

## Nye metoder - Request for reassessment of medical product

A health technology developer seeking reassessment of a medicinal product/indication previously assessed by Nye metoder, should contact Nye metoder using this form, provided requirements detailed below are met.

Please send the completed form to Nye metoder by e-mail: [nyemetoder@helse-sorost.no](mailto:nyemetoder@helse-sorost.no).

A request for reassessment must apply to the same population as the original assessment. If the request relates to another population or a subpopulation, then the form titled "Request for assessment of medicinal product" should be used (see [nyemetoder.no](http://nyemetoder.no)).

If there is no new clinical data, a request for reassessment is not warranted. If only the cost of the new method has changed since the previous assessment, contact the Norwegian Hospital Procurement Trust (Sykehusinnkjøp HF) directly<sup>1</sup>.

This form must be completed in its entirety. Based on the request, Nye metoder will assess whether there are grounds for commissioning a reassessment. The request must be justified.

Information about Nye metoder can be found online ([nyemetoder.no](http://nyemetoder.no)). Please contact Sekretariatet for nye metoder if you have any questions.

**Please note:** The form will be published in its entirety.

The submitter is aware that the form will be published in its entirety (**tick**):

<b>1 Contact information</b>	
Date	
Health technology developer	
Name	
Position	
Telephone	
E-mail	
External representation Name/organization Phone/e-mail  <i>PLEASE NOTE: For external representation, please attach an authorisation/power of attorney</i>	

<sup>1</sup>Norwegian Hospital Procurement Trust e-mail : [nyelegemidler@sykehusinnkjop.no](mailto:nyelegemidler@sykehusinnkjop.no)

## 2 Medical product overview and assessment history

Nye Metoder ID Number	
Active substance	
Trade name	
Indication  <i>A request for reassessment must apply to the same population as the original assessment. If the request relates to another population or a subpopulation, the form titled "Request for assessment of medicinal product" should be used (see nyemetoder.no).</i>	
Current decision from Beslutningsforum for nye metoder (Nye metoder's Decision Forum)  <i>Date?</i>	

## 3 Basic prerequisites for reassessment

Clinical practice  <i>Is the description of Norwegian clinical practice in the original assessment still applicable, including comparator, prior treatment etc.?  Briefly describe.</i>	
New data for the medicinal product  <i>Briefly describe why there are grounds for a reassessment of the method. Describe the available new data</i>	
Expected date (quarter/year) for submission of documentation to Norwegian Medicines Agency  <i>Dates must be stated</i>	
New data for the comparator  <i>Describe any new data for the comparator</i>	

**Other conditions**

*Describe any other conditions that have changed since the previous assessment*

**4 Relevance of new data****New data**

*Give an account of the new data compared to the original results that formed the basis for the current decision by Beslutningsforum for Nye metoder (Nye metoder's Decision Forum)*

*Describe how the new data can help meet the prioritisation criteria.*