

**Form for providing technical information on probiotic microorganisms**  
(In the case of microorganisms were **not included** in the latest QPS (EFSA) list)

Company/Organization name .....

Company/Organization status (Please marking (✓) by select one or more items)

- Producer of probiotic microorganisms   
 Importer of probiotic microorganisms   
 Producer of probiotic foods   
 Importer of probiotic foods  
 Laboratory   
 Academic organization/Educational institute   
 Other, please specify .....

Tel. .... Email .....

**Part 1: General information**

Please select the <b>genus and species</b> of the microorganism by marking (✓) <b>only one item</b>	Please provide additional information relevant to the selected microorganisms
<input type="checkbox"/> <i>Bifidobacterium pseudolongum</i>	<b>subspecies</b> (If present, please specify).....
<input type="checkbox"/> <i>Enterococcus durans</i>	<b>strain</b> (please specify).....
<input type="checkbox"/> <i>Enterococcus faecium</i>	<b>latest name/synonyms</b> (If present, please specify).....
<input type="checkbox"/> <i>Lactobacillus zae</i> ( <i>Lacticaseibacillus zae</i> )	<b>trade name</b> (If present, please specify).....
<input type="checkbox"/> <i>Propionibacterium arabinosum</i>	<b>source of isolation</b> (please specify) .....
<input type="checkbox"/> <i>Staphylococcus sciuri</i> ( <i>Mammaliicoccus sciuri</i> )	<b>authorization status</b> (In the case of a producer or importer) Please marking (✓)
<input type="checkbox"/> Other, please specify.....	<input type="checkbox"/> Licensed granted, please specify the Food Serial Number ..... <input type="checkbox"/> Assessment passed, please specify the official letter number that informs the assessment results (අඹ) no. .... / ..... date ..... <input type="checkbox"/> Not licensed granted yet/ Not assessment passed yet

**Part 2: Safety information and probiotic properties according to the strain selected above**

<b>(1) Strain identification and characterization</b>	Please marking (✓)
(1.1) Identity of the genus, species, and strain of microorganisms	<input type="checkbox"/> Information and supporting documents were provided** <input type="checkbox"/> No information
<b>(2) Probiotic properties</b>	Please marking (✓)
(2.1) Resistance to gastric acidity	<input type="checkbox"/> Information and supporting documents were provided** <input type="checkbox"/> No information
(2.2) Resistance to bile salts	<input type="checkbox"/> Information and supporting documents were provided** <input type="checkbox"/> No information
(2.3) Adherence to mucus and/or human epithelial cells and cell line	<input type="checkbox"/> Information and supporting documents were provided** <input type="checkbox"/> No information
(2.4) Bile salt hydrolase activity	<input type="checkbox"/> Information and supporting documents were provided** <input type="checkbox"/> No information
(2.5) Other properties (if present)	<input type="checkbox"/> Information and supporting documents were provided** <input type="checkbox"/> No information

<b>(3) Safety assessment*</b>	Please marking (✓)	
(3.1) Antimicrobial resistance (AMR)	<input type="checkbox"/> Information and supporting documents were provided**	<input type="checkbox"/> No information
(3.2) Assessment of certain metabolic activities (e.g., D-lactate production, bile salt deconjugation)	<input type="checkbox"/> Information and supporting documents were provided**	<input type="checkbox"/> No information
(3.3) Assessment of side-effects during human studies	<input type="checkbox"/> Information and supporting documents were provided**	<input type="checkbox"/> No information
(3.4) Epidemiological surveillance of adverse incidents in consumers (post-market)	<input type="checkbox"/> Information and supporting documents were provided**	<input type="checkbox"/> No information
(3.5) Toxin production (for the species that is a known mammalian toxin producer)	<input type="checkbox"/> Information and supporting documents were provided**	<input type="checkbox"/> No information
(3.6) Hemolytic activity (for the strain belongs to a species with known hemolytic potential)	<input type="checkbox"/> Information and supporting documents were provided**	<input type="checkbox"/> No information
<b>(4) Other supporting information (if present)</b>	Please marking (✓)	
(4.1) Other related information from different countries or recognized international organization(s) such as regulations, authorized information	<input type="checkbox"/> Information and supporting documents were provided**	<input type="checkbox"/> No information
<b>Notation:</b> * Requirements according to FAO/WHO guidelines (2002)		
** Please prepare a summary of all topics in the Thai language and send it together with the supporting document files to email “ <a href="mailto:food.publichearing@gmail.com">food.publichearing@gmail.com</a> ”		

**\*\* 1 form per 1 strain of microorganisms only \*\***