

## MONOGRAPH INCLUSION REQUEST FORM

<b>1.</b>	<b>Therapeutic Category</b>		
<b>2.</b>	<b>Name of the Molecule</b>		
<b>3.</b>	<b>Monograph (Please tick)</b>		
<b>4.</b>	<b>Is it approved in India?</b>		<b>API</b>
			<b>Dosage Form</b>
			<b>Both</b>
			<b>Any Other</b>
<b>5.</b>	<b>In case of Dosage Form, provide details wrt for how long product is being marketed in India?</b>		
<b>6.</b>	<b>Details of the Product/ Companies marketing product.</b>		
<b>7.</b>	<b>Benchmark – International Product/Company</b>		
<b>8.</b>	<b>Category (Please tick)</b>		<b>National Health Programs of India</b>
			<b>Essential Medicines List</b>
			<b>Fixed Dose Combination</b>
			<b>Any Other</b>
<b>9.</b>	<b>Justification of Inclusion of Monograph:</b>		
<b>Reviewers Remarks:</b>			
<b>1.</b>	_____	<b>2.</b>	_____
<b>Authorized by:</b>			

**Details/samples attached – Specs**

**STP WS**

**Impurity Standards**

**Validation**