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| **EUnetHTA 21 Joint Scientific Consultation Secretariat** EUnetHTA21-JSC@g-ba.de | **Date:** Click to select date |

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| **EUnetHTA 21 Joint Scientific Consultation (JSC) Application Form**  **EUnetHTA 21 1st Open Call (Nov 2021 – Dec 2021)** |

**Please fill in all the predefined fields as accurately as possible**

|  |  |
| --- | --- |
| **Unique Product Identifier** |  |
| **Substance** | |
| * **INN** (if available) |  |
| * **Trade name** (if available) |  |
| * **Company product code** |  |
| **Description of the product & mechanism of the action** |  |
| **Type of product** | Chemical  Generic  Antisense  NCE  Others  Bio(techno)logical  Classical biological:  Blood derived  Vaccine  Enzyme  Other biologicals  Recombinant DNA derived product:  Cytokine  Hormone  Monoclonal antibody  Vaccine  Transgene derived (animal/biopharm)  Other Recombinant  Similar biological  Nucleic acid-Based  DNA vaccine  Oncolytic virus  Advanced Therapy:  Gene therapy:  Autologous  Allogenic  Xenogenic  Somatic cell therapy:  Autologous  Allogenic  Xenogenic  Tissue-engineered product  Autologous  Allogenic  Xenogenic  Therapeutic, Scientific, or Technical Innovation |
| **Is the product used together with a digital application?** | YES  NO  If yes, please describe: |
| **Is the product used together with a medical device or an *in vitro* diagnostic medical device?** | YES  NO  If yes, please describe: |

Comments:

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| --- | --- |
| **Intended indication for the scope of the current JSC** |  |
| **Products with market authorization in similar indication** |  |
| **Products in development with similar indication** |  |
| **Application type EMA (anticipated):** | Initial market application (IMA)  Extension of Indication (EoI)  Line Extension (LE)  First in class (FC)  Priority Medicine (PRIME)  Accelerated access (AC)  Orphan designation (OD)if current OD, please provide:  OD number: EU/  Date: YYYY-MM-DD  Indication for which OD has been granted: |
| **Therapeutic field** | Cancer  HIV/AIDS  Diabetes  Neurodegenerative disorder  Viral disease  Autoimmune disease/dysfunction  Cardiovascular  Other |
| **ATC code** (broad or detailed if known) | Click to select. or detail here: |

Comments**:**

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| --- | --- |
| **Applicant** | **Company Name:**  **Address:**  **Country:** |
| **Contact Person details** | **Title and Name:**  **Direct Tel:** **Fax:**  **Email:** |
| **Alternate Contact Person details[[1]](#endnote-1)** | **Title and Name:**  **Direct Tel:** **Fax:**  **Email:** |
| **Financial Contact Person details[[2]](#endnote-2)** | **Title and Name:**  **Direct Tel:** **Fax:**  **Email:** |

Comments:

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| --- | --- |
| **Small and Medium Sized Enterprises (SME)** | NO – N/A |
| YES |
| - SME Number: |

|  |  |
| --- | --- |
| **Consultant on behalf of Applicant** (if applicable) | Title and Name:  Direct Tel: Fax:  Email: |
| **Contact Person details** | Title and Name:  Direct Tel: Fax:  Email: |
| **Alternate Contact Person details** (if applicable) | Title and Name:  Direct Tel: Fax:  Email: |
| **Letter of authorisation from applicant** | NO (to be provided within 15 days)  YES (please attach) |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Aimed date of the draft Briefing Book ready for submission and deadline to receive final EUnetHTA 21 recommendations**  (*please refer to the EUnetHTA 21 Joint Scientific Consultation procedure for the full timeline*) | |  |  |  | | --- | --- | --- | | Please select (multiple choices possible) | Draft Briefing Book submission | EUnetHTA 21 final recommendation | |  | 10 Jan 22 | 22 Apr 22 | |  | 07 Feb 22 | 20 May 22 | |  | 07 Mar 22 | 24 Jun 22 | |  | 04 Apr 22 | 22 Jul 22 | |  | 02 May 22 | 16 Sep 22 | |

Comments:

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| **Clinical trial phase(s) for which JSC is requested** | Phase I  Phase II  Phase III  Phase IV  If the clinical trial phase for which JSC is requested is not Phase III:  Is a Phase III study planned:  YES  NO  If no, please explain why not: |
| **Are the trial(s) for which advice is requested on-going?** | YES  NO  If yes, please specify study registry/ID number:   |  |  | | --- | --- | | Study title | registry/ID-number | |  |  | |  |  | |  |  | |
| **Does the product target an unmet need?** | YES  NO  If yes, please describe: |
| **Is the product the first in its class?** | YES  NO  If yes, please describe: |
| **Does the product have potential impact on patients, public health, or healthcare systems?** | YES  NO  If yes, please describe: |
| **Will the product have significant cross-border dimension?** | YES  NO  If yes, please describe: |
| **Will the product have a major Union-wide added value?** | YES  NO  If yes, please describe: |
| **Does the product address the union clinical research priorities?** | YES  NO  If yes, please describe: |
| **Does the product target a life-threatening or chronically debilitating disease?** | YES  NO  If yes, please describe: |
| **Can the product be considered breakthrough technology as defined below?[[3]](#endnote-3)** | YES  NO  If yes, please specify why: |
| **Summary of expected information (study phase, minimum information on PICO scheme) annexed[[4]](#endnote-4)** | YES  NO |

Comments:

|  |  |
| --- | --- |
| **Other scientific advice (received or planned)** | EMA Scientific Advice:  NO  YES  Date: Click to select date  Previous EUnetHTA Early Dialogue (ED)  NO  YES, ED-Number:  Date: Click to select date  Other scientific advices with individual HTA bodies:    NO / Not planned  YES  Which countries: |

Comments:

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| --- | --- |
| **Status of the product / pipeline** | MA Granted in another indication  MA not yet granted  N/A |
| **Marketing Authorisation (MA) already granted in another indication** | Date of MA granting:  Route of MA:   National Procedure  MRP/Decentralised Procedure  Centralised Procedure Specify in which indication: |
| **MA not yet granted** | MA Application planned date:  Route of MA planned:   National Procedure  MRP/Decentralised Procedure  Centralised Procedure (according to Reg. (EC) No 726/2004) |

Comments:

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| --- | --- |
| **Area of Advice** | Please briefly outline the scope/content of each question,  for each area of advice following topic order proposed below:  Target Population:  Intervention:  Comparator choice:  Outcomes choice:  Study Design including statistical analysis method:  Post-Launch Evidence Generation (only in conjunction with request for pivotal trial):  Health Economics: |

Comments:

**Important application submission instructions:**

1. Please send this form in Word format do not convert it into PDF.
2. The Application Form for Joint Scientific Consultation should be submitted to the EUnetHTA 21 JSC secretariat via E-Mail (EUnetHTA21-JSC@g-ba.de).

1. An additional alternate contact person is requested in case the main contact point is unavailable. All official correspondence will be sent to both contact persons. If a consultant is acting on behalf of the applicant, the alternate contact person details are not requested. [↑](#endnote-ref-1)
2. Please provide details of a contact person in case fees will have to be paid to some HTA bodies participating in the Joint Scientific Consultation. [↑](#endnote-ref-2)
3. Breakthrough technology: Preliminary clinical evidence indicates that the drug may demonstrate substantial improvement over available therapy on a clinically significant endpoint (could include impact on a surrogate or clinical intermediate endpoint or pharmacodynamic biomarker that strongly suggests the potential for a clinically meaningful effect on the underlying disease; improved safety profile or quality of life) or a substantial improvement in practicality or convenience of use or care pathways (organizational impact). [↑](#endnote-ref-3)
4. As available, a summary of expected information (study phase, high level design with minimum information on Population, Intervention, Comparator, Outcomes (PICO)) for the intended product and indication must be annexed when submitting the Application Form. [↑](#endnote-ref-4)