World Health Organization		REGULATIO	N AND PREQUALIFICATION DEPARTMENT	
		VACCINES ASSESSMENT TEAM		
TEMPLATE				
EMAIL TO REQUEST UP-TO-DATE INFORMATION FROM A PQS ACCREDITED LABORATORY				
Doc No: IMD/TP/07a	Version No: 2		Revise before: 15 Jun 2027	
Effective date: 15 Jun 2024	Replaces: Annex 1		Page 1 of 2	
Approved by:	TL-VAX, date: 7 Jun 2024		UH-PQT, date: 13 Jun 2024	
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## Standard email request for reference

Dear <name of referee>,

The IMD-PQS Secretariat is evaluating <name of laboratory> for its suitability to carry out independent testing of the following types of products for IMD-PQS approval.

The laboratory has given the name of your organization as a reference. Please complete the attached questionnaire and return it to us within two weeks. Your reply will be treated as confidential and will be used solely for our own internal evaluation of the named laboratory.

Please use the "other comments" section to highlight any issues that are not covered elsewhere by the questionnaire. We recognise some responses can be subjective. If you would like to forward additional material to support your observations and conclusions, we would be grateful to receive it.

Yours sincerely,

<name>

For and on behalf of the WHO PQS Secretariat

Reference questionnaire for: <name of laboratory>

Questionnaire completed by.....

Position in company / organization.....

Date.....

1. How many times have you used the laboratory over the past three years?

.....times.



VACCINES ASSESSMENT TEAM

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2. Will you continue to use the laboratory? Whether your answer is Yes or No, please state why:

3. What types of product have been	tested for you and for what purpose?
Type of product	Purpose of test
Other comments:	

