

## Expression of Interest

Seeking manufacturers of Ebola laboratory-based PCR kits, point-of-care molecular tests and Ag-RDTs to participate in performance evaluations in low- and middle-income countries

### EXECUTIVE SUMMARY

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| <b>Background</b>                          | <p>Ebola disease cases caused by Bundibugyo virus (BDBV) are increasing in the Democratic Republic of the Congo (DRC). Exportation of cases have been noted in Uganda. In response, WHO declared the outbreak a Public Health Emergency of International Concern (PHEIC) on 17 May 2026. Africa CDC followed on 18 May 2026, designating the outbreak as a Public Health Emergency of Continental Security (PHECS), based on recommendations from its Emergency Consultative Group (ECG).</p> <p>Critical gaps in testing capacity needed to assess the outbreak's impact and guide an effective response. There is an urgent need for diagnostics capable of detecting BDBV, as well as rapid and accurate tests that can be deployed in decentralized settings to support the most affected communities.</p> <p>A consortium composed of WHO, Africa CDC, PATH and FIND with the support of UNITAID is launching a coordinated initiative to strengthen the BVD diagnostic response. The initiative will take a comprehensive approach across the diagnostic ecosystem, including the evaluation and benchmarking of laboratory-based molecular assays to support confirmatory testing, alongside the advancement of diagnostics suitable for decentralized settings to enable faster, front-line decision-making. Aligned with the 100 Days Mission for medical countermeasures, this effort aims to accelerate access to a broad range of fit-for-purpose diagnostics to ensure timely and equitable response across affected regions.</p> |
| <b>Purpose of partner engagement</b>       | <p>The consortium is launching an Expression of Interest (EOI) for manufacturers interested in participating in an <b>independent performance evaluation of diagnostics for BDBV detection, including laboratory-based molecular kits, point-of-care molecular (MDx POC) tests, and antigen-based rapid diagnostic tests (Ag-RDTs).</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <b>Type of partners &amp; Technologies</b> | <p>Eligible entities are original IVD manufacturers of lab-based molecular kits, MDx POC test, and Ag-RDTs capable of detecting BDBV. The diagnostic assay and associated device (where applicable) must be at a commercial or pre-commercial stage, with demonstrated readiness for scale-up and the ability to ship to evaluation sites in Europe, the United States, DRC, Uganda, and other relevant African countries.</p> <p>Selected manufacturers will be required to deliver the requested quantities of tests to the designated evaluation sites over June and July 2026.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |

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|                                    | Applicants must demonstrate a commitment to supplying LMICs at affordable pricing. Further details are provided in the “Eligibility criteria” section.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| <b>Benefits for the applicants</b> | <p>Through this performance evaluation project, the selected candidates will benefit from the following:</p> <ul style="list-style-type: none"> <li>- The consortium will fund the independent performance evaluation and will purchase the required tests and devices within budget constraints only for the purpose of this evaluation. We may request selected manufacturers to donate tests/devices to support the evaluation</li> <li>- Independent analytical and usability data will be generated</li> <li>- Independent clinical data will be generated in field settings at partner sites</li> <li>- Based on the quality of the newly generated evidence, tests may be further assessed for potential recommendation by Africa CDC</li> <li>- Manufacturers will have access to a detailed confidential performance report on their test</li> <li>- Data generated may also support submissions to the WHO Emergency Use Listing (EUL) process</li> </ul> |
| <b>Estimated project timeline</b>  | <ul style="list-style-type: none"> <li>- <b>June 29:</b> Shortlisting of a first batch of tests and notification to the selected candidates</li> <li>- <b>June - July:</b> purchase of tests and shipping at evaluation sites</li> <li>- <b>July:</b> Start of analytical and usability studies (duration ~ 2 weeks)</li> <li>- <b>July - August:</b> Start of clinical studies (duration ~ 2-3 months with an interim data analysis)</li> </ul> <p><u>Note:</u></p> <ul style="list-style-type: none"> <li>- The evaluation framework will encompass analytical studies and prospective clinical evaluations, as appropriate. The selection and timing of these evaluation activities will be tailored to the intended use of each tool and the requirements of the public health context.</li> <li>- Depending on the number of tests and site capacity, inclusion of tests in the evaluations may be conducted in multiple rounds</li> </ul>                     |
| <b>Application deadline</b>        | The deadline for receipt of submissions is <b>11 June 2026 at 23h59 CEST.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| <b>Contact</b>                     | Please email questions to <a href="mailto:rfp.bi@finddx.org">rfp.bi@finddx.org</a> with the subject line: “EOI EBOLA EVALUATION JUNE2026”                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |

## SECTION 1: THE PROJECT

### BACKGROUND

As described on WHO website (<https://www.who.int/emergencies/situations/ebola-outbreak---drc-2026>), the Ebola disease outbreak was confirmed in the Democratic Republic of the Congo (DRC) and in Uganda in May 2026. The Bundibugyo species involved is one for which there is no approved vaccine or specific treatment, though work is ongoing to evaluate promising candidates. The outbreak is occurring in a challenging context: humanitarian crisis and a remote and densely populated area, combined with insecurity and high population and trade movements.

Since the Public Health Emergency of International Concern (PHEIC) declared by WHO on May 17 and the Public Health Emergency of Continental Security (PHECS) declared by Africa CDC on May 18, the number of confirmed cases has increased rapidly in DRC, with geographical expansion into North Kivu and South Kivu Provinces. Cross-border transmission risks remain elevated due to insecurity, humanitarian crises, high population mobility, urban/semi-urban transmission hotspots, and porous borders, requiring intensified surveillance and information sharing.

Bundibugyo virus disease (BVD) is a severe and often fatal form of Ebola disease caused by the Bundibugyo virus, one of the *Orthoebolavirus* species. Case fatality rates in the past two BVD outbreaks, reported in Uganda and in DRC in 2007 and 2012, have ranged from approximately 30% to 50%.

Controlling transmission chains relies on rapid case identification, isolation and care. Therefore, health authorities in DRC, in collaboration with WHO and partners are implementing public health measures. For example, laboratory surge capacity is being scaled-up. The Institut National de la Recherche Biomédicale (INRB) teams are deploying to Bunia and other locations to establish and scale-up testing, in line with a nationally led decentralization strategy.

Limited diagnostic capacity and lack of sufficient decentralized testing solutions continue to impede Ebola disease preparedness and response in DRC and neighboring countries. Furthermore, critical detection gaps can occur if Ebola disease tests being used are not validated against BVD.

Therefore, a consortium composed of WHO, Africa CDC, PATH and FIND with the support of UNITAID is launching this Expression of Interest (EOI) to support analytical, laboratory and field evaluations of laboratory-based molecular kits, point-of-care molecular (MDx POC) tests, and antigen-based rapid diagnostic tests (Ag-RDTs) that detect BDBV.

## PRODUCT SPECIFICATIONS

Ebola BDVD tests targeted for inclusion in the evaluations should meet or target the following key product requirements<sup>1</sup>:

| Category            | Lab-based molecular kits                                                                                                                                                                                | MDx POC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Ag-RDT                                                                                                                                                         |
|---------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Target technology   | PCR kits: A kit containing reagents for a nucleic acid amplification test that can be run on standard PCR laboratory equipment. Not restrained to a specific instrument.                                | <p><b>Near-POC:</b> molecular platforms enabling testing in intermediate referral facilities (level 2). Key features are: Intermediate size, require basic technical / laboratory skills, dependent on basic laboratory infrastructure / equipment</p> <p><b>POC:</b> molecular devices enabling testing at the lowest level healthcare settings. Key features: Handheld or portable, power-free, battery-operated (4 to 8h autonomy) or portable charger compatible, require no special skills, independent of laboratory infrastructure / equipment</p> | <p>Antigen-detecting lateral flow immunodiagnostic rapid tests (Ag-RDTs)</p> <p><i>Note: antibody-detecting lateral flow tests are out of scope.</i></p>       |
| Target user*        | Laboratory technician                                                                                                                                                                                   | <p><b>Near-POC:</b> Healthcare workers (HCW) with limited training on laboratory practices.</p> <p><b>POC:</b> Non-lab trained health workers and/or lay community workers</p>                                                                                                                                                                                                                                                                                                                                                                            | Non-lab trained healthcare workers (HCW) and/or lay community workers                                                                                          |
| Target use settings | Laboratory settings.                                                                                                                                                                                    | <p><b>Near-POC:</b> District hospitals / intermediate referral facilities (level 2) staffed with laboratory technicians and sometimes with laboratory specialists. Mains power is usually available but can be intermittent.</p> <p><b>POC:</b> Primary healthcare settings (Level 1) and above (outside laboratory settings).</p>                                                                                                                                                                                                                        | Within the community (Level 0) and above. No lab or infrastructure is available.                                                                               |
| Species target      | At minimum, Bundibugyo virus only or pan-Orthoebolavirus single-target assay. If available, additional coverage of Marburg virus and other hemorrhagic fever viruses. Species differentiation is a plus | At minimum, Bundibugyo virus only or pan-Orthoebolavirus single-target assay. If available, additional coverage of Marburg virus and other hemorrhagic fever viruses. Species differentiation is a plus                                                                                                                                                                                                                                                                                                                                                   | At minimum Bundibugyo virus detection capability and preferably pan-Orthoebolavirus inclusivity, with Orthomaburgvirus detection considered an added advantage |

<sup>1</sup> For more details, please review the TPP "The Case for Improved Diagnostic Tools to Control Ebola Virus Disease in West Africa and How to Get There" from <https://journals.plos.org/plosntds/article?id=10.1371/journal.pntd.0003734>, the 2014 WHO TPP <https://www.who.int/publications/m/item/target-product-profile-for-za-re-ebolavirus-rapid-simple-test-to-be-used-in-the-control-of-the-ebola-outbreak-in-west-africa> and the [Systematic review and meta-analysis of antigen rapid diagnostic tests to detect Zaire ebolavirus - ScienceDirect](#)

|                                                                  |                                                                                                             |                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                              |
|------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <i>Sample type</i>                                               | Venous whole blood, or derived specimen (plasma, serum) and oral samples                                    | <b>Near POC:</b> Fingerstick capillary blood, venous whole blood or derived specimen (plasma, serum) and oral samples<br><br><b>POC:</b> Fingerstick capillary blood and oral samples                                                                                                                             | Fingerstick capillary blood and oral samples                                                                                                                                                 |
| <i>Time to results</i>                                           | ≤ 3h                                                                                                        | ≤ 90 min                                                                                                                                                                                                                                                                                                          | ≤ 30 min                                                                                                                                                                                     |
| <i>Sample preparation</i>                                        | Standard molecular laboratory practice including extraction methods, PCR mix preparation and reaction setup | Minimal, simple pre-test processing, such as the need for sample inactivation step and/or sample transfer step. Minimal reagent reconstitution acceptable without any requirement for precise measurement. No centrifugation, no precise measurement required.                                                    |                                                                                                                                                                                              |
| <i>Test Kit components</i>                                       | Master mix, buffers, primers, controls and IFU                                                              | All materials for sample collection, preparation, and test operation included. IFU including information on the viral region(s) being targeted.                                                                                                                                                                   |                                                                                                                                                                                              |
| <i>Operating temperature and shelf life</i>                      | Shelf-life: ≥12 months refrigerated or frozen acceptable. Operable under routine laboratory conditions      | <b>Near-POC:</b> Shelf-life: ≥12 months refrigerated or frozen acceptable<br>Operating range: 15°C - 30°C, 80% RH<br><br><b>POC:</b> Shelf-life: ≥12 months at 30°C, 70% RH (tolerates brief periods > 40°C); Refrigerated acceptable<br>Operating range: 5°C - 40°C, 90% RH (able to withstand dusty conditions) | Shelf-life: ≥12 months at 30°C, 70% RH (tolerates brief periods > 40°C)<br>Operating range: 5°C - 40°C, 90% RH (able to withstand dusty conditions)<br>No cold-chain shipping required.      |
| <i>Result display &amp; interpretation</i>                       | Not applicable                                                                                              | Results are easily interpreted (e.g. visual or digital readout).                                                                                                                                                                                                                                                  | Visual read-out is preferred (clear result for naked eye), but the use of a portable, affordable and battery-operated reader can be accepted if it justifies the improvement of performance. |
| <i>Size &amp; Weight (in case of the use of a device/reader)</i> | Not applicable                                                                                              | Refer to “Target technology” definition                                                                                                                                                                                                                                                                           | When applicable, portable, battery-operated LFA reader that ensures operations for 4-8 hours operation between charges.                                                                      |
| <i>Maintenance</i>                                               | Not applicable                                                                                              | <b>Near-POC:</b> maintenance and support services required<br><br><b>POC:</b> None, swap out or replace ancillary devices when needed                                                                                                                                                                             | None, swap out or replace ancillary devices when needed                                                                                                                                      |

\* All HCW, lab technicians, and community workers mentioned here must be trained for work with Ebola patients/samples

## OBJECTIVE AND SCOPE

As part of the 100 Days Mission, global health actors are working together to accelerate and expand the availability of diagnostics to ensure rapid and equitable access for affected communities. In the current BVD outbreak, the gaps are evident as diagnostic capabilities are limited through the lack of detection of BDBV by commonly used Ebola virus (EBOV) tests, the lack of performance data for tests that target BDBV as well as a lack of POC solutions to support decentralized testing. Therefore, **a consortium composed of WHO, Africa CDC, PATH and FIND with the support of UNITAID is collaborating to support the BVD diagnostic response** by ensuring the evaluation and availability of Ebola diagnostic tests and benchmarking activities to the 100 Days Mission for medical countermeasures.

Specifically, the consortium will focus on assessing the performance of Ebola diagnostics across centralized laboratory and decentralized settings. In that context, we are seeking eligible IVD manufacturers interested in having their Ebola laboratory-based molecular kits, point-of-care molecular (MDx POC) tests, or antigen-based rapid diagnostic tests (Ag-RDTs) evaluated. The consortium aims to fund and conduct:

1. Analytical laboratory studies
2. Clinical field studies in DRC and possibly in other African countries, such as Uganda. Product usability and acceptability will also be assessed.

For this study, the consortium will collaborate with its evaluation partners including Hôpitaux Universitaires de Genève (HUG), Charité and Institut National de Recherche Biomedicale (INRB). Other partners may be involved.

Only a subset of tests will undergo prospective clinical field evaluation, with selection based on technical and operational performance, intended use, clinical site capacity, and logistical considerations..

High level results of the findings will be available in public reports, through partner websites, respecting confidentiality agreements. This is not a cross-comparison study across applicant manufacturer products (kits from different providers will not be compared to each other). No data will be shared between manufacturers, and only the submitting party will have access to the respective detailed report.

Evidence generated throughout this study may inform potential recommendation by national/regional public health authorities (e.g., Africa CDC) or support submissions for regulatory authorization (e.g., WHO-EUL).

#### Notes:

- Participation in the independent evaluation does not constitute, and shall not be presented as, any endorsement, certification, recommendation, approval, validation or guarantee by any consortium member or any designated evaluation partner of the Applicant, the product, its performance, regulatory status, procurement suitability, or any WHO PQ, WHO EUL or other regulatory, policy or procurement outcome.
- This EOI is for information and selection purposes only and participation does not guarantee selection or conduct of any evaluation. The consortium may modify, suspend, or cancel the EOI process at any time

## OPPORTUNITIES AND BENEFITS FOR THE APPLICANTS

Through their participation in the independent evaluation, the test manufacturers will:

- **Benefit from evidence generation** that will be relevant to global health stakeholders, particularly Africa CDC and WHO. Data may be used to inform potential recommendation by Africa CDC or support submission to the WHO Emergency Use Listing (EUL) process
- **Contribute to Global Health:** By participating in this project, applicants contribute to advancing diagnostic capabilities for Ebola in LMICs.
- **Networking and Collaboration Opportunities:** The project provides a platform for applicants to connect and collaborate with the consortium and potential partners in the global health community. This can foster valuable relationships, knowledge exchange, and future opportunities for research and development.

## TIMELINE

An overview of key project dates is provided below (tentative dates):

- **June 29:** Shortlisting of a first batch of tests and notification to the selected candidates
- **June - July:** procurement of tests and shipping at evaluation sites
- **July:** Start of analytical studies (duration ~ 2 weeks)
- **July - August:** Start of clinical studies (duration ~ 3 months with an interim data analysis)

## SUPPORT PROVIDED BY THE CONSORTIUM

### INDEPENDENT EVALUATION ACTIVITIES

For technologies ready and eligible for independent evaluations, the applicants can expect the following support from the consortium and its partners (the list provides examples and is not exhaustive):

- The consortium will procure the tests and platforms (or consider loan agreements for platforms) for the evaluation study.
- The consortium will conduct performance evaluation and usability assessment.
- Assistance with import permit to ship the kits to the evaluation sites.
- Selection of the study sites.
- Study protocol development and submission for IRB approval.
- Study management.
- Data collection and data analysis.
- Study report preparation.
- Dissemination of results to relevant stakeholders.

## COMMERCIAL PARTNER COMMITMENT

The following typical commitment will be needed from the selected partners:

### INDEPENDENT EVALUATION ACTIVITIES

- Manufacture and ship a minimum of 2000 assays and 5 devices/readers (if applicable) to evaluation sites based in Europe, United States and Africa within a 15-day timeframe or less.
- Provide instructions for use and any required training to the evaluation team.
- Provide technical support during the studies, if necessary.

Please note that this evaluation will be conducted independently. Suppliers and manufacturers will not be involved in executing the studies or in analyzing or reporting the results and conclusions. All data generated from the studies will be owned by the consortium.

Irrespective of the type of partner engagement activities, the selected partners commit to a transparent and affordable pricing model for the lowest sustainable pricing for LMICs (i.e., COGs-based pricing).

## SECTION 2: INSTRUCTIONS AND PROPOSAL REQUIREMENTS

### ELIGIBILITY CRITERIA

We invite developers/manufacturers from around the globe and also strongly encourage applications from local manufacturers in LMICs. Entities responding to this EOI must meet the following criteria for their submissions to be considered:

- **Type of entity:** Original developers/manufacturers of the Ebola test (not a distributor)
- **Type of test technology:** Laboratory-based molecular kits, point-of-care molecular tests (MDx POC) or antigen-based rapid diagnostic tests (Ag-RDTs).  
Note: lab-based immunoassays and any antibody-based tests are not eligible
- **Disease / Pathogen target:** capable of detecting Bundibugyo virus (BDBV), as demonstrated at a minimum by in silico studies. Differentiation between BDBV and other Filoviruses is a plus for molecular tests.
- **Stage of development:** commercially available is preferable. If pre-commercial, the system must be design-locked and ready for independent evaluation (including manufacturing and shipping), defined as TRL7 or above (see TRL table).
- **Ready for independent evaluation:** Willing to participate in an independent performance evaluation and commit to supply at least 2000 assay kits and 5 devices to DRC, Uganda and other sites in EU, and US over June and July 2026 for manufacturer-independent performance evaluation.

Table: Description of Technology Readiness Level (TRL).

| Technology Readiness Level | Description                                        | Detail                                                                                                                                 |
|----------------------------|----------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|
| TRL 1                      | Basic technology principles                        | Scientific literature reviews and market surveys; unmet need and potential solutions articulated                                       |
| TRL 2                      | Technology concept formulated                      | Potential applications identified, research plans and protocols developed                                                              |
| TRL 3                      | Experimental proof-of-concept                      | Preliminary demonstration of scientific principles using laboratory models and methods                                                 |
| TRL 4                      | Technology components validated in laboratory      | Component validation in laboratory environment<br><i>Some laboratory practices (e.g. kit extraction) still used</i>                    |
| TRL 5                      | Technology validated in operational environment    | Component/breadboard validation for target setting (e.g. LMIC, POC)<br><i>All components for device are developed and demonstrated</i> |
| TRL 6                      | Technology demonstrated in operational environment | Prototype demonstration: full process but not final integration<br><i>Appropriate for in-house alpha testing</i>                       |
| TRL 7                      | Integrated system demonstration in target setting  | Prototype demonstration: fully integrated system<br><i>Appropriate for beta-testing; can be sent out for evaluation</i>                |
| TRL 8                      | System complete and qualified                      | Validation studies completed; in process for regulatory approval                                                                       |
| TRL 9                      | Commercial system ready for operation              | System can be marketed                                                                                                                 |

## OUT OF SCOPE

The following categories of entities and products are not in the scope of this EOI:

- ✗ Distributors
- ✗ Academic teams which lack a development partner or without a clear plan towards commercialization
- ✗ Antibody-based tests and lab-based immunoassays
- ✗ Laboratory molecular kits that are restricted to an instrument that is proprietary to the kit manufacturer (i.e. not an open-PCR kit)
- ✗ Prototype tests (e.g. tests still in early development and not design-locked)
- ✗ Tests currently not available for supply or procurement for independent evaluation
- ✗ Tests not ready for commercial distribution in DRC and neighboring countries within 3 months

## SELECTION CONDITIONS

For this EOI, selected candidates are expected to:

- Commit to and follow [FIND Global Access Policy](#) and [FIND Code of Conduct and Ethics](#)
- See **Appendix 1** for additional information on "Grounds for Exclusion".
- Commit to undertaking activities that enable product launch (e.g., local registration, service, and distribution activities) and to supply to the public sector in LMICs.
- Commit to a pricing model that is transparent and affordable for LMICs (i.e. COGS-based pricing)

## APPLICATION DEADLINE

The deadline for receipt of submissions is **11<sup>th</sup> June 2026 at 23h59 CEST**.

## APPLICATION REQUIREMENTS

To be complete, applications must include the following:

- **Online questionnaire:** Applicants shall fill out and submit the online questionnaire, available here: <https://forms.cloud.microsoft/e/sBryvRKWQV>
- **Applicant presentation:** Applicants shall provide a slide deck of **no more than 10 slides** and must use the provided PowerPoint template, available here: [https://www.finddx.org/wp-content/uploads/2026/06/20260602\\_EOI\\_Ebola-Dx-Evaluation\\_PPT-Template.pptx](https://www.finddx.org/wp-content/uploads/2026/06/20260602_EOI_Ebola-Dx-Evaluation_PPT-Template.pptx)
- **Self-declaration:** Applicants are to complete the self-declaration form (see Appendix 1), available here: [https://www.finddx.org/wp-content/uploads/2026/06/20230911\\_self\\_dec\\_FV\\_EN.xlsx](https://www.finddx.org/wp-content/uploads/2026/06/20230911_self_dec_FV_EN.xlsx)
- **Supporting documents:** Aside from the documents listed above, applicants must provide the instructions for use/product inserts for the relevant products and the analytical and/or clinical reports supporting the performance claims.

*Name your documents as follows: NAME OF THE COMPANY\_NAME OF TEST\_DOCUMENT SHORT TITLE*

## HOW TO APPLY

Submit applications by:

- 1) completing the online questionnaire
- 2) emailing the requested documents and supporting materials to [rfp.bi@finddx.org](mailto:rfp.bi@finddx.org).

An incomplete dossier will not be considered for review.

## SELECTION PROCESS

The selection process is designed to be objective, independent, and transparent to ensure that the most suitable partner is selected, and potential conflicts of interest avoided. Candidates will be evaluated by a review panel comprised of staff representing the different partners of the consortium. The review panel will use information submitted in the application (see **Application Requirements**), as well as publicly available information. The review panels may request additional information or clarifications, if needed, in writing.

Applications will be evaluated in stages, as follows:

- **Stage 0.** All applicants' eligibility will be verified, and those that are "out of scope" or incomplete will be excluded. Additional grounds for exclusion of an application at this stage are detailed in **Appendix 1**. The list of eligible candidates will advance to Stage 1.
- **Stage 1.** This evaluation will shortlist and rank the most promising candidates (up to 5 tests per technology category). The consortium review panel will assess long-listed candidates using the submitted application materials (See **Application Requirements**). More specifically, candidates will be evaluated on:
  - o Technical score: Existing product specifications and user workflow (technical, operational)
  - o Performance score: Existing product claim performances and data quality (level of evidence)
  - o Access score: Existing product stage of development, pricing and availability (in key countries)
  - o Organizational score: Assessment of business achievements, finance, quality & regulatory, manufacturing & distribution
- **Consensus call** – Short-listed candidates will be selected following a consensus call with representatives from each consortium member and their respective decision-making bodies (e.g., DAC from Africa CDC).

Note: Applicants not selected will be notified; however, the details regarding non-selection will not be provided for every applicant.

| Stage 0                                                                                                                                                                                                                                                                                                                                             | Stage 1                                                                                                                                                                                                                                                                                                                                                                  | Consensus call                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
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| <i>Initial screening of all applicants to a set of long-listed candidates</i>                                                                                                                                                                                                                                                                       | <i>Evaluation to short-list candidates</i>                                                                                                                                                                                                                                                                                                                               | <i>To make a final decision on a shortlist of selected candidates</i>                                                                                                                                                                                                                                                                                                                                                                                                         |
| <ul style="list-style-type: none"> <li>• Verification that the contents of the application are in-scope. Applicants that are "out of scope" will be excluded.</li> <li>• Verification of applicant eligibility. Applicants that are not eligible will be excluded.</li> <li>• Verification of the completeness of the submission dossier</li> </ul> | <ul style="list-style-type: none"> <li>• Evaluation of long-listed candidates will be performed by the consortium review panel.</li> <li>• Candidates will be evaluated based on:               <ol style="list-style-type: none"> <li>1. Technical score</li> <li>2. Performance score</li> <li>3. Access score</li> <li>4. Organizational score</li> </ol> </li> </ul> | <ul style="list-style-type: none"> <li>• Short-listed candidates will be selected in a consensus call of reviewers.</li> <li>• To judge the alignment of the submission dossier with the objective of the EOI, a particular focus will be on availability, implementation feasibility, and performance data.</li> <li>• The final list of selected candidates will be approved by the decision-making bodies of the consortium members (e.g., DAC from Africa CDC)</li> </ul> |

## SUMMARY OF SELECTION TIMELINE

|                                           |                            |
|-------------------------------------------|----------------------------|
| EOI Issued                                | 5 <sup>th</sup> June       |
| Deadline for questions                    | 9 <sup>th</sup> June 2026  |
| Application deadline                      | 11 <sup>th</sup> June 2026 |
| Notification of short-listed candidates   | 29 <sup>th</sup> June 2026 |
| Start of evaluations (tentative timeline) | July 2026                  |

## QUESTIONS & FURTHER INFORMATION

Please email questions to [rfp.bi@finddx.org](mailto:rfp.bi@finddx.org) with the subject line: “EOI EBOLA EVALUATION JUNE2026”. Questions will be accepted and responded to expediently up to and including 10<sup>th</sup> June 2026. Submitted questions (and corresponding answers) will be publicly available on the [Calls for Partners](#) page.

## CONFIDENTIALITY

FIND acknowledges that the information received from Applicants under the EOI may be of a confidential nature. “Confidential Information” means non-public information submitted by an Applicant, whether in written, oral, electronic or other form, that is clearly marked or identified as confidential at the time of submission, or that by its nature and the circumstances of disclosure would reasonably be understood to be confidential. Confidential Information does not include information that: (i) is or becomes publicly available; (ii) was already lawfully known to FIND or a Representative or an Authorized Recipient before disclosure; (iii) is lawfully received from a third party without confidentiality restrictions; (iv) is independently developed without use of the Applicant’s Confidential Information; or (v) is required to be disclosed by law, regulation, court order or applicable institutional requirement. Applicants are responsible for clearly identifying any information they consider confidential. Information not so identified may be treated as non-confidential, unless it is clearly confidential by nature.

FIND shall use the same degree of care with Applicant’s confidential information as it uses to protect its own confidential information. If required by Applicant, FIND can sign a separate CDA with interested Applicants prior to proposal submission.

FIND may communicate the Confidential Information to its employees, independent contractors, institutional donors and other financial sponsors, legal, financial, scientific or technical advisors (together “Representatives”) and also to the members of the consortium under which this EOI is conducted (including, but not limited to, WHO, PATH, UNITAID and Africa CDC) and designated evaluation partners (including, but not limited to, HUG, Charite and INRB) (together the “Authorized Recipients”) who:

- (a) need to know such confidential information for reviewing the EOI submissions, the purposes of evaluation (including but not limited to selecting products for evaluation, planning, conducting or supporting the evaluation activities, analysing evaluation results), and for other related purposes connected with this EOI, and
- (b) bound by terms and conditions substantially similar to those contained in this EOI, including but not limited to confidentiality and non-use restrictions.

Review of proposals will be carried out by an internal FIND team as well as consortium members, evaluation partners and/or a team of external experts (which may or may not include members of FIND’s independent Scientific Advisory Committee). All such reviewers shall be subject to confidentiality obligations and shall be required to disclose any actual, potential or perceived conflict of interest and to recuse themselves where needed.

Confidential information may be shared across jurisdictions as required for the evaluation activities described in this EOI, subject to the safeguards set out above.

The submission of information under this EOI does not restrict the consortium's ability to publish or share evaluation results in accordance with the terms of this EOI.

Any specific questions concerning confidentiality should be addressed to the FIND team.

## COMPLAINTS

Applicants who disagree with any actions or decisions taken in the course of the RFP evaluation may file a complaint in writing to FIND ([rfp.bi@finddx.org](mailto:rfp.bi@finddx.org)), detailing the grounds for the complaint and making reference to the applicable provisions in the RFP or other regulations. The complainant may also use FIND's [Ethics Hotline](#) as a channel for raising complaints anonymously. FIND shall acknowledge the complaint within three (3) days of receipt and respond within ten (10) working days thereafter.

## Appendix 1: Grounds for exclusion

Country of origin is not an exclusion criterion for this EOI, **except** where an international embargo or sanction by the United Nations, the European Union, Switzerland or other applicable sanctions regime applies.

Applicants shall not be selected for this EOI if, on the date of the application submission, selection, or any time during the EOI process, they:

- are bankrupt, being wound up or ceasing their activities, are having their activities administered by courts, have entered into receivership, or are in any analogous situation;
- have been:
  - convicted by a final judgment or a final administrative decision or subject to financial sanctions by the United Nations, the European Union and/or Switzerland for involvement in a criminal organization, money laundering, terrorist-related offences, child labour or trafficking in human beings; this criterion of exclusion is also applicable to legal persons, whose majority of shares are held or factually controlled by natural or legal persons who themselves are subject to such convictions or sanctions;
  - convicted by a final court decision or a final administrative decision by a court, the European Union or national authorities in any relevant jurisdiction for fraud, corruption, sanctionable practices, professional misconduct or other serious irregularity relevant to participation in this EOI or the evaluation process
- have been subject, within the last five years, to termination of a contract for significant or persistent failure to comply with their contractual obligations during contract performance, unless this termination is under challenged and dispute resolution is still pending or has not confirmed a fault against them;
- have not fulfilled applicable fiscal obligations regarding payments of taxes either in the country where they are constituted or operate or in Switzerland (governing law will be Switzerland);
- are subject to an exclusion, debarment or sanctions decision of the World Bank, or any other multilateral development bank, international organization, public authority or donor, unless the Applicant can demonstrate, with supporting information that such decision is not relevant to this EOI or the evaluation;
- have given a misrepresentation in supplying the information requested by FIND as a condition to participate in this EOI;
- fail to provide requested clarifications, supporting documents or self-declarations within the requested timeline;
- present a conflict of interest that cannot be appropriately mitigated

Applicants must complete the self-declaration form provided in the submission portal (see HOW TO APPLY). To note: “yes” answers to these questions should indicate, preferably with accompanying evidence, what remedial measures have been taken by the Applicant to resolve the issue in question. FIND and/or the consortium may decide not to exclude an Applicant where they consider the measures to be sufficient and appropriate, and where the Applicant’s reliability can be clearly demonstrated. Applicants must promptly notify FIND of any material change to the information provided in their application or self-declaration. FIND and the consortium are not required to provide detailed reasons for non-selection or exclusion.

## References

- [Ebola outbreak DRC 2026 \(who.int\)](#)
- [The Case for Improved Diagnostic Tools to Control Ebola Virus Disease in West Africa and How to Get There \(TPP\)](#)
- [Target Product Profile for Zaïre ebolavirus rapid, simple test to be used in the control of the Ebola outbreak in West Africa](#)
- [Systematic review and meta-analysis of antigen rapid diagnostic tests to detect Zaire ebolavirus - ScienceDirect](#)