

## 15 September 2020

Practical User Guide for Electronic Application Forms (eAF) for human and veterinary medicinal products in the EU

Version 1.8.

## Note to readers

This guidance reflects the current state of knowledge and is subject to future updates to take new information on-board. Therefore, it is important that comments are fed back to the eAF User Group by e-mail EMA IT service desk (<u>https://servicedesk.ema.europa.eu</u>).

Screenshots in this document have been, in most cases taken using eAF version 1.24. In some cases, this guidance will still use screenshots based on earlier versions. It is not possible to match this guidance document with one exact version of the eAF. However, information about new functionalities or changes are in the up to date release notes at: <u>http://esubmission.ema.europa.eu/eaf/index.html</u>.

## **Document History**

## Change Record

Version	Author(s)	Comments
1.0	eAF User Group	This document has been prepared by the sub-group on guidance and information of the eAF User Group in collaboration with CMDh and CMDv
	eAF User Group	First draft for revision, made the document in line with reported corrections, improved consistency with the Q&A on eAF and aligned with changes of the eAFs version 1.18
1.1	eAF User Group	Indicating acceptance of an image of a text snippet for EMA, additional advice for optimising the PDF file for eCTD purpose, minor editorial changes after review
1.2	eAF Sub-Group on Guidance	Update of the guidance to include new features of version 1.20 as well as to improve several sections based on user comments.
1.3	eAF Sub-Group on Guidance	Consolidation of review comments.
1.4.1	eAF Sub-Group on Guidance	Deleting the note in section 2.5.3 pointing to a workaround not meaningful.
1.4.2	eAF Sub-Group on Guidance	Update based on eAF v1.20.0.3 (Screenshots updated as necessary, advice on button "Add All" for member states in MAA hum/vet and REN), correction of link to EMA IT service desk
1.4.3	eAF Sub-Group on Guidance	Clean version for publication
1.6	EMA	Updated to reflect eAF v1.22.0.0
1.7	EMA / eAF Sub-Group on Guidance	Updated to reflect eAF v1.23.0.0 and the NtA changes triggering the updated version of the eAF.
1.7.1	eAF Sub-Group on Guidance	Including clarification on section 2.5.4
1.8	EMA	Updated to reflect eAF v1.24.0.0 (mainly variation form)

## Reviewers

Version Name Organisation	
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Version	Name	Organisation
1.0	Representatives of NCA and EMA	eAF Full Group,
	Representatives of NCA and EMA	CMDh,
	Representatives of NCA and EMA	CMDv
1.1	Representatives of NCA and EMA	eAF Full Group,
1.2	Representatives of NCA and EMA	eAF Full Group, CMDh and CMDv, eSub CMB
1.7	Representatives of NCA and EMA	eAF Full Group, CMDh and CMDv, eSub CMB

## Distribution

Version	Distributed to	Method of distribution
1.0	General public	Published on the EMA eSubmission website
1.1	General public	Published on the EMA eSubmission website
1.4	General public	Published on the EMA eSubmission website
1.5	General public	Published on the EMA eSubmission website
1.6	General public	Published on the EMA eSubmission website
1.7	General public	Published on the EMA eSubmission website
1.7.1	General public	Published on the EMA eSubmission website
1.7.2	General public	Published on the EMA eSubmission website
1.8	General public	Published on the EMA eSubmisison website

## Entering operation

Version	Date	Comments
1.0	July 2015	This guidance document should always be read in conjunction with the respective regulatory guidance documents on human and veterinary medicinal products. In parallel a Q&A document is available providing quick up-to-date additional information regarding usage of eAFs.
1.1	October 2015	This is an interim update. A next update will follow once the eAF version 1.19 is published.
1.4	June 2016	This is an interim update. Further updates are expected based on user feedback once version 1.20 is published.
1.5	October 2016	Updated version based on eAF v1.20.0.3
1.6	December 2017	Updated version based on eAF v1.22.0.0
1.7	July 2018	Updated version based on eAF v1.23.0.0

Version	Date	Comments
1.7.1.	August 2018	Updated version based on version 1.7
1.7.2.	September 2018	Updates based on minor comments
1.8	September 2020	Updates based on eAF v1.24.0.0

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## Purpose and general technical rules

The following pages provide general technical information regarding to all four PDF format electronic application forms. Additional information related to the specific application forms is provided in separate sections.

## Purpose of this document

As part of a submission package, it is mandatory for all (Human and Veterinary) submissions in EU Member States to use the electronic application form. The paper MS Word application forms are no longer provided by Notice to Applicants (NtA).

This document provides practical and technical support on the use of the Electronic Application Forms (eAFs) for human and veterinary medicinal products, and in addition to the regulatory user guide for the electronic application form for a marketing authorisation which is available for human medicinal products at CMDh and for veterinary medicinal products at CMDv. This document should be read in the context with the regulatory guidance referenced above.

**Note:** Reliable regulatory information must be taken from the (regulatory) user guides of the application form only.

A question and answer document is available at <u>http://esubmission.ema.europa.eu/eaf/index.html</u> to cover anticipated questions relating specifically to the electronic forms.

Field level help or tool tips are also available in the eAF by moving the mouse pointer over each field of the electronic forms.

**Note:** If the tooltips are not visible when you hover over the fields in the forms please contact your IT support.

The release notes list any new functionality when new versions of the forms become available. It is strongly recommended to review the release notes each time a new version of the forms is available.

Information is also available relating to the use of the forms in the release notes, for example some workaround solutions.

If you encounter an issue with a specific field, please refer to the Known Issues 'section in the release notes for the specific form <u>here</u> on the eSubmission website. Raise any new issues with the <u>EMA Service</u> <u>Desk</u>.

If the information cannot be included in the form, please review any workaround solutions provided in the release notes, or use an annex. In case of any further technical queries, please contact the  $\underline{\sf EMA}$ Service Desk

### Referential term change request processes

In case of a missing term and as a general rule, in order to complete an eAF, use the RMS Change Request processes as outlined in the Referential Management Services (RMS) operating model document. Please submit a request using the SPOR Portal: http://spor.ema.europa.eu/rmswi/#/

Provide as much supporting documentation as possible (e.g. name of the product concerned, SmPC, etc.). Please note you need to be registered with SPOR prior to submission of change requests: https://register.ema.europa.eu/identityiq/login.jsf. The user guide for managing referential and organisation data in eAF is available here. If you need to request a missing substance in order to complete an eAF, please submit a request for substance insertion with the corresponding SmPC to the EMA Service Desk portal - https://servicedesk.ema.europa.eu/.

## Access to the forms and news on updates

The use of the electronic application form has become mandatory as of July 1<sup>st</sup>, 2015, for the centralised procedure and as of January 1<sup>st</sup>, 2016, for all MRP/DCP and national procedures. Technical details are accessible at <a href="http://esubmission.ema.europa.eu/eaf/index.html">http://esubmission.ema.europa.eu/eaf/index.html</a>. The latest versions of the respective forms can also be found there.

Updates to the electronic application forms are expected to reflect any changes agreed by the European Commission, in consultation with the competent authorities of the Member States and the European Medicines Agency (EMA).

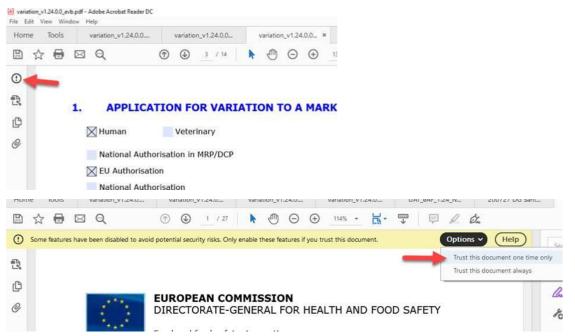
**Note**: Regular updates occur according to release planning.

The simplest way to keep up to date with changes to eAF is to subscribe to the eAF RSS feed.

For more information about RSS feeds, see <u>The EMA's Guide to RSS</u>.

## Adobe Reader requirements and IT security settings

When opening the eAF for the first time with Adobe Reader<sup>™</sup>, **click** the exclamation mark at the top of the left hand side menu bar and once a yellow bar opens across the top of the form, then **click Trust this document one time only or Trust this document always**. It has been noted that for some users the Trust this document one time only option works better.



Adobe<sup>™</sup> no longer supports version 9 or earlier, so we strongly advise to upgrade Adobe Reader<sup>™</sup> to the latest version. Please keep updated about Adobe<sup>™</sup> supported versions.

The minimum specification to use eAF is Adobe Reader<sup>™</sup> version 10 or above. If you wish to continue using Adobe Acrobat 9 and eAFs are working fine with it then do so, however should there be any compatibility issues then Adobe is unable to support the EMA.

Extensive testing has not been performed using Linux or Mac OS environments, however there are no known issues preventing the use as long as Adobe reader, and an internet connection are accessible.

**Note**: The built-in PDF viewer with Mozilla Firefox and Google Chrome do not support XFA based PDF forms. Guidance to assist with resolving this issue can be found <u>here</u>.

#### http://helpx.adobe.com/livecycle/kb/xfa-forms-firefox-chrome.html

If you receive this error message when opening the form the first time **click Options** and **click Trust this document** always.

Some features have been disabled to avoid potential security risks. Only enable these features if you trust this document.

**Note**: If the IT policy of your local organisation prohibits you from making changes to a security setting, contact your local IT service desk and request that they allow access to the following URL: <a href="http://eaf.ema.europa.eu/eaf/services/EutctService?wsdl">http://eaf.ema.europa.eu/eaf/services/EutctService?wsdl</a>

**Important:** The web services location, managed by the EMA, enables many of the forms' fields, searches and drop-down lists to be populated dynamically. Without access, the form **cannot** be completed. Please note that 'Trusting' the forms is an essential step to access the drop-down lists. Some issues have been reported when multiple PDF documents are open at the same time and some of the documents have been signed with Adobe Sign. This can prevent the eAFs from working and if you experience this issue, please close the document containing the Adobe Sign signature. Please note that the eAFs must not be signed using Adobe Sign or any other digital signature tool.

### Opening the form

The eAF forms are connected to a web services and this means they can take longer to open than conventional documents. When a form is opened, lists are loaded from EUTCT and RMS and some have complex built in 'business validation rules' which can make the forms heavy.

Drop-down lists are also loaded into the form and when initially opened and this is one of the reasons that the form takes longer time to open.

The average response times for how long it takes to open a current version of the eAF depends on the form. The responses are also different for new forms that are being opened directly from the eAF website as opposed to those that have been filled in, locked and submitted by the MAA/MAH.

**Note:** The searchable fields will not work if there is no internet connection (such as Active substance, Excipients and ATC code).

### Navigating the forms

You can jump between different sections of the forms by clicking your mouse on the bold blue section name. When you click to this text you are automatically taken to the Table of Contents section from where you can navigate to any other part of the form.



This functionality is limited in the locked forms where the table and contents and all the headers have been greyed out. The return to the Table of Contents will only work if the header is surrounded by dotted line.

TAB	LE OF CONTENTS			LE OF CONTENTS		
DECI	ARATION AND SIGNATURE	-	0.00	LARATION AND SIGNATURE		
1.	TYPE OF APPLICATION unlocked		1.	TYPE OF APPLICATION		
1.1	This application concerns		1.1	This application concerns		
1.2	Orphan medicinal product information		1.2	Orphan medicinal product information		
1.3	Application for a change to existing marketing authorisa extension as referred to in Annex I of Regulations (EC) in national legislation, where applicable	tion leading to an to 1234/2008, or any	1.3	Application for a change to existing marketing authorisation leading to an extension as referred to in Annex I of Regulations (EC) no 1234/2008, or any national legislation, where applicable		
1.4				.4 This application submitted in accordance with the following Article in Directive 2001/83/EC		
1.5				Consideration of this application also requested under the following article in Directive 2001/83/EC or Regulation (EC) N° 726/2004		
1.6	Requirements according to Regulation (EC) No 1901/200	06 ('Paediatric Regul	1.6	Requirements according to Regulation (EC) No 1901/2006 ('Paediatric Regulation		
2.	MARKETING AUTHORISATION APPLICATION PA	RTICULARS	2.	MARKETING AUTHORISATION APPLICATION PARTICULARS		
2.1	Name(s) and ATC code		2.1	Name(s) and ATC code Click to advance to named section.		
2.2	Strength, pharmaceutical form, route of administration,	container and pack s	2.2	Strength, pharmaceutical V jute or administration; container and pack sizes		
2.3	Legal status	80	2.3	Legal status		
2.4	Marketing authorisation holder / Contact persons / Con					
2.5	Manufacturers	2. MARKET	ING	AUTHORISATION APPLICATION PARTICULARS		
2.6	Qualitative and quantitative composition	2.1 NAME(S)		ATC CODE Dotted line indicates the link back		
3.	SCIENTIFIC ADVICE	Z.1 NAME(S)	AND	ATC CODE O'D Dotted line indicates the link back		
4.	OTHER MARKETING AUTHORISATION APPLICA	n t t Proposed (inve	nted) n	ame of the medicinal process in the European Union/Member State/ Iceland/ Liechtenstein/		
4.1	For National/MRP/DCP applications, please complete the with Article 8(j)-(l) of Directive 2001/83/EC	following in accorda	4.1	For National/MRP/DCP applications, please complete the following in accordance with Article 8(j)-(l) of Directive 2001/83/EC		
4.2				Marketing authorisation applications for the same product in the EEA (same qualitative and quantitative composition in active substance(s) and having the sam pharmaceutical form from applicants belonging to the same mother company or group of companies OR which are "licensees").		
4.3	For multiple/duplicate applications of the same medicina	il product	4.3	For multiple/duplicate applications of the same medicinal product		
4.4	Marketing authorisation applications for the same product outside the EEA (i. applicants belonging to the same mother company or group of companies OR are "licensees". Same qualitative and quantitative composition in active subs and having the same pharmaceutical form).		4.4	Marketing authorisation applications for the same product outside the EEA (i.e fr applicants belonging to the same mother company or group of companies OR wh are "licensees". Same qualitative and quantitative composition in active substan- and having the same pharmaceutical form).		
5.	ANNEXED DOCUMENTS (where appropriate)		5,	ANNEXED DOCUMENTS (where appropriate)		
FOR	M VALIDATION	FORM VALIDATION		M VALIDATION		

It is also possible to jump back to the respective sections of the form footnote references in the end of the document and back to the relevant section in the form by clicking the section that is surrounded by a dotted line. This functionality is disabled in locked forms.

In which Membe	r States <sup>2</sup> ?	<b>i</b>				
	-	Click to go	to corresponding foot	note.		
centrally authorised	products a lis				where the product is o	n

## Integration of the forms into dossier

Only the final signed PDF created using the electronic forms should be submitted in the relevant part of the dossier. The XML data can be extracted from the pdf file. This action will be performed by agencies when receiving the pdf form. Therefore, applicants should refrain from providing the XML data file separately.

It is underlined that the forms are secured in such manner that no change can be brought outside filling the field, i.e. no bookmarks or hyperlinks can be added, no merging with other files can be done, no

comments can be brought in the pdf file. In addition, it is not allowed to add any attachments/hyperlinks to the document.

If the eAF.xml is stored in the eCTD sequence or VNeeS submission, an error during technical validation will be reported. It is of course strongly advised against printing out the form and scanning it in.



**Important:** You must not use the attachment function within the forms to attach supporting documents. Whilst this feature is visible in the Reader/Acrobat window under a paper clip (), it should not be used. Unfortunately this functionality cannot be removed as it is inherent to adobe forms.

**Important:** Do not use the bookmarking functionality in PDF as this affects on how the forms are locked and may lead to rejection by receiving agencies.

## Export of XML data

The **`Export XML**' function allows users to extract the content of the electronic form in the XML (eXtensible Mark-up Language) file format. This is useful in a number of ways, including:

- 1. The XML output can be used in other IT systems (for example receiving regulators can use this data to populate their systems).
- 2. Previously exported XML outputs may be imported into a new version of the form, as long as the underlying .xsd (XML Schema Definition) has not changed in the interim.
- 3. The XML file is much smaller than the PDF file so may be considered more suitable for archiving.

To extract and view the XML do the following:

- 1. Navigate to the Form Validation page in the PDF, and then click **Export XML** to create an XML file.
- 2. To export the full form xml (including the drop-down list cache in the envelope node of the schema), click **No** when asked Would you like to export just the user entered form data?
- 3. To extract the user entered data only, click 'Yes' when asked 'Would you like to export just the user entered form data?'.
- 4. Save the file in your local file system and use your chosen XML file editor to view the data and its structure.

**Note:** You may also use the inbuilt export xml tool in Reader or Acrobat. The procedure to reach the inbuilt function varies in the different major software versions. The common procedure path for Reader 10 is: Extended>Export Data. The export can also be automated although the EMA does not provide a specific tool.

## Import of the XML data

This function mainly used by industry in order to recover and reuse data from a previous eAF into a new one.

It is also possible to **import XML** data in the correct format, if you have previously exported XML data (as long as the underlying .xsd (XML Schema Definition) has not changed in the interim):

1. Navigate to the Form Validation page in the PDF, and click **Import XML** to open the file system browser to find a previously created XML file.

2. Once the xml is imported, save, close then re-open the form whilst online to refresh the lists.

**Note:** You may also use the built in import xml in Reader or Acrobat to import previously completed form data.

**Important:** Performing this procedure, may overwrite the cached drop-down lists with an older version. To ensure this is resolved, save, close and re-open the form whilst online. This will refresh the lists and overwrite any outdated list content in the form cache.

**Note:** It is possible that some information will be lost when you export and import data from an older version of eAF to a new version due to changes in the form, and underlying schema. However, if you export from unlocked version and import into new version you will be able to change content in the form.

When exporting from a 'locked version of the form' you can only make changes in the actual xml and import into the new version.

## Update of the XML data

Concerns that the content will not remain the same after a couple of months (and require a print due to modified terms from controlled terms lists) are not justified as the terms will have a version ID which will assure that the display remains the same.

In case of updates of the eAF it will be possible to extract the data from the existing version of the form and import the data into the revised version. Most likely, manual correction may have to be done at least if data field types have been changed.

When any eAFs are opened when connected to the internet, an automatic version check is done to notify the user if a new version of the eAF is available for download. Drop down terms are always updated when opening the form. **Click** the **Update lists** button to update the list.

To manually check the version of eAF, do the following:

- Right-click on the body of the form and select Document Properties or on the Acrobat menu bar click: File>Properties (PC keyboard shortcut= CTRL+D).
- 2. The Document Properties dialog window is displayed. **Click** the Custom tab to find version information.

**Note:** The NtA revision number of the form on the right hand side reflects the paper form on which the particular electronic form is based on. The version number of the eAF is displayed on the left hand side.

EUROPEAN COMMISSION HEALTH AND FOOD SAFETY DIRECT	ORATE-GENERAL
Health systems, medical products and innovatio	n
eAF Version Number: 1.23.0.0	
	Revision 13

### Data fields and formats

In the form square boxes indicate that multiple choices are possible while round boxes indicate that one choice excludes the other possibilities.

Free text fields have been implemented in a number of sections of the forms where no controlled terminology is available. Improvement is ongoing on finding best solution to implement structured data fields throughout the form. In some sections free text fields provide additional options to describe e.g. roles of a manufacturer where no controlled terminologies are available.

Normally, free text fields in the forms allow only plain text. Only in the table for present and proposed information text in the variation form inclusion of formatted text will be possible (see section 3 of VAR form). Tracked-changes functionality is currently not available in interactive Acrobat forms.

The user interface indicates where text fields, data fields or entire sections can be duplicated or eliminated by using "+" or "-"buttons.

For each type of pack give	:	+	-
2.2.3.1 Package size	+ -		

eAFs are intelligent forms with built in business rules. Some sections are only displayed depending on previous selections. It is not necessary/possible to delete sections which are not required.

Once information is entered, the fields remain visible when un-ticking corresponding fields. To reduce the risk of accidental data loss completed sections when completed, are hidden. Data can only be deleted on a field by field basis by users. In some other cases, the values will be deleted when a different selection is chosen in the variations form when you switch between centralised and MR procedures.

The pop-up calendar fields allow you to select future months, and years within the form. With the calendar open, click the month/year and select the month/year option from the drop-down menu. Finally, click the day to close the calendar.

In some forms there are **copy from xx/populate from xx and clone** buttons to allow copying/duplicating information from previous sections to remove the need to re-enter data multiple times.

Please provide any proposals for implementation of certain sections/fields, any usability issues of the forms or certain character sets that you would like to see in any future implementation in order to meet your needs.

#### Providing contact & address details

Provide contact and address in a consistent way. Given there are a number of these sections required, the eAF provides users with the ability to reuse this data from one section to another. This reduces the need to repeat entry steps. See the example below:

Copy contact details from Declaration Section		
Copy contact details from 2.4.1 Section		
Copy contact details from 2.4.2 Section		

There are two ways offered to complete the data fields: You can complete address data line by line manually or select these details from the Organisation Management Service (OMS) by using an appropriate identifier (see over-next sub-section). Use of OMS is strongly recommended and it should be noted that mandatory use of OMS in the eAFs is being discussed.

#### Manual completing address details

Information how the address details must be entered in are provided in the tooltips when you hover over the corresponding field. The address details should only be entered manually exceptionally. The OMS data should always be used where possible.

Please select organisation from SPOR OMS to autofill address details. If the organisation is not found or the address details are not correct, please visit the OMS page in the SPOR portal for more information: http://spor.ema.europa.eu/omswi/#/		
Company name Pharma Company Ltd.		
Address	Mainstreet 23	
City/Locality/Town/Village Capitaltown		
State		
County		
Postcode	EF 2391 G	
Country United Kingdom		•
Telephone		
E-mail		

### Providing OMS organisation details to auto-populate address fields

In order to facilitate entry of the large number of required organisation and address details; eAF is integrated with OMS data. This allows users to search and select organisations from OMS records resulting in the auto-completion of the related address fields. This is to simplify data entry and reduce the number of repetitive manual data entry steps. The eAF OMS integration is one of the first integrated systems under the Agency SPOR program.

In all eAFs where there are organisation and address details required (with the exception of CROs & Billing Addresses), users will see the following: after **clicking Find Organisation**:

Please select organisation from SPOR OMS to autofill address details. If the organisation is not found or the address details are not correct, please visit the OMS page in the SPOR portal for more information: http://spor.ema.europa.eu/omswi/#/	Find Address Clear Address
Organisation name	Search
Country	
Address Results	
Select Select/Close	

This allows users to search for OMS organisations by using either:

- A unique Organisation ID\Location ID (OrgID/LocID). This 9 digit unique ID is issued as part of the OMS registration process.
- Using a combination of both the organisation name and country

Once the search is executed, the results are displayed in pipe delimited format with the following details:

- Language
- Company Name
- Address Line 1
- City
- Country

**Note**: The contents and structure is entirely dependent on the data present in OMS; given the early stage of OMS it is likely that not all data will be available as required. If data is missing or corrections are required; these need to be managed through the OMS change management process. Refer to the following link for further information: <u>http://spor.ema.europa.eu/omswi/#/viewDocuments</u>

	DMS page in the SPOR po europa.eu/omswi/#/		Clear Address
	OR		
Organisation na	me europe		Search
Country	United Kingdom	V	
Address Result	5		
EN Speciality E EN Vertex Phar EN Celgene Eu	uropean Pharma Limited maceuticals (Europe) Lin rope Limited 1 Longwalk	21 St. Thomas Street  Unit 16 John Street  United Kin hited Paddington Central Le Road Stockley Park United	gdom vel 9 United Kingd Kingdom

Once the OMS record has been selected all address related fields will be populated with the exception of the telephone and email. These details are held in OMS on the company level and the information required in the eAF is required for the procedure specific contact.

Company name	Incline Therapeutics Europe Limited	
Address 1	21 St. Thomas Street	
City/Locality/Town/Village	Bristol	
Postcode	BS1 6JS	
Country	United Kingdom	
OrgID	ORG-100003216	
LocID	LOC-100000283	
Telephone		
Telefax		
E-mail		

There is also the possibility to enter previously selected OMS addresses without having to perform a search on each individual entry; further aiding entry of organisation address fields, and can be illustrated as follows:

Previously selected addresses	
EN 21 St. Thomas Street Bristol United Kingdom	

If the service is temporarily unavailable or matching data is not available the following error messages is displayed:



In case such as this, please save and closed the form and reopen. If this does not help, please raise a ticket with the EMA service desk. In urgent cases, you may proceed and complete the address data manually.

## File Naming Convention

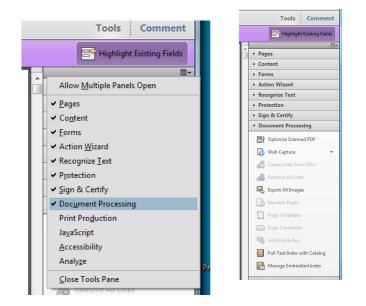
For human medicinal products the file name will be **common-form-var**.pdf. The variable part should be used as outlined in the file & folder naming convention of the updated eCTD validation criteria version 6.1. NeeS validation criteria version 4.1. In case you have to annex parts from the Classification Guideline for variations, this should become part of the 'var'- section, e.g. common-form-annex-classgl.pdf

	Recommended usage of the variable part of the file name in this section:	
	cc-form-eaf-var.pdf	
	cc-form-annex-var.pdf	Γ
_		

In case of veterinary submissions please consult the respective guidance.

### Rendering the eAF PDF file for eCTD purpose

Be aware of the settings for optimising the PDF file in accordance with the eCTD specifications. Make sure, that the line "Document Processing" is ticked on (as highlighted below) to allow full text index with catalogues and managing embedded indexes.



#### Validating the form

You can **click** the **Validate Form** button on the last page of each of the eAFs as soon as you open the document, however it should be noted that this will make filling in the form slower as the validation is performed continuously. Once the forms are validated all mandatory fields are highlighted (in yellow or

red). Validation can be performed as often as needed. The resulting list will provide links to the respective section where corrections or additional entries are needed.

If you are providing a separate annex to the application form instead of entering the information directly in a particular mandatory field, enter a space, N/A (not applicable) or a full stop to bypass the current minimum validation requirements. If the field does not allow text/full stop ignore the validation error and note this in the application cover letter.

In certain cases, it might not be possible to fill in all 'mandatory' fields in the eAFs leaving some form validation errors. If the information required in such fields is provided via an annex for example, or the fact that the information is not available is mentioned in the cover letter this doesn't normally cause any issues during content validation phase. However, if information required in the mandatory section is not filled in and no annex is provided a content validation issue might be triggered and the application cannot be processed.

The form validation is simply a feature that enables use of business rules and guides the MAA/MAH to fill in the form correctly to avoid content validation issues once the application has been submitted.

The validation errors are not visible in the form after it is locked and signed, however, the number of remaining errors will be displayed in the validation screen of the locked form.

Validating the form before entering the data might affect the form performance by making data entry slower – consider if you wish to validate the form, to highlight mandatory fields, before you start data entry.

**Note:** Validation rules are imposed to ensure that a good quality submission is enabled for all concerned parties. The validation rules are not linked to eCTD, NeeS or VNeeS validation rules and in some cases, for example when separate annex is used, it is acceptable to have validation error in the form which does not lead to business validation issues.

Applicants are encouraged to contact EMA technical help <u>EMA service desk</u> if currently implemented business rules should be reviewed and/or changed.

If you have any questions, comments or proposals for a best practice solution based on your requirements, please send these to <u>EMA service desk</u> for consideration.

### Signature

In regard to the requirements of signing the application form, EMA and national competent authorities may have different legal obligations. Consult their respective websites. Additional information will be provided by CMDh and CMDv.

Up to now the effect of inserting an image which normally is an image of a relevant signature or an image of a text snippet stating that the form was signed by the person authorised by the applying company can be used as well, (e.g. stating "This form was approved/authorised following company policies by [Mr. Nick Name; Head of Reg. Affairs] with authorisation to sign. The signature is in file.") The 'signature' image is used to lock the application form to avoid any further data manipulation. This image will not work as a digital advanced or qualified electronic signature nor can replace requirements of wet signed forms.

Brief instructions how to insert an image are contained within the tooltip for all signature fields within the eAFs. In order to ensure that the image is displayed accurately, follow the recommendations below:

Unit of Measurement	Width	Height
centimetres	12.70	2.54

Inches	5	1
pixels	1500	300

**Note**: Digital signatures (as opposed to scanned signatures) are not currently within the scope of this project.

**Important note**: The inclusion of the signature (image) will lock the form and prevent further data entry. Therefore, the insertion of that image should be the very last step completing the form. It is **strongly recommended** to always **save an un-locked** version of the form and to execute the validation of the form prior to including the signature image. However, export of the xml file and re-import into a new eAF pdf file will work as well.

**Important note**: **Adobe Sign** or other digital signature tools **must not be used** to sign the eAF. This will impact the functioning of the form and may lead to rejection of your submission.

There is no need to use qualified signatures for eAFs submitted to the EMA for Centralised Procedure applications. The eAF does not change the wet signature requirements at the NCAs. Please check the national requirements for wet signatures to avoid validation issues.

In DCP/MRP an AF signed by multiple responsible persons is needed for communication with specific Authorities (could be initial submission or renewal or variation). Ideally provide a single contact point. For those NCAs that require multiple contact persons include a separate annex with the contact details.

## Saving the form

The filename format for human submissions is the same as for the paper form and is detailed in the latest version of the EU Module 1 Specification EU Module 1 Specification (Appendix 2: Directory / File Structure for Module 1 (Sequential Number 9)). Also for veterinary submissions the requirements for filenames do not change with introduction of the eAF.

The eAF form (.pdf) itself contains the xml data. This document should be included within the CTD structure in folder 1.2. In the VNeeS dossier structure the correct location is in folder "1a- admin-info". Do not include the raw xml extraction separately (see here for more details).

It is strongly recommended to save the form before locking the form. You might need to use the unlocked version to update the application form in case of business validation issues when updated application form is requested. In addition, you can re-use the file for e.g. a new variation of the same product. As an alternative and independent from locking the form, you are also able to export the XML data and import them in an empty form and correct or modify the data then.

**Note:** If the form has been locked with a signature image, this image will be exported and imported back. The eAF will remain locked.

To save the form, **click Save Form** at the end of the form or press Ctrl + S. Note that if you have not saved it to a specific location, the **Save As** option is displayed prompting you to save in a particular folder other than the default location.

**Note:** When a signature file is attached to the eAF it will be locked and no further changes are possible (with the exception of the additional signatory section, where only this section is locked).

## MAA FORM (human)

On the following pages technical information with regard to the human marketing authorisation application form is provided. Additional information related to the veterinary form as well as related to the variation and renewal form will be provided in a separate section thereafter.

## **Administrative Data**

## **Declaration and Signature**

A screenshot is provided to illustrate some principles in this section.

APPLICATION FORM : ADMINISTRATIVE DATA			
The application form is to be used for an application for a marketing authorisation of a medicinal product for human use submitted to (a) the European Medicines Agency under the centralised procedure or (b) a Member State (as well as Iceland, Liechtenstein and Norway) under either a national, mutual recognition procedure or decentralised procedure. Usually a separate application form for each strength and pharmaceutical form is required. For centralised procedures a combined application form is acceptable (information on each pharmaceutical form and strength should be provided successively, where appropriate).			
DECLARATION AND SIGNATURE			
Product (invented) name Ibuprofen 200 mg Tablets			
+ -			
Pharmaceutical Form: Tablet			
+ -			
Strength: Units + - 200 mg •			
Active Substance +			
IBUPROFEN (LYSINE)			
OK Clear Cancel			
Populate data in sections 2.1.2, 2.2.1 and 2.6.1			

## Product (Invented) name

The form allows one product name to be provided. In the text field 250 characters can be used. In case of different names and marketing authorisation holders in the concerned member states a separate list needs to be appended to the application form in Annex 5.19. However, for MAA for MRP/DCP there should be one common application form for each form or strength but for all member states involved.

### **Pharmaceutical form**

The pharmaceutical form should be described as in the current version of standard terms from the Ph. Eur. provided by the EDQM as also displayed via SPOR RMS controlled vocabulary list. Only the full term should be mentioned (not the short term).

Pharmaceutical Form	: Powder and solvent for oral solution	
	Powder and solvent for intravesical solution	C.
	Powder and solvent for intravesical suspension	Let a let
	Powder and solvent for nasal drops, solution	
Strength:	Powder and solvent for nebuliser solution	
	Powder and solvent for oral solution	
	Powder and solvent for oral suspension	-
	Powder and solvent for prolonged-release suspension for injection	Г
	Powder and solvent for sealant	
	Powder and solvent for solution for infusion	

The dropdown includes the pharmaceutical forms described in the Standard terms published in the European Pharmacopoeia that provides standardised nomenclatures and quality standards for medicinal substances and products (<u>https://www.edqm.eu/en/standard-terms-590.html</u>)

Keying in the first character the term begins with and it will display the list in alphabetical order. Use the mouse or the down arrow button to navigate to the correct term. Press enter or **click** the left mouse button to select the term.

If the correct term is not available use an appropriate alternative instead. Usually, new pharmaceutical form terms can be required in advance by the agency responsible to run the procedure of the new marketing authorisation application.

## Strength(s)

The strength(s) will be entered in a structured way. Consider regulatory requirements relating to the rules on naming of combination products. The units of measurement are selected from a controlled list according to standard terms as provided by EDQM (For selection the term name its first character is being used to display the list). The active ingredient data fields need to be duplicated as necessary.

luct (invented) nai	Ibucafego 200 mg /20 mg orodispersible tablets	
harmaceutical form	m(s): Orodispersible tablet	• + -
		+ -
		+ -
Strength:	Units	+ -
200	mg 👻	
For numeric values,	, please use the full stop as the decimal separator. i.e. 0.002, rather than 0,002	
ull name of the ac	ctive substance(s) (including salt or hydrate, if applicable):	
BUPROFEN D,L-LY	YSINATE	
Note: * for active s	whetances presented in the form of salt or hydrate, the expression of strength sk	hould be based on
	substances presented in the form of salt or hydrate, the expression of strength sl	hould be based on
	substances presented in the form of salt or hydrate, the expression of strength sh	hould be based on
		hould be based on
se/active moiety		hould be based on
se/active moiety		hould be based on
Add Active Subst	tance(s)	hould be based on
Add Active moiety Add Active Subst	tance(s) Units	hould be based on + - + -
Add Active moiety Add Active Subst	tance(s)	hould be based on + - + -
Add Active Subst	tance(s) Units mg v	hould be based on + - + -
Add Active Subst	tance(s) Units	hould be based on + - + -
Add Active Subst Strength: 20 For numeric values,	tance(s) Units mg  , please use the full stop as the decimal separator. i.e. 0.002, rather than 0,002	hould be based on + - + -
Add Active Subst Strength: 20 For numeric values, Full name of the active set to the set of the set	tance(s) Units mg v	hould be based on + - + -
Add Active Subst Strength: 20 For numeric values, Full name of the active set to the set of the set	tance(s) Units mg  , please use the full stop as the decimal separator. i.e. 0.002, rather than 0,002	hould be based on
Add Active Subst Strength: 20 For numeric values, Full name of the active set to the set of the set	tance(s) Units mg  , please use the full stop as the decimal separator. i.e. 0.002, rather than 0,002	hould be based on
Add Active Subst Strength: 20 For numeric values,	tance(s) Units mg  , please use the full stop as the decimal separator. i.e. 0.002, rather than 0,002	hould be based on
Add Active Subst Strength: 20 For numeric values, Full name of the ac	tance(s) Units mg  , please use the full stop as the decimal separator. i.e. 0.002, rather than 0,002 ctive substance(s) (including salt or hydrate, if applicable):	+ -
Add Active Subst Add Active Subst Strength: 20 For numeric values, Full name of the ac	tance(s) Units mg  , please use the full stop as the decimal separator. i.e. 0.002, rather than 0,002	+ -
Add Active Subst Add Active Subst Strength: 20 For numeric values, Full name of the acc AFFEINE Note: * for active su	tance(s) Units mg  , please use the full stop as the decimal separator. i.e. 0.002, rather than 0,002 ctive substance(s) (including salt or hydrate, if applicable):	+ -
Add Active Subst Add Active Subst Strength: 20 For numeric values, Full name of the acc AFFEINE Note: * for active su	tance(s) Units mg  , please use the full stop as the decimal separator. i.e. 0.002, rather than 0,002 ctive substance(s) (including salt or hydrate, if applicable): substances presented in the form of salt or hydrate, the expression of strength sh	+ -

## Active Substance(s)

**—** 

Use the drop-down menu to select the active substance. The dropdown menu also includes a dictionary.

ll name of the active sub UPROFEN D,L-LYSINATE		ding salt or hy	drate, if applicab	le):	
lote: * for active substances e/active moiety	presented in the	form of salt or h	vdrate, the express	sion of strength should b	be based on
Full name of	the active substa	nce(s) (including	salt or hydrate, if	applicable):	+
IBUPROFEN D,L-LYSINATE				-	
Caffeine				Search	
CAFFEINE IBUPROFEN D,L-LYSINAT	E				
				Select	
L					
	ок	Clear	Cancel		

Type in minimum of three characters from the name of the active substance name and click search. Enter more characters to receive more accurate results. Scroll through the list or use the arrow-downbutton of the keyboard and select the correct name. Confirm the selection by **clicking OK**.

		e(s) (including s	alt or hydrate, if applicable	<i>.</i> ,.
IBUPROFEN D,L-LYSINATE				-
	ОК	Clear	Cancel	

The selected substance name will be displayed. **Click** the **OK** button to close the section. For corrections "Add Active Substances" needs to be activated and opens the dialogue again.

To select another active substance, click in the add new substance section and open the dialogue by **clicking Add Active Substances**. Do this for each additional active substance.

Full name of the active substance(s) (including salt or hydrate, if applicable): IBUPROFEN D,L-LYSINATE
Note: * for active substances presented in the form of salt or hydrate, the expression of strength should be based on base/active moiety
Add Active Substance(s)

The example above displays the case of two active substances.

Once the list is complete **click Populate data** to copy to all similar sections.

**Note**: Other similar sections cannot be filled if this first one is not completely populated.

**Note**: Workaround solution for entering formatted text using rtf format in Word or Outlook and copy pasting the edited text to eAF does not work in the Initial MAA form when the details in sections 2.1.2, 2.2.1 and 2.6.1 are populated from 'Declaration' section. If you require special characters in these sections, please add an annex and mention this on the cover letter.

Select the **Populate data in sections 2.1.2, 2.2.1 and 2.6.1** button and the form will copy data into each respective section with the exception of the Active Substance field in section 2.2.1 only. Users need to manually enter, and select an active substance for this field.

## **Base/Active moiety**

Users may also provide the base/active moiety details of the active substance. This should only be added in this section if different to the active substance, serving to specify the strength of the pharmaceutical preparation and if the substance is included in the product as a salt or hydrate:

The class (type) of the substance should be selected from the proposed catalogue.

Full name of the active substance(s) ( including salt or hydrate, if applicable)	+				
IBUPROFEN (LYSINE)	•				
Base/active moiety of the active substance(s) (if different from above)					
IBUPROFEN	-				
Substance type : (e.g. chemical substance, recombinant biological substance)			•		

## Applicant

The applicant address details should be selected from SPOR OMS organisation dictionary as outlined in the Providing OMS details section.

LocID 🔽 1	0 0 0 0	0 2	3 0	
	OR	0 2	5 0	
Organisation name	UK			
Country			V	Search
Address Results				
EN Laboratorios Abo ES Laboratorios Abo	-			

One of the address lines presented can be selected and its selection need to be confirmed by **clicking Select** or **Select/Close**.

LocID 🔽 1	0 0	0 0	0 2	3	0		
		OR					
Organisation name							
Country					•	Search	
Address Results							
EN/Laboratorios Ab	elló S.A. (	Calle Josefa	a Valcarcel	38 Mad	lrid Spa	in	
ES Laboratorios Abelló S.A. Calle Josefa Valcarcel 38 Madrid Spain							
					_		
	Select				ct/Close		

All available details will be retrieved from OMS:

Please select organisation from SPOR OMS to autofill address details. If the organisation is not found or the address details are not correct, please visit the OMS page in the SPOR portal for more information: <u>http://spor.ema.europa.eu/omswi/#/</u>							
Laboratorios Abelló S.A.							
Calle Josefa Valcarcel 38							
City/Locality/Town/Village Madrid							
Madrid							
28027							
Spain							
ORG-100000941							
LOC-100000230							
	found or the address details are not e in the SPOR portal for more inform au/omswi/#/ Laboratorios Abelló S.A. Calle Josefa Valcarcel 38 Madrid Madrid 28027 Spain ORG-100000941	found or the address details are not correct, e in the SPOR portal for more information: eu/omswi/#/ Laboratorios Abelló S.A. Calle Josefa Valcarcel 38 Madrid Madrid 28027 Spain ORG-100000941					

Personal details like telephone and e-mail address are not available in OMS and need to be added as appropriate.

## Person confirming fees will be/ have been paid, on behalf of the Applicant

The following fields must be completed in accordance to the letter of authorisation as detailed in the user guidance available for human medicinal products at CMDh and for veterinary medicinal products at CMDv.CMDv. However, the company address details can be copied from the previous section by clicking the Copy contact details button from previous section button.

## 1. Type of application

The following examples describe the options to complete the form according to the planned procedure. Selecting one of the round boxes will add further lines while changing the selection will hide the lines as appropriate for the respective procedure.

## 1. TYPE OF APPLICATION

Note: The following sections should be completed where appropriate.

### 1.1 THIS APPLICATION CONCERNS

1.1.1 A CENTRALISED PROCEDURE

(according to Regulation (EC) No 726/2004)

1.1.2 A MUTUAL RECOGNITION PROCEDURE

(according to Article 28(2) of Directive 2001/83/EC)

1.1.3 A DECENTRALISED PROCEDURE

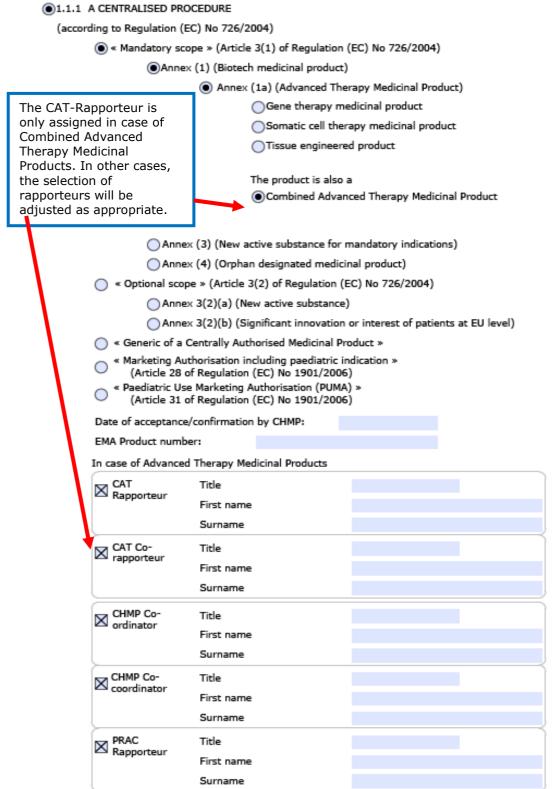
(according to Article 28(3) of Directives 2001/83/EC)

1.1.4 A NATIONAL PROCEDURE

### **1.1.** This application concerns

In this case the centralised procedure is selected as an example how the section will be expanded depending from the selected procedure type.

This example is for human products specifically, for details of the veterinary products application form, please follow the link.



This example is for veterinary products only:

1.1.1 <u>A CENTRALISED PROCEDURE</u> (according to Regulation (EC) No 726/2004)							
"Mandatory scope" (Article 3(1))							
"Optional scope" (Article 3(2))							
"Generic of a centra	"Generic of a centrally authorised veterinary medicinal product" (Article 3(3))						
🗙 CVMP Rapporteur	Title						
	First name						
	Surname						
X CVMP Co-rapporteur	Title						
	First name						
	Surname						

## 1.1.1. A Centralised Procedure

For extension applications as indicated in section 1.3, if the corresponding original eligibility basis no longer exists. Only a Centralised Procedure should be indicated, leaving the eligibility basis tick boxes blank. The eAF does not support this very rare case of difference as details of the CHMP acceptance are required due to validation rules. (A workaround might be explained in the Q&A document if necessary.)

## 1.1.2. A Mutual Recognition Procedure

For a mutual recognition procedure, the Reference Member State and details of that national authorisation need to be added. Concerned Member States can be added line by line or all in one go. Type in the first character of the Member States' name. Or use the down the drop-down menu. Click the "+" button for a next line or hit return to confirm the selection.

1.1.2 A MUTUAL RECOGNITION PROCEDUR	RE	
(according to Article 28(2) of Directive 200	01/83/EC)	
Reference Member State	Germany 🔽	
Date of authorisation	2015-09-15	
Marketing authorisation number	12345.00.00	
(* a copy of the authorisation should	d be provided - see section 4.2	?)
Procedure number: DE/	/H/1234/001/MR	
First use Repeat use (Please)	e also complete section 4.2)	
		Add All Remove All
Concerned Member State (specify	r) Croatia	- + -
Concerned Member State (specify	r) Finland	• + -
Concerned Member State (specify	r) Greece	- + -
Concerned Member State (specify	) United Kingdom	• + -
Proposed/Agreed common renewa	l date 2020-08-15	

In case of Repeat -use Procedure the wave information is no longer required.

1.1.2 A MUTUAL RECOGNITION PROCEDURE

(according to	Article 28(2)	of Directive	2001/83/EC)
---------------	---------------	--------------	-------------

Reference Member State	Germany		•	
Date of authorisation	2015-09-:	15		
larketing authorisation number	12345.00	.00		
* a copy of the authorisation shou	ld be provide	ed - see section	4.2)	
Procedure number: D	E/H/1234/00	01/MR		
)First use 💿 Repeat use (Plea	se also com	plete section 4.2	2)	
			Add All	Remove All
Concerned Member State (specif	īy)	Croatia		• + -
Concerned Member State (specif	fy)	Finland		• + -
Concerned Member State (specif Concerned Member State (specif		Finland Greece		▼ + − ▼ + −

## **1.1.3. A Decentralised Procedure**

There is no specific technical information to be considered.

## **1.1.4. A National Procedure**

There is no specific technical information to be considered.

## **1.2.** Orphan Medicinal Product Information (human only)

If your product is an orphan medicinal product, provide the below details. Tick **Yes** to display the data fields:

	Yes	🔵 No						
	Orp	han designatio	n procedure num	ber:			_	
	•	Pending						
	•	Orphan Design	ation Granted					
	•	Orphan Design	ation Refused					
		Orphan Design	ation Withdrawn					
1.2.2	Has any m					roduct for a conditio	n relating to the	indication
	O V	🔿 No						
	Yes							
	Please spe	cify the EU Orp	han Designation		on arranted i	- marketing authoric	+ -	
	Please spe	cify the EU Orp the designated No			en granted a	a marketing authoris	+ -	
	Please spe Has any of Yes	cify the EU Orp the designated No			en granted a	a marketing authoris	+ -	
	Please spe Has any of Ves Please spec	cify the EU Orp the designated No	orphan medicina		en granted a	a marketing authoris	+ -	•-
	Please spectra Please	cify the EU Or; the designated No ify:	s)		en granted a	a marketing authoris	+ -	+ -
	Please spe Has any of Ves Please spec Therape Product	cify the EU Orp the designated No ify: utic indication(	s)		en granted a	a marketing authoris	+ -	+ -
	Please spe Has any of Ves Please spec Therape Product Pharmac	cify the EU Orp the designated No ify: utic indication( (invented) nam eutical form(s)	s)	I product(s) be	-	a marketing authoris Procedure number f MRP/DCP (if applica	or Date of	+ - + - + -

# **1.3.** Application for a change to existing marketing authorisation leading to an extension as referred to in Annex I of Regulation (EC) no 1234/2008, or any national legislation, where applicable?

There is no specific technical information to be considered.

## **1.4.** This application is submitted in accordance with the following article in Directive 2001/83/EC as amended

There is no specific technical information to be considered.

## **1.5.** Consideration of this application requested under the following article of Directive 2001/83/EC or Regulation (EC) No 726/2004

There is no specific technical information to be considered.

## **1.6.** Requirements according to Regulation (EC) N° 1901/2006 ('Paediatric Regulation')

There is no specific technical information to be considered.

## 2. Marketing Authorisation Application

## 2.1. Names(s) and ATC code

## **2.1.1.** Proposed (invented) name of the medicinal product in the European Union / Member State/Iceland/Lichtenstein/ Norway

The information is identical to the one in section "Declaration and signature" and has to be populated automatically (see Section 1.1.1).

If the box is ticked like this an Annex 5.19 need to be provided.

#### 2.1 NAME(S) AND ATC CODE

2.1.1 Proposed (invented) name of the medicinal product in the European Union/Member State/ Iceland/ Liechtenstein/ Norway: Ibucafego 200 mg / 20 mg Tablets (Value populated from the "Declaration" section.) ☐ If different (invented) names in different Member States are proposed in a mutual recognition or decentralised procedure, these should be listed in (Annex 5.19)

This field appears only in case of MRP or DCP selected in section 1.2 or 1.3. The annex is not integrated into the form but the required list should be added as a separate PDF file to the submission.

Attachments to the form should be included as per the currently approved processes. Annexes to the application form should always be included in section 1.2 of EU Module 1.

## 2.1.2. Active substance(s)

The declaration of the active substance is populated automatically if the button in section 1 has been **clicked**.

Any changes you want to apply must to be executed in section 1 first and this in turn correctly populates this section.

#### **DECLARATION AND SIGNATURE**

oduct (invented) name	Ibucafego 200 mg / 20 mg orodispersible tablet
Pharmaceutical form(s):	Drodispersible tablet
	name or strength in section "Declaration be displayed in this section 2.1.2 correctly.
Strength: 200 For numeric values, please	Units
Full name of the active su IBUPROFEN (LYSINE)	bstance(s) (including salt or hydrate, if applicable):
Note: * for active substance pase/active molety Add Active Substance(s	es presented in the form of salt or hydrate, the expression of strength should be based on + -
Strength:	Units +
20 For numeric values, please	use the full stop as the decimal separator. i.e. 0.002, rather than 0,002
	use the full stop as the decimal separator. I.e. 0.002, rather than 0,002
	bstance(s) (including salt or hydrate, if applicable):
CAFFEINE	
CAFFEINE Note: * for active substance	bstance(s) (including salt or hydrate, if applicable): es presented in the form of salt or hydrate, the expression of strength should be based on

Populate data in sections 2.1.2, 2.2.1 and 2.6.1

#### Section 2.1.2 being populated with above mentioned details: Ibucafego 200 mg / 20mg 2.1 NAME(S) AND ATC CODE

2.1.1 Proposed (invented) name of the medicinal product in the European Union/Member State/ Iceland/ Liechtenstein/ Norway:

Ibucafego 200 mg / 20 mg orodispersible tablet

(Value populated from the "Declaration" section.)

If different (invented) names in different Member States are proposed in a mutual recognition or decentralised procedure, these should be listed in (Annex 5.19)

#### 2.1.2 Active substance(s)

Note: \* active substance should be indicated here as full substance. If the substance is included in the product as a salt or hydrate, the corresponding base/active moiety should be indicated in the additional field:

Name should be based on the following order of priority: INN\*, Ph.Eur., National Pharmacopoeia, common name, scientific name.

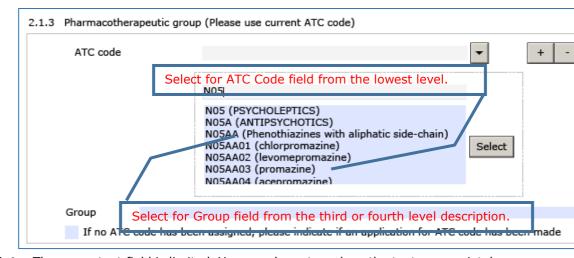
(The value of the active substances field has been populated from "Declaration" section.)

F	full name of the active substance(s)	( including salt or hydrate, if applicable)		+
IBUPROFEN (LYSINE)			•	
	Base/active moiety of the active s	ubstance(s) (if different from above)		e
IBUPROFEN			-	
CAFFEINE			-	
	Base/active moiety of the active s	ubstance(s) (if different from above)		e
			•	
Substance type : (e.g. chemical substance, recombinant biological substance)		Chemical substance		

•

## 2.1.3. Pharmacotherapeutic group

The most complete code corresponding to the claimed therapeutic use of the product should be given. Please use current ATC codes. Consequently, this section should be duplicated where needed. To display the list, at least three characters need to be inserted. The list starts with the next available code based on your entry.



The two fields ATC Code and Group are linked and should be both completed.

#### **Note:** The group text field is limited. You may have to reduce the text appropriately.

It is advisable to know the ATC code in advance as the search tool may not display the entire details of each code.

## **2.2.** Strength, pharmaceutical form, route of administration, container and pack sizes

## 2.2.1. Strength and pharmaceutical form (use current list of standard terms – European Pharmacopeia)

If the values of the Pharmaceutical form, Strength and Active Substance field have been populated from the Declaration section" it is not possible to edit the following data fields. If you need to correct an error, go back to Declaration section.

Search and select the active substance(s) in the Declaration' section and populate the sections where active substance is required by **clicking Populate data in section 2.2.1 and 2.6.1**.

#### 2.2 STRENGTH, PHARMACEUTICAL FORM, ROUTE OF ADMINISTRATION, CONTAINER AND PACK SIZES

#### 2.2.1 Strength and pharmaceutical form (use current list of standard terms - European Pharmacopoeia)

harmaceutical Form:	Orodispersible tablet		+
Strength:		Units	
200		mg	
For numeric values, ple	ase use the full stop as the decimal s	separator. i.e. 0.002, rather than 0,002	
Active substance(s) (a	s used for expression of strengt	h*)	
IBUPROFEN	succe for expression of seeinge	,	
	ances presented in the form of salt o	or hydrate, the expression of strength should be based	t on
ase/active molety	-	or hydrate, the expression of strength should be based	t on
ase/active moiety	ances presented in the form of sait o e(s) or Base/active moiety	or hydrate, the expression of strength should be based	i on
ase/active moiety	-	or hydrate, the expression of strength should be based	l on
Add Active Substance	-		l on
Add Active Substand Strength: 20	e(s) or Base/active moiety	Units	l on
Add Active Substand Strength: 20	e(s) or Base/active moiety	Units mg v	l on
Add Active Substance Strength: 20 For numeric values, ple Active substance(s) (a	e(s) or Base/active moiety	Units mg	l on
Add Active Substance Strength: 20 For numeric values, ple Active substance(s) (a	e(s) or Base/active moiety	Units mg	l on
Add Active Substance Strength: 20 For numeric values, ple Active substance(s) (a	e(s) or Base/active moiety	Units mg	l on
ase/active molety Add Active Substance Strength: 20 For numeric values, ple Active substance(s) (a	e(s) or Base/active moiety	Units mg	l on
ase/active molety Add Active Substanc Strength: 20 For numeric values, ple Active substance(s) (a CAFFEINE	e(s) or Base/active moiety	Units mg	

If a salt/ester/maleate/monohydrate etc. form is required, this can be added via the corresponding <u>base/active moiety field</u> as detailed in **Base/Active moiety** section.

### **2.2.2.** Route(s) of administration (current list standard terms - European Pharmacopoeia)

Use the dropdown field to open the search menu. The dropdown includes the current list of standard terms included in the List of Standard Terms for pharmaceutical dosage forms, routes of administration and containers published by the <u>EDQM</u> / <u>RMS</u>.

Repeat the routes field using the "+" and/or"-" buttons.

#### 2.2.2 Route(s) of administration (use current list of standard terms - European Pharmacopoeia)

Route of Administration		•
	ora	Search
	Intravesical use	
	Intravitreal use	
	Laryngopharyngeal use Nasal use	Select
	Ocular use	
	Oral use	
	Oromucosal use	

#### 2.2.3. Container, closure and administration device(s)

Include a description of material from which it is constructed. Use the current list of standard terms - European Pharmacopoeia.

Provide details for each of the pack sizes that are planned for marketing. The package sizes fields are can be repeated using the "+" / "-" button.

The material field is a free text but it is advisable to use known standard abbreviations for chemical names, such PVC or HDPE.

2.2.3 Container, closure and administration device(s), including description of material from which it is constructed. (use current list of standard terms - European Pharmacopoeia)

			+
r each type of pack giv	e:		
.2.3.1 Package Size 1	2 × 12 tablets		+ -
	and decentralised proce	dures, all package sizes authorised in the Re	eference Member
te should be listed			
scription IDPE-blister/alu foil clo	osurex12 tablets		
or each container give			+ -
			+ -
Container	Blister		
Material	HDPE		
Closure	Child-resistant clo	sure	
Administration Device			
	-		
			+ -
2.2.3.2 Proposed she	elf life 3		Years 💽
2.2.3.3 Proposed she			
(after first opening co		These are numeric field	s, where
2.2.3.4 Proposed she (after reconstitution of		`.' as a decimal separat	or needs 🛛 💽
-		to be used.	
2.2.3.5 Proposed s Do not store above			<b>T</b> + -
2.2.3.5 Proposed s	torage conditions		
	in the outer carton		• + -
Keep the container			
Keep the container		r first opening	
Keep the container	torage conditions afte	r first opening	• + -

Attach a list of Mock-ups or Samples/specimens sent with the application, as appropriate (see EMA/CMDh websites) (Annex 5.17)

#### 2.2.4. Medical Devices

The medical product incorporates, as an integral part, one or more medical devices within the meaning of Article 1(2)(a) of Directive 93/42/EEC or one or more active implantable medical devices within the meaning of Article 1(2)(c) of Directive 90/385/EEC. There is no specific technical information to be considered.

#### 2.3. Legal status

The dispensing status applies to all Member States the product is authorised to be marketed. For convenience all Member States selected according to section 1.1 can be added or removed by **clicking** the **Add Selected** or **Remove All** buttons.

#### 2.3 LEGAL STATUS

2.3.1 Proposed dispensing/classification

(Classification under Article 1(19) of Directive 2001/83/EC)

- Subject to medical prescription (Complete 2.3.2)
- Not subject to medical prescription (Complete 2.3.3 & 2.3.4)

	Click to create	e selected member states. + -
The button "Add All" should not be used as in that case the RMS will not be added.	Add All Add Selecte	Remove All
European Union/Member State	Croatia	• + -
European Union/Member State	Finland	• + -
European Union/Member State	Greece	• + -
European Union/Member State	United Kingdom	• + -
European Union/Member State	Germany	• + -

The adjustment of the list can easily be achieved by deleting single Member States **clicking** the - button.

#### 2.4. Marketing authorisation holder / contact persons / company

Select from 2 options: Centralised Procedure and National Procedures in section 1.1. It is not possible to change the selection in this section. Copy address details from the Declaration section by **clicking** on one of the following buttons.

Copy contact details from Declaration Section	Copy address from above address details
Copy contact details from 2.4.1 Section	

#### 2.4.1. Proposed responsible marketing authorisation holder/person

#### 2.4 MARKETING AUTHORISATION HOLDER / CONTACT PERSONS / COMPANY

2.4.1 Proposed marketing authorisation holder/person legally responsible for placing the product on the market in the European Union/each MS

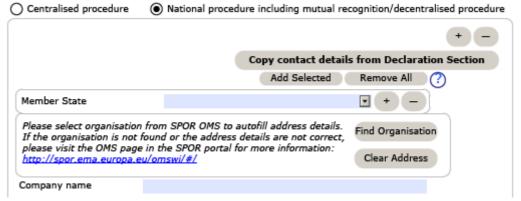
O Centralised procedure 

National procedure including mutual recognition/decentralised procedure

	Copy contact detail	ls from Declaration
the organisation is no	ion from SPOR OMS to autofill address details. ot found on the address details are not correct,	Find Organisation
ease visit the OMS pa tp://spor.ema.europa	ge in the SPOR portal for more information: a.eu/omswi/#/	Clear Address
mpany name	BonnPharma	
dress	Kurt-Georg-Kiesinger-Allee 3	
y/Locality/Town/Villag	ge Bonn	
te		
unty	53121	
itcode	Germany	
ephone	0049 228 99 3079999	
efax		
nail	Bill.miller@bonnpharma.de	
Attach proof of esta	ablishment of the applicant/MAH in the EEA	(Annex 5.3)
Has SME status been	ablishment of the applicant/MAH in the EEA assigned by the EMA?	(Annex 5.3)
Has SME status been Yes No EMA-SME Number		(Annex 5.3)
Has SME status been Yes No EMA-SME Number Date of expiry		
Has SME status been Yes No EMA-SME Number Date of expiry	assigned by the EMA? e "Qualification of SME Status" (Annex 5	
Has SME status been Yes No EMA-SME Number Date of expiry Attach copy of the Proof of payment (wh	assigned by the EMA? e "Qualification of SME Status" (Annex 5	
Has SME status been Yes No EMA-SME Number Date of expiry Attach copy of the Proof of payment (wh	assigned by the EMA? e "Qualification of SME Status" (Annex S	
Has SME status been Yes No EMA-SME Number Date of expiry Attach copy of the Proof of payment (wh Have all relevant fees	assigned by the EMA? e "Qualification of SME Status" (Annex S	5.7)
Has SME status been Yes No EMA-SME Number Date of expiry Attach copy of the Proof of payment (wh Have all relevant fees Yes (for fees paid	assigned by the EMA? e "Qualification of SME Status" (Annex S nen relevant) s been prepaid to competent authorities?	5.7)
Has SME status been Yes No EMA-SME Number Date of expiry Attach copy of the Proof of payment (wh Have all relevant fees Yes (for fees paid	assigned by the EMA? e "Qualification of SME Status" (Annex S nen relevant) s been prepaid to competent authorities? I, attach proof of payment in) (Annex S	5.7)
Has SME status been Yes No EMA-SME Number Date of expiry Attach copy of the Proof of payment (wh Have all relevant fees Yes (for fees paid	assigned by the EMA? e "Qualification of SME Status" (Annex 5 nen relevant) s been prepaid to competent authorities? d, attach proof of payment in) (Annex 5 Copy address from	5.7)
Has SME status been Yes No EMA-SME Number Date of expiry Attach copy of the Proof of payment (wh Have all relevant fees Yes (for fees paid No	assigned by the EMA? e "Qualification of SME Status" (Annex 5 hen relevant) s been prepaid to competent authorities? d, attach proof of payment in) (Annex 5 Copy address from s) Germany	5.7) = = = = = = = = = = = = = = = = = = =
Has SME status been Yes No EMA-SME Number Date of expiry Attach copy of the Proof of payment (wh Have all relevant fees Yes (for fees paid No For Member State(:	assigned by the EMA? e "Qualification of SME Status" (Annex 5 hen relevant) s been prepaid to competent authorities? d, attach proof of payment in) (Annex 5 Copy address from s) Germany n relevant)	5.7) = = = = = = = = = = = = = = = = = = =

In the second case the address details will be assigned to the respective Member State. To simplify data entry a button to insert contact details from Declaration section is available. To add the Member States selected in that section **click Add Selected**.

2.4.1 Proposed marketing authorisation holder/person legally responsible for placing the product on the market in the European Union/each Member State



For MRP/DCP/National procedure; The Member State field allows multiple Member States to have the same marketing authorisation holder contact person, or alternatively to show that one or more Member States have different marketing authorisation holder contact persons.

**Note**: This field is not mandatory and it will be expected that all relevant member states have the same marketing authorisation holder contact person.

we all relevant fees be	en prepaid to compete	ent authorities?		
) Yes (for fees paid, a ) No	ttach proof of paymen	it in) (Annex 5	.1)	+ -
-		Copy address from a	ahova address d	ataile
		copy address from t	+	-
For Member State	Germany		• + -	] [
Billing address (when r	elevant)			·
VAT number	123-XYZ-201	8		
Company name	BonnPharma			
Address	Kurt-Georg-Kiesin	ger-Allee 3		
City/Locality/Town/Vill	age Bonn			
State				
County				
Postcode	53121			
Country	Germany			•
Telephone	0049 228 99 307	9999		
E-mail	Bill.miller@bfarm.	de		

Additionally, details of proof of payment can be entered regardless of the procedure.

If the fees have not been paid in advance and an invoice is going to be sent select **No** and indicate the billing address (even if it has not yet been relevant to pay a fee as it will be invoiced later).

For a Centralised Procedure; either select 'EU' from the term list or leave the Member state field empty.

### **2.4.2.** Person/company authorised for communication on behalf of the applicant during the procedure

No specific technical guidance is necessary.

#### 2.4.3. Person/company authorised for communication

No specific technical guidance is necessary.

#### **2.4.4.** Summary of the applicant pharmacovigilance system

For the section 2.4.4 Summary of the pharmacovigilance system, in a community procedure with more than 1 MAH Qualified Person in EEA for Pharmacovigilance can be increased for more than one QPPV. Also the location of the Pharmacovigilance system master file can be multiplied independently. If the location is the same for all Member States, the Member states need to be added in the first box. If this is not the case, the entire section needs to be copied. In this case section 2.4.4 needs to be repeated as different PV master files will be maintained. For each system the QPPV may be identical.

#### 2.5. Manufacturers

**Note**: All manufacturing and control sites mentioned throughout the entire dossier must be consistent regarding names, detailed addresses and activities.

In this section the address fields offer a possibility to enter two addresses if the administrative address differs from the manufacturing site:

### **2.5.1.** Authorised manufacturer(s) (or importer(s)) responsible for batch release in the EEA

Subsections are defined to describe different roles:

- Authorised manufacturer(s) (or importer(s)) responsible for batch release in the EEA in accordance with Article 40 and Article 51 of Directive 2001/83/EC ( as shown in the package leaflet and where applicable in the labelling or Annex II of the Commission Decision)
- Official batch release for Blood products and Vaccines
- Details of the Official Medicines Control Laboratory (OMCL) or laboratory designated for the purpose of official batch release (in accordance with Articles 111(1), 113, 114(1)-(2) and 115 of Directive 2001/83/EC as amended)
- Contact person in the EEA for product defects and recalls
- Batch control Testing arrangements

On top of the sub-section a free text field is available so applicants who have multiple manufacturers doing batch releases can include details of, for example, which packaging the manufacturer is responsible for. This is an optional field that can be left blank it is not required.

The following screens illustrate the principle of the two options offered for all address fields in section 2.5 in case the administrative address and the manufacturing facility address is identical or different:

#### **Option # 1:- Administrative and manufacture address(es) are the same**

The fields related to telephone, e-mail can be duplicated in order to indicate more than one number in in case the administrative and operating addresses differ:

)o you have a separate admin and	manufacturer address?	Yes 💿 No	
		+ -	
Please select organisation from SP If the organisation is not found or please visit the OMS page in the S http://spor.ema.europa.eu/omswi	the address details are not correct, POR portal for more information:	Find Organisation Clear Address	
Company name			
Address			
City/Locality/Town/Village			
State			
County			
Postcode			
Country			•
Telephone			
E-mail			
anufacturing Authorisation number	r		
Attach copy of manufacturing au	thorisation(s) (Annex 5.6)		

#### *Option # 2:- When the administrative address and manufacture address are different:*

For additional authorised manufacturer's data fields can be repeated, where required, using the "+" / "-" buttons:

Any manufacturer responsible for batch release in the EEA should be listed under section 2.5.1 of the application form. This is the only section where this information should be provided. If the site responsible for batch release in the EEA is also involved in batch control testing activities, the name and address of such site should be repeated in section 2.5.1.2.

ease select organisation from Si		er address? autofill address o	اھ letails.		O No	
the organisation is not found or ease visit the OMS page in the s	the address SPOR portal f	details are not o	orrect,		ganisation	
tp://spor.ema.europa.eu/omsw	<u>V#/</u>			Clear	Address	ļ
npany name						
in Office Address						
y/Locality/Town/Village						
min Office State						
min Office County						
stcode						
min Office Country						
min Office Telephone						
nin Office E-mail						J.
he organisation is not found or	the address	details are not o	orrect,	+ Find Or	ganisation	
the organisation is not found or ase visit the OMS page in the s p://spor.ema.europa.eu/ornsw	the address SPOR portal f	details are not o	orrect,		ganisation Address	]
he organisation is not found or ase visit the OMS page in the s p://spor.ema.europa.eu/omsw pany name	the address SPOR portal f	details are not o	orrect,			]
the organisation is not found or ease visit the OMS page in the s tp://spor.ema.europa.eu/omsw mpany name	the address SPOR portal f	details are not o	orrect,			)
ease select organisation from Si the organisation is not found or ease visit the OMS page in the s tp://spor.ema.europa.eu/omsw mpany name mufacturing Facility Address	r the address SPOR portal f <u>V N /</u>	details are not o	orrect, tion:	Clear		]
the organisation is not found or ease visit the OMS page in the s tp://spor.ema.europa.eu/omsw mpany name	r the address SPOR portal f	details are not c or more informa epeat this su s many as	b-sect	Clear		
the organisation is not found or ease visit the OMS page in the s p://spor.ema.europa.eu/ornsw npany name nufacturing Facility Address //Locality/Town/Village	r the address SPOR portal f	details are not o or more informa epeat this su	brrect, tion: b-sect	Clear		
the organisation is not found or ease visit the OMS page in the s tp://spor.ema.europa.eu/omsw mpany name nufacturing Facility Address y/Locality/Town/Village nufacturing Facility State	r the address SPOR portal f	details are not of or more information epeat this su s many as nanufacturing	brrect, tion: b-sect	Clear		
the organisation is not found of tase visit the OMS page in the s p://spor.ema.europa.eu/omsw npany name nufacturing Facility Address //Locality/Town/Village nufacturing Facility State nufacturing Facility County	r the address SPOR portal f	details are not of or more information epeat this su s many as nanufacturing	brrect, tion: b-sect	Clear		
the organisation is not found or ease visit the OMS page in the s tp://spor.ema.europa.eu/omsw mpany name nufacturing Facility Address y/Locality/Town/Village nufacturing Facility State nufacturing Facility County stcode	r the address SPOR portal f	details are not of or more information epeat this su s many as nanufacturing	brrect, tion: b-sect	Clear		
the organisation is not found or ease visit the OMS page in the s p://spor.ema.europa.eu/omsw mpany name nufacturing Facility Address //Locality/Town/Village nufacturing Facility State nufacturing Facility State nufacturing Facility County stoode nufacturing Facility Country	r the address SPOR portal f	details are not of or more information epeat this su s many as nanufacturing	brrect, tion: b-sect	Clear		
the organisation is not found or ease visit the OMS page in the s p://spor.ema.europa.eu/omsw npany name nufacturing Facility Address //Locality/Town/Village nufacturing Facility State nufacturing Facility County tcode	r the address SPOR portal f	details are not of or more information epeat this su s many as nanufacturing	brrect, tion: b-sect	Clear		
the organisation is not found or ease visit the OMS page in the s p://spor.ema.europa.eu/omswing npany name nufacturing Facility Address //Locality/Town/Village nufacturing Facility State nufacturing Facility State nufacturing Facility County tcode nufacturing Facility Country nufacturing Facility Telephone	r the address SPOR portal f	details are not of or more information epeat this su s many as nanufacturing	brrect, tion: b-sect	Clear		
he organisation is not found or ase visit the OMS page in the s p://spor.ema.europa.eu/omswin pany name sufacturing Facility Address /Locality/Town/Village sufacturing Facility State sufacturing Facility County toode sufacturing Facility Country sufacturing Facility Country sufacturing Facility Telephone ail	r the address SPOR portal f	details are not o or more informa epeat this su s many as nanufacturing nust be enter	brrect, tion: b-sect	Clear		

#### 2.5.2. Manufacturer(s) of the medicinal product and site(s) of manufacture

A free text field is included to add a description of the partial product (e.g. vial with solvent, vial with powder, solvent etc. can be included to indicate which part of the product a specific manufacturer produces. This field is optional.

2.5.2 Manufacturer(s) of the medicinal product and site(s) of manufacture:

(Note: including manufacturing sites of any diluent/solvent presented in a separate container but forming part of the medicinal product, quality control/ in-process testing sites, immediate and outer packaging and importer(s). For each site provide the relevant information.)

					Copy contact	t details from 2.5.1.a
						+ -
~	I.	 · •	r .	 <u> </u>	(C) +	

Address details can be copied from section 2.5.1.a if identical or if it is more convenient to make minor corrections afterwards.

For sites in the EEA, the manufacturing authorisation number should always be provided. In addition, either a copy of the authorisation (tick box) or the EudraGMDP reference number should be provided. If neither the copy nor the EudraGMDP number are provided a validation error is displayed.

• Site(s) is in the EEA: O Site(s) is outside the E	EA:	
		+ -
Manufacturing authorisation number		
Attach copy of manufacturing authorisation(s	e) (Annex 5.6)	
Enter EudraGMP Manufacturing Authorisation reference		
Name of qualified person		
(if not mentioned in manufacturing authorisation)	)	

**Note**: Including manufacturing sites of any diluent/solvent presented in a separate container but forming part of the medicinal product, quality control/ in-process testing sites, immediate and outer packaging and importer(s). For each site provide the relevant information.

If the site is outside the EEA provide the following information:

Site(s) is in the EEA:	• Site(s) is outside the EEA:
	+ -
if available,	
D-U-N-S number <sup>7</sup>	
	equivalent of manufacturing authorisation in accordance with Article 8.3(k) 83/EC (Annex 5.6)
	ected for GMP compliance by an EEA authority or by an authority of or other European Union arrangements apply within the terms of the
Yes No	
	ected for GMP compliance by any other authority (including those of or other European Union arrangements apply but not within their respective
Ves No	
(D&B) which assigns a	Numbering System (D-U-N-S) is a system developed by Dun & Bradstreet a unique digit numeric identifier to a single business entity. It is used in this dentification of manufacturing sites outside of EEA

]		0	~
	Do you have admin address and manufacturer address?	Yes	O No
In case the company address or just	Company name		
the address details of	Admin Office Address 1		
manufacturing sites needs to be	Admin Office Address 2		
multiplied, the address or the	Postcode		
address details of the	Admin Office Country		•
manufacturing site can be	Admin Office Telephone		
duplicated maintaining the one	Admin Office Telefax		
address of the administrative site:	Admin Office E-mail		
			+ -
Regarding section 2.5.2	Company name		
(Manufacturer of the medicinal	Manufacturing Facility Address 1		
product) and 2.5.3 (Manufacturer	Manufacturing Facility Address 2		
of the active substance) the	Postcode		
manufacturer names, addresses and in case manufacturing sites	Manufacturing Facility Country		•
need to be stated (and repeated)	Manufacturing Facility Telephone		
in each section separately. To	Manufacturing Facility Telefax		
avoid duplication of data entry,	Manufacturing Facility E-mail		
the buttons are offered:			+ -
	Company name		
	Manufacturing Facility Address 1		
	Manufacturing Facility Address 2		
Copy contact details from 2.5.1.a	Postcode		
I	Manufacturing Facility Country		•
Copy contact details from 2.5.1.a	Manufacturing Facility Telephone		
Copy contact details from Declaration	Manufacturing Facility Telefax		
copy contact details nom Decidiation	Manufacturing Facility E-mail		

The reasoning from a regulatory point of view reads as follows: Release testing of the finished product is part of Quality testing. This activity is only linked to sites performing Batch Control testing arrangements in relation to the Batch Release of the product as per requirements of Article 51 of Directive 2001/83/EC. As such a site may perform both release testing under 2.5.1.2 and "normal" QC-FP activities under 2.5.2 which are not linked to the batch release. In this case, the site(s) will be listed twice i.e. under each section. However, if the site only performs one or the other quality control testing only, the site(s) will then need to be listed in the relevant section depending on the QC-FP activity. Testing arrangements in relation to the Batch Release of the product. Sometimes, sites perform both kinds of testing activities. However only sites located in the EEA or where an MRA or ACAA arrangement is in place can be listed in 2.5.1.2. Third country sites (USA and any other country outside the EEA/MRA/ACAA) cannot perform this activity and should therefore not be listed in 2.5.1.2. These sites are only authorised to perform QC-FP activities not related to the Batch Release.

However, only the tests carried out for the products in the application should be listed here. Therefore, you should not mention all possibilities as is stated in Manufacture License for company (if possible to find them there).

### 2.5.3. . Manufacturer(s) of the active substance(s) and site(s) of manufacture

All manufacturing sites involved in the manufacturing process of each source of active substance. For each site provide the relevant information.

(The values of the active substa available. Please click the drop	ances field has been populated from down button to see the list).	"Declaration" se	ection, hence no	search button	+ -	
	Active Substance			+		
				•		
		Copy cont	act details f	rom Declara	ation Section	
		Cop	y contact de	etails from 2	2.5.1.a	
De you have a consente of	Imin and manufacturer address		es 🔾	No		
Do you have a separate ad	amin and manuracturer address	r 🕕	es 🕕	NO		
			+ -	-		
				_		
If the organisation is not please visit the OMS page	n from SPOR OMS to autofill add found or the address details are e in the SPOR portal for more in su/omswi/ #/	e not correct,	Find Organis			
If the organisation is not i please visit the OMS page http://spor.ema.europa.e	found or the address details are in the SPOR portal for more in	e not correct,				
If the organisation is not i please visit the OMS page http://spor.ema.europa.e Company name	found or the address details are in the SPOR portal for more in	e not correct,				
If the organisation is not i please visit the OMS page http://spor.ema.europa.e	found or the address details are in the SPOR portal for more in	e not correct,		ess		
If the organisation is not i please visit the OMS page http://spor.ema.europa.e Company name	found or the address details are in the SPOR portal for more in	e not correct,		The		tance
If the organisation is not i please visit the OMS page http://spor.ema.europa.e Company name	found or the address details are in the SPOR portal for more in	e not correct,		The selecte	d from	previo
If the organisation is not i please visit the OMS page http://spor.ema.europa.e Company name	found or the address details are in the SPOR portal for more in	e not correct,		The selecte		previo 2.1).
If the organisation is not i please visit the OMS page http://spor.ema.europa.e Company name	found or the address details are e in the SPOR portal for more in <del>eu/omswi/#/</del>	e not correct,		The selecte selecte values have	d from d list (Section of Active Subs been popula	previc 2.1). tance
If the organisation is not i please visit the OMS page http://spor.ema.europa.e Company name Address	found or the address details are e in the SPOR portal for more in <del>eu/omswi/#/</del>	e not correct,		The selecte selecte values have	d from d list (Section of Active Subs	previo 2.1). tance
If the organisation is not i please visit the OMS page http://spor.ema.europa.e Company name Address City/Locality/Town/Village	found or the address details are e in the SPOR portal for more in <del>eu/omswi/#/</del>	e not correct,		The selecte selecte values have	d from d list (Section of Active Subs been popula	previc 2.1). tance
If the organisation is not i please visit the OMS page http://spor.ema.europa.e Company name Address City/Locality/Town/Village State	found or the address details are e in the SPOR portal for more in <del>eu/omswi/#/</del>	e not correct,		The selecte selecte values have	d from d list (Section of Active Subs been popula	previo 2.1). tance
If the organisation is not i please visit the OMS page http://spor.ema.europa.e Company name Address City/Locality/Town/Village State County	found or the address details are e in the SPOR portal for more in <del>eu/omswi/#/</del>	e not correct,		The selecte selecte values have "Declar	d from d list (Section of Active Subs been popula	previc 2.1). tance
If the organisation is not i please visit the OMS page http://spor.ema.europa.e Company name Address City/Locality/Town/Village State County Postcode	found or the address details are e in the SPOR portal for more in <del>eu/omswi/#/</del>	e not correct,		The selecte selecte values have	d from d list (Section of Active Subs been popula	previo 2.1). tance

		ny and procedural guideline/20	and the second second
			- + -
			the different sites involved in the
manufa	cturing process, includi	ng batch control sites	(Annex 5.8)
manufa	ctured in compliance wi	th the principles and guideli	ration that the active substance is ines on good manufacturing practice for
starting	materials	(Annex 5.22)	
as the site			
		P compliance by an EEA aut on arrangements apply within	thority or by an authority of countries in the terms of agreement?
here MRA Yes as the site	or other European Unic No been inspected for GM	on arrangements apply within IP compliance by any other a	
here MRA Yes as the site here MRA	or other European Unic No been inspected for GM	on arrangements apply within IP compliance by any other a	in the terms of agreement? authority (including those of countries
here MRA Yes as the site here MRA Yes	or other European Unic No been inspected for GM or other European Unic No	on arrangements apply within IP compliance by any other a	in the terms of agreement? authority (including those of countries not within their respective territory)?
here MRA Yes as the site here MRA Yes as a Ph.Eu	or other European Unic No been inspected for GM or other European Unic No	on arrangements apply within IP compliance by any other a on arrangements apply but n	in the terms of agreement? authority (including those of countries not within their respective territory)?
here MRA Yes as the site here MRA Yes as a Ph.Eu Yes	or other European Unic No e been inspected for GM or other European Unic No ur. Certificate of suitabil No	on arrangements apply within IP compliance by any other a on arrangements apply but n ity been issued for the active	in the terms of agreement? authority (including those of countries not within their respective territory)? re substance(s):
here MRA Yes as the site here MRA Yes as a Ph.Eu Yes	or other European Unic No e been inspected for GM or other European Unic No ur. Certificate of suitabil No	on arrangements apply within IP compliance by any other a on arrangements apply but n	in the terms of agreement? authority (including those of countries not within their respective territory)? re substance(s):

Use the drop-down menu to select between the manufacturing steps performed.

The dictionary for processing of medicinal products and for manufacturing steps are linked to the guidance document included in the eAF itself next to this field where more information can be sought from.

Brief description of manufacturing steps performed by manufacturing site:	
Manufacture of active substance Manufacture of active substance intermediate Packaging of active substance Preparation of Working Cell Bank Quality Control Testing - Biological Quality Control Testing - Chemical/Physical Quality Control Testing - Microbiological - non-sterility Quality Control Testing - Microbiological - sterility	

These are the Interpretation Documents for MIAs and GMP certificates. These are part of the 'Compilation of Union Procedures on Inspections and Exchange of Information', which is published on the EMA external website (see pages 144-173)1. E.g. the role 'Manufacture of the finished product' or "Manufacturing of the VMP" are covered by the term 'Processing of medicinal product"

The contents of the controlled vocabulary are coming directly EUTCT (for substances only) as well as RMS (for all other lists) and the terms have been decided by the European inspectors from documents issued from Inspection.

Additional information in regard to inspections, suitability of Pharm. Eur. Certificates or information on ASMF can be entered if the respective box 'yes' is ticked.

<sup>1)</sup> http://www.ema.europa.eu/docs/en\_GB/document\_library/Regulatory\_and\_procedural\_guideline/2009/10/WC500\_004706.pdf

Has the site been inspected for GMP compliance by an EEA authority or by an authority of countries where MRA or other European Union arrangements apply within the terms of agreement?
🔘 Yes 📃 No
Please
Attach latest GMP certificate in (Annex 5.9)
Or
EudraGMP certificate reference number
Has the site been inspected for GMP compliance by any other authority (including those of countries where MRA or other European Union arrangements apply but not within their respective territory)?
Yes No
If yes, please provide summary information in (Annex 5.9) (and, if available a GMP certificate or a statement from the competent authority which carried out the inspection)
Has a Ph.Eur. Certificate of suitability been issued for the active substance(s):
Yes No
Name of the CEP holder
Name of the manufacturer if different from the above
CEP number
Date of last update
Provide copy in (Annex 5.10)
Is a Active Substance Master File to be used for the active substance(s)
🕟 Yes 💫 No
+ -
Name of the ASMF holder
Name of the manufacturer if different from above
EU ASMF reference number if available
National ASMF reference number: (when applicable and only if EU ASMF reference number is not available)
Applicant part version number
Date of submission
Date of last update
Attach letter of access for European Union/Member State authorities where the application is made (see "European ASMF procedure for active ingredients") (Annex 5.10)
Attach copy of confirmation from the manufacturer of the active substance to inform the applicant in case of modification of the manufacturing process or specifications according to Annex 1 of Directive 2001/82/EC (Annex 5.11)
Is an EMA certificate for a Vaccine Antigen Master File (VAMF) issued or submitted in accordance with Directive 2001/83/EC Annex I, Part III, being used for this MAA?
Yes No
+ -
Active Substance +
• •
Name of the VAMF Certificate Holder / VAMF Applicant
Reference number of Application / Certificate
Date of submission (if pending)

## 2.5.4. Contract companies used for clinical trial(s) (including bioavailability and bioequivalence studies) included in the application or used for the validation of blood product manufacturing processes.

For each contract company, state where analytical tests are performed and where clinical data is collected and open data fields by clicking the **Add Study** button.

In cases where multiple studies have been performed by only one contract company all study titles can be keyed in by repeating the first section.

Company details are grouped and details of the tasks related to the study can be provided. In case multiple contract companies have been involved the address fields and details of the tasks can be repeated using the "+" / "-" buttons.

				Add Study
				Delete Study
			ſ	+ -
Title of study			-	
Protocol code				
EudraCT number				
		Add Company	Delete Co	VOSOW
-		Add company	Delete Ct	Inpany
Company name				
Address 1				
Address 2				
D	(name of: city, town, village, etc)			
Postcode			_	
Country			•	
Telephone				
Telefax				
E-mail				
Duty performed a	according to contract			

#### 2.6. Quantitative and Qualitative Composition

### **2.6.1.** Qualitative and Quantitative composition in terms of the active substance(s) and the excipient(s)

The chosen active substance(s) is/are automatically displayed in section 2.6.1 on the `Name of active substance field(s)'. Additional information on the active substance including all excipients in a separate list can be added.

To interpret the composition correctly the reference of counting must be stated in the first line. All quantities of substances are referring to a defined quantity of the specified pharmaceutical form, e.g. 1 (unit) of tablets or 100 (ml) of a solution.

#### 2.6 QUALITATIVE AND QUANTITATIVE COMPOSITION

2.6.1 Qualitative and Quantitative composition in terms of the active substance(s) and the excipient(s)

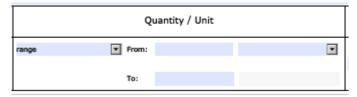
maceutical Form Tablet				▼ 1	U	•	]
values of the pharmaceutical f	orm, strength and active sub	stances fields have been pop	ulated from "Declaration" sect	ion.)			
						+ -	
trength		Units	+ -				
00		mg	•		utton to dup		
st the active substance(s) sepa	rately from the excipient(s)		_	for an addit	tional streng	gth (CP o	nly)
Free text field for a					Reference /		
Name of active	substance	Q squal to 💽 200	uantity / Unit	Mond	Reference / ograph Standard	•	
	substance	Q squal to 💽 200		Mond			
Name of active	substance	Q aqual to 200 For di	ng numeric values, please use the ful ccimal separator. i.e. 0.002, rathe	Mond			
Name of active	substance	Q squal to 💽 200	ng numeric values, please use the ful ccimal separator. i.e. 0.002, rathe	Mond			
Name of active	substance	Q equal to 200 For ditional description	ng numeric values, please use the ful ccimal separator. i.e. 0.002, rathe	Wand as the r than 0,002			

In centralised procedures multiple strengths can be included on one application form. For this purpose the following frame of strength needs to be duplicated. In case of national procedures only 1 strength per pharmaceutical form can be mentioned in 1 MAA form.

In the free text field, add a qualifying like 'calculated as'. This text field will also serve for an additional explanation to separate the filling of a capsule from the capsule shell or clustering all ingredients of the printing ink.

				+
Name of active substance	Qu	Jantity / Unit	Reference / Monograph Standard	+
IBUPROFEN (LYSINE)	approximately equal to equal to	T	I	-
	equivalent to less than less than or equal to more than			+
calculated as	more than or equal to quantity sufficient			
Name of active substance	runge	antity / Unit	Reference / Monograph Standard	+
•		×	1	-

The quantity is built with an operator, a value and the unit of measure: equal to 20 mg. A reference can also be added, e.g. Pharm.Eur. If you select range as the quantity operator, the value field will be split into a lower and upper value.



The quantity operator 'quantity sufficient' is defined as adding enough of an ingredient to achieve a specific final volume or total weight. This term has been discussed extensively in the past and it was

agreed that 'quantity sufficient' was introduced as quantity operator in the eAFs to describe the limits precisely.

To express for example: "to five grams of NaCl add enough (quantity sufficient qs) water to make 100 ml"

```
Ingredient = water
```

Quantity operator = "quantity sufficient"; Value =100

 $\mathsf{Unit} = ``mL''$ 

Name of active substance	Qu	antity / Unit
	approximately equal to equal to equivalent to less than or equal to more than or equal to quantity sufficient range	

If multiple active substances have been selected in the 'Declaration' section, these are automatically displayed.

Delete any unnecessary fields displaying incorrect terms using 🕒 button.

#### Process steps in case of a missing substance name/term

If you need to request a missing substance to complete an eAF, submit a request for substance insertion with the corresponding SmPC using the <u>EMA Service Desk portal</u>.

To request a new term (e.g. pharmaceutical form or unit of measurement) or a request for an update of an existing term in order to complete the eAF, please submit a request through the <u>SPOR Portal</u> and provide as much supporting documentation as possible (e.g. name of the product concerned, SmPC, etc.). Please note you need to be <u>registered with SPOR</u> prior to submission of change requests: The user guide for managing referential and organisation data in eAF is available here.

A provisional term may be added to the list within 5 working days; however, please note that there is a possibility that the term might not be approved in future. More information on how to request additional terms in eAF can be found in the RMS Web User Manual available <u>here</u>.

In case of declaration of overages it is mandatory to complete this section:

Active Substance	Overage	
	For numeric values, please use the full sto, decimal separator. i.e. 0.002, rather than 0,002	p as the
Excipient	Overage	
Excipient	Overage	

Details of any overages should not be included in the formulation columns but stated below:

Press the "+" button and select from the drop-down menu the substance as included in the composition then add the overage value. Use a full stop to indicate decimal numeric values.

### **2.6.2.** List of materials of animal and/or human origin contained/ used in the manufacturing process of the medicinal product?

There is no specific technical information to be considered.

## 2.6.3. Is an EMEA certificate for a Plasma Master File (PMF) issued or submitted in accordance with Directive 2001/83/EC Annex I, Part III, being used for this MAA?

There is no specific technical information to be considered.

### **2.6.4.** Does the medicinal product contain or consist of Genetically Modified Organisms (GMOs) within the meaning of Directive 2001/18/EC?

There is no specific technical information to be considered.

#### 3. Scientific advice

### 3.1. Was there formal scientific advice(s) given by EMA for this medicinal product?

There is no specific technical information to be considered.

### **3.2.** Was there scientific advice(s) given by Member State(s) for this medicinal product?

These sections may be replicated where needed.

#### 4. Other marketing authorisation applications

There is no specific technical information to be considered.

#### 5. Annexed documents (where appropriate)

There is no specific technical information to be considered.

#### MAA FORM (veterinary)

On the following pages, technical information with regards to the veterinary marketing authorisation application form is provided. To avoid duplication of information reference is provided to the human MAA form as appropriate. Information related to the variation and renewal form will be provided in a separate section thereafter.

#### Administrative data

For details on this section please refer to the identical section of the MAA form for human medicinal products.

#### Declaration and signature

The following example is provided to illustrate some principles in this section which are entirely the same human medicinal products.

#### **DECLARATION AND SIGNATURE**

	•	
armaceutical Form(s):	• + -	
	• -	
Strength:	Units + -	
For numeric values plea	se use the full stop as the decimal separator. i.e. 0.002, rather than 0,002	
	se use the run stop as the decimal separator. I.e. 0.002, rather than 0,002	
	nces presented in the form of salt or hydrate, the expression of strength should be	
Note: * for active substa	nces presented in the form of salt or hydrate, the expression of strength should be	
Note: * for active substa ased on base/active moiel	nces presented in the form of salt or hydrate, the expression of strength should be	
Note: * for active substa ased on base/active moiel	nces presented in the form of salt or hydrate, the expression of strength should be y	
Note: * for active substa ased on base/active moiel	nces presented in the form of salt or hydrate, the expression of strength should be y	

Populate data in sections 2.1.2, 2.2.1 and 2.6.1

Please select organisation If the organisation is not I please visit the OMS page <u>http://spor.ema.europa.e</u>	Find Organisation	
Applicant		
Address		
City/Locality/Town/Village		
State		
County		
Postcode		
Country		•
Felephone		
E-mail		

#### 1. Type of application

The following examples describe the options to complete the form according to the planned procedure. Ticking one of the round boxes will add further lines as appropriate for the respective procedure. Changing of the selection will hide the lines but addition different ones according to the other procedure selected.

1.	TYPE OF APPLICATION
Note:	The following sections should be completed where appropriate.
1.1	THIS APPLICATION CONCERNS
	1.1.1 <u>A CENTRALISED PROCEDURE</u> (according to Regulation (EC) No 726/2004)
	1.1.2 <u>A MUTUAL RECOGNITION PROCEDURE</u> (according to Article 32(2) of Directives 2001/82/EC)
	1.1.3 <u>A DECENTRALISED PROCEDURE</u> (according to Article 32(3) of Directive 2001/82/EC)
	1.1.4 A NATIONAL PROCEDURE

#### 1.1. This application concerns

In this case the centralised procedure is selected as an example how the section will be expanded depending from the selected procedure type.

This example is for veterinary products specifically, for details of the human products application form, please follow the link.

1.1.1 <u>A CENTRALISED PROC</u>	CEDURE (accord	ing to Regulation (E	C) No 726/2004)					
"Mandatory scope" (A	Article 3(1))							
"Optional scope" (Article 3(2))								
Generic of a centra	ally authorised	veterinary medicina	al product" (Article 3(3))					
CVMP Rapporteur	Title							
	First name							
	Surname							
CVMP Co-rapporteur	Title							
	First name							
	Surname							

#### 1.1.1. A Centralised Procedure

There is no specific technical information to be considered.

#### 1.1.2. A Mutual Recognition Procedure

There is no specific technical information to be considered.

#### **1.1.3. A Decentralised Procedure**

There is no specific technical information to be considered.

#### **1.1.4. A National Procedure**

There is no specific technical information to be considered.

# **1.2.** Is this an application for a change to your existing marketing authorisation leading to an extension as referred to in Annex I of Regulation (EC) NO 1234/2008, or any national legislation, where applicable?

There is no specific technical information to be considered.

### **1.3.** This application is submitted in accordance with the following articles in Directive 2001/82/EC

There is no specific technical information to be considered.

#### 1.4. MRL status (only for food-producing species)

		substance(s)	+
		•	-
			+ -
Marker residue			
Other Provisions	ifientie n	• •	-
Therapeutic class	Incation		
Animal species		T	+ -
	MRL	Target Tissues	+
Application for a Maxi	num Residue Limit has been	made to the EMA	

Application fo	All food producing species except poultry All mammalian food producing species All other food producing species All ruminants Bees Bovine Caprine Chicken Deer, including reindeer		]
	MRL	Target Tissues +	1
2 microg	ram/litre	Milk 🔽 -	j
Maximum Re	sidue Limits (MRL) according to Commissio	on Regulation (EU) No 37/2010	
			7
	subst	ance(s) +	
	BENZYLPENICILLIN SODIUM	• -	
Therape Animal species	For bovine milk only eutic classification Bovine MRL	+   +   +   Target Tissues	
2 micros	gram/litre I	Milk 🖸 🗖	
Application fo		e to the EMA + - ance(s) + -	
Species			ļ
in th	substances contained in the product are su he dose in which they are administered to t 2010 should also be listed and an appropria	ubject to this requirement if they are pharmacologically activ he animal. Excipients not included in Regulation (EU) No ate justification given.	e

The form requires excipients not included in Regulation (EU) No 37/2010 should also be listed and an appropriate justification given. If this is the case, tick "not applicable" and provide justification in the "remarks" field.

In case an MRL application has been submitted to the EMA and the procedure is still pending, tick **Yes** and provide details on the application including submission date in this section:

Application for a Maximum Residue Limit has been made to the EMA	
Yes	
	+ -
substance(s)	+
▼	-
Date of Submission	
Species	
Remarks	

## **1.5.** Consideration of this application is also requested under the following article in Directive 2001/82/EC or Regulation (EC) No 726/2004

There is no specific technical information to be considered.

#### 2. Marketing authorisation application particulars

#### 2.1. Name(s) and ATC vet code and target species

### **2.1.1.** Proposed (invented) name of the veterinary medicinal product in the European Union / Member State/Iceland/Lichtenstein/ Norway

The information is identical to the Declaration and signature and is populated automatically.

If the box is ticked provide Annex 5.18.

2.1	NAME(S), ATC VET CODE AND TARGET SPECIES
2.1.1	Proposed (invented) name of the veterinary medicinal product in the European Union / Member State / Iceland / Liechtenstein / Norway
	Wonderpil Extractum
	(Value populated from the "Declaration" section.) If different (invented) names in different Member States are proposed in a mutual recognition or decentralised procedure, these should be listed in (Annex 5.18)

This field is only displayed in the case of an MRP or DCP selected in section 1.2 or 1.3. The annex is not integrated into the form but added as a required list in a separate PDF file to the submission.

#### 2.1.2. Active substance(s)

The declaration of the active substance is populated automatically if the button in section 1 is clicked.

#### **2.1.3.** Pharmacotherapeutic group (Please use current ATC vet code)

#### 2.1.4. Target species

The most complete code corresponding to the claimed therapeutic use of the product should be given. Consequently, this section should be duplicated where needed.

The ATC Code (select vet specific terms) and Group fields are linked and both should be completed. It is recommended to key in the third or fourth level description. However, the description of the third or fourth level of the ATC vet code may be too long to include completely.

Target species Bovi	ne, including buffalo	▼ + -
Target species Beef	cattle	<b>v</b> + -
ATC code		•
	QJ01C	
	QJ01C (BETA-LACTAM ANTIBACTERIALS, QJ01CA (Penicillins with extended spectru QJ01CA01 (ampicillin)	
	QJ01CA02 (pivampicillin) QJ01CA03 (carbenicillin) QJ01CA04 (amoxicillin) QJ01CA05 (carindacillin)	Select
Group Penicillin	s with extended spec	

### 2.2. Strength, pharmaceutical form, route of administration, container and pack sizes

### 2.2.1. Strength and pharmaceutical form (use current list of standard terms – European Pharmacopeia)

For details refer to the human products application form.

### **2.2.2.** Route(s) of administration (use current list of standard terms - European Pharmacopoeia)

2.2.2 R	oute(s) of administratio	n (click 'find' to use the currer	nt list of standard terms - European Pharma	copoeia)
	Route of Administration	Intradermal use	•	+ -
	Target species Bov	ine, including buffalo		

The drop-down menu includes the current list of standard terms included in the "List of Standard Terms for pharmaceutical dosage forms, routes of administration and containers" published by the <u>EDQM</u> / <u>RMS</u>. Repeat the routes if required using the "+"/ "-" buttons. Complete the section by selecting the target species again.

## 2.2.3. Container, closure and administration device(s), including description of material from which it is constructed. (use current list of standard terms - European Pharmacopoeia)

or each type of pack give								4
Package Size 1							] + -	-
ote: For mutual recognition a tate should be listed	nd decentralis	ised proce	dures, all pa	ckage sizes a	uthorised in i	the Reference	Member	
escription:								
<b>- - - - - -</b>								
For each container give:								+
							+ -	
Container								_
Material								
						<b>.</b>		
Closure						•		
Administration Device						<u> </u>		
								+
2.2.3.2 Proposed she	f life							•
2.2.3.3 Proposed shell (after first opening cor	f life tainer)							*
2.2.3.4 Proposed shell	f life							
(after reconstitution or	dilution)							
2.2.3.5 Proposed sto	age conditio	ons						
							•	+ -
2.2.3.6 Proposed sto	ace conditio	ons after	r first openi	na				
	-,						•	+ -

Provide details for each of the pack sizes planned for marketing. Repeat the package sizes fields if required using the "+"/"-" buttons as displayed in the example above.

In this example highlighted fields indicate the mandatory section to be input as a minimum. The highlight appears after **clicking** the validate form button at the end of the form.

The term list on Container, Closure and Administration Device will become more complete over time. Therefore, check carefully in advance whether the term you will use is provided. Otherwise, request the term as soon as possible at mdms@ema.europa.eu.

The material is a free text field, but it is advisable to use known standard abbreviations for chemical names, such PVC, HDPE, etc.

#### 2.3. Legal status

There is no specific technical information to be considered.

#### 2.4. Marketing authorisation holder / contact persons / company

For details refer to the human products application form.

#### 2.5. Manufacturers

For details refer to the human products application form.

#### 2.6. Quantitative and qualitative composition

### **2.6.1.** Qualitative and Quantitative composition in terms of the active substance(s) and the excipient(s)

For details refer to the human products application form.

### **2.6.2.** List of materials of animal and/or human origin contained or used in the manufacturing process of the medicinal product?

There is no specific technical information to be considered.

## 2.6.3. Does the veterinary medicinal product contain or consist of Genetically Modified Organisms (GMOs) within the meaning of Directive 2001/18/EC?

There is no specific technical information to be considered.

#### 3. Scientific advice

### 3.1. Was there formal scientific advice(s) given by CVMP for this veterinary medicinal product?

There is no specific technical information to be considered.

### 3.2. Was a scientific recommendation(s) given by Member State(s) for this veterinary medicinal product?

These sections may be replicated if needed.

#### 4. Other marketing authorisation applications

There is no specific technical information to be considered.

#### 5. Annexed documents (where appropriate)

There is no specific technical information to be considered.

#### VARIATION FORM

On the following pages technical information on the variation form is provided.

#### 1. Application for variation to a marketing authorisation

#### 1. APPLICATION FOR VARIATION TO A MARKETING AUTHORISATION

Human Veterinary		
National Authorisation in MRP/DCP		
EU Authorisation		
National Authorisation		
Variation procedure number(s) <sup>1</sup> (?)	Click here to populate varia	tion number in section 2
DE/H/2020/BB1-002/II/G/022		+ -
Reference Member State / Reference Authori	ty for worksharing Germany	×
Concerned Member State(s)		
Add All Re	emove All	
Austria	+ -	
Estonia	+-	
Finland	+ -	
Type of Application (tick all applicable option	s)	
<ul> <li>Single variation</li> </ul>	Type IA <sub>IN</sub>	
Grouping of variations	Type IA	
Including a line extension <sup>3</sup> 🕜	Type IB unforeseen <sup>2</sup>	
🔀 Worksharing	Туре ІВ	
	∑ Type II	
	Type II Art. 29 <sup>4</sup>	
Change(s) concern(s) (for Type IB and Type	II variations only, tick all changes ap	oplicable)
Indication		
Paediatric requirements		
Safety		
Quality		
Annual variation for human influenza vac	cines	
Non-food producing target species		
Other		

Details of the procedure number and involved Member States depend from the type of procedure. In case of variations to a national authorisation in MRP/DCP select the Reference Member State. In the list below all Member States or the EMA can be selected except the same Member States as already selected in the role of RMS. You may add member states line by line or click Add all to add all member states at once. To remove them all in one go by click Remove all. It is also possible to remove single member states line by line.

Select the type of variation next. In case of variations other than IA/IAIN additional information about the scope of the variation should be indicated.

Please note that the selection in this section will directly impact the scopes available in section 3 and any changes in section 1 will delete the selected scopes in section 3.

If grouping is selected in section 1, multiple scopes can be selected in section 3. It is possible to add more scopes by using the dropdown menu, by +/- buttons or using a clone button.

If single is selected in section 1, only one scope can be selected in section 3.

For example, if procedure type Type IA has been selected in section 1, only scopes applicable type Type IA will be available for selection in section 3.

Туре о	f Application (tick all applicabl	le options)
🔵 Sing	gle variation	∑ Type IA <sub>IN</sub>
🖲 Gro	ouping of variations	Type IA
	Including a line extension <sup>3</sup>	i Type IB unforeseen <sup>2</sup> i
🖂 Wor	rksharing	Type IB
		Type II
		Type II Art. 29 <sup>4</sup>
Type of	Application (tick all applicable	options)
Singl	le variation	Type IA <sub>IN</sub>
Grou	ping of variations	Type IA
Work	csharing	Type IB unforeseen <sup>2</sup> i
	dditional information on e scope is requested.	Type IB
		Type II Art. 29 <sup>4</sup>
Change(	(s) concern(s) (for Type IB and	Type II variations only, tick all changes applicable)
📃 Indic	ation	
🔀 Paed	iatric requirements	
🔀 Safet	ty	
F	ollowing Urgent Safety Restric	tion
Quali	ity	
🗌 Annu	al variation for human influenz	za vaccines
Non-	food producing target species	
Othe	r	

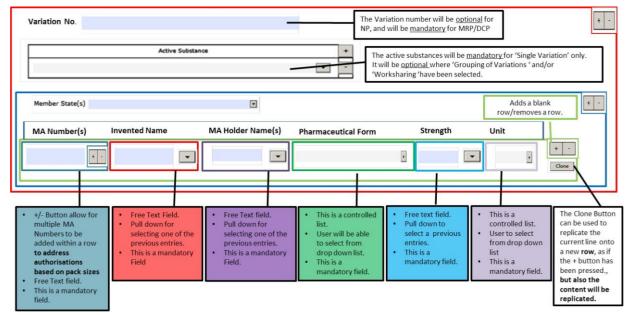
In case of purely nationally authorised products involved in a work sharing procedure, the Reference Authority will be included instead of the RMS.

The selection of the MA Holder address will be supported by the SPOR Organisation Management Service as outlined in <u>providing contact & address details</u>.

#### 2. Products concerned by this application

The variation form allows you to include all forms and strengths. Again, the signatures should be provided by the MAH. If different national companies are involved it is recommended to add power of attorney as required by member states appropriately.

The products involved in the variation need to be named. To allow all possibilities to be keyed in within a structured manner, this section has completely been revised. The principles of that construct are explained in the following example:



The sample displays how several products with different authorisation numbers different product names or different MAH names etc. can be added. In case the strength details are too complex, a footnote can be added to describe the strengths in more detail:

	gth information is pr	ovided in toothote						
ariation Number	DE/H/0212/001/1A/098	3						+ Clone
		Active S	ubstance		+			
	IBUPROFEN (LYSINE)			•	-			
1ember State	Germany			•				+ - Clone
MA Number(s)	Invented Name	MA Holder Name	Pharmaceu	itical Form		Strength	Unit	
234.00.00 +	Advil 🔹	Company 🔹	Tablet		•	200	▪ mg ▪	+ – Clone
234.00.01 +	Advil forte 🛛 🗸	Company 🔹	Tablet		•	400	• mg •	+ – Clone
lember State	Austria			•				+ - Clone
MA Number(s)	Invented Name	MA Holder Name	Pharmaceu	itical Form		Strength	Unit	
VK 1234 +	Advil 🗸	Company 🗸	Tablet		•	200	• mg •	+ – Clone
VK 1235 +	Advil forte 🔹	Company 🗸	Tablet		•	400	🕶 mg 💽	+ – Clone
lember State	Netherlands			•				+ - Clone
MA Number(s)	Invented Name	MA Holder Name	Pharmaceu	itical Form		Strength	Unit	
VG 120034 +	Advil 🔹	Company 🗸	Tablet		•	200	• mg •	+ – Clone
VG 120035 + -	Advil forte 🗸	Company 🗸	Tablet		•	400	• mg •	+ – Clone

#### 3. Types(s) of changes (s)

Select the changes you want to submit: The variation items according to EU Commission Guidelines will be selectable from RMS using a dropdown menu **clicking Show Variation Lists**.

The selections in section 1 (single/grouping and the procedure type) is reflected above the dropdown menu to remind the user of their previous selections. It is very important to note that any change in Type of Application in section 1 will delete any selected variation in section 3.

#### 3. TYPES OF CHANGE(S)

fill Secti lists, in You can	Variations included in this application: Please follow instructions below to add variation fill Section 1 of the form first, so as for the proper variations to be loaded. Navigate through the dropdown lists, in order to show the variation. You can select the variation by clicking the relevant checkbox of the variation box. Note: Any change in Type of Application in Section 1, will delete any selected variation!						
Variation Selected Show Selected Variations		Show Selected Variations	Show Variation Lists				

Single Variation is being selected. You may choose only type IA variation changes and only one scope.

	•
A. ADMINISTRATIVE CHANGES	
B. QUALITY CHANGES	
C. SAFETY, EFFICACY, PHARMACOVIGILANCE CHANGES	
D. PMF / VAMF	

Grouping of variations is being selected. You may choose variation changes of types that are selected on section 1.

B. QUALITY CHANGES	•
B.I ACTIVE SUBSTANCE	•
B.I.b) Control of active substance	•
B.I.b.1 Change in the specification parameters and/or limits of an active substance, starting material / intermediate / reag	•
	•
B.I.b.1.a Tightening of specification limits for medicinal products subject to Official Control Authority Batch Release B.I.b.1.b Tightening of specification limits	
B.I.b.1.c Addition of a new specification parameter to the specification with its corresponding test method B.I.b.1.d Deletion of a non-significant specification parameter (e.g. deletion of an obsolete parameter)	
B.I.b.1.e Deletion of a specification parameter which may have a significant effect on the overall quality of the active sub B.I.b.1.f Change outside the approved specifications limits range for the active substance	
B.I.b.1.g Widening of the approved specifications limits for starting materials/intermediates, which may have a significan	

B.I.b.1.h Addition or replacement (excluding biological or immunological substance) of a specification parameter with it

B.I.b.1.i Where there is no monograph in the European Pharmacopoeia or the national pharmacopoeia of a Member Stat

Drill down the selection to select the variation scopes. If only one option is applicable/available according to previous selections, it will be automatically ticked and cannot be manually changed.

For grouped variations there are +/- buttons and clone button to copy/add multiple scopes.

Depending on the selections, implementation date/note box will be available. If Art. 5 is applicable, the box will be automatically ticked and cannot be manually changed.

The conditions and documentation have been integrated into the scope in RMS and are now part of the scope selection. Only relevant conditions and documentation for each scope will be shown. Applicable conditions and documentation can be selected using a tick box. If any of the options is not applicable/not met, a mandatory free text field must be used to provide justification or further details. The free text fields are always available and can be used to provide additional, relevant information as previously when this information was provided as a separate annex to the application form.

Example of 'single Type IA'

#### 3. TYPES OF CHANGE(S)

fill Secti lists, in You can	ion 1 of th order to s select the	I in this application: Please follow instructions below to add variation form first, so as for the proper variations to be loaded. Navigate through the dropdown ow the variation. variation by clicking the relevant checkbox of the variation box. in Type of Application in Section 1, will delete any selected variation!
Variation	Selected	Show Selected Variations Show Variation Lists
A.5.b	1	

Single Variation is being selected. You may choose only type IA variation changes and only one scope.

select	(including batch release or quality control testing sites) - The activities for which the manufacturer/importer is responsible do not					
Procedu	re Types: IA 🔀 IB 🗌					
Implem	Implement. Date: 6 months after approval					
Conditio	<u>2055</u>					
The manufacturing site undergoing the name and/or address change and all manufacturing operations must remain the same.						
Note:						
Documentations:						
Copy of the modified manufacturing authorisation, if available; or a formal document from a relevant official body (e.g. Chamber of Commerce, or if not available, from a Regulatory Agency) in which the new name and/or address is mentioned.						
Note:						
If applicable, amendment of the relevant section(s) of the dossier (presented in the EU-CTD format or NTA volume 6B format for veterinary products, as appropriate), including revised product information as appropriate.						
Note: Not applicable						

Example of Grouping of Type IB and Type II

Variation	Selected
B.II.b.1.a	1
C.I.11.b	1

Show Selected Variations

Show Variation Lists

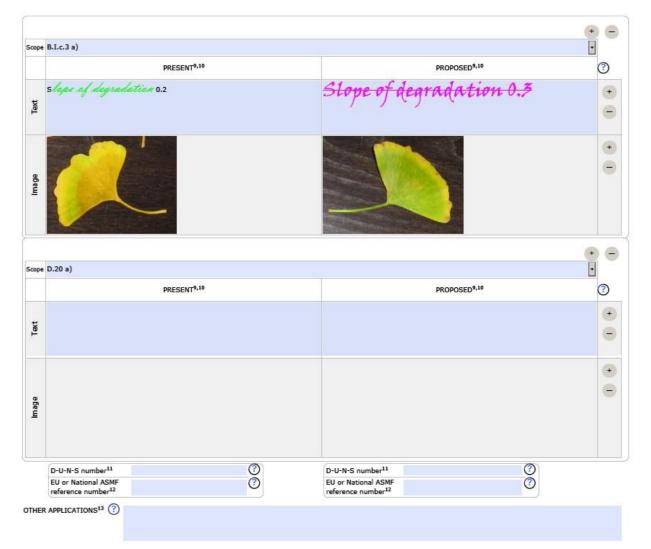
Grouping of variations is being selected. You may choose variation changes of types that are selected on section 1.

select       B.II.b.1.a - QUALITY CHANGES - FINISHED PRODUCT - Manufacture - Replacement or addition of a manufacturing site for part the manufacturing process of the finished product - Secondary packaging site	t or all of Clone
Procedure Types: IAIN IB	
Conditions:	
Site appropriately authorised (to manufacture the pharmaceutical form or product concerned).	
Note:	
Satisfactory inspection in the last three years by an inspection service of one of the Member States of the EEA or of a country where an operational Practice (GMP) mutual recognition agreement (MRA) exists between the country concerned and the EU.	Good Manufacturing
Note:	
Documentations:	
Amendment of the relevant section(s) of the dossier (presented in the EU-CTD format or NTA volume 6B format for veterinary products, as appropriate the section of the relevant section (s) of the dossier (presented in the EU-CTD format or NTA volume 6B format for veterinary products, as appropriate to the section (s) of the dossier (presented in the EU-CTD format or NTA volume 6B format for veterinary products, as appropriate to the section (s) of the dossier (presented in the EU-CTD format or NTA volume 6B format for veterinary products, as appropriate to the section (s) of the dossier (presented in the EU-CTD format or NTA volume 6B format for veterinary products, as appropriate to the section (s) of the dossier (presented in the EU-CTD format or NTA volume 6B format for veterinary products, as appropriate to the section (s) of the dossier (presented in the EU-CTD format or NTA volume 6B format for veterinary products, as appropriate to the section (s) of the dossier (presented in the EU-CTD format or NTA volume 6B format for veterinary products, as appropriate to the section (s) of the dossier (presented in the EU-CTD format or NTA volume 6B format for veterinary products, as appropriate to the section (s) of the dossier (presented in the EU-CTD format or NTA volume 6B format for veterinary products, as appropriate to the section (s) of the dossier (presented to the section (s) of the dossier (s) of the section (s)	iate).
Note:	
Proof that the proposed site is appropriately authorised for the pharmaceutical form or product concerned.	
Note:	
The variation application form should clearly outline the 'present' and 'proposed' finished product manufacturers as listed in section 2.5 of the app	lication form.
Note:	
select CI.11.b - SAFETY, EFFICACY, PHARMACOVIGILANCE CHANGES - HUMAN AND VETERINARY MEDICINAL PRODUCTS - Introduc	·
change(s) to, the obligations and conditions of a marketing authorisation, including the risk management plan - Implement change(s) which require to be further substantiated by new additional data to be submitted by the MAH where significant a by the competent authority is required*	
Procedure Types: II	

Once you have made your selection(s) you can close the list /collapse the list to show only the selected items by **clicking Show Selected Variations**.

If you wish to change the selections, simply unselect the selected scope and if necessary to show the selection dropdown menu, click **Show Variation Lists**.

It is essential to select the scopes by ticking the **Select** tick box. If this is not done the scope is not selected and any change in the dropdown menu will delete the changes you have made. Always ensure that the selected scope is shown in the summary box before proceeding to select more scopes/moving to next sections. Depending from the items you have to complete, the following table describes the present and proposed wording in the PL or SmPC or any brief description of the changes, or DUNS number of involved manufacturer or ASMF reference number. Due to the anticipated complexity this is not needed in case of work sharing or grouping procedures affecting more than one product.



Present and proposed section – text fields

It is possible to include formatted text, but only in the present and proposed text fields of this form. All other free text fields in the forms allow only plain text. Track-changes functionality is currently not available in interactive Acrobat forms.

The formatting can be changed based on the following rules:

Click to insert details regarding present product information in the free text field. You can change the presentation of the text. To underline, set italic or set bold, select the words and use following key combinations: CTRL+U, CTRL+I, CTRL+B on Windows and CMD+U, CMD+I, CMD+B on Mac.

Using the right mouse button, you can select Text style providing the same options: If selecting Hyperlink, the pop-up will provide more options to directly format the text or paragraph:

Form Field Text Pro	perties 🛛	Form Field Text Properties	×
Text Font: Size: Underline:	8 • Baseline Shift: 0 points No Underline • Bold Italic Strike-through	PPOS Font Paragraph Link Alignment E Right P points First None • Right P points By: P points Spacing: Above P points Line Spacing: Single • Below: P points	
	Close	Close	

Alternatively, rich text (formatted) can be used by editing the text in Word<sup>M</sup> or Outlook<sup>M</sup> in the rtf format. Copy and paste the formatted text in to the present and proposed fields.

	+
C.I.6 a)	<b>•</b>
PRESENT <sup>9,10</sup>	PROPOSED <sup>9,10</sup>
This is the old version.	This is also a test for formatting text in a different way +

A complex table as part of the present and proposed section in the variation eAF cannot be included. When a table is needed in the present and proposed section of the eAF you are able to include the information in separate annex included in folder 1.2 of the eCTD structure for Human applications or in the "1a-admin-info" folder of the VNeeS structure for Veterinary applications.

The annex should be attached as a separate PDF document, clearly named (for example 'ema-formannex-presentandproposed') in the folder 1.2 or folder "1a-admin-info" for VNeeS submissions.

Text such as 'See Annex Present and Proposed' should be entered into the mandatory present and proposed fields of the eAF.

To include an image (always one image per cell) click the left mouse button into the cell. Select from your file share an image as appropriate. If the size needs to be adjusted, please provide the image as an annex as the image cannot be enlarged.

Additionally, it is not possible within one section of the present/proposed table to alternate text fields and image fields. You will need to repeat the scope section entirely.

#### Present and proposed section – address details

The section now allows the usage of OMS entry.

PRESENT <sup>9,10</sup>				PROPOSED <sup>9,10</sup>			?
Please select organisation from SPDR OMS to autoful address details. If the organisation is not found or the address details are not correct, please visit the OMS page in the SPOR portal for more information: <u>http://spor.ema.europa.eu/omswi/#/</u>		Find Organisation Clear Address		Please select organisation from SPOR OMS to autofill address details. If the organisation is not found or the address details are not correct, please visit the OMS page in the SPOR portal for more information: http://spor.ema.europa.eu/omswi/#/		Find Organisation Clear Address	
Company name				Company name			
Address				Address			
City/Locality/ Town/Village				City/Locality/ Town/Village			
State				State			
County				County			
Postcode				Postcode			
Country		•		Country		•	
OrgID				OrgID			
LocID				LocID			
Telephone				Telephone			
E-mail				E-mail			

Depending on the role of the company of which the address needs to be included, it may happen that OMS cannot provide details. It is assumed that in those cases – more likely in the present part of that section – the details need to be completed manually. Although due to the early stage of productive OMS usage not every address might be available, it is highly recommended to use OMS for any new address to be inserted in the proposed section.

### 4.a Type IB and Type II variations – new indications – orphan medicinal product information

This section is only displayed if variation type IB or type II has been selected. The section can be flagged out, if not applicable:

4.a Type II variations - new indicati	ions - orphan medicinal product information				
(For human medicinal products only; mark this section N/A if the variation does not relate to a new indication)					
Select flag if not applicable; section will not be displayed.					
Has orphan designation been applied for, for this	new indication?				
Yes No					
Orphan designation procedure number:	+ -				
Pending					
Orphan Designation Granted					
Orphan Designation Refused					
Orphan Designation Withdrawn	Orphan Designation Withdrawn				
Information relating to orphan market e	exclusivity				
Has any medicinal product been designated as an proposed in this variation application?	Orphan medicinal product for a condition relating to the new indication				
Yes No					
Please specify the EU Orphan Designation Number(s):					
+ -					
Has any of the designated Orphan medicinal product(s) been granted a marketing authorisation in the EU?					
Yes No					

#### **4.b Type IB and Type II variations – Paediatric Requirements**

This section is only displayed if variation type IB or type II has been selected. This section can be flagged out, if not applicable

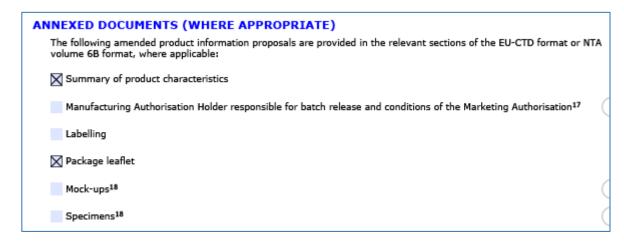
4.b Type II variations - Paediatric re	equirements
(For human medicinal products only; section to be co variations related to PIP implementation)	mpleted only for variations concerning a new indication or for 🛛 👔
(Note: The notion of 'global marketing authorisation'	as stated in Article 6(1)2nd subparagraph of Directive 2001/83/EC, as belonging to the same <sup>14</sup> marketing authorisation holder)
Select flag if not applicable; section will not be dis	played.
Article 8 of Paediatric Regulation applies to this	s variation application since.
This application relates to a new indication	for an authorised medicinal product which:
is protected by a supplementary protect	tion certificate under Regulation (EC) No 469/2009.
<ul> <li>is protected by a patent which qualifies</li> </ul>	for the granting of the supplementary protection certificate.
This application relates to a previous/ongo	ing/parallel procedure which triggered Article 8 requirement.
OArticle 8 of the paediatric regulation does not a	apply to this application, since.
O This application relates to a new indication for	a paediatric use marketing authorisation (PUMA).
This application relates to paediatric studies su	bmitted according to Article 45 or 46 of the paediatric regulation
This application relates to paediatric studies in	cluded in a paediatric investigation plan
This application includes:	
PIP Decision Number <sup>15</sup>	+ - (i)
Product-Specific Waiver Decision Number <sup>16</sup>	+ - (i)
Class Waiver Decision Number	+ -
(Note: a copy of the PIP/Product-Specific Waiv Summary Report, is to be included in Module 1	er decision including the paediatric Committee (PDCO) opinion and the .10)
Has this application been subject to PIP complian	ce verification?
🖲 Yes 🔵 No	
Please specify	
The compliance document reference	+ -
(Note: If available, a copy of the PDCO con issued by the national competent authority	npliance report with, where applicable, the PDCO opinion or the document is to be included in Module 1.10)
Please provide the overview table of PI	P results in Module 1.10

## 4.c Type II variations – Extended data exclusivity/market protection

This section is only displayed if variation type II has been selected. The section can be flagged out, if not applicable

	pe II variations - Extended data exclusivity/market protection: lag if not applicable; section will not be displayed.
Conside No 726/	ration of this application is also requested under the following article in directive 2001/83/EC or regulation (EC) 2004:
۵	Article 10(1) of Directive 2001/83/EC / Article 14(11) of Regulation (EC) No 726/2004 (one year of market protection for a new indication)
() A	rticle 10(5) of Directive 2001/83/EC (one year of data exclusivity for a new indication)
( A	rticle 74(a) of Directive 2001/83/EC (one year of data exclusivity for a change in classification)
(Not	e: The report justifying the claim for extended data exclusivity/market protection is to be provided in Module 1.5.3)

#### Annexed documents (where appropriate)



#### **Declaration of the applicant**

#### Signature

Complete these sections in the same way as previous forms.

30 Churchill Place • Canary Wharf • London E14 5EU • United Kingdom Telephone +44 (0)20 3660 6000 Facsimile +44 (0)20 3660 5525 Send a question via our website www.ema.europa.eu/contact



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#### **RENEWAL FROM**

#### 1. Application form for renewal of a marketing authorisation

This form is applicable to both domains and you have to make a selection at first (indicated with arrows in the figure below):

HUMAN VETERINARY National authorisation in MRP/DCP EU authorisation	All member states can be included in one go.	0
National authorisation only	Yes No	`+' for an additional invented name
vented Name	Add All Remove All	+-
Member state		`+' for an additional pharmaceutical prod
		+-
Pharmaceutical form(s) <sup>3</sup> Tablet Strength(s) <sup>3</sup>	Units 🕐 + -	
	Units () + -	
Strength(s) <sup>3</sup>		

#### 1. APPLICATION FOR RENEWAL OF A MARKETING AUTHORISATION

A renewal form must be provided for each form and strength of a medicinal product (except for Centrally Authorised products where renewal always covers the whole product with all its forms and strengths). Nevertheless, the product name per member state may differ. In case of combined packages and different composition of pharmaceutical products need to be addressed, several options to copy data fields are provided.

Another difference to the previous form is the indication whether the product is marketed or not (squared box), but all other details need to be completed as known from the MAA form or the variation form.

Again you have the option to populate the product details in section Qualitative and quantitative composition (section 3.)

Provide further product characteristics:

		+ -
ATC code	•	
Group		
If no ATC code has been	en assigned, please indicate if an application for ATC code has bee	n made
Route of Administration <sup>3</sup>	▼ +	- (i)
		+ - i
Member state	v + -	
MA Number <sup>3</sup>	+ -	

When selecting "Veterinary" this section is adapted to add the target species and it is likely the ATC vet code and respective group are chosen (although not explicitly mentioned):

		+ -
Target Species <sup>3</sup>		V + - i
ATC code		-
Group		
If no ATC code has	een assigned, please indicate if an applica	ation for ATC code has been made

The name and address of the Marketing Authorisation Holder will be handled in the same way as in other forms.

#### Name and address of MA holder

	Add All	Add Selected	+ Remove All
	Add All	Add Selected	Remove All
Member state	Finland		• • -
Member state	France		• • -
Member state	Greece		
Member state	Hungary		• • -
Member state	Germany		• • -
Company Name	BfArM-Pharma		
Address 1	Kurt-Georg-Kiesinger-Strasse 3		
Address 2	Bonn		
	(name of: city, town, village, etc)		
ostcode	53175		
Country	Germany		•
Telephone	+492282079999		
[elefax			
-mail	bill.miller@bfarm.de		

Again buttons are added to allow replication of data:

Name and address o	f contact person <sup>4</sup>	3			
		Co	py contact details fro	om previous	Section
				(	+ -
		Add All	Add Selected	Remove All	?
Member State	Germany		•	+ -	
Title					
First name	Bill				
Surname	Miller				
Company Name	BfArM-Pharma				
Address 1	Kurt-Georg-Kiesi	nger-Strasse 3			
Address 2	Bonn				
	(name of: city, tow	n, village, etc)			
Postcode	53175				
Country	Germany			•	
Telephone	+492282079999				
Telefax					
E-mail	bill.miller@bfarm	.de			

#### 2. Approved manufacturers

Details of the role of the manufacturer can be described in the free text field on top.

#### 2. APPROVED MANUFACTURERS

Authorised manufacturer(s) (or importer) responsible for **batch release** in the EEA (in accordance with Articles 40 and 51 of Directive 2001/83/EC, as amended, or Articles 44 and 55 of Directive 2001/82/EC (as shown in the package leaflet and where applicable in the labelling or Annex II of the Decision)

Company Role:	Batch releas	se l		
Do you have a se	parate admin a	and manufacturer address? () Yes	O No	
If the organisation	on is not found	SPOR OMS to autofill address details. or the address details are not correct,	Find Organisation	
please visit the OMS page in the SPOR portal for more information: http://spor.ema.europa.eu/omswi/#/				
Company name		BfArM-Pharma		
Admin Office Add	ress	Kurt-Georg-Kiesinger Allee 3		
		-		
City/Locality/Tow		Bonn		
Admin Office Stat Admin Office Cou				
Postcode	ancy	53121		
Admin Office Cou	intrv	Germany		
Admin Office Tele		0049 228 99 307 9999		
Admin Office E-m		Bill miller Obfermende		
Aurnin Once E-m	าลแ	Bill.miller@bfarm.de		
	nali	Bill.miller@bfarm.de	+ -	
Please select org	anisation from	SPOR OMS to autofill address details.	+ -	
Please select org If the organisation please visit the (	ganisation from on is not found OMS page in th	SPOR OMS to autofill address details. or the address details are not correct, e SPOR portal for more information:	+ -	
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The free text field can be used to indicate the 'role' of the manufacturer for applications with multiple active substances, excipients and manufacturers. For example, this field can be used to indicate the manufacturer of the 'Drug product' and manufacturer of the 'solvent' or the batch release of the product. Leave this field blank if not required.

r blood products a	nd vaccines:			
ate laboratory or labo	pratory designated for official <b>batcl</b> Directive 2001/83/EC as amended	n release, as ac	cordance with Article	s 111(1) +
		Copy address	details from 'batch releas	e'
aboratory Name				
o you have admin a	ddress and manufacturer address?	Yes	🔵 No	
Company name				
Admin Office Address	1			
Admin Office Address	2			
Postcode				
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Manufacturing Facility	y Telephone			
Manufacturing Facility	y Telefax			
Manufacturing Facility	y E-mail			
Site(s) in EEA or in count control/testing takes p 2001/82/EC, if different	tries where an MRA or other EU arranger place, as required by Article 51 of Directi from above	ve 2001/83/EC as a	amended or Article 55 o	
		Copy add	ress details from 'bate	th release
			+ -	
Do you have a separa	te admin and manufacturer address?	Ves	No	
		+		
Company name	BfArM-Pharma			
Address 1	Kurt-Georg-Kiesinger-Allee 3			
Address 2	Bonn (name of: city, town, village, etc)			
Postcode	53175			
Country	Germany		×	
Telephone	+492282079999			
Telefax				
E-mail	bill.miller@bfarm.de			

In the various address fields you will find buttons to copy the address details as appropriate.

Brief descriptio	n of functions	performed by	manufacturers	of the active	substance(s)
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		<b>•</b> + -
Has a Ph.Eur. Certificate of suitability been issued for t	he active substance(s):	
• Yes		
Νο		
Name of the CEP holder		
Name of the manufacturer if different from the above		
CEP number		
Date of last update		
Is a Active Substance Master File to be used for the act	tive substance(s)	
💽 Yes 🔵 No		
If yes, please provide the following information		+ -
Name and contact details of the ASMF holder		
Name of the manufacturer if different from above		
EU ASMF reference number if available		
National ASMF reference number: (when applicable and only if EU ASMF reference number is not available)		
Applicant part version number		

Ph. Eur certificate has been issued, further details can be provided in this section.

Date of last update

### 3. Quantitative and qualitative composition in terms of the active substance(s) and the excipient(s)

This section is concluded with a tabular listing of changes of the product information texts. This table can be provided as a separate document attached to the application form as well.

Per section or subsection of the SmPC or PL you should use a separate line item by item to be changed.

If

PRESENT PRODUCT INFORMATION TEXT	PROPOSED PRODUCT INFORMATION TEXT	
		+
		+
		+

If you formatted text is to be used follow the tips provided <u>here</u>.

#### 4. Documents appended to this application

In cases where a renewal is being made for either a human or veterinary medicinal product following the nationally authorised procedure (National authorisation in MRP/DCP or National authorisation only), users can elect to have a shortened renewal procedure and provide the appropriate justification as displayed below:

4. DOCUMENTS APPENDED - FOR HUMAN MEDICINA	
Product subject to shortened renewal	
Shortened Procedure Reason	

For the remaining Module 1 section, depending on your selections, complete the list of documents you will attach.

Module 1	
1.0	Cover letter
1.1	Comprehensive table of content (not applicable for centrally authorised medicinal products)
1.2	Renewal Application Form with the following annexes:
	A list of all authorised product presentations for which renewal is sought in tabular format
	Details on contact persons:
	Qualified person in the EEA for Pharmacovigilance
	Contact person in the EEA with overall responsibility for product defects and recalls
	• Contact person for scientific service in the EEA in charge of information about the medicinal product
	Chronological list of all post-authorisation submissions since grant of the Marketing authorisation or last renewal: a list of all approved or pending Type IA/IB and Type II variations, Extensions, Art 61(3) Notifications, USR and PSUR, giving the procedure number (where applicable), date of submission, date of approval (if approved) and brief description of the change.
	Chronological list of conditions and Specific Obligations (for centrally authorised products) submitted since grant of marketing authorisation or last renewal indicating scope, status, date of submission and date when issue has been resolved (where applicable)
	Revised list of all remaining conditions and any Specific Obligations (for centrally authorised products) (where applicable)
	A statement, or when available, a certificate of GMP compliance, not more than three years old, for the manufacturer(s) of the medicinal product listed in the application issued by an EEA competent authority or MRA partner authority. A reference to the EudraGMP database will suffice, once this is available
	For manufacturing sites of the medicinal product not located in the EEA or in the territory of an MRA partner, a list of the most recent GMP inspections carried out by other authorities indicating the date, inspection team and outcome
	A declaration by the Qualified Person (QP) of each of the manufacturing authorisation holders (i.e. located in the EEA) listed in the application form where the active substance(s) is used as a starting material, that the active substance(s) is manufactured in accordance with the guidelines on good manufacturing practice for starting materials as adopted by the EU <sup>5</sup>

#### **Declaration and Signature**

Complete this section in the same way as previous forms.

#### **DECLARATION AND SIGNATURE**

I hereby make application for the above Marketing Authorisation to be renewed. I declare that the quality of the product, in respect of the methods of preparation and control, has been regularly updated by variation procedure to take account of technical and scientific progress in accordance with Article 23 of Directive 2001/83/EC or Article 27 (1) of Directive 2001/82/EC or Article 16 or Article 41(1) of Regulation (EC) No 726/2004. The product conforms with current CHMP/CVMP quality guidelines where relevant. I confirm that no changes have been made to the product particulars other than those approved by the Competent Authority.

Proof of payment	(when relevant)			
				+ -
Have all relevant fe	es been prepaid to co	ompetent authoriti	es?	
• Yes (for fees pa	id, attach proof of pa	yment in Annex)		
O No				
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Please specify fee	category under Natio	nal rules		
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Signatory				

Additional Signatory

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