

REGULATION AND PREQUALIFICATION DEPARTMENT

VACCINES ASSESSMENT TEAM

TEMPLATE

TESTING LOG - ALL PQS TESTING AND/OR EVALUATION CARRIED OUT SINCE 1ST MARCH OF LAST YEAR

Doc No: IMD/TP/08c	Version No: 2	Revise before: 30 Sept 2027		
Effective date: 30 Sept 2024	Replaces: Annex 3	Page 1 of 1		
Approved by:	TL-VAX, date: 16 Sep 2024	UH-PQT, date: 17 Sep 2024		
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Enter one line for each product tested.

Date of Report	E00 Category	Type-testing or Type-exam or OA?	Verification Protocol Reference ID	Name of manufacturer and/or reseller