ANNEX D

New Molecule Evaluation and Assessment Form

(For new chemical/biological entities not previously registered in Nepal)

SECTION 0: ADMINISTRATIVE INFORMATION

Product Name	*(Brand-Strength-Dosage Form)*
Generic Name	*(INN + salt/equivalent)*
Applicant / Importer	
Manufacturer	
Manufacturing Site	
Marketing Authorization Holder	
Date of Application	

SECTION 1: PRODUCT CHARACTERIZATION

1.1 Nature of the Product

Select all applicable categories:

Category	**Sub-category**	☐
Chemical	Pharmaceutical product	☐
	Contrast agent for imaging	☐
Biological	Vaccine / immunizing product	☐
	Blood/plasma-derived product	☐
	Recombinant product	☐
	Monoclonal antibody	☐
	Cell/tissue therapy	☐
	Biosimilar (reference: _____)	☐

Herbal / Traditional	Herbal medicine	☐
	Other traditional medicine	☐
Other	Specify: _____	☐

Note: If Biosimilar or Recombinant selected, complete Annex D-Supplement 1.

SECTION 2: PRODUCT INFORMATION

Product Name	*Brand name - Strength - Dosage form*
Generic Name	*INN + Salt/Equivalent*
Dosage Form & Route	
Composition & Strength	
Therapeutic Category (ATC Code)	
Drug Classification	*☐ Prescription ☐ OTC ☐ Controlled*
BCS Classification	*☐ Class I ☐ Class II ☐ Class III ☐ Class IV ☐ N/A*
Innovator Brand & Manufacturer & Date of approval	

SECTION 3: REGULATORY STATUS & PUBLIC HEALTH RELEVANCE

3.1 Global Registration Status

Regulatory Authority	Registered?	Year / Comments
USFDA	☐ Yes ☐ No	*Also specify the strength and dosage form of the registered molecule*
EMA	☐ Yes ☐ No	*Also specify the strength and dosage form of the registered molecule*
MHRA	☐ Yes ☐ No	*Also specify the strength and dosage form of the registered molecule*
PMDA	☐ Yes ☐ No	*Also specify the strength and dosage form of the registered molecule*
TGA	☐ Yes ☐ No	*Also specify the strength and dosage form of the registered molecule*
CDSCO	☐ Yes ☐ No	*Also specify the strength and dosage form of the registered molecule*

WHO PQ	☐ Yes ☐ No	*Also specify the strength and dosage form of the registered molecule*
Others: ……		

3.2 Reference Listings

WHO Model List of Essential Medicines 2025	☐ Yes ☐ No	
Nepal National List of Essential Medicines	☐ Yes ☐ No	
Pharmacopoeia Monograph Available • **Finished Product** • **API**	☐ USP ☐ BP ☐ IP ☐ Ph.Eur ☐ Other ☐ USP ☐ BP ☐ IP ☐ Ph.Eur ☐ Other	
First Global Approval	Country: _____ Year: _____	

3.3 Patent & Data Exclusivity Status

Patent Status	**Data Exclusivity / Market Exclusivity**

SECTION 4: STORAGE CONDITIONS & DISTRIBUTION RISK ASSESSMENT

► *Guiding Questions: At what temperature must it be stored? Are there risks with temperature excursions? Is it sensitive to moisture or light?*

Storage conditions	***<Directions to fill> Guiding questions: Storage, distribution and other risk linkage*** • *At what temperature it must be stored? (Room Temperature, 2-4 degree Celsius, Freezing temperature, Ambient temperature)* • *Additional storage guidelines required? (Do not refrigerate or freeze, Do not freeze, Keep in the freezer)* • *Others storage conditions: Sensitive to moisture, Sensitive to light (Keep the container*** tightly closed, Store in the original package)* • *Are there risks associated with temperature excursions (e.g., vaccine potency)?*
Approved indication(s)	***<Directions to fill>****Detailed description of the indications* ***Guiding questions:*** *Scientific and clinical justification* ▪ *Is the indication scientifically, clinically, and regulatorily justified?*

	▪ *Is there a clear unmet medical need or advantage over existing therapies?* ▪ *Does the benefit–risk balance remain positive within the proposed indication?* *Scope and target population* ▪ *Does the indication clearly define for each age group the medicine is indicated for?* ▪ *Are any subgroups (e.g., elderly, children, pregnant women) included without sufficient supporting data?* ▪ *Does the proposed indication include high-risk populations (e.g., immunocompromised, elderly, patients with co-morbidities)?* *Regulatory Consistency* ▪ *Should the indication be modified, restricted, or clarified to ensure safe and appropriate use?* ▪ *Is the proposed indication consistent with the SmPC (Summary of Product Characteristics)?* ▪ *Is it the same or different from the indication approved in other regulatory jurisdictions (e.g., FDA, EMA)?* *Risk Management & Pharmacovigilance Considerations* ▪ *Does the indication suggest off-label use potential?* ▪ *Will the indication require additional risk minimization measures or pharmacovigilance activities?* *Is there an intention to include paediatric population, pregnant or breastfeeding women, and patients with renal or hepatic impairment? (e.g. Is a paediatric Investigation Plan in place?)*
Posology	***<Directions to fill>Guiding questions:*** *Dosing and Target Population* • *Is the posology clearly defined for all relevant age groups, body weights, or clinical subgroups (e.g., infants, pregnant women, immunocompromised) if needed?* • *Is the dose and dosing regimen (dose, frequency, duration) scientifically justified and clinically feasible?* • *Are dose adjustments justified for specific populations (e.g., renal/hepatic impairment, elderly, children)?* *Risk Management & Pharmacovigilance Considerations* • *Are there risks of under-dosing (loss of efficacy, resistance development) or overdosing (toxicity, serious adverse events)?* • *Are additional risk minimisation measures required to support correct dosing (e.g., educational materials, dosing devices, clear labelling)?* • *Will special pharmacovigilance activities be needed to monitor dosing-related safety concerns (e.g., therapeutic drug monitoring, registries)?*

If any Nepal-specific risk is identified, Section 9 (Risk Minimization) must include targeted measures.

SECTION 5: INDICATIONS, EPIDEMIOLOGY & TARGET POPULATION

5.1 Proposed Indication(s) for Nepal

5.2 Nepal Epidemiology Profile

Epidemiology of the disease	*<Directions to fill>*This may discuss • **Who** gets the disease? (age, gender, risk groups) • **Where** does it occur? (geographic distribution) • **When** does it occur? (seasonal trends, outbreaks) • **Why/How** does it occur? (causes, risk factors, transmission) **Also,** **Prevalence** • Total **existing cases** at a given time **Mortality rate** • Number of deaths due to the disease **Risk factors** • Factors that increase likelihood (e.g., smoking, genetics, environment)

5.3 Concomitant Therapy & Co-morbidity Profile

► *Guiding Questions: What are common concomitant therapies? Are there known drug interactions? Could concomitant use increase AE risk (e.g., QT prolongation, bleeding)?*

Co-morbidity	Common Concomitant Therapy	Known/Expected Interaction	Risk Level
			Categorize Risk Levels as Mild, Moderate, and Severe/Major.

If any 'Major' interaction identified, Section 9 (PV Plan) must include targeted monitoring.

SECTION 6: MODE OF ACTION, PHARMACOLOGY & POSOLOGY

6.1 Mechanism of Action

Describe the mechanism of action in detail, including receptor/target specificity and downstream effects.

6.2 Pharmacodynamics & Pharmacokinetics

Pharmacodynamics (PD)	*Primary effect, receptor binding, dose-response relationship*
Pharmacokinetics (PK)	*Absorption, Distribution, Metabolism, Excretion (ADME)*
Bioavailability	*Absolute / Relative bioavailability data*
Half-life & Elimination	*Terminal half-life, clearance, accumulation potential*

6.3 Posology Assessment

► *Guiding Questions: Is posology clearly defined for all age groups? Is dose scientifically justified? Are dose adjustments needed for renal/hepatic impairment? Risks of under-dosing or overdosing?*

Posology Criterion	Comments / Risk Considerations
Dose Definition (all age groups)	
Dosing Regimen Justification	
Dose Adjustments Required	
Therapeutic Index	Low TI requires TDM consideration
Under-dosing Risk	
Over-dosing Risk	

SECTION 7: CLINICAL EVIDENCE SUMMARY

7.1 Clinical Study Overview

Study Type	Design	Population (n)	Key Outcomes	Conclusion
Phase I				
Phase II				

Phase III				
Phase IV / Post-marketing				
Bioequivalence (if generic/biosimilar*)				

** Can be submitted after molecule approval*

7.2 Comparative Efficacy & Safety

Comparator	Efficacy Comparison	Safety Comparison	Overall Assessment
Standard of Care in Nepal			
Comparator Product (global)			
Individual drug components			
Placebo (if applicable)			

SECTION 8: SAFETY SPECIFICATION & RISK ASSESSMENT

8.1 Risk Categorization Matrix

Risk Category	MAH-Identified Risks
Important Identified Risks	[Indicate all the important identified risks according to the MAH]
Important Potential Risks	[Indicate all the important potential risks according to the MAH]
Missing Information	[Indicate all the missing information according to the MAH]
Other risks (as stated in product Information)	

8.2 Product Information Risk Mapping

► *Guiding Questions: Map each SmPC section risk to assess adequacy. Is labeling sufficient for Nepal's healthcare context?*

Contraindications	
Special Warnings & Precautions	
Drug Interactions	
Fertility, Pregnancy & Lactation	
Effects on Driving / Machines	
Adverse Reactions (frequency tables)	
Overdose (management guidance)	

SECTION 9: PHARMACOVIGILANCE PLAN ASSESSMENT

9.1 Routine Pharmacovigilance (Minimum Requirements)

Activity	MAH Proposal
Pharmacovigilance Plan	
PSUR/PBRER Submission	

SECTION 10: INTEGRATED BENEFIT–RISK ASSESSMENT

10.1 Structured Evidence Evaluation

► *Guiding Questions: Assess evidence quality per GRADE or equivalent. Evaluate direct applicability to Nepal's population and healthcare context.*

Dimension	Evidence Assessed
Safety Profile	
Comparative Efficacy	
Standard of Care (Nepal)	
Cost-Effectiveness	

SECTION 11: CONCLUSIONS & RECOMMENDATIONS

11.1 Safety Profile Conclusions

Question	Response	Supporting Evidence (cite)
1. Overall safety profile based on clinical and post-marketing data?		
2. Comparison with therapeutic alternatives (AEs, tolerability, benefit-risk)?		
3. Clinically significant advantages/disadvantages vs. existing options?		
4. Safe and appropriate for intended Nepal patient population?		

11.2 DDA Recommendation (For Official Use)

Decision	☐ Approved ☐ Approved with conditions ☐ Deferred — additional data required ☐ Rejected
Conditions (if applicable)	
Timeline for compliance	
Post-approval commitments	
Assessor's Justification	

SECTION 12: APPROVAL SIGNATURES

Role	Name	Signature	Date
Primary Assessor			
Secondary Reviewer (if required)			

Pharmacovigilance Unit Head			
Final Approver (Director/Designate)			

APPENDICES: REFERENCE DOCUMENTS

Appendix	Document	Date	Version
A	SmPC (proposed for Nepal)		
B	Risk Management Plan (MAH submission)		
C	Clinical Overview / Clinical Summary		
D	Nepal Epidemiology Data		
E	GMP Certificates (API & FPP)		
F	Stability Data Summary		
G	WHO Prequalification (if applicable)		