

REGULATION AND PREQUALIFICATION DEPARTMENT

VACCINES ASSESSMENT TEAM

TEMPLATE

EXAMPLE FORMAT FOR A PQS-ACCREDITED TEST LABORATORY DATA SHEET

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Example format for an IMD-PQS-accredited test laboratory data sheet



Test laboratory data sheet

Name: Country:

Address:

Telephone:

Fax:

Email: Web address:

Contact:

PQS cat.	Equipment type	Type- examination	Type-testing	QA inspection	The following equipment types are excluded	
E001	Cold rooms, freezer rooms	No	n/a	No		
	Standby generators	No	n/a	n/a		
	Large voltage regulators	No	n/a	n/a		
E003	Refrigerators and freezers	Yes	Yes	n/a		
	Solar power systems	Yes	Yes	Yes		
E004	Insulated containers	Yes	Yes	n/a		
E005	Water packs	Yes	Yes	n/a		
E006	Temperature monitoring Electronic	Yes	Yes	n/a	IN05 - VVMs	
	Temperature monitoring Chemical	No	No	n/a		
E007	Cold chain accessories	No	No	n/a		
	Small voltage regulators	No	No	n/a		
E008	Single-use injection devices	No	No	n/a		
	Jet injectors	No	No	n/a		
E010	Safety boxes	Yes	Yes	n/a		
	Needle cutters	Yes	Yes	n/a		
E011	Specimen collection equipment	Yes	Yes	n/a		
E013	Therapeutic injection devices	No	No	n/a		
	Nasal atomizer	No	No	n/a		
Shipping contact name:			Shipping te	Shipping telephone:		
Shipping address:			Shipping fa	Shipping fax:		
Email address:			Mobile pho	Mobile phone:		
ISO/IEC 17025 accreditation UKAS body:			Next reass	Next reassessment date: 4/1/2010 12:00:00 AM		
WHO a	accreditation date:					

Check shipping arrangements with the laboratory to avoid problems with customs and to ensure safe delivery of test samples.