	--------------------------	--------------------------	--------------------------

Submitted By (Sign & Seal)

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH

MAY 2022

Authorized Personnel Only

Annexure – 2

FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27	<i>[Signature]</i>	29.05.22	13 of 38

Section	Supporting Documents	Submitted?	Conditions	Met?	Assessment Outcome		
					Yes	No	NA

Container Closure System

24. Change in the primary container closure system(s) for the storage and shipment of the antigen

1. 1 - 5 from Annexure-1 1

25. Change in the specification of the primary container closure system for the antigen

- a) deletion of a test

1. 1, 2 from Annexure-1 1, 2 from Annexure-1

- b) addition of a test

1. 1 – 3 from Annexure-1 3

- c) replacement of an analytical procedure

1. 1 – 3 from Annexure-1 6, 7 from Annexure-1

- d) minor changes to an analytical procedure

1. 1, 3 from Annexure-1 4 – 7 from Annexure-1

- e) widening of an acceptance criterion

1. 1 – 2 from Annexure-1 None

- f) narrowing of an acceptance criterion

1. 1 from Annexure-1 8 from Annexure-1

Submitted By (Sign & Seal)

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH

Authorized Personnel Only

30 MAY 2022

Annexure – 2

FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

		Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.	
		NRA-MA-003/F02-01	01	JUN' 22	JUN' 27	<i>[Signature]</i>	29-05-22	14 of 38	
		Supporting Documents		Submitted?	Conditions	Met?	DGDA Screening		
				<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> NA	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> NA
								Assessment Outcome	

Stability

26. Change in the shelf-life/hold-time for the antigen or for a stored intermediate of the antigen

a) Extension

- | | | | | | | |
|--------------------------|--------------------------|--------------------------|-----------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 – 5 from Annexure-1 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|-----------------------|--------------------------|--------------------------|--------------------------|

1. 1 – 5 from Annexure-1

- | | | | | | | |
|--------------------------|--------------------------|--------------------------|-------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6 from Annexure-1 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|-------------------|--------------------------|--------------------------|--------------------------|

1. 1 – 5 from Annexure-1

- | | | | | | | |
|--------------------------|--------------------------|--------------------------|-------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 from Annexure-1 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|-------------------|--------------------------|--------------------------|--------------------------|

- | | | | | | | |
|--------------------------|--------------------------|--------------------------|------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | None | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|------|--------------------------|--------------------------|--------------------------|

- | | | | | | | |
|--------------------------|--------------------------|--------------------------|-------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2 from Annexure-1 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|-------------------|--------------------------|--------------------------|--------------------------|

1. 1, 2, 4, 6 from Annexure-1

Submitted By (Sign & Seal)

- b) reduction
- c) addition of test(s) into the post-approval stability protocol

27. Change in the post-approval stability protocol of the antigen

- a) significant change to the post-approval stability protocol or stability commitment, such as deletion of a test, replacement of an analytical procedure or change in storage temperature

- | | | | | | | |
|--------------------------|--------------------------|--------------------------|-----------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1 – 6 from Annexure-1 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|-----------------------|--------------------------|--------------------------|--------------------------|

- | | | | | | | |
|--------------------------|--------------------------|--------------------------|----------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4, 6 from Annexure-1 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|----------------------|--------------------------|--------------------------|--------------------------|

- | | | | | | | |
|--------------------------|--------------------------|--------------------------|----------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1, 2, 4, 6 from Annexure-1 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--------------------------|--------------------------|--------------------------|----------------------------|--------------------------|--------------------------|--------------------------|

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH



MAY 2022

Authorized Personnel Only

Annexure - 2

FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines



Form No.	Version No.	Effective Date	Review Date	Authorized by	Date
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27		29.05.22 15 of 38

Section	Supporting Documents	Submitted?	Conditions	Met?	DGDA Screening		
					Yes	No	NA
Stability							

d) deletion of time point(s) from the post-approval stability protocol beyond the approved shelf-life

1. 4, 6 from Annexure-1 None

e) deletion of time point(s) from the post-approval stability protocol within the approved shelf-life

1. 4, 6 from Annexure-1 3 from Annexure-1

28. Change in the storage conditions for the antigen, involving

a) addition or change of storage condition for the antigen (for example, widening or narrowing of a temperature criterion)

1. 1 – 4 from Annexure-1 1, 2 from Annexure-1

Submitted By (Sign & Seal)

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH



30 MAY 2022

Authorized Personnel Only

Annexure - 2

FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27		29-05-22	16 of 38

Section	Supporting Documents	Submitted?	Conditions	Met?	DGDA Screening						
					Yes	No	NA				
Changes to Final Product											
29. Change in the description or composition of the final product											
a)	addition of a dosage form or change in the formulation (for example, lyophilized powder to liquid, change in the amount of excipient or new diluent for lyophilized product)										
	Note: Change in formulation does not include changes in antigen(s) or adjuvants. A change in antigen(s) or adjuvant(s) requires the filing of a new application for MA or licensure. MA holders are encouraged to contact the NRA for further guidance.										
1.	1 – 10 from Annexure-1	<input type="checkbox"/>									
b)	change in fill volume (that is, same concentration, different volume)										
1.	1, 5, 7, 10 from Annexure-1	<input type="checkbox"/>									
c)	addition of a new presentation (for example, addition of a new prefilled syringe where the approved presentation is a vial for a vaccine in a liquid dosage form)										
1.	1, 5, 7 – 10 from Annexure-1	<input type="checkbox"/>									
Submitted By (Sign & Seal)											

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH



30 MAY 2022
Authorized Personnel Only

Annexure - 2



FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27		29-05-22

Section	Supporting Documents	Submitted?	Conditions	Met?	DGDA Screening		
					Yes	No	NA
					ISSUED DATE	Page NO.	
					17 of 38		

Description and composition of the final product change to an adjuvant

30. Change involving an approved chemical/synthetic adjuvant

- a) change in supplier of a chemical/ synthetic adjuvant

1.	4, 5, 10, 11 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1-3 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
----	------------------------------	--------------------------	--------------------------	--------------------------	---------------------	--------------------------	--------------------------	--------------------------
- b) change in manufacture of a chemical/synthetic adjuvant

1.	3 – 5, 10, 11 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
----	-------------------------------	--------------------------	--------------------------	--------------------------	------	--------------------------	--------------------------	--------------------------
- c) change in specification of a chemical/synthetic adjuvant (including tests and/or the analytical procedures)

1.	7 – 11 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1 & 3 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
----	------------------------	--------------------------	--------------------------	--------------------------	-----------------------	--------------------------	--------------------------	--------------------------

31. Change involving a biological adjuvant

- a) change in supplier of a biological adjuvant

1.	1 – 7, 10 – 13 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
----	--------------------------------	--------------------------	--------------------------	--------------------------	------	--------------------------	--------------------------	--------------------------
- b) change in manufacture of a biological adjuvant

1.	1 – 7, 10 – 12 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
----	--------------------------------	--------------------------	--------------------------	--------------------------	-------------------	--------------------------	--------------------------	--------------------------
- c) change in specification of a biological adjuvant (including tests and/or the analytical procedures)

1.	6 – 10 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1 & 3 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
----	------------------------	--------------------------	--------------------------	--------------------------	-----------------------	--------------------------	--------------------------	--------------------------

Submitted By (Sign & Seal)

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH

30 MAY 2022

Authorized Personnel Only

Annexure – 2

FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27		29-05-22	18 of 38

Section	Supporting Documents	Submitted?		Conditions	Met?	DGDA Screening	Assessment Outcome
		Yes	No				
Description and composition of the final product: change to a diluent							
32. Change to the diluent							
a) change in manufacturing process							
1. <input type="checkbox"/> 1 – 5 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1 & 3 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>							
b) replacement of or addition to the source of a diluent							
1. <input type="checkbox"/> 1 – 5 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1 & 3 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>							
c) change in facility used to manufacture a diluent (same company)							
1. <input type="checkbox"/> 1, 3, 5 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1 & 2 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>							
d) addition of a diluent filling line							
1. <input type="checkbox"/> 1, 3, 5 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1, 2, 4 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>							
e) addition of a diluent into an approved filling line							
1. <input type="checkbox"/> 1, 3, 5 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1, 2 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>							
f) deletion of a diluent							
1. <input type="checkbox"/> None <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> None <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>							
Submitted By (Sign & Seal)							

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH

NAY 2022
Authorized Personnel Only

Annexure – 2

FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

		Form No.			Version No.	Effective Date	Review Date	Authorized by	Date	Page No.
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27	<i>[Signature]</i>	29.05.22				19 of 38	

Section	Supporting Documents	Submitted?	Conditions	Met?	DGDA Screening			Assessment Outcome
					Yes	No	NA	

Manufacture (Final Product)

33. Change involving a final product manufacturer/ manufacturing facility

- a) replacement or addition of a manufacturing facility for the final product (including formulation/ filling and primary packaging)

1. 1 – 8 from Annexure-1 1-5 from Annexure-1

b) replacement or addition of a secondary packaging facility, a labelling/storage facility or a distribution facility

1. 1– 3 from Annexure-1 2, 3 from Annexure-1

c) deletion of a final product manufacturing facility

1. None None

34. Change in the final product manufacturing process

- a) scale-up of the manufacturing process at the formulation/filling stage

1. 1 – 6 from Annexure-1 1 – 4 from Annexure-1

b) addition or replacement of equipment (for example, formulation tank, filter housing, filling line and head, and lyophilizer); see change 13 above

1. 1 – 9 from Annexure-1 5 from Annexure-1

c) addition of a new scale bracketed by the approved scales or scale down of the manufacturing process

1. 1 & 4 from Annexure-1 1 – 4 from Annexure-1

Submitted By (Sign & Seal)

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH

* Authorized Personnel Only

30 MAY 2022

Annexure - 2



FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27	<i>M.J.</i>	29-05-22	20 of 38

Section	Supporting Documents	Submitted?	Conditions	Met?	DGDA Screening			Assessment Outcome
					Yes	No	NA	

Manufacture (Final Product)

- d) addition of a new step (for example, filtration)

1. 1 – 6 from Annexure-1 3 from Annexure-1

35. Change in the controls (in-process tests and/or acceptance criteria) applied during the manufacturing process or on intermediates

- a) narrowing of in-process limits

1. 1, 5 from Annexure-1 2, 3, 7 from Annexure-1

- b) addition of new in-process test and limits

1. 1 – 6, 8 from Annexure-1 2, 3, 8, 9 from Annexure-1

- c) deletion of a non-significant in-process test

1. 1, 5, 7 from Annexure-1 2 – 4 from Annexure-1

- d) widening of the approved in-process limits

1. 1 – 6, 8, 9 from Annexure-1 1 – 3 from Annexure-1

- e) deletion of an in-process test which may have a significant effect on the overall quality of the final product

1. 1, 5, 6, 8 from Annexure-1 None

Submitted By (Sign & Seal)

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH

Authorized Personnel Only

Annexure - 2



FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.
NR-A-MA-003/F02-01	01	JUN' 22	JUN' 27	<i>JAS</i>	29.05.22	21 of 38

Section	Supporting Documents			Submitted?	Conditions	Met?	DGDA Screening	Assessment Outcome
	Yes	No	NA					
Manufacture (Final Product)								
f) addition or replacement of an in-process test as a result of a safety or quality issue								
1. 1 – 6, 8 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) addition or replacement of an in-process test as a result of a safety or quality issue								
1. 1 – 6, 8 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36. Change in in-process controls testing site								
1. 10 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1 – 3, 5, 6 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
37. Change in the specification used to release the excipient								
a) deletion of a test								
1. 1, 3 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5,8 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) addition of a test								
1. 1 – 3 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) replacement of an analytical procedure								
1. 1, 2 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1 – 3 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Submitted By (Sign & Seal)								

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH



30 MAY 2022
 Authorised Personnel Only

Annexure – 2

FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.	
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27		29.05.22	29 of 38	
Supporting Documents		Submitted?	Conditions	Met?	DGDA Screening		
		Yes	No	NA	Yes	No	NA
d) minor changes to an approved analytical procedure							
1.	1, 2 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	None	<input type="checkbox"/>	<input type="checkbox"/>
e) change from an in-house analytical procedure to a recognized compendial analytical procedure							
1.	1, 2 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	None	<input type="checkbox"/>	<input type="checkbox"/>
f) widening of an acceptance criterion							
1.	1, 3 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	None	<input type="checkbox"/>	<input type="checkbox"/>
g) narrowing of an acceptance criterion							
1.	1 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3, 4, 6, 7 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>
38. Change in the source of an excipient from a vegetable or synthetic source to a human or animal source that may pose a TSE or viral risk							
1.	2 – 7 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	None	<input type="checkbox"/>	<input type="checkbox"/>
39. Change in the source of an excipient from a TSE risk (for example, animal) source to a vegetable or synthetic source							
1.	1, 3, 5, 6 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	None	<input type="checkbox"/>	<input type="checkbox"/>
40. Replacement in the source of an excipient from a TSE risk source to a different TSE risk source							
1.	2 – 7 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5, 6 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>
Submitted By (Sign & Seal)							

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH

Authorised Personnel Only



Annexure - 2

FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27		29.05.22	23 of 38
Supporting Documents		Submitted?	Conditions	Met?		
		Yes	No	NA		
Manufacture (Final Product)						
41. Change in manufacture of a biological excipient						
1. 2 – 7 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> None						
42. Change in supplier for a plasma derived excipient (for example, human serum albumin						
1. 1 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 3, 4, 6, 7 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						
43. Change in supplier for an excipient of non-biological origin or of biological origin (excluding plasma-derived excipient)						
1. 2, 3, 5 – 7 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1, 5, 6 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						
44. Change in excipient testing site						
1. 10 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						
Submitted By (Sign & Seal)						



Issue date:

COPY

30 MAY 2022

**DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH**

Authorized Personnel Only

Annexure - 2

FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Annexure – 2		FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines				Page No.	
						24 of 38	
Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.	
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27		29.05.22	24 of 38	
Section	Supporting Documents	Submitted?	Conditions	Met?	Assessment Outcome		
		Yes				No	NA
Control of Final Product							
45. Change affecting the QC testing of the final product (release and stability)							
a) transfer of the QC testing activities for a non-pharmacopoeial assay (in-house) to a new company or to a different site within the same company							
1. 1, 2 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) transfer of the QC testing activities for a pharmacopoeial assay to a new company							
1. 1, 2 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 1 Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Change in the specification used to release the final product							
a) for products or components subject to terminal sterilization by heat (for example, diluent for reconstitution of lyophilized vaccines), replacing the sterility test with process parametric release							
1. 1, 2, 6, 8, 10 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) deletion of a test							
1. 2, 9, 10 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) addition of a test							
1. 2 – 4, 8 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 1, 2, 9 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Submitted By (Sign & Seal)							

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH

Authorized Personnel Only

Annexure – 2



FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27		29.05.22	25 of 38

Section	Supporting Documents	Submitted?			Met?	DGDA Screening	Assessment Outcome
		Yes	No	NA			

Control of Final Product

d) change in animal species/strains for a test (for example, new species/strains, animals of different ages, and/or new supplier where genotype of the animal cannot be confirmed)

1. 5, 11 from Annexure-1 1 from Annexure-1

e) replacement of an analytical procedure

1. 2 – 4, 7, 8 from Annexure-1 None

f) minor changes to an approved analytical procedure

1. 3, 8 from Annexure-1 3 – 6 from Annexure-1

g) change from an in-house analytical procedure to a recognized compendial analytical procedure
 1. 2 – 4, from Annexure-1 3, 6 from Annexure-1

h) widening of an acceptance criterion

1. 2, 8, 10 from Annexure-1 None

i) narrowing of an acceptance criterion

1. 2 from Annexure-1 7 – 10 from Annexure-1

Submitted By (Sign & Seal)

30 MAY 2022

CONTROLEE COPY

MINISTRY OF HEALTH AND FAMILY WELFARE

DGDA

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH

Authorized Personnel Only

Annexure – 2



FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines



Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27	<i>[Signature]</i>	29.03.22	26 of 38

Section	Supporting Documents	Submitted?	Conditions	Met?	DGDA Screening						
					Yes	No	NA				
Reference Standards or Materials											
47. Qualification of a reference standard against a new primary international standard											
1.	1, 2 from Annexure-1	<input type="checkbox"/>									
48. Change of the reference standard from in-house (no relationship with international standard) to pharmacopoeial or international standard											
1.	1, 2 from Annexure-1	<input type="checkbox"/>									
49. Qualification of a new lot of reference standard against the approved reference standard (including qualification of a new lot of a secondary reference standard against the approved primary standard)											
1.	2 from Annexure-1	<input type="checkbox"/>									
50. Change to the reference standard qualification protocol											
1.	3, 4 from Annexure-1	<input type="checkbox"/>									
51. Extension of the shelf-life of the reference standard											
1.	5 from Annexure-1	<input type="checkbox"/>									
Submitted By (Sign & Seal)											



[Signature]

<p style="text-align

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH

Authorized Personnel Only

Annexure – 2



FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Form No.	Version No.	Effective Date	Review Date	Authorized By	Date	Page No.
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27		29.05.22	27 of 38

Section	Supporting Documents	Submitted?	Conditions	Met?	DGDA Screening		
					Yes	No	NA

Container Closure System

52. Modification of a primary container closure system (for example, new coating, adhesive, stopper or type of glass)

Note: The addition of a new container closure system (for example, addition of a pre-filled syringe where the currently approved presentation is only a vial) is considered a change in presentation

1. 1-7 from Annexure-1

53. Change from a reusable container to a disposable container with no changes in product contact material (for example, change from reusable pen to disposable pen)

1. 1, 3, 6 from Annexure-1

54. Deletion of a container closure system

1. 1 from Annexure-1

55. Change in the supplier for a primary container closure component

a) replacement or addition of a supplier

1. 4, 5 from Annexure-1

b) deletion of a supplier

1. None

Submitted By (Sign & Seal)

**DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH**

Authorized Personnel Only

Annexure - 2



FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines					
Form No.	Version No.	Effective Date	Review Date	Authorized by	Date
NRA-MA-003/F02-01	01	JUN' 22	JUN '27		29.05.22
					Page No. 28 of 38

Section	Supporting Documents	Submitted?			Conditions	Met?	DGDA Screening
		Yes	No	NA			
							Assessment Outcome
Container Closure System							
56. Change in the specification used to release a primary container closure component or functional secondary container closure component							
a) deletion of a test							
1. 1, 2 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1, 2 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) addition of a test							
1. 1, 2 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) replacement of an analytical procedure							
1. 1-3 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6,7 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) minor changes to an analytical procedure							
1. 1-3 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4-7 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) widening of an acceptance criterion							
1. 1-2 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) narrowing of an acceptance criterion							
1. 1 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Submitted By (Sign & Seal)							

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH

Authorized Personnel Only

Annexure – 2



FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27		29.05.22	29 of 38

Section	Supporting Documents	Submitted?	Conditions	DGDA Screening		
				Met?	Assessment Outcome	
				Yes	No	NA

Stability

57. Change in the shelf-life of the final product

a) extension (includes extension of shelf-life of the final product as packaged for sale, and hold-time after opening and after dilution or reconstitution)

1. 1 – 5 from Annexure-1 None

b) reduction (includes reduction as packaged for sale, after opening, and after dilution or reconstitution)

1. 1 – 5 from Annexure-1 None

58. Change in the post-approval stability protocol of the final product

a) major change to the post-approval stability protocol or stability commitment, such as deletion of a test, replacement of an analytical procedure or change in storage temperature

1. 1 – 6 from Annexure-1 None

b) addition of time point(s) into the post-approval stability protocol

1. 4, 6 from Annexure-1 None

c) addition of test(s) into the post-approval stability protocol

1. 4, 6 from Annexure-1 1 from Annexure-1

Submitted By (Sign & Seal)

CONTROLLED COPY
ADMINISTRATIVE APPROVAL
MINISTRY OF HEALTH & FAMILY WELFARE
D.G.D.A. DRUGS
ISSUE DATE:
30 MAY 2022

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH

Authorized Personnel Only

Annexure – 2

FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27		29-05-22 30 of 38

Section	Supporting Documents	Submitted?	Conditions	Met?	DGDA Screening		
					Yes	No	NA

Stability

d) deletion of time point(s) from the post-approval stability protocol beyond the approved shelf-life

1. 4, 6 from Annexure-1 None

e) deletion of time point(s) from the post-approval stability protocol within the approved shelf-life

1. 4, 6 from Annexure-1 2 from Annexure-1

f) replacement of the sterility testing by the container/closure system integrity testing

1. 1, 2, 4, 6 from Annexure-1 3 from Annexure-1

59. Change in the labelled storage conditions for the final product or the diluted or reconstituted vaccine

a) addition or change of storage condition(s) for the final product, or for diluted or reconstituted vaccine (for example, widening or narrowing of a temperature criterion, or addition of or change to controlled temperature chain conditions)

1. 1 – 4, 6 from Annexure-1 None

b) addition of a cautionary statement (for example, "Do not freeze")

1. 1, 2, 4, 5 from Annexure-1 None

Submitted By (Sign & Seal)



**DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH**

Authorized Personnel Only

Annexure - 2



FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27	<i>[Signature]</i>	29.05.22	31 of 38

Section	Supporting Documents	Submitted?	Conditions	Met?	DGDA Screening		
					Assessment Outcome		
					Yes	No	NA
MAY 2022							

Product Labelling Information Changes

- | | | | | | |
|---|--------------------------|--------------------------|--------------------------|--------------------------|------|
| a) Addition of an adverse event identified as consistent with a causal association with immunization with the vaccine concerned | | | | | |
| 1. 1 from Annexure-1 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | None |
| b) Change in the frequency of occurrence of a given adverse reaction | | | | | |
| 1. 1 from Annexure-1 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | None |
| c) Addition of a contraindication or warning (such as identification of a specific subpopulation as being at greater risk, such as individuals with a concomitant condition or taking concomitant medicines, or a specific age group). These changes may include the provision of recommended risk-management actions (for example, required testing prior to vaccination, specific monitoring and ensuring patient awareness of certain risks) | | | | | |

Submitted By (sign & seal)

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH

Authorized Personnel Only

Annexure – 2



FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27		29.05.22	32 of 38

Section	Supporting Documents	Submitted?	Conditions	Met?	DGDA Screening			Assessment Outcome
					Yes	No	NA	
1.	1 from Annexure-1	<input type="checkbox"/>						
b)	Change in the frequency of occurrence of a given adverse reaction							
1.	1 from Annexure-1	<input type="checkbox"/>						
c)	Addition of a contraindication or warning (such as identification of a specific subpopulation as being at greater risk, such as individuals with a concomitant condition or taking concomitant medicines, or a specific age group). These changes may include the provision of recommended risk management actions (for example, required testing prior to vaccination, specific monitoring following vaccination and ensuring patient awareness of certain risks)							
1.	1 from Annexure-1	<input type="checkbox"/>						
d)	Strengthening or clarification of product labelling information text relating to contraindications, warnings, precautions and adverse reactions							
1.	1 from Annexure-1	<input type="checkbox"/>						

Submitted By (Sign & Seal)

Licensed by:



*ISSUE DATE: 30 MAY 2022
COPY*

Urgent Product Labelling Information Changes

a) Addition of an adverse event identified as consistent with a causal association with immunization with the vaccine concerned

1. 1 from Annexure-1

b) Change in the frequency of occurrence of a given adverse reaction

1. 1 from Annexure-1

c) Addition of a contraindication or warning (such as identification of a specific subpopulation as being at greater risk, such as individuals with a concomitant condition or taking concomitant medicines, or a specific age group). These changes may include the provision of recommended risk management actions (for example, required testing prior to vaccination, specific monitoring following vaccination and ensuring patient awareness of certain risks)

1. 1 from Annexure-1

d) Strengthening or clarification of product labelling information text relating to contraindications, warnings, precautions and adverse reactions

1. 1 from Annexure-1

*ISSUE DATE: 30 MAY 2022
COPY*

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH

Authorized Personnel Only

Annexure – 2



FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

[Signature]

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27	<i>[Signature]</i>	29.05.22	33 of 38

Section	Supporting Documents	Submitted?	Conditions	Met?	DGDA Screening																																				
					Yes	No	NA	Assessment Outcome																																	
					ISSUED DATE:	ISSUE DATE:																																			
Administrative Product Labelling Information Changes																																									
<p>a) Change in the name of the MA holder and/or manufacturer (such as change of name due to a merger)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">1.</td> <td style="width: 10%;">1 from Annexure-1</td> <td style="width: 10%; text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td colspan="7" style="text-align: center;">b) Change in the trade name of the vaccine</td> </tr> <tr> <td colspan="7" style="text-align: center;"> </td> </tr> <tr> <td style="width: 10%;">1.</td> <td style="width: 10%;">1 from Annexure-1</td> <td style="width: 10%; text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td colspan="7" style="text-align: center;">Submitted By (Sign & Seal)</td> </tr> </table>							1.	1 from Annexure-1	<input type="checkbox"/>	b) Change in the trade name of the vaccine														1.	1 from Annexure-1	<input type="checkbox"/>	Submitted By (Sign & Seal)														
1.	1 from Annexure-1	<input type="checkbox"/>																																							
b) Change in the trade name of the vaccine																																									
1.	1 from Annexure-1	<input type="checkbox"/>																																							
Submitted By (Sign & Seal)																																									

Ministry of Health and Family Welfare
Directorate General of Drug Administration

[Signature]

Submitted By (Sign & Seal)



DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH

Annexure - 2

FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Form No.	Version No.	Effective Date	Review Date	Authorized By	Date	Page No.
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27		29.05.22	34 of 38

Section	Supporting Documents	Submitted?	Conditions	Met?	DGLA Screening		
					Yes	No	NA

Changes of Strains of Influenza Vaccine

- a) Annual changes in the vaccine strain composition

1.	1-6 from Annexure-1	<input type="checkbox"/>					
Submitted By (Sign & Seal)							

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH

Authorized Personnel Only

Annexure – 2

FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines	
	

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27		29.05.22	35 of 38

Section	Supporting Documents	Submitted?	Conditions	Met?	DGDA Screening		
					Yes	No	NA
Safety and Efficacy Changes							
a) addition of a new indication (such as prevention of a previously unspecified disease)							
1. 1-4 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> None							
b) modification of an approved indication (such as expansion of the age of use or restriction of an indication based on clinical studies demonstrating lack of efficacy)							
1. 1-4 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> None							
c) addition of a new vaccination regimen (such as addition of accelerated vaccination regimens),							
1. 1-4 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> None							
d) addition or modification of the existing vaccination regimen (such as addition of a booster dose or modification of the recommended time interval for booster vaccinations)							
1. 1-4 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> None							
e) Change to add information on shedding and transmission							
1. 1-4 from Annexure-1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> None							
Submitted By (Sign & Seal)							

CONTROLED COPY
ISSUED DATE: 30 MAY 2022

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH

Authorized Personnel Only

Annexure - 2



FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27		29-05-22	36 of 38

Section	Supporting Documents	Submitted?			Conditions	Met?	DGDA Screening	Assessment Outcome									
		Yes	No	NA													
Safety and Efficacy Changes																	
<p>f) Change to the use in specific at-risk groups (such as addition of information on use in pregnant women or immunocompromised patients)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">1.</td> <td style="width: 90%;">1-4 from Annexure-1</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> None</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>									1.	1-4 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.	1-4 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
<p>g) Change to add information on co-administration with other vaccines or medicines</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">1.</td> <td style="width: 90%;">1-4 from Annexure-1</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> None</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>									1.	1-4 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.	1-4 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
<p>h) Change to add a new route of administration</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">1.</td> <td style="width: 90%;">1-4 from Annexure-1</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> None</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>									1.	1-4 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.	1-4 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
<p>i) Change to add a new dosage form1 (such as replacement of a suspension for injection with a lyophilized cake)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">1.</td> <td style="width: 90%;">1-4 from Annexure-1</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> None</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>									1.	1-4 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.	1-4 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
<p>j) Change to add a new strength</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">1.</td> <td style="width: 90%;">1-4 from Annexure-1</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/> None</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>									1.	1-4 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.	1-4 from Annexure-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
<p>Submitted By (Sign & Seal)</p>																	

30 MAY 2022

ISSUED COPY

MINISTRY OF HEALTH AND FAMILY WELFARE

DIRECTORATE GENERAL OF DRUG ADMINISTRATION

ISSUED BY:

CONTROLED COPY

**DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH**

Authorized Personnel Only

Annexure - 2

FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines



Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27	<i>[Signature]</i>	29.05.22	37 of 38

Section	Supporting Documents	Submitted?			Conditions			Met?	Assessment Outcome
		Yes	No	NA	Yes	No	NA		
Safety and Efficacy Changes									
k) Change to add a new delivery device (such as adding a needle-free jet injector)									
l) deletion of an existing route of administration, dosage form and/or strength due to safety reasons									
1. 1-4 from Annexure-1									
m) deletion of a contraindication (such as use in pregnant women).									
1. 1-4 from Annexure-1									
Submitted By (Sign & Seal)									

DIRECTORATE GENERAL OF DRUG ADMINISTRATION
MINISTRY OF HEALTH AND FAMILY WELFARE, BANGLADESH

Authorized Personnel Only

Annexure - 2



FORM Title: Checklist for Post Marketing Authorization Variations of Vaccines

Form No.	Version No.	Effective Date	Review Date	Authorized by	Date	Page No.
NRA-MA-003/F02-01	01	JUN' 22	JUN' 27		29.05.22	38 of 38

Assessment Started on	Assessment Completed on	Total Duration	Assessment Done By/Date
Assessment Summary			
<p><i>S</i></p> <p><i>Issued by:</i></p> <p><i>Issued date:</i></p> <p><i>CONTRLED COPY</i></p>			
<p><i>S</i></p> <p><i>Head of Vaccine & Biologics Sign/Date</i></p>			
<p><i>S</i></p> <p><i>Recommendation of Head of Vaccine and Biologics</i></p>			