**Certificat de produit pharmaceutique**

**Ce certificat est conforme à la présentation recommandée**

**par l'Organisation mondiale de la Santé**

**Pays exportateur (certificateur):**

**Pays importateur (sollicitant):**

1. Nom et forme pharmaceutique du produit

1.1 Principe(s) actif(s) et quantité(s) par dose unitaire.

La composition qualitative complète du produit, y compris les excipients est jointe en annexe.

1.2 Ce produit fait-il l'objet d'une autorisation de mise sur le marché (AMM) dans le pays exportateur? Oui/*non*

1.3 Ce produit est-il commercialisé dans le pays exportateur?

Oui/*non*

Si la réponse à la question 1.2 est oui, passez à la section 2A et sauter la section 2B.

Si la réponse à la question 1.2 non, sauter la section 2A et passez à la section 2B:

2.A.1. Numéro de l'AMM et date de délivrance:

2.A.2. Titulaire de l'AMM (nom et adresse):

2.A.3. Statut du titulaire de l'AMM: (*sélectionner la catégorie applicable, parmi celles qui*

*figurent à la note N 8*) a / b / c

2.A.3.1. Pour les catégories b et c, nom et adresse du fabricant:

2.A.4. Un résumé du dossier d'AMM est-il annexé?

*Oui*/*non*

2.A.5. L'information officiellement approuvée sur le produit annexe au présent formulaire

est-elle complète et conforme aux dispositions de l'AMM?

*oui /non* */ pas fournie*

2.A.6. Nom et adresse du demandeur du certificat, s'il ne s'agit pas du titulaire de l'AMM):

2.B.1. Nom et adresse du demandeur du certificat:

2.B.2. Statut du demandeur: *(selectioner la catégorie applicable, parmi celles qui figurent*

*dans la note N 8*)a/ b/ c

2.B.2.1. Pour les catégories b et c, nom et adresse du fabricant:

2.B.3. Raison de l'absence d'AMM:

*non exigée /non demandée / en cours d'examen / refusée*

2.B.4. Remarques:

3. L'autorité certificatrice organise-t-elle des inspections périodiques de l'usine de production de la forme pharmaceutique?

Si la réponse est non ou sans objet passez à la question 4

*ou*i */non* */sans objet*

3.1. Périodicité des inspections de routine (ans):

3.2. La fabrication de ce type de forme pharmaceutique a-t-elle été inspectée?

*oui* /*non*

3.3. Les locaux et les opérations sont-ils conformes aux BPF recommandées par l'Organisation mondiale de la Santé?

*oui* /non */sans objet*

4. L'information présentée par le demandeur satisfait-elle l'autorité certificatrice quant à tous les aspects de la fabrication du produit? (*entrer la réponse appropriée*).

*Si la réponse est non, expliquez pourquoi*:

*Oui/non*

Adresse de l'autorité certificatrice:

**Health Products Regulatory Authority**

**(Autorité de réglementaton des produits de santé)**

Earlsfort Centre

Earlsfort Terrace

Dublin 2

Ireland

Téléphone: +353-1-676-4971

Télécopie: +353-1-676-4061

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Une personne authorisée par l’Autorité de réglementaton des produits de santé

Cachet et date:

**N.B. Les informations contenues dans le certificat sont valide et véritable reflète les dernières informations disponibles concernant l'autorisation de produits disponible à la date de délivrance.**

**Explanatory notes**

1. This certificate, which is in the format recommended by WHO, establishes the status of the pharmaceutical product and of the applicant for the certificate in the exporting country. It is for a single product only since manufacturing arrangements and approved information for different dosage forms and different strengths can vary.
2. Use, whenever possible, International Nonproprietary Names (INNs) or national nonproprietary names.
3. The formula (complete composition) of the dosage form should be given on the certificate or be appended.
4. Details of quantitative composition are preferred but their provision is subject to the agreement of the product-licence holder.
5. When applicable, append details of any restriction applied to the sale, distribution or administration of the product that is specified in the product licence.
6. Sections 2A and 2B are mutually exclusive.
7. Indicate, when applicable, if the licence is provisional, or the product has not yet been approved.
8. Specify whether the person responsible for placing the product on the market:
   1. manufactures the dosage form;
   2. packages and/or labels a dosage form manufactured by an independent company; or
   3. is involved in none of the above.
9. This information can only be provided with the consent of the product-licence holder or, in the case of non-registered products, the applicant. Non-completion of this section indicates that the party concerned has not agreed to inclusion of this information. It should be noted that information concerning the site of production is part of the product licence. If the production site is changed, the licence has to be updated or it is no longer valid.
10. This refers to the document, prepared by some national regulatory authorities, that summarizes the technical basis on which the product has been licensed.
11. This refers to product information approved by the competent national regulatory authority, such as Summary Product Characteristics (SPC)
12. In this circumstance, permission for issuing the certificate is required from the product-licence holder. This permission has to be provided to the authority by the applicant.
13. Please indicate the reason that the applicant has provided for not requesting registration.
    1. the product has been developed exclusively for the treatment of conditions — particularly tropical diseases — not endemic in the country of export;
    2. the product has been reformulated with a view to improving its stability under tropical conditions;
    3. the product has been reformulated to exclude excipients not approved for use in pharmaceutical products in the country of import;
    4. the product has been reformulated to meet a different maximum dosage limit for an active ingredient;
    5. any other reason, please specify.
14. Not applicable means the manufacture is taking place in a country other than that issuing the product certificate and inspection is conducted under the aegis of the country of manufacture.
15. The requirements for good practices in the manufacture and quality control of drugs referred to in the certificate are those included in the thirty-second report of the Expert Committee on Specifications for Pharmaceutical Preparations, WHO Technical Report Series No. 823, 1992, Annex 1. Recommendations specifically applicable to biological products have been formulated by the WHO Expert Committee on Biological Standardization (WHO Technical Report Series, No. 822, 1992, Annex 1).
16. This section is to be completed when the product-licence holder or applicant conforms to status (b) or (c) as described in note 8 above. It is of particular importance when foreign contractors are involved in the manufacture of the product. In these circumstances the applicant should supply the certifying authority with information to identify the contracting parties responsible for each stage of manufacture of the finished dosage form, and the extent and nature of any controls exercised over each of these parties.