



ASSAY MODIFICATION SUBMISSION FORM

Please submit all information as outlined below. Submit one hard copy of the entire package and one electronic copy (as PDF files on a CD or flash drive) to:

US Postal Service: Clinical Laboratory Evaluation Program, Biggs Laboratory, Wadsworth Center, New York State Department of Health, Empire State Plaza, Albany, NY 12237; Attn: Assay Validation Review

UPS, FedEx, Courier: Clinical Laboratory Evaluation Program, Biggs Laboratory, Wadsworth Center, New York State Department of Health, Dock J - P1 Level, Empire State Plaza, Albany, NY 12237; Attn: Assay Validation Review

Materials submitted, including related data packages, cannot be returned to the laboratory.

SECTION 1: GENERAL INFORMATION:

Lab Name: _____ PFI: _____

Contact Person: _____

Phone: _____ Contact E-mail: _____

Assay (Test) Name*: _____

*As indicated on the approval from the FDA or NYS.

NYS-approved Project ID, if applicable: _____

Methodology (e.g., EIA, PCR; LC-MS/MS; RIA): _____

Analyte(s) included (if different from Assay Name): _____

Validated Specimen Type(s): _____

Clinical Purpose/Intended Use: _____

Permit Category: _____

Laboratory Director/Assistant Director (NYS Certificate of Qualification Holder for the appropriate Permit Category)

CQ Code _____ Signature _____ Date _____

Laboratory Director (if not the responsible CQ Holder for the appropriate Permit Category)

CQ Code _____ Signature _____ Date _____

SECTION 2: Please submit the following documentation. Refer to the New York State General System Standards and any relevant Specialty Standards in preparing your submissions.

- DESCRIPTION OF THE MODIFICATION from either an FDA cleared/approved assay or NYS-approved assay, if the modification changes the intended use, including whether the modification changes the risk of the assay and how.
NARRATIVE SUMMARY of the validation studies performed with results and conclusions must be submitted. The summary must address how analytical and clinical performance characteristics were established and describe any comparative methods and the source and number of specimens.
Relevant Standard Operation Procedures (SOPs), if modified.
Copies of pertinent references, if appropriate.
Sample Test requisitions and reports, if changed.
Informed Consent materials, if applicable.
Completed RISK ATTESTATION FORM.