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| **Annex to the application**[[1]](#footnote-1) | |
| CAB[[2]](#footnote-2): |  |
| Date: |  |
| Case number: |  |

| **Testing or Inspection** | | |
| --- | --- | --- |
| **Standard / date of issue In-house method / version** | **Title of the Standard or the in-house method[[3]](#footnote-3) (specify any deviations / modifications of standard method)** | **Test item / Inspection item** |
|  |  |  |
|  |  |  |
|  |  |  |

| **Medical examination** | | | | |
| --- | --- | --- | --- | --- |
| **Analyte (measurand)** | **Examination material** | **Examination Technique** | **Procedure / version** | **Device** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

| **Certification bodies for products** | |
| --- | --- |
| **Product(s) / Product group(s)** | **Certification standard** |
|  |  |
|  |  |
|  |  |

| **Other** | |
| --- | --- |
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1. Please delete if not applicable or complete fields if necessary [↑](#footnote-ref-1)
2. Conformity assessment body [↑](#footnote-ref-2)
3. Testing method: Method, matrix and analyte are to be named in title of the in-house method. [↑](#footnote-ref-3)