APPENDIX FF
SYSTEMATIC REVIEW FORM

**CPR183/F14**

**KENYA BUREAU OF STANDARDS**

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| --- | --- |
| **Document Type:** | **Systematic Review Questionnaire** |
| **Dates:** | Circulation date | Closing date |
| 25th January 2024 | 26th February 2024 |
| **TC Secretary** | **This form shall be filled, signed and returned to Kenya Bureau of Standards for the attention of Juma Boniface at jumab@kebs.org** |

The Kenya Bureau of Standards is in the process of reviewing the Kenya Standard(s) as detailed in the attached list of Kenya Standard(s) for Systematic Review.

We are therefore seeking views from potential users in respect of relevance and effectiveness of the attached standard(s) in addressing current market needs, regulatory needs and scientific and technological development.

The Standard(s) are available at the Kenya Bureau of Standards Information Centre. Please tick (mark) and fill your preference of the listed option. (If the spaces provided are not enough, please attach a separate sheet of paper).

1. KS 2349:2012 Kenya Standard — Orthosis — Specification
2. KS ISO 11334-1:2007 Kenya Standard — Assistive products for walking manipulated by one arm — Requirements and test methods Part 1: Elbow crutches
3. KS ISO 11334-4:1999 Kenya Standard — Assistive products for walking manipulated by one arm — Requirements and test methods Part 4: Walking sticks with three or more legs
4. KS 1320:2010 Wheelchairs Foldable and Fixed Wheelchairs Specification Second Edition

Please indicate your choice out of the following actions which you prefer to be taken on this Kenya Standard.

| **S/No.** | **STANDARD NUMBER** | **CONFIRMATION** | **REVISION** | **AMENDMENT** | **WITHDRAWAL** |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |
|  | KS 2349:2012 |  |  |  |  |
|  | KS ISO 11334-1:2007  |  |  |  |  |
|  | KS ISO 11334-4:1999 |  |  |  |  |
|  | KS 1320:2010 |  |  |  |  |

Justification for revision, amendment or withdrawal (cite specific clauses and wording preferred):

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Name and (of respondent)……………………………………………… Position…………………

Signature: …………………………………………………….

On behalf of: (Name of organization)

Date:

**NOTE:** Absence of any reply or comments shall be deemed to be an acceptance of the proposal for confirmation and **shall constitute an approval vote**.