

## CHECKLIST

**Form Name:** Form MD-14

**Category:** MD

### FRESH

Section no.	Checklist Name	Is Mandatory
1.0	Covering Letter	Yes
2.0	Fee Challan	Yes
3.0	Application (Form MD-14)	Yes
4.0	Power of Attorney along with undertaking from the authorized agent as per Part I of Fourth Schedule of MDR, 2017 (duly authenticated in India either by a Magistrate of First Class or by Indian Embassy in the country of origin or by an equivalent authority through apostille)	Yes
5.0	Copy of Whole Sale licence / Manufacturing licence / Registration Certificate in Form MD-42 of the Authorized agent	Yes
6.0	Constitution details of the authorized agent	Yes
7.0	Regulatory Certificate	No
7.1	Copy of Free Sale Certificate/Marketing Authorization of the product issued by the National Regulatory Authority of country of origin (if any) (duly notarized)	Yes
7.2	Copy of Free Sale Certificate Marketing Authorization of the product issued from National Regulatory Authority of any of the following countries viz USA, UK, EU, Canada, Japan or Australia (duly notarized)	Yes
7.3	Copy of overseas manufacturing site / establishment / plant registration, by whatever name called, in the country of origin issued by the competent authority (duly notarized)	Yes
7.4	Copy of latest inspection or audit report carried out by the Competent Authority within last 3 years, if any.	Yes
8.0	Quality Certificate in respect of the actual manufacturing site, as applicable	No
8.1	Copy of Certificate supporting Quality Management System (duly notarized)	Yes

8.2	Copy of Full Quality Assurance Certificate/ CE type examination Certificate/ CE product quality assurance certificate, CE design Certificate, etc as applicable (duly notarized)	Yes
8.3	Declaration of conformity issued by the manufacturer	Yes
9.0	Plant Master file from the Manufacturer as per Appendix I of Fourth Schedule of Medical Devices Rules, 2017	Yes
10.0	Device Master file from the Manufacturer as per Appendix II of Fourth Schedule of Medical Devices Rules, 2017	No
10.1	Executive Summary	Yes
10.2	Descriptive information of the device	Yes
10.3	Justification for the Medical Device Grouping	Yes
10.4	Product Specification, including variants, accessories, etc	Yes
10.5	Substantial equivalence with reference to the predicate device or previous generations of the device	Yes
10.6	Labelling information (Labels, Instruction for Use, etc)	Yes
10.7	Device Design and Manufacturing Information	Yes
10.8	Essential Principles checklist for demonstrating conformity to the Safety and Performance of the Medical Device	Yes
10.9	Risk analysis and control summary	Yes
10.10	Verification and validation of the medical device	Yes
10.11	Biocompatibility validation data (if applicable)	Yes
10.12	Medicinal substances data (if device contains Drug)	Yes
10.13	Biological Safety (TSE/BSE), if applicable	Yes
10.14	Sterilization Validation data (if applicable)	Yes
10.15	Software verification and validation (if software used)	Yes
10.16	Animal studies – Preclinical data (if any)	Yes
10.17	Stability study data (Real-time and Accelerated conditions) for the claimed shelf life (if applicable)	Yes
10.18	Clinical evidence (if any)	Yes
10.19	Post Marketing Surveillance data (Vigilance reporting)	Yes

10.20	Batch Release Certificates or Certificate of Analysis for minimum 3 consecutive batches/ Software version release certificate	Yes
11.0	Any other additional documents	Yes
12.0	Copy of Permission in Form MD-27 (incase of Investigational Medical Device )	Yes

### ENDORSEMENT

Section no.	Checklist Name	Is Mandatory
1.0	Covering letter	Yes
2.0	Application (Form MD-14)	Yes
3.0	Fee Challan	Yes
4.0	Power of Attorney along with undertaking from the authorized agent as per Part I of Fourth Schedule of MDR, 2017 (duly authenticated in India either by a Magistrate of First Class or by Indian Embassy in the country of origin or by an equivalent authority through apostille)	Yes
5.0	Copy of Import License obtained for which the endorsement is applied	Yes
6.0	Regulatory Certificate	Yes
6.1	Copy of Free Sale Certificate/Marketing Authorization of the product issued by the National Regulatory Authority of country of origin (if any) (duly notarized)	Yes
6.2	Copy of Free Sale Certificate Marketing Authorization of the product issued from National Regulatory Authority of any of the following countries viz USA, UK, EU, Canada, Japan or Australia (duly notarized)	Yes
7.0	Quality Certificate in respect of the actual manufacturing site, as applicable (duly notarized)	Yes
7.1	Copy of Certificate supporting Quality Management System	Yes
7.2	Copy of Full Quality Assurance Certificate/ CE type examination Certificate/ CE product quality assurance certificate, CE design Certificate, etc as applicable	Yes
7.3	Declaration of conformity issued by the manufacturer	Yes

8.0	Undertaking from the overseas manufacturer stating that there is no major change(s) in the existing Plant Master File (PMF). Otherwise, information as per Appendix I of Fourth Schedule of Medical Devices Rules, 2017 needs to be submitted	Yes
9.0	Device Master file from the Manufacturer as per Appendix II of Fourth Schedule of Medical Devices Rules, 2017	Yes
9.1	Executive Summary	Yes
9.2	Descriptive information of the device	Yes
9.3	Justification for the Medical Device Grouping	Yes
9.4	Product Specification, including variants, accessories, etc.	Yes
9.5	Substantial equivalence with reference to the predicate device or previous generations of the device	Yes
9.6	Labelling information (Labels, Instruction for Use, etc)	Yes
9.7	Device Design and Manufacturing Information	Yes
9.8	Essential Principles checklist for demonstrating conformity to the Safety and Performance of the Medical Device	Yes
9.9	Risk analysis and control summary	Yes
9.10	Verification and validation of the medical device	Yes
9.11	Biocompatibility validation data (if applicable)	Yes
9.12	Medicinal substances data (if device contains Drug)	Yes
9.13	Biological Safety (TSE/BSE), if applicable	Yes
9.14	Sterilization Validation data (if applicable)	Yes
9.15	Software verification and validation (if software used)	Yes
9.16	Animal studies – Preclinical data (if any)	Yes
9.17	Stability study data (Real-time and Accelerated conditions) for the claimed shelf life (if applicable)	Yes
9.18	Clinical evidence (if any)	Yes
9.19	Post Marketing Surveillance data (Vigilance reporting)	Yes

9.20	Batch Release Certificates or Certificate of Analysis for minimum 3 consecutive batches/ Software version release certificate.	Yes
10.0	Any other additional documents	Yes
11.0	Copy of Permission in Form MD-27 (incase of Investigational Medical Device )	Yes

## RETENTION

Section no.	Checklist Name	Is Mandatory
1.0	Covering letter	Yes
2.0	Duly Signed Retention Form	Yes
3.0	Fee Challan	Yes
4.0	Copy of the existing Import licence or its retention (if obtained)	Yes
5.0	Copy of endorsement(s) to the existing Import license	Yes
6.0	List of the device(s) deleted from the existing Import license along with the reason	Yes
7.0	Detailed breakup of the fees deposited in terms of site, risk class of the device and Medical device grouping etc.	Yes
8.0	An undertaking from the manufacturer stating that there is no major change(s) in the existing Device Master File (DMF) and Plant Master File (PMF)	Yes
9.0	Post marketing surveillance data (Vigilance reporting) during last 5 yrs (details of complaints, recall (if any), CAPA taken, etc), duly authenticated by the manufacturer or authorized agent	Yes
10.0	Copy of Free Sale Certificate/Marketing Authorization of the product issued by the National Regulatory Authority of country of origin (if any), (duly notarized).	Yes
11.0	Copy of Free Sale Certificate Marketing Authorization of the product issued from National Regulatory Authority of any of the following countries viz USA, UK, EU, Canada, Japan or Australia (duly notarized)	Yes
12.0	Copy of Certificate supporting Quality Management System	Yes
13.0	Copy of Full Quality Assurance Certificate/ CE type examination Certificate/ CE product quality assurance certificate, CE design Certificate, etc as applicable	Yes

14.0	Declaration of conformity issued by the manufacturer	Yes
15.0	An undertaking by the manufacturer and authorized agent, stating that they have agreed for retention of the Import License Number, for applied products	Yes
16.0	Undertaking by the manufacturer and authorized Indian agent stating that there is no change in the Power of Attorney (POA). In case any change, a fresh POA along with undertaking from the authorized agent as per Part I of Fourth Schedule of MDR, 2017 (duly authenticated in India either by a Magistrate of First Class or by Indian Embassy in the country of origin or by an equivalent authority through apostille) shall be submitted	Yes
17.0	Undertaking from the foreign manufacturer as well as from the authorized agent stating that there is no change in the Constitution of the firm	Yes
18.0	Undertaking stating that they shall submit the requisite fees for all the products endorsed in the base license before completion of the five years from the date of issue of the base license	Yes
19.0	Post Approval Changes taken due to change in name and/or address of the firm, product details (if any)	Yes