

TGA use only

This form, when completed, will be classified as 'For official use only'. For guidance on how your information will be treated by the TGA see: Treatment of information provided to the TGA at http://www.tga.gov.au/treatment-information-provided-tga>.

Pre-submission meeting record

Our guidance at the meeting is nonbinding and without prejudice. As knowledge evolves over time, the initial guidance we gave at the meeting may become out-of-date or be superseded.

Applicant				
Company				
Address				
Contact person				
Name				
Position				
Mailing address				
Phone				
Email				
Meeting information				
Meeting date				
Location				
Start time				
Closing time				

PO Box 100 Woden ACT 2606 ABN 40 939 406 804
Phone: 1800 020 653 Fax: 02 6203 1605 Email: info@tga.gov.au http://www.tga.gov.au



Subject matter for discussion				
☐ Prescription medicine registration				
☐ Orphan drug designation				
☐ Priority review prescription medicine designation				
Over-the-counter medicine				
Registered complementary medicine				
Assessed listed complementary medicine				
☐ Ingredient for use in listed medicines				
☐ Medical device (manufacturer)				
☐ Medical device (sponsor)				
☐ In vitro diagnostic medical device (manufacturer or sponsor)				
☐ Biological (cell and tissue-based products)				
☐ Disinfectant (manufacturer or sponsor)				
Other (please specify)				
Medicine				
Generic name				
Trade name				
Substance name				
Dosage form(s)				
Other relevant information				

Medical Device

Device name or Unique Product Identifier (UPI)	
GMDN Code	
Device Classification	
Device Description	
Intended Purpose	
Other relevant information	
Biological	
Biological Product name	
Product name	
Product name Trade name Biological	

Meeting participants

Facilitator or Chair	Secretariat or minute taker

External participants	Company position	

TGA participants	Position

Meeting objectives

Discussion points (keep brief in bullet format)

[NB: comments made by TGA participants may be recorded as *'TGA advised.....'* rather than naming individuals]

Outcomes (bullet format)

.

Unresolved issues, or issues requiring further discussion

[NB: These should result in further correspondence]

.

Action items

Item #	Item to be actioned	Responsible person	Due date
1.			
2.			
3.			

Attachments/handouts