
Selection of the Appropriate Package Type Terms and Recommendations for Labeling Injectable Medical Products Packaged in Multiple-Dose, Single-Dose, and Single-Patient-Use Containers for Human Use Guidance for Industry

DRAFT GUIDANCE

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Center for Drug Evaluation and Research (CDER)
Center for Biologics Evaluation and Research (CBER)
Center for Devices and Radiological Health (CDRH)
Office of Combination Products**

**October 2015
Pharmaceutical Quality/CMC**

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Recommendations for Labeling Injectable Medical Products Packaged in
Multiple-Dose, Single-Dose, and Single-Patient-Use Containers for
Human Use**

Guidance for Industry

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1 **Selection of the Appropriate Package Type Terms and**
2 **Recommendations for Labeling Injectable Medical Products**
3 **Packaged in Multiple-Dose, Single-Dose, and Single-Patient-Use**
4 **Containers¹ for Human Use**
5 **Guidance for Industry²**
6

7
8 This draft guidance, when finalized, will represent the current thinking of the Food and Drug
9 Administration (FDA or Agency) on this topic. It does not establish any rights for any person and is not
10 binding on FDA or the public. You can use an alternative approach if it satisfies the requirements of the
11 applicable statutes and regulations. To discuss an alternative approach, contact the FDA staff responsible
12 for this guidance as listed on the title page.
13

14
15
16 **I. INTRODUCTION**
17

18 This guidance provides industry with the Food and Drug Administration’s (FDA’s)
19 recommendations on the selection of appropriate package type terms and selection of appropriate
20 discard statements³ for injectable medical products for human use, packaged in multiple-dose,
21 single-dose, and single-patient-use containers.⁴ Specifically, this guidance provides FDA’s
22 revised definitions for single-dose and multiple-dose containers, and introduces the definition of
23 a new package type term, “single-patient-use” container. Marketing applications for such
24 products include: New Drug Applications (NDAs), Abbreviated New Drug Applications
25 (ANDAs), Biologics License Applications (BLAs), Premarket Approval Applications (PMAs),
26 and Premarket Notifications under section 510(k) of the Federal Food, Drug, and Cosmetic Act
27 (FD&C Act).
28

29 In general, FDA’s guidance documents do not establish legally enforceable responsibilities.
30 Instead, guidances describe the Agency’s current thinking on a topic and should be viewed only

¹ The term *container* in this guidance refers to all package types used for injectable medical products for human use. This guidance does not discuss all package type terms (e.g., *Pharmacy Bulk Package*). Please refer to United States Pharmacopeia (USP) General Chapter <659> *Packaging and Storage Requirements* for other package type terms.

² This guidance has been prepared by the Office of Pharmaceutical Quality in the Center for Drug Evaluation and Research (CDER) in cooperation with the Center for Biological Evaluation and Research (CBER), the Center for Devices and Radiological Health (CDRH), and the Office of Combination Products in the Office of the Commissioner at the Food and Drug Administration.

³ This guidance is intended to provide recommendations on the selection of discard information for drugs and drug containers, and certain combination products regulated as medical devices. It does not provide information on disposal instructions of drugs or devices. Discard information is a statement supported by appropriate data on when to stop using an injectable medical product. Disposal information is a statement on how to safely and appropriately destroy any unused injectable medical product.

⁴ For the purpose of this guidance, the term *medical products* applies to human drug and biological products, and certain combination products regulated as medical devices.

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31 as recommendations, unless specific regulatory or statutory requirements are cited. The use of
32 the word *should* in Agency guidances means that something is suggested or recommended, but
33 not required.

34
35

II. BACKGROUND

37

38 Unsafe injection practices, including the improper use of needles, syringes, and medication vials
39 for more than one patient, threaten patient safety and have resulted in multiple blood borne
40 bacterial and viral infection outbreaks. Bacterial infections have been transmitted to patients
41 when single-dose containers were used improperly, the contents became contaminated and these
42 contents were then administered to multiple patients. Failure to follow standard precautions and
43 aseptic techniques has also been associated with several outbreaks of infections involving
44 multiple-dose vials. Examples of such incidents with single-dose and multiple-dose vials are:

45

46 • From 1998 through 2008, patient to patient transmission of blood borne pathogens due to
47 unsafe injection practices resulted in 33 outbreaks of viral hepatitis in nonhospital health
48 care settings in the United States.⁵

49

50 • According to the Centers for Disease Control and Prevention (CDC), at least 26 incidents
51 involving the improper use of single-dose medications in outpatient settings have
52 occurred over a five year period resulting in the potential exposure of more than 95,000
53 patients to infectious diseases.⁶

54

55 • In 2002, 71 cases of hepatitis C virus (HCV) infection and 31 cases of hepatitis B virus
56 (HBV) infection were attributed to unsafe needle/syringe practices in an Oklahoma pain
57 clinic.⁷

58

59 • In 2008, an investigation of an HCV outbreak in Nevada revealed that reuse of syringes
60 in multiple patients and use of single-use medication vials for multiple patients were the
61 likely mechanisms by which HCV infections were transmitted.⁸

62

63 It is evident from the examples described above that single-dose containers, which are intended
64 for use for a single patient, have been used for more than one patient in the past, and that this
65 practice has contributed to many of these bacterial and viral infection outbreaks. Additionally,
66 there is a concern that existing package type terms do not adequately convey that some

⁵ Thompson, ND, et al. 2009, Nonhospital Health Care-Associated Hepatitis B and C Virus Transmission: United States, 1998-2008. *Ann Int Med*; 150:33-39.

⁶ CDC: Injection Safety, 2012, CDC's position-protect patients against preventable harm from improper use of single-dose/single-use vials. Atlanta, GA: US Department of Health and Human Services. Available at: <http://www.cdc.gov/injectionsafety/cdcposition-singleusevial.html>.

⁷ Comstock RD, et al. 2004, A Large Nosocomial Outbreak of Hepatitis C and Hepatitis B Among Patients Receiving Pain Remediation Treatments. *ICHE*; 25:576-583.

⁸ CDC: 2007, Acute hepatitis C virus infections attributed to unsafe injection practices at an endoscopy clinic-Nevada. *MMWR* 2008; 57:513-7. Available at: <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5719a2.htm>.

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67 containers (e.g., insulin pens) that provide multiple doses are intended for use for only a single
68 patient.⁹

69
70

71 III. DISCUSSION

72

73 As part of its review of medical products, FDA clears or approves package type terms and
74 discard statements as part of the labeling of injectable medical products. FDA believes that
75 consistent use of correct package type terms and discard statements for injectable medical
76 products for human use will promote their proper use and provide a foundation for educational
77 efforts to reduce the transmission of blood borne pathogens. The following sections describe the
78 appropriate package type terms for multiple-dose, single-dose, and single-patient-use injectable
79 drug and biological products for human use and certain combination products regulated as
80 medical devices for injection.

81

82 Definitions

83

84 The package type terms “single-dose” container and “multiple-dose” container have been in use
85 for a long time. To provide clarity on the intended use of these terms, the definitions are being
86 revised as follows:

87

88 *1. Single-Dose Container:* A single-dose container is a container of a sterile
89 medication for parenteral administration (injection or infusion) that is not required to
90 meet the antimicrobial effectiveness testing requirements. A single-dose container is
91 designed for use with a single patient as a single injection/infusion. When space permits,
92 a single-dose container is labeled as such and should include on the label appropriate
93 discard statements. Examples of single-dose containers are vials, ampules, and prefilled
94 syringes.

95

96 *2. Multiple-Dose Container:* A multiple-dose container is a container of a sterile
97 medication for parenteral administration (injection or infusion) that has met antimicrobial
98 effectiveness testing requirements, or is excluded from such testing requirements by FDA
99 regulation.¹⁰ A multiple-dose container is intended to contain more than one dose of the

⁹ In March 2009, in response to reports of improper use of insulin pens in hospitals, FDA issued a Safety Alert for health care professionals reminding them that insulin pens are meant for use on a single patient only and are not to be shared between patients. Available at:

<http://www.fda.gov/Safety/MedWatch/SafetyInformation/SafetyAlertsforHumanMedicalProducts/ucm127783.htm>.

¹⁰ Antimicrobial effectiveness testing determines whether the product prevents microbial growth if contamination of the container occurs during patient use conditions. Some injectable chemical formulations may possess sufficient inherent antimicrobial effectiveness characteristics without the addition of a preservative, while other products rely on the addition of a preservative to meet this requirement. However, certain specially designed packaging and delivery systems permit the use of preservative-free injectable products for multiple patient uses. While most multiple dose biological products require a preservative, 21 CFR 610.15 provides for a few exceptions.

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100 drug product. When space permits, a multiple-dose container is labeled as such.
101 Multiple-dose containers are generally expected to contain 30 mL or less of medication.¹¹
102 The beyond-use date¹² for an opened or entered (e.g., needle-punctured) multiple-dose
103 container is 28 days, unless otherwise specified by the manufacturer in the label.^{13,14} An
104 example of a multiple-dose container is a vial.
105

106 In the vast majority of cases, the package type terms “single-dose” and “multiple-dose” are
107 properly used. However, in some unique situations, a package contains multiple doses of a
108 medical product that is intended to be for use in a single patient. The medical product in this
109 package type may not contain a preservative or be able to pass antimicrobial effectiveness if
110 tested, yet this package type contains multiple doses. An example of this package type is a drug
111 intended for intrathecal administration that is packaged in a patient-controlled analgesia
112 cartridge. Because the package type is designed to administer multiple doses, the package type
113 term “single-dose” is not appropriate. However, the package type term “multiple-dose” is also
114 inappropriate because the package contents are not able to meet antimicrobial effectiveness
115 testing requirements.
116

117 In other cases, the medical products in this package type do contain a preservative and are
118 expected to pass antimicrobial effectiveness if tested, yet the intent is that the package is to be
119 restricted to use by a single patient. In this scenario, referring to the package type as “multiple-
120 dose” does not adequately convey the intent to restrict the use to a single patient. An example of
121 such a product is an insulin pen that contains multiple doses of insulin for individual patient use.
122

123 In the past, the term “single-use” container has been used by FDA to describe a package type that
124 contained multiple doses but was intended to be used in a single patient. Unfortunately, the term
125 “single-use” was also inappropriately used as if it were interchangeable with the term “single-
126 dose” which was not the Agency’s original intent. To address this confusion regarding the
127 terminology, the Agency is retiring the term “single-use” and a new package type term “single-
128 patient-use” container, is being created to address the need for describing a package that contains
129 multiple doses of an injectable medical product that is intended to be used in a single patient.
130

131 **3. *Single-Patient-Use Container:*** A single-patient-use container is a container of a
132 sterile medication for parenteral administration (injection or infusion) that is intended to
133 be used multiple times for a single patient. When space permits, a single-patient-use
134 container is labeled as such and should include on the label appropriate discard

¹¹ United States Pharmacopeia-National Formulary (USP 38-NF 33) <1> INJECTIONS, *Packaging and Storage* in the version official until 4/30/2016. This information also appears in the version of <659> PACKAGING AND STORAGE REQUIREMENTS, *Injection Packaging* that will be official on 5/1/2016.

¹² Beyond-use date (BUD) is the date or time beyond which a product should not be used. See USP 38-NF 33 General Notices 10.40.100. This information appears in <7> LABELING, *Expiration Date and Beyond-Use Date* which will be official on 5/1/2016.

¹³ See

http://www.jointcommission.org/standards_information/jcfaqdetails.aspx?StandardsFaqId=434&ProgramId=47.

¹⁴ Vaccines in multiple-dose vials should be used and disposed of according to their FDA approved product labeling. Unless a multiple-dose vial is labeled otherwise, vaccines supplied in multiple-dose vials may be used up to the date of expiry of the product. See also <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr6002a1.htm>.

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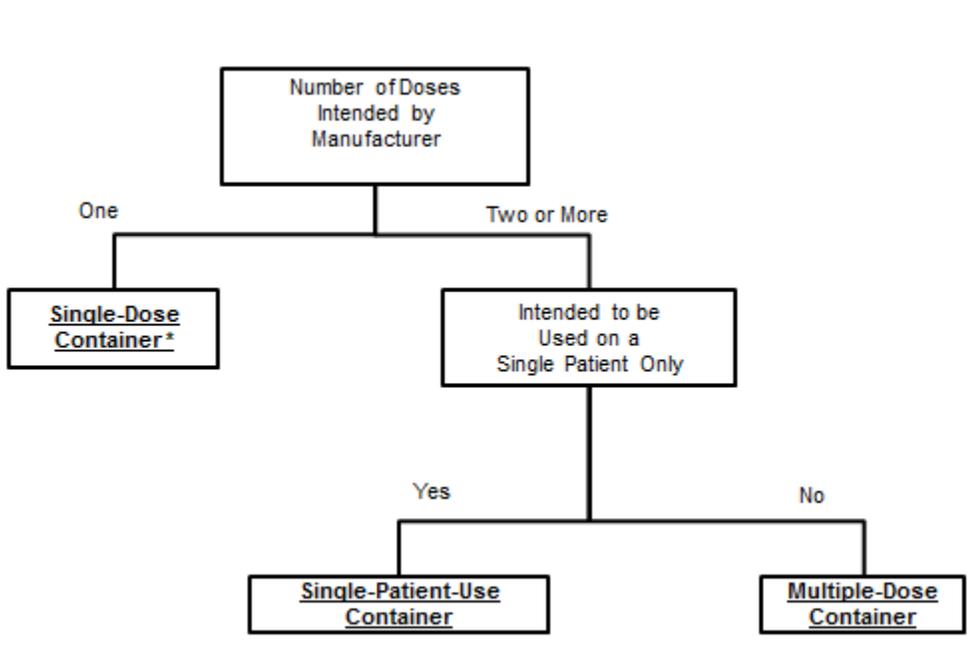
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135 statements. Examples of single-patient-use containers are patient controlled analgesia
136 cartridges and certain pens for injection.

137
138 For multiple-dose and single-patient-use containers, the antimicrobial effectiveness testing
139 results, if performed, will be used to support the labeled beyond-use date or discard instructions.

140
141 The following diagram illustrates how the appropriate package type term for an injectable
142 medical product can be determined:

143



144
145 * Use of the term “single-dose” container does not imply the entire contents of the container constitute a single dose.
146 In some instances, a single-dose container may contain more drug than is required for a single dose. For example,
147 for a medical drug product that is dosed based on body weight, or due to the required overfill in vials and ampules,
148 there may be excess amount constituting more than one dose in the container, which should be discarded. Please
149 refer to FDA’s guidance for industry on *Allowable Excess Volume and Labeled Vial Fill Size in Injectable Drug and*
150 *Biological Products*.¹⁵ Furthermore, although dosed over an extended time period, infusion containers (large or
151 small volume) are considered single-dose containers because they are designed for use with a single patient as a
152 single infusion.

153

154

155 IV. LABELING REQUIREMENTS AND RECOMMENDATIONS

156

157 Applicants should determine the proper package type term (“single-dose,” “multiple-dose,” or
158 “single-patient-use”) for injectable medical products for human use and use only the correct term
159 for the package type throughout the labeling. FDA recommends that the appropriate package

¹⁵ We update guidances periodically. To make sure you have the most recent version of a guidance, check the FDA Drugs guidance Web page at <http://www.fda.gov/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/default.htm>.

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160 type term will appear on all components of the labeling of injectable medical products for human
161 use so the user will be able to easily identify the package type. This includes the container label
162 and carton, and, where applicable, the prescribing information.¹⁶

163
164 The package type term “single-dose” is required to appear on the container labels of single-dose
165 injectable medical products that have a United States Pharmacopeia (USP) monograph, when
166 space permits (FD&C Act section 502(g) (21 U.S.C. 352(g)).¹⁷ When space does not permit the
167 “single-dose” term to appear on such products’ container labels, then according to 21 CFR
168 201.10(i)(2), it must appear on the carton or other outer container or wrapper, if space permits, or
169 in the prescribing information. In FDA’s experience, there has always been sufficient space to
170 include this information on the carton labeling.

171
172 When space permits, the appropriate package type term should appear on the container label of
173 multiple-dose and single-patient-use injectable medical products, as well as single-dose
174 injectable medical products that do not have a United States Pharmacopeia monograph. If there
175 is insufficient space to include this information on the container label, the package type term
176 should appear on the carton labeling where it will be easily visible.

177
178 When appropriate, the prescribing information for single-patient-use and single-dose injectable
179 medical products should include a discard statement. The discard statement should also be
180 included on the container and carton, when space permits. For example, single-dose container
181 labeling should typically include the statement “Discard unused portion.”

182
183 Multiple-dose containers do not normally have a discard statement because the beyond-use date
184 is assumed to be 28 days for an opened or entered (e.g., needle-punctured) multiple-dose
185 container, unless otherwise indicated.¹⁸ If the beyond-use date is other than 28 days for a
186 product in a multiple-dose container, an appropriate discard statement (supported by appropriate
187 data) should be included on the container label, carton labeling, and in the prescribing
188 information. Examples of statements that might appear on multiple-dose containers include:

- 189
- 190 • “Discard within XX hours after opening or after assembly” or
 - 191
 - 192 • “After first use, refrigerate or keep at a temperature not greater than XX for XX days.”
 - 193

194 The Agency recommends that applicants make the necessary labeling changes to follow its
195 recommendations within two years of the publication of the final version of this guidance. All
196 submissions (annual reports and supplements) should clearly identify the change(s) being made.
197 In addition, a supplement submission to follow the recommendations in the guidance should be

¹⁶ Examples of sections within the prescribing information for drug products where the package type term may appear include, but are not limited to: DOSAGE AND ADMINISTRATION, DOSAGE FORMS AND STRENGTHS, DESCRIPTION, and HOW SUPPLIED/STORAGE AND HANDLING (21 CFR 201.56 and 201.57).

¹⁷ 21 U.S.C. section 352(g); The following statement “A single-dose container is labeled as such....” appears in United States Pharmacopeia-National Formulary (USP 38-NF 33), <7> *Labeling* which becomes official on 5/1/2015 and <659> *Packaging and Storage Requirements* in the version that will be official on 5/1/2016.

¹⁸ See footnote 14.

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198 identified as “Labeling Changes to Follow the Package Type Term Guidance.” For approved
199 applications, changes made to labeling to follow the recommendations in this guidance should be
200 submitted to the FDA as described below:¹⁹

201

A. Change from “single-use” to “single-dose” package type term

202

203
204 For a drug product that was designed and otherwise labeled for use with a single patient as a
205 single injection/infusion, a change from the package type term “single-use” to “single-dose” to
206 accurately reflect the package type should be submitted in an annual report. See 21 CFR
207 314.70(d)(2)(x); 21 CFR 314.94(a)(8)(iv) and 21 CFR 601.12(f)(3)(i)(A).²⁰

208

B. All other changes to a package type term

209

210
211 ALL other changes to a package type term, including a change from the package type term
212 “single-use” to “single-patient-use,” as well as a change from “multiple-dose” to “single-patient-
213 use” should be submitted as a “Prior Approval Supplement” (PAS) for NDAs and BLAs only.
214 See 21 CFR 314.70(b)(2)(v)(A); and 21 CFR 601.12(f)(1).

215 After FDA approval of a PAS for an NDA, the holders of any ANDAs that relied upon the NDA
216 as the reference listed drug (RLD) would be required to submit conforming labeling revisions.
217 See 21 CFR 314.94(a)(8)(iv) and 21 CFR 314.150(b)(10). FDA is specifically requesting that
218 these conforming labeling revisions be submitted in a “Changes Being Effected” (CBE-0)
219 supplement. See 21 CFR 314.70(c)(6)(iii)(E). If approval of the NDA for the RLD has been
220 withdrawn, the corresponding ANDA holders for specific drug product(s) should contact the
221 Agency.

C. Changes made to add a package type term to the container/carton labeling (and, in some cases, the prescribing information) when no package type is included (or listed)

222

223
224
225
226 1. If the prescribing information already includes the appropriate assigned package
227 type but the container/carton labeling lacks the designation for some reason other than
228 lack of space, NDA, BLA and ANDA holders may submit the addition of the package
229 type term to the container/carton labeling in an annual report under 21 CFR
230 314.70(d)(2)(x), and 21 CFR 601.12(f)(3)(i)(A), as long as the package type term
231 being added to the container/carton labeling is the same correct term that has already
232 been included in the approved prescribing information. The same procedure applies
233 if the container/carton labeling includes the appropriate assigned package type but the
234 prescribing information lacks the designation.

235

¹⁹ This information is specific for NDAs, ANDAs, and BLAs. For information related to PMAs and 510(k)s, please contact CDRH.

²⁰ This discussion of potential regulatory pathways for submission assumes that the change in package type term from “single-use” to “single-dose” is the only change being made to the labeling. Other changes may require submission of a supplement.

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236 2. If neither the container/carton nor the prescribing information has a package type
237 term listed, NDA and BLA holders should submit a PAS to add the appropriate term
238 to the container/carton and prescribing information, see 21 CFR 314.70(b)(2)(v)(A)
239 and 21 CFR 601.12(f)(1). After FDA approval of the PAS for the NDA RLD,
240 corresponding ANDA holders would be required to submit conforming labeling
241 revisions. See 21 CFR 314.94(a)(8)(iv) and 21 CFR 314.150(b)(10). FDA is
242 specifically requesting that these conforming labeling revisions be submitted in a
243 CBE-0 supplement. See 21 CFR 314.70(c)(6)(iii)(E). If approval of the NDA for the
244 RLD has been withdrawn, the corresponding ANDA holders should contact the
245 Agency.
246

D. Any other proposed changes

247
248
249 For any other proposed changes regarding package type terms, please contact the Agency.
250