

**INDIAN COUNCIL OF MEDICAL RESEARCH**

**DEPARTMENT OF HEALTH RESEARCH**

**Requisite information to be submitted by private laboratories interested in COVID 19 testing**

S.No	Name of lab	Head Office	Total No of collection sites	Location of Collection sites	Influenza testing by RT-PCR Y/N	No of RT-PCR Machine available	No of Biosafety cabinets	Dedicated area for molecular diagnostics	COVID 19 testing reagents available Y/N	List of reagents available	Quantity of Reagent available	If not available please mention timeline for procurement	NABL/CAP/ILAC Accreditation & Scope of Accreditation	Participation in EQAS Programme (If any)	Modality of Sample Collection	No cost /chargeable
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2																
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10																

Interested private laboratories may kindly send the filled in performa to Dr. Neeraj Aggarwal at: [aggarwal.n@icmr.gov.in](mailto:aggarwal.n@icmr.gov.in)