



Australian Government

Department of Health and Ageing
Therapeutic Goods Administration

Module 1

Administrative Information and Prescribing
Information for Australia

Notice to Applicants CTD-Module 1 January 2011

Applicable to submissions received by the
TGA from 1 March 2011

TGA Health Safety
Regulation



About the Therapeutic Goods Administration (TGA)

- The TGA is a division of the Australian Government Department of Health and Ageing, and is responsible for regulating medicines and medical devices.
- The TGA administers the *Therapeutic Goods Act 1989* (the Act), applying a risk management approach designed to ensure therapeutic goods supplied in Australia meet acceptable standards of quality, safety and efficacy (performance), when necessary.
- The work of the TGA is based on applying scientific and clinical expertise to decision-making, to ensure that the benefits to consumers outweigh any risks associated with the use of medicines and medical devices.
- The TGA relies on the public, healthcare professionals and industry to report problems with medicines or medical devices. The TGA investigates reports received by it to determine any necessary regulatory action.
- To report a problem with a medicine or medical device, please see the information on the TGA website.

DRAFT

Copyright

© Commonwealth of Australia 2011

This work is copyright. Apart from any use as permitted under the Copyright Act 1968, no part may be reproduced by any process without prior written permission from the Commonwealth. Requests and inquiries concerning reproduction and rights should be addressed to the Commonwealth Copyright Administration, Attorney General's Department, National Circuit, Barton ACT 2600 or posted at <http://www.ag.gov.au/cca>

Version history

Version	Description of change	Author	Effective date
V1.0	First version	OPM	28/09/2007
V1.1	References to TGA organisation and titles updated	OPM	14/11/2008
V1.2	Part B Module 1.7 <ul style="list-style-type: none"> Text amended to reflect changes in GMP clearance for prescription medicines as a result of the introduction of TGA eBusiness Services 	OPM	14/11/2008
V1.3	Addition of Module 1.13 Information relating to Pharmacovigilance	OPM	14/11/2008
V1.4	Transitional version to: <ul style="list-style-type: none"> Reflect new requirements arising from the introduction of the streamlined submission process Improve clarity of existing requirements. 	OPM	17/09/2010
V1.5	Minor corrections and clarifications	OPM	04/01/2011
V1.6	Transferred to new template	OPSS	04/2011

Contents

Abbreviations and Acronyms	7
Introduction	9
Overview	9
About this document	10
Scope of document	10
About the common technical document format	14
Submission dossier regulatory requirements	17
Part A – General requirements for applications	18
Summary of requirements	19
Submission dossier requirements	20
Subsequent data	25
Part B– Format of module 1	27
Module 1.0 Letter of application	27
Summary of requirements	27
Module 1.0.0 Electronic lodgement cover sheet	28
Module 1.0.1 Letter of application	28
Module 1.0.2 Responses to requests for information	29
Module 1.1 Comprehensive table of contents	32
Summary of requirements	32
Module 1.1 Comprehensive table of contents	33
Module 1.2 Application forms	34
Summary of requirements	34
Module 1.2.1 Application form	35
Module 1.2.2 Pre-submission details	37
Module 1.2.3 Patent certification	37
Module 1.3 Medicine information documents, packaging, and labelling	39
Summary of requirements	40
Module 1.3.1 Proposed Australian product information and package insert	40
Module 1.3.2 Proposed Australian consumer medicines information	42

Module 1.3.3 Therapeutic goods and use of human embryos or human embryonic stem cells or material derived from them _____	42
Module 1.3.4 Label mock-ups and specimens _____	44
Module 1.4 Information about the experts _____	46
Summary of requirements _____	46
Module 1.4.1 Information about the expert - Quality _____	47
Module 1.4.2 Information about the expert – Non-clinical _____	47
Module 1.4.3 Information about the expert - Clinical _____	49
Module 1.5 Specific requirements for different types of applications _____	51
Summary of requirements _____	51
Module 1.5.1 Literature Based Submission documents _____	52
Module 1.5.2 Orphan drug designation _____	52
Module 1.5.3 Genetically modified organisms: Consent from the Office of the Gene Technology Regulator _____	53
Module 1.5.4 Additional trade name declarations _____	53
Module 1.5.5 Co-marketed medicine declarations _____	54
Module 1.6 Drug and Plasma Master Files and Certificates of Suitability of Monographs of the European Pharmacopoeia _____	57
Summary of requirements _____	57
Module 1.6.1 Relevant external sources _____	58
Module 1.6.2 Sponsor’s declaration _____	59
Module 1.6.3 Letters of Access _____	59
Module 1.6.4 Certificates of Suitability (including Annexes) _____	60
Module 1.7 Good manufacturing practice _____	62
Summary of requirements _____	63
Module 1.7.1 List of Australian manufacturer names and licence numbers _____	63
Module 1.7.2 GMP clearance letters for all overseas manufacturing sites _____	64
Module 1.7.3 Copies of applications for TGA GMP clearances _____	65
Module 1.8 Compliance with meetings and pre-submission processes _____	68
Summary of requirements _____	68
Module 1.8.1 Details of compliance with pre-submission meeting outcomes _____	69
Module 1.8.2 Details of any additional data to be submitted _____	69
Module 1.8.3 Declaration of compliance with pre-submission planning form and planning letter _____	70
Module 1.9 Individual patient data _____	72
Summary of requirements _____	72

Module 1.9 Individual patient data _____	73
Module 1.10 Overseas regulatory status _____	75
Summary of requirements _____	75
Module 1.10.1 Overseas regulatory status _____	76
Module 1.10.2 Product information from Canada, the Netherlands, New Zealand, Sweden, UK and USA _____	76
Module 1.10.3 Data set similarities and differences _____	77
Module 1.11 Summary of biopharmaceutical studies _____	79
Summary of requirements _____	79
Module 1.11.1 Summary of a Bioavailability or Bioequivalence Study _____	80
Module 1.11.2 Justification for not providing appropriate biopharmaceutical studies _____	80
Module 1.12 Paediatric development program _____	82
Summary of requirements _____	82
Module 1.12 References to paediatric development program _____	83
Module 1.13 Information relating to pharmacovigilance _____	84
Summary of requirements _____	84
Module 1.13.1 Risk Management Plan for Australia _____	85
Annex I Antibiotic resistance data _____	87
Summary of requirements _____	87
Annex I Antibiotic resistance data _____	88
Annex II Overseas evaluation reports _____	89
Summary of requirements _____	89
Annex II Overseas evaluation reports _____	90
Part C - Requests for confidentiality _____	92
What will the TGA regard as confidential information? _____	92
When may the TGA be required to release or use confidential information? _____	92
Part D – Dossier documents matrix _____	94

Abbreviations and Acronyms

AAN	Australian approved name
ABN	Australian biological name
ACPM	Advisory Committee on Prescription Medicines
ARGPM	Australian regulatory guidelines for prescription medicines
ARTG	Australian Register of Therapeutic Goods
ATN	additional trade name
AusPAR	Australian Public Assessment Report
AUST R	Australian Registration number
CD	compact disc
CEP	Certificate of Suitability of monographs of the European Pharmacopoeia
CHMP	European Committee for Medicinal Products for Human Use
CMI	consumer medicines information
CTD	Common Technical Document
CV	curriculum vitae
DMF	Drug Master File
DVD	digital versatile disc
eBS	eBusiness Services
eCTD	electronic Common Technical Document
EDQM	European Directorate for the Quality of Medicines and Healthcare
EMA	European Medicines Agency (previously EMEA)
EMEA	European Medicines Agency
EOI	extension of indication
EU	European Union
FDA	United States Food and Drug Administration
FOI	freedom of information
GMO	genetically modified organism
GMP	Good Manufacturing Practice
ICH	International Conference on Harmonisation of Technical Requirements for Registration of Pharmaceuticals for Human Use
IPD	individual patient data
JETACAR	Joint Expert Technical Advisory Committee on Antibiotic Resistance
NCE	new chemical entity
NeeS	non-eCTD electronic dossier

OGTR	Office of Gene Technology Regulator
OMA	Office of Medicines Authorisation (formerly Office of Prescription Medicines and Office of Non-Prescription Medicines)
OMQ	Office of Manufacturing Quality
PAR	provisional ARTG record
PDF	Portable Document Format
PI	product information
PMF	Plasma Master File
RMP	Risk Management Plan
SAN	'self assessable' notification
SPC	Summary of Product Characteristics
TGA	Therapeutic Goods Administration
TGO	Therapeutic Goods Order
UK	United Kingdom
USA	United States of America
USB	universal serial bus

DRAFT

Introduction

Overview

The *transitional draft CTD Module 1 Administrative information and prescribing information for Australia* ('this document') is intended to be used by applicants who are preparing an application to the Therapeutic Goods Administration (TGA) for the registration or variation of an existing registration for a prescription medicine during the streamlined submission process transitional period that commenced 1 November 2010.

This document is being released as a transitional draft document. The November 2008 version of the *CTD Module 1* will remain until the updated *Australian regulatory guidelines for prescription medicines* are released later in 2011.

Further details of the submission categories impacted by the transition period are located in [Scope of document](#).

This section of the document provides:

- an overview of the TGA's requirements for the submission dossier that supports the application
- further information and guidance to assist sponsors to use this document effectively.

Contents

About this document	10
Part A – General requirements for applications	9
Part B – Format of Module 1	10
Part C – Request for confidentiality	10
Part D – Dossier documents matrix	10
Scope of document	10
About the common technical document format	
General Common Technical Document information	14
Submission and CTD terminology	15
Physical attributes	16
Submission dossier regulatory requirements	17

About this document

- This document consists of four parts – A, B, C and D, as described below.

Part A – General requirements for applications

- [Part A](#) explains general requirements relating to preparing a prescription medicine submission for lodgement with the TGA, including the requirement that all submissions are in Common Technical Document (CTD) format.
- CTD format requires that the submission dossier is presented to the TGA in modules 1, 2, 3, 4 and 5. Each module contains a group of documents of similar subject matter (e.g. module 3 contains chemistry information about the medicine). See [About the Common Technical Document Format](#) below.
- [Part A](#) of this document also includes physical and administrative requirements for the whole submission dossier (i.e. modules 1 to 5 and any other information supplied to the TGA after the original submission dossier).

Part B – Format of module 1

- [Part B](#) explains the format that module 1 of a submission dossier must follow. Module 1 holds multiple documents relating to the application to register a medicine or change registered medicines.
- [Part B](#) describes each document to be included in module 1, outlines when each document needs to be provided and any other requirements relating to the documents.
- To aid in determining which documents and which modules are required for a given application type, at the start of each document within Part B is a table identifying whether the documents in the section are mandatory, not required, or may be required in certain circumstances.

Part C – Request for confidentiality

- [Part C](#) explains the nature of the legal test for confidential information and the situations in which the TGA is legally obliged to release information.

Part D – Dossier documents matrix

- [Part D](#) provides a summary of which CTD documents are required for each different submission category and application type.
- It is intended to provide an ‘at a glance’ indication of which CTD documents are required – in many cases, documents are optional dependent on the details of the submission.
- Sponsors must refer to Part B of this document, and the CTD documents for [modules 2 to 5](#) on the TGA website for the detailed business rules that determine whether or not a given CTD document is required.

Scope of document

- This document primarily applies to category 1, category 2 and category 3 submissions relating to prescription medicines from 1 November 2010. The impact of the introduction of the streamlined submission process on each submission category and the relevant version of the *CTD Module 1* document is summarised in the following table.

Category	Description of category	Transitional arrangements from 1 November 2010	
		Processes	Regulatory documents
category 3	<p>Requests for variations under s. 9D(3) of the Act to which Regulation 16F applies</p> <p>OR</p> <p>Applications for new Register entries made under s. 23 of the Act to which Regulation 16G applies.</p>	Processes for preparing and lodging submission remain unchanged.	<p>For category 3 submissions lodged between 1 November 2010 and 28 February 2011 (inclusive), refer to the transitional draft <i>CTD Module 1¹</i> - as at September 2010 document.</p> <p>For category 3 submissions lodged on or after 1 March 2011, refer to the transitional draft <i>CTD Module 1</i> - as at January 2011 document.</p> <p>For details on processes and other regulatory requirements, refer to the <i>Australian regulatory guidelines for prescription medicines (ARGPM)</i>.</p>
category 2	<p>Applications for new Register entries made under s. 23 of the Act to which Regulation 16C(4) applies</p> <p>OR</p> <p>Requests for variations under s. 9D(3) of the Act to which Regulation 16D(4) applies.</p>	All category 2 submissions lodged with the TGA from 1 November 2010 will be processed through the streamlined submission process (i.e. a pre-submission planning form (PPF) must be lodged with the TGA between 2½ to 6 months before the submission).	<p>For category 2 submissions lodged between 1 November 2010 and 28 February 2011 (inclusive), refer to the transitional <i>CTD Module 1¹</i> - as at September 2010 document.</p> <p>For category 2 submissions lodged from 1 March 2011, refer to the transitional draft <i>CTD Module 1</i> - as at January 2011 document.</p> <p>For details of processes and other regulatory requirements, refer to the Transitional prescription medicine streamlined submission process document.</p>

¹ The November 2008 version of CTD Module 1 requirements will remain available on the TGA website until the updated *Australian regulatory guidelines for prescription medicines* is released. This is due to some overlaps of information between the documents.

Category	Description of category	Transitional arrangements from 1 November 2010	
		Processes	Regulatory documents
category 1 applications solely for additional trade names (ATN)	Applications for new Register entries made under s. 23 of the Act where the sponsor seeks only to register an ATN for an existing registration.	Processes for preparing and lodging submission remain unchanged.	<p>For ATN submissions lodged between 1 November 2010 and 28 February 2011 (inclusive), refer to the transitional draft <i>CTD Module 1¹</i> - as at September 2010 document.</p> <p>For ATN submissions lodged from 1 March 2011, refer to the transitional draft <i>CTD Module 1</i> - as at January 2011 document.</p> <p>For details on processes and other regulatory requirements, refer to the ARGPM.</p>
category 1 (other than submissions solely for additional trade names)	<p>All other submissions that are either:</p> <ul style="list-style-type: none"> applications for new Register entries made under s. 23 of the Act to which Regulation 16C applies <p>OR</p> <ul style="list-style-type: none"> requests for variations under s. 9D(3) of the Act to which Regulation 16D applies. 	All category 1 submissions, with the exception of ATN applications, lodged with the TGA from 1 November 2010 will be processed through the streamlined submission process (i.e. a pre-submission planning form (PPF) must be lodged with the TGA between 2½ to 6 months before the submission).	<p>For all other category 1 submissions lodged between 1 November 2010 and 28 February 2011 (inclusive), refer to the transitional <i>CTD Module 1¹</i> - as at September 2010.</p> <p>For all other category 1 submissions lodged from 1 March 2011, refer to the transitional draft <i>CTD Module 1</i> - as at January 2011 document.</p> <p>For details of processes and other regulatory requirements, refer to the Transitional prescription medicine streamlined submission process and the Transitional mandatory requirements for an effective submission documents.</p>

Category	Description of category	Transitional arrangements from 1 November 2010	
		Processes	Regulatory documents
Notifications	<p>Notifications ('requests') lodged under one of the following:</p> <ul style="list-style-type: none"> • s. 9D(1) of the Act i.e. requests for corrections to ARTG entries • s. 9D(2) of the Act i.e. 'safety related' notifications • s. 9D(3) of the Act for 'self assessable' notifications as described in Part B of Appendix 12 and Appendix 13 of the ARGPM • s. 9D(3) of the Act for 'minor editorial changes' as described in the ARGPM. 	Process for preparing and lodging remains unchanged.	<p>For submissions lodged between 1 November 2010 and 28 February 2011 (inclusive), refer to the transitional <i>CTD Module 1¹</i> - as at September 2010 document.</p> <p>For submissions lodged from 1 March 2011, refer to the transitional draft <i>CTD Module 1</i> - as at January 2011 document.</p> <p>For details on processes and other regulatory requirements, refer to the ARGPM.</p>
Non-assessable changes	Non-assessable changes as described in Part A of Appendix 12 of the ARGPM.	Unchanged.	For details on processes and other regulatory requirements, refer to the ARGPM .
Section 14 exemption	Request for exemption from compliance with standards under s.14 of the Act.	Processes for preparing and lodging remains unchanged.	<p>For exemptions lodged between 1 November 2010 and 28 February 2011 (inclusive), refer to the transitional <i>CTD Module 1¹</i> - as at September 2010 document.</p> <p>For requests lodged from 1 March 2011, refer to the transitional draft <i>CTD Module 1¹</i> - as at January 2011 document.</p> <p>For details on processes and other regulatory requirements, refer to the ARGPM.</p>

- 'self assessable' notifications, 'safety related' notifications and requests for correction to ARTG entries are not currently required to be in CTD format.
 - It should be noted, however, that this will change on the introduction of electronic CTD ([eCTD](#)) dossiers in the future.
 - Until the introduction of eCTD dossiers, some provisions in Part A are still relevant to these items – these are identified in the table 'summary of requirements' in Part A.

About the common technical document format

- Submission dossiers for category 1, category 2 and category 3 applications must be prepared in Common Technical Document (CTD) format.
- The CTD format sets out requirements for a consistent, unambiguous and transparent dossier that can be easily navigated by TGA staff and evaluators.
- The CTD format prescribes the order in which documents must be placed in a dossier so that they are grouped logically and can be easily located. It also prescribes other requirements relating to the physical attributes of the dossier (e.g. page sizes).

General common technical document information

- The CTD format was originally compiled and ratified by the International Conference on Harmonisation of Technical Requirements for Registration of Pharmaceuticals for Human Use (ICH). Both the European Medicines Agency (EMA) and the US Food and Drug Administration (FDA) adopted the CTD format, although each subtly adjusted the format to suit their purposes.
- Under the CTD format, each application is a collection of documents, grouped into 5 modules:

CTD modules		
Module	Description	Comments
1	Administrative Information and Prescribing Information	<ul style="list-style-type: none"> · Contains relevant administrative documentation. Format of module 1 is unique to Australia. · This module is divided into sections, as described in Part B of this document. · Some sections of module 1 are mandatory for all application types. Some sections are only mandatory for certain application types. These are defined in Part B.
2	Common Technical Document Summaries	<ul style="list-style-type: none"> · Contains the summaries and overviews for the quality, non-clinical and clinical sections of the dossier. · Adopted from the European (EU) CTD format.
3	Quality	<ul style="list-style-type: none"> · Contains the chemical, pharmaceutical and biological data relevant to the application. · Adopted from the EU CTD format.

CTD modules		
Module	Description	Comments
4	Safety (Non-clinical Study Reports)	<ul style="list-style-type: none"> Contains the non-clinical (pharmaco-toxicological) data relevant to the application. Adopted from the EU CTD format.
5	Efficacy (Clinical Study Reports)	<ul style="list-style-type: none"> Contains the clinical data relevant to the application. Adopted from the EU CTD format.

- Further information about each module is available from the [CTD page](#) of the TGA website.

Submission and CTD terminology

The following information is provided to clarify the concepts of the CTD format and its relationship to dossiers, documents, and volumes.

- A submission dossier consists of one or more applications with a supporting data set.
- The supporting data set consists of:
 - the submission dossier lodged in the first instance
 - any submission dossiers provided to the TGA previously that are referenced by the submission
 - any other data to support the submission that is lodged following the submission dossier (e.g. s. 31 responses, further safety data).
- Submission dossiers must be in CTD format:
 - A CTD format submission dossier is divided into modules.
 - Each module is divided into a series of documents (e.g. module 1.0) and sub-documents (e.g. module 1.0.1). See Figure 1 for a pictorial representation.

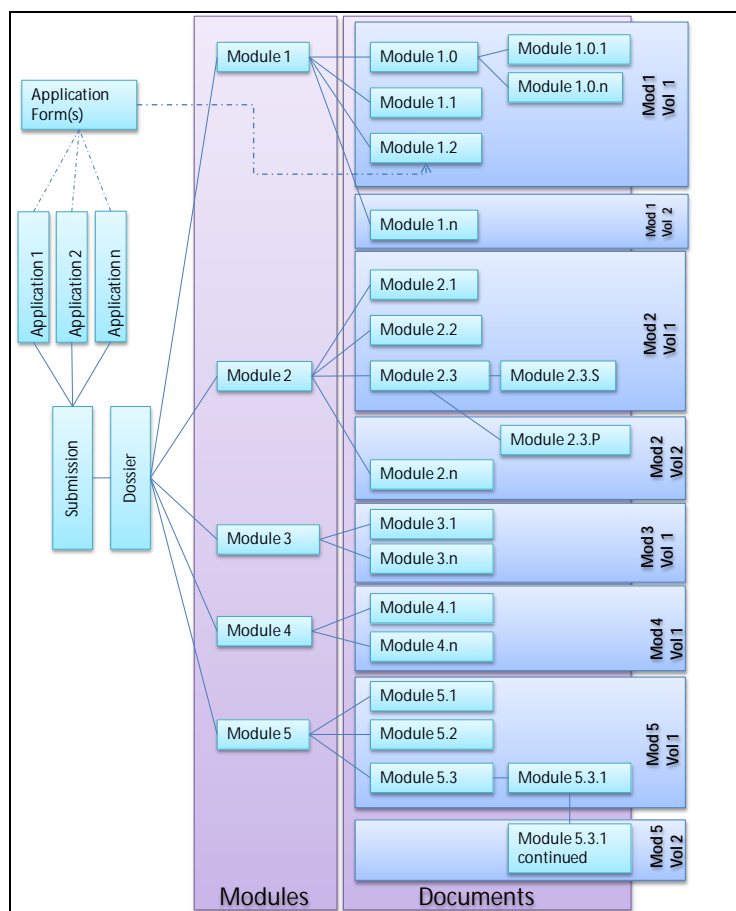


Figure 1 - CTD Format

- For the hard copy submission dossier:
 - The documents and sub-documents within a given module are inserted sequentially into one or more volumes (see Figure 1).
 - Each volume is fully contained in a binder. There can only be one volume per binder and one binder per volume.
 - Each volume's binder must be labelled with the module number, the volume number and other information as described in [Volume identification](#).
- Depending on the submission type, CTD format submission dossiers must be provided in both hard copy and electronic form (see [Hard copy and electronic form dossier requirements](#) for more information).

Physical attributes

- The CTD format also prescribes requirements for a range of other attributes of the submission, including:
 - physical attributes of the dossier (e.g. paper size, binding)
 - language
 - hard copies and electronic copies.

This document predominantly provides information on these other attributes and also the contents of Module 1: Administrative Information and Prescribing Information.

Submission dossier regulatory requirements

- When preparing a CTD format submission dossier, the following information needs to be considered to ensure submission dossiers meet the regulatory requirements:
 - transitional draft CTD Module 1 Administrative Information and Prescribing Information for Australia (this document)
 - [CTD regulatory requirements documents](#) for the remaining modules – modules 2 to 5
 - *Australian regulatory guidelines for prescription medicines* ([ARGPM](#))
 - technical guidelines and requirements (see below)
 - any other relevant documents provided by the TGA.
- The module 1 and module 2 documents are prescriptive in their requirements – i.e. they describe the structure/format of the module and also provide detail on what needs to be included in each section of the module and the regulatory requirements for when the information needs to be included.
- For modules 3 to 5, the structure and format are explained but the technical content requirements are not included i.e. they do not indicate the data or studies required; they merely indicate an appropriate format and organisation for the data to be presented.
- The technical data requirements for prescription medicines evaluated by the TGA are closely aligned with those of the European Union (EU). There are two types of TGA technical data requirements for prescription medicines:
 - [Australian-specific requirements](#) – e.g. need for a summary of biopharmaceutic studies at module 1.11, products for which biopharmaceutic studies are expected (Appendix 15 of [ARGPM](#))
 - [EU Guidelines adopted in Australia](#) – i.e. guidelines prepared by the European Committee for Medicinal Products for Human Use (CHMP) and/or those prepared within the ICH process that have been adopted by the TGA.
- Australian-specific requirements are identified in either this document or the [ARGPM](#).
- For a small number of the EU guidelines that have been adopted in Australia, additional TGA comments are provided. These comments are annotated on the TGA website listing of [adopted EU guidelines](#).
- The annexes to modules 3, 4 and 5 of the EU CTD have not been adopted in Australia. Australian applicants must refer to the list of the [EU guidelines adopted by the TGA](#) instead.
- A description of the process by which the TGA reviews new and revised EU Guidelines and subsequent adoption is included in the [ARGPM](#) (see Part 1 – Introduction).

Part A – General requirements for applications

Overview

Part A explains general requirements relating to preparing a prescription medicine submission for lodgement with the Office of Medicines Authorisation (OMA), including physical and administrative requirements for the complete submission dossier (i.e. modules 1 to 5 and any other information supplied to the TGA after the original submission dossier).

Part A applies primarily to category 1, category 2 and category 3 submissions, but some requirements also apply to other data lodged with OMA (e.g. s. 31 responses, notifications).

Contents

Summary of requirements	19
Submission dossier requirements	20
Language used in dossier	20
Preparation	20
Hard copy and electronic form dossier requirements	20
Organisation of documents in submission dossier	22
Size and binding	22
Volume identification	23
Pagination	24
Paper size and printing	24
Fonts	24
Packaging	24
Subsequent data	25
Responses to s. 31 questions	25
Other data	25

Summary of requirements

Submission dossier requirements				
Requirement	Category 1/ category 2	Category 3	Notifications ²	Other data types ³
Language used in dossier				
Preparation				
Submission dossier				
Organising documents				
Size and binding				
Volume identification				
Pagination				
Paper size and printing				
Fonts				
Packaging				

Key

| = mandatory i = requirement defined by application type and regulatory requirements –refer to this section for more information blank = not required

² Notifications = 'safety related' notifications, 'self assessable' notifications and requests for correction to register entry under s. 9D(1) of the *Therapeutic Goods Act 1989*.

³ Other data types = s. 31 responses, additional data, certified product details

Submission dossier requirements

Language used in dossier

- Information supporting an application must be in English and legible.
- Where material is not originally in English, a copy in the original language and a full translation must be submitted, the accuracy of which is the responsibility of the sponsor.
- Reports submitted only in a language other than English will not be accepted.

Preparation

- The EU CTD format must be used for all category 1, category 2 and category 3 applications whether or not any previous application was in the EU CTD format.
 - The only exception is where the TGA has agreed to accept an application in the US version of the CTD format, rather than the EU version of the CTD format. This would need to be agreed at a pre-submission meeting (see s. 3.1.1 of the [ARGPM](#)).
- Any s. 31 responses, additional data, or new safety data submitted must also be in CTD format – i.e. the module(s) must be identified and numbering must follow from the original documentation.
- The CTD structure must also be used for category 1, 2 and 3 amendments and variations.
- The applicant should not submit the modules and documents that are not used i.e. it is not necessary to include 'not applicable' pages against unused CTD document headings.
- Literature based submissions must also be prepared using the CTD format. The specific requirements for such applications are discussed in the document [Literature based submissions - points to consider](#) and part B of this document (see module 1.5.1).
- Acronyms and abbreviations must be defined the first time they are used in each module.
- Applicants must not modify the overall organisation of the CTD.
- Any submission-related data to be sent to the TGA after the original submission dossier was lodged (e.g. s. 31 response, additional data) must be provided as addenda to the relevant module. Additionally:
 - the data must meet the CTD requirements outlined in this document (e.g. labelling of volumes, packaging, electronic copy)
 - any additional expert comment that may be provided as a supplement to, or incorporated into, the relevant summary, overall summary or overview, must also be provided.

Hard copy and electronic form dossier requirements

- When preparing a category 1 or category 2 submission dossier for lodgement with the TGA, the dossier must be provided in both hard copy and electronic medium.
- Category 3 submissions are required in hard copy only.

Requirements for hard copy submission dossier

- To support the concurrent evaluation of a category 1 or category 2 submission by all evaluation areas, multiple copies of some modules are required.
- The hard copy submission dossier must be submitted in the following quantities:

Number of copies of modules required by submission type			
Module	Category 1/ category 2 submissions (excluding additional trade names)	Category 1 additional trade name submission	Category 3 submission
Module 1	4	3	1
Module 2	4	0	1
Module 3	2	0	1
Module 4	1	0	0 ^(b)
Module 5	1	0	0 ^(b)
Module 5.3.1 - Reports of Biopharmaceutic Studies	1 ^(a)	0	0 ^(b)
Module 5.3.2 - Reports of studies pertinent to pharmacokinetics using human biomaterials	1 ^(a)	0	0 ^(b)

Notes:

(a) One copy of each of module 5.3.1 and 5.3.2 is required in addition to the copy provided as part of module 5. This is to allow pharmaceutical chemistry evaluators and toxicology evaluators to evaluate modules 5.3.1 and 5.3.2 (respectively) concurrently with the clinical evaluators' evaluation of the complete module 5.

(b) By legislative definition, a category 3 submission does not require evaluation of non-clinical, clinical or bioequivalence data. Therefore such data is not required in a category 3 submission.

Requirements for electronic submission dossier

- The submission dossier must be provided in an electronic medium for all category 1 and category 2 submissions.
 - An electronic copy of the submission is optional for category 3 submissions but it must be supplied in addition to the hard copy format.
- Acceptable structures for the electronic submission dossier are:
 - a non-eCTD electronic submission (Nees) (see the [TGA website](#) for more information)
 - eCTD.
- The electronic submission dossier must include the Australian-specific module 1.
- The electronic submission dossier must be provided on either CD or DVD (USB keys, hard drives etc are not acceptable).
- Six copies of the full electronic dossier must be provided for category 1 and category 2 submissions.
 - Sponsors must provide the electronic submission dossier on the smallest number of media units possible, taking into consideration the size of the submission. If more than one unit is needed, avoid spanning the content of a part or a module of the dossier over two units.
- PDF files produced from an electronic source document are highly preferred over PDF files produced from scanned paper, since those 'electronic' PDF files provide the maximum functionality to the reviewers in terms of search and print capabilities, and copy and paste functionality.

- While it is a requirement for both a hard copy submission dossier and an electronic submission dossier to be submitted, the hard copy dossier remains the formal submission.
- Sponsors may choose to include the individual patient data in module 5 in the electronic format of the dossier only.
- The letter of application must include a declaration confirming that either the data on the electronic submission dossier supplied is identical to that in the hard copy dossier or, if not identical, a declaration that the dossiers are identical with the exception of the specified differences (see module 1.0.1).

Organisation of documents in submission dossier

- Documents from within a module can be combined in the same volume as long as they are in consecutive order and separated by appropriately named tab identifiers. For example, the product information should be separated from the other documents by a tab identifier named 1.3.1 - Product information.
- With the exception of category 3 submissions, documents from different CTD modules must not be included in the same volume.
- Where additional data is provided as answers to questions raised by the TGA (i.e. s. 31 request responses) or as the submission of new safety data, and more than one module is involved, each module must be submitted as one or more separate volumes.
- Administrative documents (e.g., letter of access to Drug Master Files, statement on the availability of individual patient data) are included in module 1. The organisation of such documents should be consistent with the structure described in this document. Since these administrative documents are small, they should be placed in the same volume, separated by tab identifiers.
- If one or more annexes to module 1 are to be provided, they must be provided in separate volumes (i.e. start a new volume for each annex).
- Where there are multiple versions of a given document (e.g. for a fixed combination, the dossier might contain one module 3.2.S for one active ingredient and another module 3.2.S for the other active ingredient), the documents should be:
 - included in the relevant module sequentially
 - titled to include the name of the active ingredient (or component) and manufacturer or other identifying details (e.g. module 3.2.S Amoxicillin trihydrate, Manufacturer XYZ; module 3.2.P Amoxicillin Tablets).
- Further information about preparing the submission dossier can be found in the [EU General Questions and Answers](#) (CPMP/ICH/2887/99) that have been adopted by Australia.

Size and binding

- All data that exceed 20 pages, including additional and new safety data, and responses to the TGA's requests for further information, submitted in support of an application must be bound.
- Binders with durable covers, which can be dismantled and reassembled, are preferred.
- Where ever possible, the external dimensions of binders should not exceed 270mm width x 320 mm height and 80 mm in thickness.
 - Binders of larger dimensions require additional preparation for storage and archive, causing delays.

- Binders must not be overfilled.



Did you know?

The TGA is required to keep submission dossiers for a period of 70 years. To help ensure that submission dossiers are intact and legible throughout their lifetime, the TGA keeps all submissions in special acid-free archival standard boxes. However, these boxes will not prevent the degradation of the information during that time if the paper, binders, inserts, plastic inserts etc. that constitute the submission are not themselves acid-free.

While the TGA is preparing to transition to a fully electronic submission dossier, sponsors should still ensure submission dossiers are acid-free. As a minimum, acid-free inserts should be used to protect the contents of the volume from an acidic binder.

For more information, refer to the [National Archives of Australia](#) website, including the information on [preserving paper files](#).

Volume identification

- Volumes must be numbered by module, resulting in a separate set of numbers for each module.
- The labelling of each volume must include:
 - name of applicant
 - name of medicine
 - module and volume number
 - copy number
 - contents of volume (expressed as CTD document(s)).
- Module and volume number
 - The volumes for each module must be numbered separately and sequentially using the format: x of y volumes, where x is the number for the specific volume and y is the total number of volumes submitted for the respective module e.g. module 3, Vol.1 of 6.
- Copy number
 - The 4 copies of modules 1 and 2 and the 2 copies of module 3 must be numbered as: copies 1 to 4, and 1 and 2, respectively.
 - The additional copies of module 5.3.1 (Reports of Biopharmaceutic studies) and module 5.3.2 (Reports of studies pertinent to pharmacokinetics using human biomaterials) must be clearly labelled as duplicate copies.
- Contents
 - Where a module spans more than one volume, each volume must also be labelled to show the section(s) that it contains, for example: section 3.2.P.4, meaning:
 3. – Module 3 - Quality
 2. – Body of data
 - P. – Product
 4. – Control of excipients

Pagination

- A document is a set of pages, numbered sequentially and divided from other documents by a tab. Each module consists of several documents.
- Page numbering must be at the document level and not at the volume or module level. (The entire submission dossier should never be numbered consecutively by page.)
- All documents must have page numbers. Since the page numbering is at the document level, there should only be one set of page numbers for each document.
- Cross-referencing to documents should be made by referring to the module, volume, tab identifier, and page number (for example, see module 3, vol. 6, p.4.3 method validation, p 23).

Paper size and printing

- Standard A4 paper must be used for all submissions.
- Text and tables must be prepared using margins that allow the document to be printed on A4 paper.
- The left-hand margin must be sufficiently large that information is not obscured through binding.
- Documents can be double-sided provided that all of the following conditions are met:
 - legibility is not impaired
 - margin space is sufficient on both the left and right side, so that information is not obscured when the page is placed in a binder
 - page numbers are applied to both sides
 - binders are of a type that will open flat.

Fonts

- Font sizes for text and tables must be of a style and size that are large enough to be easily legible, even after photocopying or when provided electronically.
- Generally, a font size of 10 points is considered acceptable in tables, but fonts smaller than 12 points should be avoided whenever possible.
- Times New Roman, 12-point font is recommended for narrative text.
- Ten-point font is recommended for footnotes.

Packaging

- All submissions must be appropriately packed so as to arrive at the TGA in an undamaged state. The following points identify how to achieve this:
 - Where a submission constitutes more than two binders, binders must be boxed.
 - Where a submission constitutes more than 10 boxes, the boxes must be delivered on a pallet.
 - The weight of any box must not exceed 16kg.
 - Boxes must be packed with the binder spines to the sides or bottom of the box, not the top of the box.
 - Bubble wrap may be used around the sides of the box to protect the folders. Individual folders must not be bubble-wrapped.
 - Polystyrene beads or peanuts must not be used for packaging.
- Boxes must be numbered sequentially, with box 1 containing volume 1 of module 1.

- Box 1 must be clearly identified and easily accessible on a pallet.

Subsequent data

- Where the sponsor is required to lodge further submission related information after the original submission dossier has been lodged with the TGA (e.g. s. 31 responses, new safety related data), the data must meet the requirements specified in the preceding section, with the following exceptions.

Responses to s. 31 request

- Responses must be in CTD format.
- Unless stated otherwise in the request from the TGA, the response must be provided as:
 - one hard copy of the response
 - one electronic copy of the response on CD/DVD in Nees or eCTD format.
- For the hard copy, the volumes must:
 - meet the above [organising documents](#), [size and binding](#), [volume identification pagination](#), [paper size and printing](#), [fonts](#) and [packaging](#) requirements, and
 - be labelled to indicate that it is a s. 31 response and show the s. 31 request number in addition to the module and volume numbers as required above.
- The TGA may request information and/or documents via a s. 31 request or informal request.

Other data

- For all other data, please contact the TGA to determine whether it should be provided in hard copy, electronic or both formats, and the number of copies required.
- Apart from the number of copies, both the hard copy and the electronic versions must meet the requirements outlined in part A above.

Legislation

Category 1, category 2 and category 3 applications for new registrations are made under s. 23 of the *Therapeutic Goods Act 1989* (the Act). (A new registration is one that requires a new ARTG entry by reason of being separate and distinct goods under s.16 of the Act.) Section 23 requires that applications are made in a form approved by the Secretary. The currently approved form is the CTD format, as described in this document and related [CTD documents](#).

Category 1, category 2 and category 3 applications requesting a variation to an existing registration are made under s. 9D(3) of the Act. The TGA requires that such applications are provided in CTD format.



The use of adopted EU guidelines and other Australian-specific guidelines is not mandated in the legislation. However, s. 25(1)(d) of the Act requires that when making a decision whether or not to approve a medicine for registration, the delegate determine:

whether the quality, safety and efficacy of the goods for the purposes for which [the goods] are to be used have been satisfactorily established.

This requires that the sponsor provide the appropriate documentation, including outcomes of trials and studies, to adequately support their quality, safety and efficacy claims. Failure to establish quality, safety and efficacy for the purpose may result in rejection of the application.

The adopted EU guidelines and other Australian-specific guidelines are the regulatory requirements against which the TGA assesses quality, safety and efficacy. Thus failure to address the relevant regulatory requirements in a submission dossier, or failure to adequately justify why a relevant requirement has not been applied to the submission, carries a high risk of submission rejection.

Part B– Format of module 1

Module 1.0 Letter of application

Overview

This section of the document explains the information that is required to be provided in the first section of module 1 for an application. This information is important and needs to be readily accessible by TGA staff from multiple work areas.

The following information describes each document in the section, outlines when each document needs to be provided, and any other requirements relating to the documents.

Contents

Summary of requirements	27
Module 1.0.0 Electronic lodgement cover sheet	28
Module 1.0.1 Letter of application	28
Module 1.0.2 Responses to questions	29

Summary of requirements

Documentation					
Section	Description	Category 1/category 2		Category 3	
		New registration ⁴	Variation	New registration ⁴	Variation
1.0.0	Electronic lodgement cover sheet	i	i		
1.0.1	Letter of application				
1.0.2	Responses to questions	i	i	i	i

Key

| = mandatory i = requirement defined by application type and regulatory requirements – refer to this section for more information blank = not required

⁴ A new registration is one that requires a new ARTG entry by reason of being separate and distinct goods under s.16 of the *Therapeutic Goods Act 1989*. This includes new chemical entities, new strengths, new dosage forms, different directions for use, formulation changes, changes in trade name, extension of indication etc. By the provisions in the Therapeutic Goods (Groups) Order 2001, not all new registrations will result in a new AUST R number being allocated if they are taken to be grouped.

Module 1.0.0 Electronic lodgement cover sheet

When to include this document

- A signed electronic lodgement cover sheet must be included in module 1.0.0 when the submission has been lodged electronically via eBS prior to the submission dossier being sent to the TGA.

How to generate and prepare this document

- Following the online declarations and invoice generation during electronic lodgement, the system will then generate the electronic lodgement cover sheet. Print it.

More information about this process is available in module 1.2.1.

- The cover sheet must be signed by an authorised officer of the company.
- Include the electronic lodgement cover sheet in the first volume of module 1. It must be the first page visible when module 1 is opened.
- The original signed cover sheet must be included in copy 1 of module 1. Remaining copies of module 1 may contain copies of the signed cover sheet.

Points to note

- All new chemical entity and new generic submissions must be lodged via the eBS electronic lodgement system before lodging the submission dossier with the TGA.
- An 'authorised officer of the company' is a person that has been identified to the TGA as authorised to conduct business on behalf of the sponsor (i.e. the person must be listed on the eBS client database). This person may be a company employee or an agent. Refer to the [ARGPM](#) for more information (see Part 2 – General overview).

Module 1.0.1 Letter of application

When to include this document

- A letter of application must be included in module 1.0.1 for all application and submission types.

How to prepare this document

- The letter must be prepared on company letterhead.
- The letter must contain all of the following information:
 - The submission type applied for.
 - The trade name(s), active ingredient name(s), dosage forms and strengths of the medicine(s).
 - Where the submission seeks to change existing registered medicines, the AUST R numbers for those medicines.
 - The reason for the submission, for example, to register a new chemical entity, to change the formulation.
 - For category 1 and category 2 submissions (with the exception of additional trade names), the submission ID, as allocated at the time of lodging the pre-submission planning form.
 - Statistics of the submission dossier – the number of volumes in each module, the number of copies of each module, and a total page count for each module (including an indication of whether the module is single sided or double sided).
 - A declaration that the hard copy submission dossier and electronic copy of the dossier provided to the TGA are identical. If not identical, the declaration must specify the differences.

- Any studies supplied in the submission dossier that have been evaluated by the TGA previously, including information relating to the initial lodgement of the data (submission ID, date etc.).
- For category 3 submissions, a declaration that:

‘No aspects of the quality information have been changed, including manufacturing procedures and equipment and raw material and finished product specifications, other than the changes nominated in this application.’
- The letter must be signed by an authorised officer of the company; the signature must be wet.
- The letter must contain the full name, phone number, facsimile number and email address of the authorised officer. Where an alternate officer is to be contacted in relation to the submission, the same details must be provided for the alternate officer.
- The original letter must be included in copy 1 of module 1. Remaining copies of module 1 may contain copies of the signed original letter.

Points to note

- The letter of application is used by TGA staff, in conjunction with the application form (see module 1.2.1), to confirm the legality of the application.
- A submission dossier that differs significantly from its pre-submission planning form may be taken to be not effective on the basis that it impacts on the evaluation plan and resource requirements. See the [Transitional prescription medicine streamlined submission process document](#) for more information.
- A written request for confidentiality may be included as an attachment to the letter of application at the discretion of the sponsor where they wish to assert that information submitted with, or as part of, their application is confidential. Sponsors should prepare such a request taking into account the nature of the legal test for confidential information and other information set out in Part C of this document in relation to the TGA’s legal obligations to release information in certain contexts.

Module 1.0.2 Responses to requests for information

When to include this document

- Include this document where:
 - the TGA has requested more information about the submission via an informal request before the application is accepted for evaluation (i.e. a request not made under s. 31) and the response cannot be provided to the TGA by telephone, facsimile or email
 - you are preparing a response to a s. 31 request.
- It follows that this document/s will not be included in the initial submission dossier. Questions arising from the pre-submission phase that required sponsor action as part of the submission must be identified in [module 1.8](#).

How to prepare this document

- Assess the TGA’s request. Determine whether or not it will be necessary to provide revised or new CTD documents as part of the response.
- Prepare a letter, on company letterhead, that identifies:
 - The submission ID.

- The trade name(s), active ingredient name(s), and dosage forms of the medicine(s).
 - All of the questions in the TGA's request and, for each question, an appropriate response (see below).
 - A statistical summary of the information provided with the response, including which modules have been provided, the number of volumes in each module, and a total page count for each module (including an indication of whether the module is single sided or double sided).
 - Where relevant, a declaration that the hard copy dossier and electronic copy of the responses provided to the TGA are identical. If not identical, the declaration must specify the differences.
 - The full name, phone number, facsimile number and email address of the authorised officer. Where an alternate officer is to be contacted in relation to the response(s), the same details must be provided for the alternate officer.
- An appropriate response for a question is a comprehensive response that addresses all aspects of the question. References may also be used.
 - Where the response includes one or more references, a list of all of the revised CTD documents that are to be considered as part of the response must be provided. Where possible, a detailed reference as to the location of the required information should be included, for example p. 23.
 - For references that are CTD documents provided previously to the TGA, the submission ID must be provided.

Points to note

- Before sending the response to the TGA, ensure that the relevant revised/new CTD documents have been provided.
 - The revised/new CTD documents are considered to form part of the response and thus must be sent to the TGA along with module 1.0.2.
 - Note that the revised/new CTD documents are considered to be addenda to the modules already provided as part of the initial submission dossier. As such, they are also subject to the CTD requirements.
- Where provided, revised/new CTD documents must be included as addenda to the relevant modules. For example:
 - A revised product information document must be provided at module 1.3.1, with a tabbed identifier to distinguish it from other documents in the addendum to module 1.
 - A revised clinical overview must be provided at module 2.5, with a tabbed identifier to distinguish it from other documents in the addendum to module 2.
 - A revised control of drug product specification must be provided at module 3.2.P.5.1, with a tabbed identifier to distinguish it from other documents in the addendum to module 3.
- Documents from different modules must not be placed in the same volume.
- The response to questions, the revised CTD documents, the volumes containing the documents, the binders and the labelling and packaging of the binders must meet the requirements identified in Part A of this document, with the exception of the requirement for multiple copies.
- Note that the provision of extensive data/documents as part of the response requires the inclusion of the relevant summaries and/or overview sections in module 2.
- The response must also be provided electronically, on CD or DVD.
 - Only a single copy of the electronic format is required.

- Other requirements relating to the provision of an electronic format in Part A of this document still apply.



Legislation

Category 1, category 2 and category 3 applications for new registrations are made under s. 23 of the *Therapeutic Goods Act 1989* (the Act). Section 23 requires that applications are made in a form approved by the Secretary. The currently approved form is the CTD format, which incorporates a mandatory letter of application and application form.

Category 1, category 2 and category 3 applications requesting a variation to an existing registration are made under s. 9D(3) of the Act. This section requires that the sponsor request the Secretary to vary information in the Register entry relating to the affected goods. The TGA requires that the request to the Secretary for a category 1, category 3 or category 3 variation is also made in CTD format including a covering letter of application and a corresponding application form.

DRAFT

Module 1.1 Comprehensive table of contents

Overview

This section of the module 1 holds the comprehensive table of contents for the submission dossier.

The following information describes the document and any other requirements relating to the document.

Contents

Summary of requirements	32
Module 1.1 Comprehensive table of contents	33

Summary of requirements

Documentation					
Section	Description	Category 1/category 2		Category 3	
		New registration ⁵	Variation	New registration ⁵	Variation
1.1	Comprehensive table of contents	I	I	i	i

Key

I = mandatory i = requirement defined by application type and regulatory requirements – refer to this section for more information blank = not required

⁵ A new registration is one that requires a new ARTG entry by reason of being separate and distinct goods under s.16 of the *Therapeutic Goods Act 1989*. This includes new chemical entities, new strengths, new dosage forms, different directions for use, formulation changes, changes in trade name, extension of indication etc. By the provisions in the Therapeutic Goods (Groups) Order 2001, not all new registrations will result in a new AUST R number being allocated if they are taken to be grouped.

Module 1.1 Comprehensive table of contents

When to include this document

- A comprehensive table of contents must be included in all category 1 and category 2 submissions, in addition to the requirement for modular tables of content.
- A comprehensive table of contents must be included for all category 3 submissions exceeding a single volume of data.

How to prepare this document

Category 1 and category 2 submissions

- The comprehensive table of contents must include a complete list of all documents provided in the submission dossier by module.
- For each document, identify its location by referring to the tab identifier and the module and volume number(s) at which the document can be found.
- The name for the tab identifier must be the name of the document, for example 'application form', or the section heading according to the CTD format, for example 3.2.P.4.2.
- If the full name of the document is too long for the tab identifier, an alternative name that adequately identifies the document should be substituted.
- Tab identifiers (as described above) must be used in the table of contents as references to documents. Page numbers must not be used.
- The table of contents must specify the titles of studies. The title must indicate the type of study and subject – study codes alone are not acceptable.

Category 3 submissions

- For category 3 submissions exceeding one volume of data, a comprehensive table of contents as for category 1 submissions is required (see above).
- For category 3 submissions with a single volume of data, a comprehensive table of contents is optional, provided that labelled tab identifiers are used to [separate documents](#).

Points to note

- For category 1 and category 2 submissions, each individual module must have its own table of contents (i.e. a 'modular' table of contents).
- For category 3 submissions that exceed a single volume of data, the module 2 (where provided) and module 3 will still require a modular table of contents.
- The tables of content provided must be an accurate reflection of the documents provided in the submission and vice versa.

Module 1.2 Application forms

Overview

This section of the module 1 holds the comprehensive table of contents for the submission dossier.

The following information describes the document and any other requirements relating to the document.

Contents

Summary of requirements	34
Module 1.2.1 Application form	35
Module 1.2.2 Pre-submission details	37
Module 1.2.3 Patent certification	37

Summary of requirements

Documentation					
Section	Description	Category 1/category 2		Category 3	
		New registration ⁶	Variation	New registration ⁶	Variation
1.2.1	Application form				
1.2.2	Pre-submission details	⁷			
1.2.3	Patent certification documents	i		i	

Key

| = mandatory i = requirement defined by application type and regulatory requirements – refer to this section for more information blank = not required

⁶ A new registration is one that requires a new ARTG entry by reason of being separate and distinct goods under section 16 of the *Therapeutic Goods Act 1989*. This includes new chemical entities, new strengths, new dosage forms, different directions for use, formulation changes, changes in trade name, extension of indication etc. By the provisions in the Therapeutic Goods (Groups) Order 2001, not all new registrations will result in a new AUST R number being allocated if they are taken to be grouped.

⁷ With the exception of additional trade name submissions.

Module 1.2.1 Application form

When to include this document

- An application form must be provided in module 1.2.1 for every category 1, category 2 and category 3 submission dossier.
- For category 1 and category 2 submissions that have been lodged electronically via eBS, a printout of the application form/s and the submission details from eBS must be provided in module 1.2.1 in lieu of a paper application form.
- For all other submissions, a completed paper application form must be provided.

How to prepare this document

- Before an application can be lodged via a paper form or eBS, a TGA Client ID is required. See Points to note below.

Electronic lodgement

- For category 1 and category 2 submissions to be lodged electronically via eBS:
 1. Create an application for the first medicine to be included on the submission. When satisfied that all the information has been entered correctly, open the application from the 'view drafts' view. Click the 'view entire app' button and then click the 'print' button.

Note that applications cannot be printed after the submission has been lodged.
 2. Repeat step 1 to create all the required applications for the submission. There must be a single application for each separate and distinct good (see Points to note below).
 3. Once all applications have been created, select the menu option 'submission'. Fill in the required details and select the applications created in steps 1 and 2 to link them to the submission.
 4. After validating, select the button to 'lodge' the submission. When the system displays the cover sheet, confirm that the details are correct, then click 'next'. Select the 'print' button to print the cover page.
 5. Once the submission has been lodged, go to 'view lodged submissions' view. Open the submission and click 'print' to print the submission details.
 6. The cover sheet must be included in module 1.0.0. The submission details and the printout for each application must be included in module 1.2.1.

Paper application form

- For category 1 and category 2 submissions that have not been lodged electronically, and all category 3 submissions, download the [paper application form](#).
- Complete the form as per the instructions on the form, noting that the form is divided into three parts:
 - A – Sponsor details
 - B – Submission details
 - C – Application (Product) details.
- For each submission, one part A and one part B must be provided. Multiple versions of part C can then be supplied to represent each medicine, as described below.
- For all submissions resulting in a new ARTG entry (e.g. new chemical entity, extension of indication, formulation change, change in trade name, new container type), Part C must be completed as follows:
 - Complete one part C per new ARTG entry.

- Where two or more new ARTG entries are identical in every way apart from the trade name, these can be condensed into one part C – all trade names need to be specified in the Label Name field on page 10.
- For composite packs, complete page 10 and then the shelf life and storage conditions for the composite pack on page 15. Then complete pages 17 to 21 for each component.
- For variations, it is not necessary to complete all of Part C, just the information that is changing e.g. the new shelf life. However, note that:
 - The information recorded should reflect the new ARTG record, not what is currently recorded in the ARTG for the medicine.
 - Where a manufacturing site is being deleted, it should be included in Part C with the annotation “to be deleted”.
 - Any Part C pages that are not relevant to the application (i.e. the information on them is not changing) may be crossed through with the comment “Not applicable” or “N/A”.
 - Where the same change applies to multiple products, all the affected products may be included in the Label Name field on page 10 (i.e. only use the one Part C).
- Where there are no changes to the ARTG database record at all (e.g. change in patient group, change to active ingredient manufacturing process), it is not necessary to record any details on the form past the Label Name field on page 10.
- For any field/section on the paper application form, if there is insufficient room, enter “see attached” in the field and attach a separate page showing the full details.

Points to note

- The application form is used by TGA staff, in conjunction with the letter of application, to confirm the legality of the application.
- For queries regarding Client IDs, please contact eBS on ebs@tga.gov.au or 1800 010 624.
- When lodging electronically, a separate application must be created for each separate and distinct good identifiable under s.16 of the Act. When lodging on a paper application form, a separate Part C is required for each separate and distinct good.
- Where a paper application form is provided for submissions other than new chemical entities or new generics, the TGA will enter the information about each medicine into their systems.
 - New chemical entities and new generics submissions must be lodged electronically via eBS.
- The information entered in the paper application form or electronic lodgement form is the basis of the new/ revised ARTG entry. It is therefore critical that this information is entered accurately and is an accurate reflection of the information provided in the submission dossier.
- Before the submission is approved, the information that forms the basis of the new/ revised ARTG entry is called the “provisional ARTG record” (PAR). The information included on the provisional record is updated as required during evaluation of the application. At the conclusion of the evaluation, the final information becomes the ARTG entry for the product.
- The manufacturing steps shown on a manufacturing licence or GMP clearance issued by the TGA do not necessarily have a 1:1 relationship with the manufacturing steps that need to be entered on the prescription medicine application form. Refer to the [ARGPM](#) for more information.
- The indications recorded on the application form for a new chemical entity/biological entity or submissions for extension of indication must be identical across the application form, letter of

application and the product information document, apart from the use of trademark and copyright symbols.

- Note that the TGA's eBS electronic lodgement system currently does not support subscript, superscript, non-alpha numeric, formatting e.g. carriage returns, bullet points or Greek characters.
- The TGA is working to expand the electronic lodgement facility to include all application and submission types. As new application types become available, a news item will be published on "Latest News" section of eBS.
- The non-proprietary ingredients in the formulation must be specified using either:
 - Australian approved names (AANs) or the proposed AANs, or
 - Australian Approved biological names (ABNs) or the proposed ABNs.A list of AANs and ABNs is available from [TGA Approved Terminology for Medicines](#).
- For new ingredients and new proprietary ingredients, the completed [Application form for proposing a chemical/biological name](#) or the completed [Notification of a New Proprietary Ingredient](#) form (respectively) must be lodged with the TGA, as specified on the form, before the pre-submission planning form is lodged.
- New medicines cannot be registered until all ingredients have either an AAN/ABN or have been included as a proprietary ingredient in the ARTG.

Module 1.2.2 Pre-submission details

When to include this document

- When a pre-submission planning form has been lodged for your category 1 or category 2 submission.

How to prepare this document

- After lodging your pre-submission planning form via eBS, go to the "Lodged Submissions" view in eBS. Locate the pre-submission planning form, open it and then print it.
- Include the printed page in module 1.2.2. Note that the pre-submission ID must be clearly visible.

Points to note

- The TGA will check the submission to confirm that it is an accurate reflection of the information provided at pre-submission.
- It is not necessary to print out the attachments to the online form.
- A pre-submission planning form is not required for additional trade name applications.

Module 1.2.3 Patent certification

When to include this document

- Before a newly approved registration can be included in the ARTG, one of the following forms is required to be provided to the TGA in order to satisfy legislative requirements under s.26B of the Act:
 - '[Certification](#) in relation to patents required in relation to registration or listing under Sections 25, 26 and 26A of the *Therapeutic Goods Act 1989*'

- '[Notification](#) to the Secretary that a Certification under s. 26B(1) of the *Therapeutic Goods Act 1989* is not required'.
- Where sponsors are able to provide this form at the time of lodging the submission, it should be included in module 1.2.3.

How to prepare this document

- Locate and open the [appropriate form](#).
- The form must be completed, and signed, in accordance with the instructions included on the form.

Points to note

- If providing this document after submission lodgement, it must be sent to the Application Entry Team. It should not be included with any other documentation (whether or not related to the same submission/medicine).
- All new registrations, including formulation changes, changes in trade name and extensions of indication, require the provision of one of these forms before the registration process can be finalised.

Legislation

Category 1, Category 2 and Category 3 applications for new registrations are made under s.23 of the *Therapeutic Goods Act 1989* (the Act). Section 23 requires that applications are made in a form approved by the Secretary. The currently approved form is the CTD format, which incorporates a mandatory letter of application and application form. As of 1 November 2010, the currently approved form is expected to include the pre-submission planning form.



Category 1, Category 2 and Category 3 applications requesting a variation to an existing registration are made under s. 9D(3) of the Act. This subsection requires that the sponsor request the Secretary to vary information in the Register entry relating to the affected goods. The TGA requires that the request to the Secretary for a variation is made in CTD format with a covering letter of application, a corresponding application form and necessary supporting data.

A certificate about relevant patents is required under s. 26B of the Act in relation to applications made under s. 25 of the Act. Otherwise, a notification must be provided that such a certificate is not relevant. More information about this requirement is available from the [TGA website](#).

Module 1.3 Medicine information documents, packaging, and labelling

Overview

This section of the module 1 holds multiple documents relating to the presentation and packaging of the medicine(s).

The following information describes each document in the section, outlines when each document needs to be provided and any other requirements relating to the documents.

Contents

Summary of requirements	40
Module 1.3.1 Proposed Australian product information and package insert	40
Module 1.3.2 Proposed Australian consumer medicines information	42
Module 1.3.3 Therapeutic goods and use of human embryos or human embryonic stem cells or material derived from them	42
Module 1.3.4 Label mock-ups and specimens	44

Summary of requirements

Documentation					
Section	Description	Category 1/category 2		Category 3	
		New registration ⁸	Variation	New registration ⁸	Variation
1.3.1	Proposed Australian product information		i		i
	Annotated copy of proposed Australian product information		i	i	i
	Package Inserts	i	i	i	i
1.3.2	Proposed Australian consumer medicines information		i		
1.3.3	Declaration concerning the use of human embryos or human embryonic stem cells				
1.3.4	Mock-ups and specimens of proposed Australian Labelling		i		i

Key

| = mandatory i = requirement defined by application type and business rules – refer to this section for more information blank = not required

Module 1.3.1 Proposed Australian product information and package insert

When to include this document

- A proposed Australian product information (PI) document must be included with:
 - All applications resulting in one or more new ARTG entries by reason of being a separate and distinct good under s.16 of the Act – for example, new chemical entities, change in formulation, additional trade names, change in trade name, new container type.
 - All applications seeking a variation that will result in a change to the PI – for example, a category 1 submission to update the clinical trials section of the PI, or a category 3 submission to change the storage conditions of the medicine which will be implemented immediately after approval (see s4.4.5 of [ARGPM](#)).
- A proposed package insert must be included with:

⁸ A new registration is one that requires a new ARTG entry by reason of being separate and distinct goods under s.16 of the *Therapeutic Goods Act 1989*. This includes new chemical entities, new strengths, new dosage forms, different directions for use, formulation changes, changes in trade name, extension of indication etc. By the provisions in the Therapeutic Goods (Groups) Order 2001, not all new registrations will result in a new AUST R number being allocated if they are taken to be grouped.

- All applications resulting in one or more new ARTG entries by reason of being a separate and distinct good under s.16 of the Act where a package insert is mandatory (injectables) or is proposed.
- All applications seeking a variation that will result in a change to an existing package insert or necessitate the inclusion of a package insert.

How to prepare this document

- The proposed Australian PI must be drafted using the format and contents specified by Section 4.1.3.2 and Appendix 8 of the [ARGPM](#). Where there is a need to deviate from the structure provided in Appendix 8, this must be justified in an attachment in module 1.3.1.
- When drafting a new PI, annotations must be included to direct evaluators to the evidence base in the summaries and other modules that support the information being proposed in the PI.
- Before amending an existing Australian PI, check the document to confirm that it is current and incorporates any changes approved by the TGA recently.
- Where an existing Australian PI is being amended (e.g. to add a new strength, update clinical trials), you must clearly show any additions, deletions or changes. A suitable way of showing such changes is using “track change” mode in a word processor. This is referred to as the “annotated” document.
- Where some of the changes to the PI are being made as a ‘safety related’ notification, those changes must be clearly identified as ‘safety related’ notifications made under s. 9D(2) of the Act on the annotated copy of the PI.
- The annotated document must include the necessary information to direct evaluators to the evidence base in the summaries and other modules that support the changes or new information being proposed in the PI.
- Where there are differences between the proposed Australian PI provided with the pre-submission planning form for category 1 and category 2 applications and the proposed Australian PI provided with the submission dossier, these differences must be clearly identified and justified.
- When preparing your submission dossier, you must include both the “annotated” Australian PI and a “clean” Australian PI. A “clean” Australian PI incorporates all the changes proposed but removes the revision marks and comments. Where there are multiple PIs, annotated and clean versions must be provided for each PI.
- For an additional trade name submission, the Australian PI of the original product must be provided for comparison with the draft PI of the new product.
- All package inserts must be consistent with the label, PI and consumer medicines information (CMI) documents.
- Package inserts must not be promotional. They should only contain information about the safe and appropriate use of the goods. An example may be where obligatory labelling information does not fit on the label, and so is included in a package insert instead.
- The PI must be supplied as a package insert for products for parenteral use. However, for self-administered injections, the CMI may be included with the PI as the package insert.

Points to note

- It is a condition of registration under s.28 of the Act that each registered prescription medicine has an Australian PI.

- You must provide any package inserts proposed for the medicine to the TGA.
- When completing your application form at module 1.2, you must indicate the Printed Product Material Supplied with the medicine on the form – this would include the product information and, where applicable, the Package Insert.

Module 1.3.2 Proposed Australian consumer medicines information

When to include this document

- All applications that will result in a separate and distinct good by reason of being a separate and distinct good under s.16 of the Act, with the exception of category 3 submissions and ‘self assessable’ notifications.
- All applications seeking a variation that will result in a change to the CMI, for example, an application to include important safety information in the PI and which needs to be reflected in the CMI.

How to prepare this document

- The CMI must conform with the format and contents specified in Schedule 12 and regulation 9A of the [Therapeutic Goods Regulations 1990](#).
- The CMI must be written in English.
- The CMI must be consistent with the Australian PI and cannot be promotional.

Points to note

- CMIs are referred to as “Patient Information” in the legislation.
- In addition to the requirements of the Regulations, the TGA strongly encourages you to follow *Writing about Medicines for People: Usability Guidelines for Consumer Medicine Information* (from the Communication Research Institute of Australia <http://www.communication.org.au/>) when developing a CMI. These guidelines outline the correct procedure for writing, testing, implementing and monitoring CMI. They also describe how to write CMIs in a way that will be the most useful and easy to read for consumers. In this way, CMIs will help consumers to use their medicines wisely and get the most benefit from them.
- When completing the application form at module 1.2, at the Printed Product Material Supplied with the medicine section indicate that a Consumer Medicine Information leaflet is included.
- It is the sponsor’s responsibility under the Regulations to ensure that the CMI remains consistent with the PI and the format specified in the Regulations.

Module 1.3.3 Therapeutic goods and use of human embryos or human embryonic stem cells or material derived from them

When to include this document

- All applications that will result in a separate and distinct good by reason of being a separate and distinct good under s.16 of the Act must include this declaration.
- This includes variations that result in a new ARTG entry but the same AUST R number is retained by application of the Therapeutic Goods (Groups) Order 2001 – e.g. changes to printing ink, change in trade name.

How to prepare this document

- Download the [declaration form](#).

- Complete the form, print it and sign it. The form must be signed by an authorised contact of the company.
- Include the signed form in module 1.3.3 of the dossier.
- A fresh form, with wet signature, is required for each submission.

Points to note

- This declaration allows the TGA to determine whether or not regulation 9B applies to the medicine.
- For the purposes of module 1.3:
 - **Human embryo** means a live embryo that has a human genome or an altered human genome and that has been developing for less than 8 weeks since the appearance of 2 pro-nuclei or the initiation of its development by other means. In working out the length of the period of development of a human embryo, any period when the development of the embryo is suspended is to be disregarded.
 - **Human embryonic stem cell** means undifferentiated cells, derived from a human embryo, that have the potential to become a wide variety a specialised cell types.

**Legislation**

Regulation 9B of the *Therapeutic Goods Regulations 1990* requires that the Product Information and Consumer Medicine Information documents contain appropriate statements where human embryonic material has been used in the manufacture of a medicine.

Module 1.3.4 Label mock-ups and specimens

When to include this document

- Proposed Australian labelling must be included with:
 - All applications resulting in one or more new ARTG entries by reason of being a separate and distinct good under s.16 of the Act where a new AUST R is allocated – for example, new chemical entities, new strength, additional trade name, change in trade name, new container type.
 - All applications seeking a variation that will result in a change to the labelling or the creation of a new label – for example, a category 3 submission to change the storage conditions or sponsor details.

How to prepare this document

- All Australian labels must comply with the [Therapeutic Goods Order—General Requirements for Labels for Medicines](#) (TGO 69) - unless otherwise exempted (see section 2.5.5 in the [ARGPM](#)).
 - The draft Therapeutic Goods Order – General Requirements for the Labelling of Medicines (TGO 79) has not yet been accepted. TGO 69 remains the current standard.
- Labelling must also meet the requirements of other Commonwealth, state and territory legislation (although TGA does not assess the labels against such requirements).
- Labelling should be prepared in accordance with the [Best Practice Guidelines for Prescription Medicines Labelling](#).
- Labels must be supplied in module 1.3.4 as either:
 - A **mock-up** - a full size copy of the flat artwork design in full colour—including a replica of both the outer and immediate packaging, and a two-dimensional presentation of the packaging/labelling of the medicine, or
 - A **specimen** - a sample of the actual printed outer and inner packaging materials and package leaflet.
- Labels must be provided for every separate and distinct good in the submission.
- Where a separate and distinct good has multiple pack sizes and the labelling is identical for each pack size (with the exception of the pack size identifier), one label may be provided with a declaration that the labelling for the other pack sizes is identical to the label provided.
 - In all other cases, labels for every presentation must be provided.
- If batch number and expiry date are to be printed on the label during packaging, a statement to this effect must accompany the labels.
- For new registrations where the provisional AUST R number is not yet known, show the proposed location for the AUST R number on the packaging using “AUST R XXXXXX”.
- Label colours must take into account the fact that dispensers and patients may have varying degrees of colour blindness and impaired vision.

Points to note

- For new registrations and packaging modifications, when completing your application form at module 1.2, you must indicate:
 - the Printed Product Material Supplied with the medicine – this would include the container and primary pack labels
 - the container type, container material and pack sizes.

- In addition for new registrations and packaging modifications, a description of the proposed packaging(s) of the product and the pack size(s) is to be included in module 3.2.P.7.

Legislation

PI, CMI, and labels are evaluated under the following legislation.

Section 25(1) of the *Therapeutic Goods Act 1989* (the Act) requires that the Secretary must evaluate goods having regard to:

- (e) whether the presentation of the goods is acceptable; and
- (f) whether the goods conform to any standard applicable to the goods, or any requirements relating to advertising applicable under Part 5-1 or under the Regulations

Section 3 of the Act defines:

presentation, in relation to therapeutic goods, means the way in which the goods are presented for supply, and includes matters relating to the name of the goods, the labelling and packaging of the goods and any advertising or other informational material associated with the goods.

Schedule 12 of the *Therapeutic Goods Regulations 1990* requires the CMI to be:

- written in English
- clearly legible
- written in language that will easily be understood by patients
- consistent with product information (within the meaning of section 9D of the Act) about the product, and
- include the matters that are listed in Schedule 12.

Section 3 of the Act also defines “standards” to include “a standard that is constituted by the matters specified in an order under section 10 that is applicable to the goods”. Therapeutic Goods Order No 69 (TGO 69) – General made under s.10 of the Act sets out requirements for labels for medicines. Labels are assessed against the requirements in TGO 69.



Module 1.4 Information about the experts

Overview

This section of the module 1 holds multiple documents relating to the application to register a medicine or change registered medicines. These documents include information about the experts that have reviewed the supporting data for the submission and prepared the summaries and overviews that constitute module 2.

The following information describes each document in the section, outlines when each document needs to be provided and any other requirements relating to the documents.

Contents

Summary of requirements	46
Module 1.4.1 Information about the expert - Quality	47
Module 1.4.2 Information about the expert - Non-clinical	47
Module 1.4.3 Information about the expert - Clinical	49

Summary of requirements

Documentation					
Section	Description	Category 1/category 2		Category 3	
		New registration ⁹	Variation	New registration ⁹	Variation
1.4.1	Information about the expert - Quality	i	i	i	i
1.4.2	Information about the expert - Non-clinical	i	i		
1.4.3	Information about the expert - Clinical	i	i		

Key

l = mandatory i = requirement defined by application type and business rules – refer to this section for more information blank = not required

⁹ A new registration is one that requires a new ARTG entry by reason of being separate and distinct goods under section 16 of the *Therapeutic Goods Act 1989*. This includes new chemical entities, new strengths, new dosage forms, different directions for use, formulation changes, changes in trade name, extension of indication etc. By the provisions in the Therapeutic Goods (Groups) Order 2001, not all new registrations will result in a new AUST R number being allocated if they are taken to be grouped.

Module 1.4.1 Information about the expert - Quality

When to include this document

- Where any subsection of module 2.3 has been provided in the submission dossier.

How to prepare this document

- There are two steps to preparing this document:
 - The expert responsible for compiling module 2.3 must complete and sign a declaration, and
 - The expert responsible for compiling module 2.3 must provide a curriculum vitae (CV) outlining their educational background, training and occupational experience.
- The declaration can be created and completed as follows:

Australian expert	<p>Download the proforma for the expert's declaration from the TGA website¹⁰ and complete it as per the instructions on the form.</p> <ul style="list-style-type: none"> Note that either Part A or Part B must be struck out to indicate that only one is applicable. The declaration must be signed by the expert that is the subject of the declaration.
Expert from European Union	<p>Provide a copy of the expert's declaration from the submission that was lodged with EMA.</p> <p>Alternatively, the same proforma specified for the Australian expert can be completed.</p>
Other overseas expert	<p>Complete the same proforma specified above for Australian experts.</p>

- The expert's signed declaration and CV (in that order) must be attached to the declaration in module 1.4.1.

Points to note

- Module 2.3 is mandatory for:
 - new chemical/biological entities and new combinations
 - new generics
 - new dosage forms and new strengths
 - any other category 1/category 2 submissions containing module 3 data.

Module 1.4.2 Information about the expert – Non-clinical

When to include this document

- Where any subsection of module 2.4 and/or module 2.6 has been provided in the submission dossier.

¹⁰ This form is expected to be published on the TGA website in early 2011. Until the new version is published, sponsors are advised to use the version of the form supplied in Module 1.4 of the November 2008 edition of the [CTD Module 1](#).

How to prepare this document

- There are two steps to preparing this document:
 - The expert(s) responsible for compiling module 2.4 and module 2.6 must complete and sign a declaration, and
 - The expert(s) responsible for compiling module 2.4 and module 2.6 must provide a curriculum vitae outlining their educational background, training and occupational experience.
- The declaration can be created and completed as follows:

Australian expert	<p>Download the proforma for the expert's declaration from the TGA website¹¹ and complete it as per the instructions on the form.</p> <ul style="list-style-type: none"> • Note that either Part A or Part B must be struck out to indicate that only one is applicable. • The declaration must be signed by the expert that is the subject of the declaration.
Expert from European Union	<p>Provide a copy of the expert's declaration from the submission that was lodged with EMA.</p> <p>Alternatively, the same proforma specified for the Australian expert can be completed.</p>
Other overseas expert	<p>Complete the same proforma specified for above for Australian experts.</p>

- The expert's signed declaration and CV (in that order) must be attached to the declaration in module 1.4.2.

Points to note

- Module 2.4 and module 2.6 are mandatory for:
 - all new chemical entities and new combinations
 - applications where new additional non-clinical studies have been provided within the documentation.
- For an application to register a new generic medicine:
 - A non-clinical overview (module 2.4) is only mandatory where the medicinal product is a new salt, ester or derivative of an authorised active substance and the sponsor claims the medicinal product to be essentially similar (see s4.3.1 of the [ARGPM](#)) to a registered product. This document should address the grounds for claiming essential similarity (see below). Non-clinical data (module 4) data may be provided to support the claim, in which case non-clinical summaries (module 2.6) must also be provided.
 - Where the sponsor of an application claims the medicinal product to be essentially similar to a registered product, the non-clinical overviews/summaries should focus on the following elements:
 - § the grounds for claiming essential similarity;

¹¹ This form is expected to be published on the TGA website in early 2011. Until the new version is published, sponsors are advised to use the version of the form supplied in Module 1.4 of the November 2008 edition of the [CTD Module 1](#).

- § if applicable, additional data in order to demonstrate evidence on the equivalence of safety and efficacy properties of different salts, esters or derivatives of an authorised active substance should be provided by the applicant when he claims essential similarity.

Module 1.4.3 Information about the expert - Clinical

When to include this document

- Where any subsection of module 2.5 and/or module 2.7 has been provided in the submission dossier.

How to prepare this document

- There are two steps to preparing this document:
 - The expert(s) responsible for compiling module 2.5 and module 2.7 must complete and sign a declaration, and
 - The expert(s) responsible for compiling module 2.5 and module 2.7 must provide a curriculum vitae outlining their educational background, training and occupational experience.
- The declaration can be created and completed as follows:

Australian expert	<p>Download the proforma for the expert's declaration from the TGA website¹² and complete it as per the instructions on the form.</p> <ul style="list-style-type: none"> Note that either Part A or Part B must be struck out to indicate that only one is applicable. The declaration must be signed by the expert that is the subject of the declaration.
Expert from European Union	<p>Provide a copy of the expert's declaration from the submission that was lodged with EMA.</p> <p>Alternatively, the same proforma specified for the Australian expert can be completed.</p>
Other overseas expert	<p>Complete the same proforma specified for above for Australian experts.</p>

- The expert's signed declaration and CV (in that order) must be attached to the declaration in module 1.4.3.

Points to note

- Module 2.5 and module 2.7 are mandatory for:
 - all new chemical entities and new combinations
 - extensions of indications
 - changes to patient group or dosage and administration

¹² This form is expected to be published on the TGA website in early 2011. Until the new version is published, sponsors are advised to use the version of the form supplied in Module 1.4 of the November 2008 edition of the [CTD Module 1](#).

- applications where new additional clinical studies have been provided within the documentation.
- For an application to register a new generic medicine:
 - The clinical overview (module 2.5) is mandatory.
 - Clinical summaries (module 2.7) can be provided, but they are only mandatory if new additional clinical studies have been provided within the documentation.
 - Where the sponsor of an application claims the medicinal product to be essentially similar (see section 4.3.1 of the [ARGPM](#)) to a registered product, the clinical overviews/summaries should focus on the following elements:
 - § the grounds for claiming essential similarity;
 - § if applicable, additional data in order to demonstrate evidence on the equivalence of safety and efficacy properties of different salts, esters or derivatives of an authorised active substance should be provided by the applicant when he claims essential similarity.

Legislation

Category 1 and 2 applications are made under s.23 of the *Therapeutic Goods Act 1989* (the Act). Section 23 requires that applications are made in a form approved by the Secretary. The currently approved form is the CTD format, which incorporates the Information About the Expert document(s) in Module 1.4.

Category 1, Category 2 and Category 3 applications requesting a variation to an existing registration are made under s.9D(3) of the Act. This subsection requires that the sponsor request the Secretary to vary information in the Register entry relating to the affected goods. The TGA requires that the request to the Secretary for a variation is made in CTD format, including appropriate Information About the Expert document(s) in Module 1.4.



Module 1.5 Specific requirements for different types of applications

Overview

This section of the module 1 holds multiple documents required for different types of applications. The following information describes each document in the section, outlines when each document needs to be provided and any other requirements relating to the documents.

Contents

Summary of requirements	_____	51
Module 1.5.1	Literature Based Submission documents _____	52
Module 1.5.2	Orphan drug designation _____	52
Module 1.5.3	Genetically modified organisms: Consent from the Office of the Gene Technology Regulator _____	53
Module 1.5.4	Additional trade name declarations _____	53
Module 1.5.5	Co-marketed medicine declarations _____	54

Summary of requirements

Documentation					
Section	Description	Category 1/category 2		Category 3	
		New registration ¹³	Variation	New registration ¹³	Variation
1.5.1	Literature Based Submission documents	i	i		
1.5.2	Orphan drug: Copy of orphan drug designation	i	i		
1.5.3	Genetically modified organisms: Consent from the OGTR	i	i		
1.5.4	Additional trade name declarations	i	i		
1.5.5	Co-marketed medicine declarations	i	i	i	i

¹³ A new registration is one that requires a new ARTG entry by reason of being separate and distinct goods under s.16 of the *Therapeutic Goods Act 1989*. This includes new chemical entities, new strengths, new dosage forms, different directions for use, formulation changes, changes in trade name, extension of indication etc. By the provisions in the Therapeutic Goods (Groups) Order 2001, not all new registrations will result in a new AUST R number being allocated if they are taken to be grouped.

Key

l = mandatory i = requirement defined by application type and business rules – refer to this section for more information blank = not required

Module 1.5.1 Literature Based Submission documents**When to include this document**

- The sponsor is relying partially, or completely, on a literature based data set to support their application.

How to prepare this document

- Three items need to be prepared:
 - 1.5.1.1 - Methodology of literature search, including complete details of database search strategies
 - 1.5.1.2 - A copy of the letter from the TGA in which approval for the search strategy was given
 - 1.5.1.3 - Complete search output.

Points to note

- An application comprising a mix of conventional and literature based data is considered a hybrid application. Hybrid applications are treated in the same manner as a pure literature based submission.
- When completing the application form, it is a requirement for literature based submissions to confirm that the search strategy used to generate the search output for the submission was in full accordance with the search strategy approval letter from the TGA.
- For more information about literature based submissions, refer to:
 - Part 3 of the [ARGPM](#)
 - Literature Based Submission – Points to Consider document available from the [TGA website](#).

Module 1.5.2 Orphan drug designation**When to include this document**

- The medicine has been designated an orphan drug and the sponsor wishes to request that the evaluation fees be waived for the application to register the medicine or extended indications on the basis of the orphan drug designation.

How to prepare this document

- Locate the TGA letter granting approval for the orphan drug designation that was sent to you. Cross check the approval letter and the submission to ensure that:
 - The sponsor identified on the designation is identical to the applicant for the submission,
 - The active ingredient(s) specified on the designation is/are identical to those in the submission, and
 - The indications designated are identical to, or wider than, those proposed in the submission.
- Copy the TGA letter granting approval for the orphan drug designation. Insert the copy in module 1.5.2.

Points to note

- Fees cannot be waived for variations (e.g. category 3 submissions) to the medicine once registered.
- If the indications proposed in the submission are wider than those approved in the orphan drug designation, then either the full evaluation fee will need to be paid or a new orphan drug designation request will need to be lodged with the TGA before proceeding with the pre-submission.
- Where the name of the sponsor company has changed, the sponsor will need to notify the TGA in writing and request that the sponsor name on the orphan drug designation be updated before proceeding with the pre-submission. See the [ARGPM](#) for more information.

Module 1.5.3 Genetically modified organisms: Consent from the Office of the Gene Technology Regulator**When to include this document**

- The submission seeks registration for a medicine that contains or consists of genetically modified organisms (GMOs).
- The submission seeks registration for a medicine that is derived from a GMO, manufactured in Australia and is subject to regulation by the Office of the Gene Technology Regulator (OGTR).

How to prepare this document

- Before lodging the pre-submission planning form, consult the OGTR to determine requirements under the *Gene Technology Act 2000*. This may result in the issuing of a licence or other consent from OGTR. Refer to [Information for sponsors completing the pre-submission planning form](#) for more information.
- Include copies of any licence, acknowledgement of receipt of application for a licence and/or other written consent from OGTR in module 1.5.3.
- Alternatively, include:
 - a declaration that the medicine is exempt under Part 1 of Schedule 2 of the *Gene Technology Regulations 2001*, or
 - a copy of OGTR acknowledgement of receipt of an application for a licence.

Points to note

- For more information, refer to Appendix 21 of the [ARGPM](#).

Module 1.5.4 Additional trade name declarations**When to include this document**

- An additional trade name is sought for an existing registered prescription medicine. This may be in an additional trade name submission or in combination with other application types (e.g. a new strength in addition to the additional trade name).

How to prepare this document

- Prepare a statement that includes:
 - An assurance that the ARTG record of the parent product is complete and accurate for all data fields **OR** that the TGA has been requested to correct the record (including the submission ID for the correction), and

- **Either** an assurance that all quality (module 3) aspects of the new product are identical to those of the parent product, except for labelling, **OR** information on any differences together with an assurance that all other quality (module 3) aspects are identical, and
- **Either** an assurance that the PI and CMI of the additional trade name(s) are identical to those of the parent product (except for the trade name), **OR** a list of the differences.

Points to note

- Where a request needs to be made to the TGA to make corrections to the parent product, this should be done well in advance of lodging the additional trade name submission to allow the correction to be processed and applied to the parent product. This reduces delays in evaluating the additional trade name submission.
- Trade names should:
 - Identify the products within a range of dose forms and strengths
 - Include distinguishing letters so that they are not confused with those already in the ARTG
 - For fixed dose combinations, identify the strengths of the actives in the trade name.
- The trade names proposed must not be:
 - Registered already (unless a further identifier is proposed)
 - Inappropriate (e.g. must not be advertorial)
 - Look or sound like other trade names (potential to cause prescribing and dispensing errors).
- It is strongly recommended that sponsors discuss proposed additional trade names with the Office of Medicines Authorisation before preparing label mock-ups and PIs to minimise the risk of trade names being found to be unsuitable.

Module 1.5.5 Co-marketed medicine declarations

When to include this document

- This document should be included where:
 - A cross-licensing agreement exists between the sponsor of the application and a third-party sponsor, and
 - The third party sponsor wants to authorise the TGA to use information on its already registered product or product under evaluation for the benefit of the submission at hand, and
 - The sponsor's product will be identical to the third-party's product or at least very similar.

How to prepare this document

- The third party sponsor must provide the sponsor lodging the application with a letter that:
 - Authorises the TGA to use information in the third party's registration file on behalf of the sponsor of the new application,
 - States whether or not the sponsor of the new application may view the information on file,
 - Identifies the trade name(s), active ingredient name(s), dosage forms and strengths of the third party's medicine(s) that are the subject of their data/information,
 - Advises of the extent of the authorisation encompassing the reason for the submission (e.g. permission to access data for the change in formulation), and any restrictions (e.g. applies to tablets only, not capsules),
 - Identifies the submission ID and file numbers relating to the third-party sponsor's data/information,
 - Identifies which party is responsible for answering queries relating to the third party data/information.

- Is signed by an authorised officer of the third party.
- Contains the full name, phone number, facsimile number and email address of the authorised officer.
- Further, the letter from the third party must include all of the following assurances:
 - Where an existing registered medicine is to be cloned, an assurance must be provided that the ARTG record of the third party product is complete and accurate for all data fields **OR** that the TGA has been requested to correct the record (including the submission ID for the correction).
 - **Either** an assurance that all quality (module 3) aspects of the new product are identical to those of the third party product except for labelling, **OR** information on any differences together with an assurance that all other quality (module 3) aspects are identical.
 - **Either** an assurance that the PI and CMI of the new product are identical to those of the third party product (with the exception of trade name and sponsor details), **OR** a statement as to the differences.

Points to note

- If the third party's data has not yet been provided to the TGA, the application may not be considered to be effective. For this reason, it is preferable to ensure that the third party has lodged their data before lodging your submission.
- Where a request needs to be made to the TGA to make corrections to a third party product that has already been registered, this should be done well in advance of lodging the co-marketed medicine submission to allow the correction to be processed and applied to the parent product. This reduces delays in evaluating the co-marketed medicine submission.

Legislation

Orphan Drugs

Orphan drug designation is granted under regulation 16J of the *Therapeutic Goods Regulations 1990* where the sponsor has made an application under regulation 16I that demonstrates why the drug satisfies the criteria set out in regulation 16H.

Regulation 45(12) allows for the waiving of a “fee that would have been payable” for the Secretary considering the application under regulation 16J or “as part of the registration of a designated orphan drug”.



Applications generally

Category 1 and 2 applications are made under s.23 of the *Therapeutic Goods Act 1989* (the Act). Section 23 requires that applications are made in a form approved by the Secretary. The currently approved form is the CTD format, which incorporates Specific requirements for different types of applications in Module 1.5.

Category 1, Category 2 and Category 3 applications requesting a variation to an existing registration are made under s.9D(3) of the Act. This subsection requires that the sponsor request the Secretary to vary information in the Register entry relating to the affected goods. The TGA requires that the request to the Secretary for a variation is made in CTD format which incorporates Specific requirements for different types of applications in Module 1.5.

DRAFT

Module 1.6 Drug and Plasma Master Files and Certificates of Suitability of Monographs of the European Pharmacopoeia

Overview

When lodging a submission that requires information about the active substance, sponsors may include the full set of information in module 3.2.S or reference one or more external sources. Acceptable external sources are Drug Master Files (DMFs), Plasma Master Files (PMFs) and Certificates of Suitability of Monographs of the European Pharmacopoeia (CEPs).

This section of the module 1 holds multiple documents relating to the use of DMFs, PMFs and CEPs as references to establish the quality of active substances in the medicine.

The following information describes each document in the section, outlines when each document needs to be provided and any other requirements relating to the documents.

Contents

Summary of requirements	_____	57
Module 1.6.1	Relevant external sources _____	58
Module 1.6.2	Sponsor's declaration _____	59
Module 1.6.3	Letters of Access _____	59
Module 1.6.4	Certificates of Suitability (including Annexes) _____	60

Summary of requirements

Documentation					
Section	Description	Category 1/category 2		Category 3	
		New registration ¹⁴	Variation	New registration ¹⁴	Variation
1.6.1	Relevant Drug and Plasma Master Files	i	i	i	i
1.6.2	Sponsor's declaration	i	i	i	i
1.6.3	Letters of Access	i	i	i	i
1.6.4	Certificates of Suitability (including Annexes)	i	i	i	i

¹⁴ A new registration is one that requires a new ARTG entry by reason of being separate and distinct goods under s.16 of the *Therapeutic Goods Act 1989*. This includes new chemical entities, new strengths, new dosage forms, different directions for use, formulation changes, changes in trade name, extension of indication etc. By the provisions in the Therapeutic Goods (Groups) Order 2001, not all new registrations will result in a new AUST R number being allocated if they are taken to be grouped.

Key

l = mandatory i = requirement defined by application type and business rules – refer to this section for more information blank = not required

Module 1.6.1 Relevant external sources**When to include this document**

- The submission makes reference to one or more Drug Master Files (DMFs).
- The submission makes reference to one or more Plasma Master Files (PMFs).
- The submission makes reference to one or more Certificates of Suitability of Monographs of the European Pharmacopoeia (CEPs).

How to prepare this document

- Obtain the relevant DMF/PMF/CEP details from the active pharmaceutical ingredient manufacturer, including any TGA reference numbers where available.
- Where a DMF or PMF is referenced, download and complete the DMF and PMF Details form from the [TGA website](#).¹⁵
- Where a CEP is referenced, download and complete the EDQM CEP Details form from the [TGA website](#).¹⁵
- Include the completed form(s) in module 1.6.1.

Points to note

- More information about DMFs, PMFs and CEPs can be found in the [ARGPM](#).
- Declaration(s) and letter(s) of access will also need to be provided – see module 1.6.2 and module 1.6.3.
- The sponsor's (*open*) part of the DMF must be included in module 3.2.S of the Quality documentation presented in the CTD-format. The active substance manufacturer's restricted (*closed*) part is supplied to TGA directly by the active substance manufacturer.
- For category 3 variations to a registered medicine involving a modified DMF/PMF/CEP, it is not necessary to provide this document again, unless a new DMF/PMF/CEP is to be provided.
- Ensure that the active substance manufacturer's part of the DMF/PMF has been submitted to the TGA before lodging the submission.
- For new registrations where the medicine contains either a raw material or excipient that is derived from plasma, then a PMF must be included in module 3 or have been previously approved by the TGA.
- Where a PMF is referenced:
 - The PMF must be prepared in accordance with EMA guideline – [EMA/CPMP/BWP/3794/03 Rev 1](#) and its [Annex](#).
 - The epidemiological data for the previous calendar year must be provided, in accordance with the EMA guideline – [EMA/CPMP/BWP/125/04](#).

¹⁵ These forms are expected to be published on the TGA website in early 2011. Until the new versions are published, sponsors are advised to use the versions of the forms supplied in Module 1.6 of the November 2008 edition of the [CTD Module 1](#).

- The PMF must comply with the [TGA approach](#) to minimising risk of exposure to Transmissible Spongiform Encephalopathies (TSEs) through medicines and medical devices.

Module 1.6.2 Sponsor's declaration

When to include this document

- The submission makes reference to one or more Drug Master Files (DMFs).
- The submission makes reference to one or more Plasma Master Files (PMFs).
- The submission makes reference to one or more Certificates of Suitability of Monographs of the European Pharmacopoeia (CEPs).

How to prepare this document

- The sponsor must establish a formal agreement with the active pharmaceutical ingredient manufacturer to ensure that the manufacturer communicates any changes to the sponsor and the TGA before any significant change is made to the drug substance.
- Once the agreement has been established, download the DMF/PMF/CEP Declaration form from the [TGA website](#)¹⁵.
- Complete and sign the form.
- Include the completed form(s) in module 1.6.2.

Points to note

- The declaration must be signed by an authorised officer of the company.
- The declaration provides written assurance that there is a formal agreement between the active pharmaceutical ingredient manufacturer and the sponsor designed to ensure that information will be communicated by the manufacturer to the sponsor and the TGA before any significant change is made to the drug substance.
- For category 3 variations to a registered medicine involving a modified DMF/PMF/CEP, it is not necessary to provide the declaration again, unless a new DMF/PMF/CEP is to be provided.

Module 1.6.3 Letters of Access

When to include this document

- The submission makes reference to one or more Drug Master Files (DMFs).
- The submission makes reference to one or more Plasma Master Files (PMFs).
- The submission makes reference to one or more Certificates of Suitability of Monographs of the European Pharmacopoeia (CEPs).

How to prepare this document

- The sponsor must establish a formal agreement with the active pharmaceutical ingredient manufacturer.
- Each manufacturer providing a DMF/PMF for the submission must complete the *Proforma Letter of Access to DMF/PMF* available from the [TGA website](#)¹⁵.
- Each manufacturer providing a CEP for the submission must complete the *Proforma Letter of Access to CEP* available from the [TGA website](#)¹⁵. Authorisation for the TGA to access relevant

European Directorate for the Quality of Medicines & Healthcare (EDQM) reports must also be given.

- Manufacturers must prepare the letter on company letterhead.
- The completed and signed letter must then be provided to the sponsor for inclusion in module 1.6.3.

Points to note

- The finished product sponsor must have written permission to access the DMF/PMF/CEP from the manufacturer that supplied the DMF/PMF/CEP. Evaluation of the submission by the TGA cannot proceed without this permission.
- Where reference is made to a CEP, the finished product sponsor must provide a copy of the CEP, and any appendices, to the TGA (see module 1.6.4).
- For category 3 variations to a registered medicine involving a modified DMF/PMF/CEP, it is not necessary to provide letters of access again, unless a new DMF/PMF/CEP is to be provided.

Module 1.6.4 Certificates of Suitability (including Annexes)

When to include this document

- The submission for a new registration makes reference to one or more Certificates of Suitability of Monographs of the European Pharmacopoeia (CEPs).
- The submission for a variation to an existing registration requires a new or amended CEP.

How to prepare this document

- Make a complete copy of the *Certificates of Suitability* (including any annexes) and include it in module 1.6.4.
- Copies of each Certificate of Suitability referenced by the submission must be included.

Points to note

- Complete copies of the *Certificates of Suitability* (including any annexes) must also be provided in module 3 2.R.
- The synthetic route (or brief details of the manufacturing process) and representative batch analytical data/certificates must also be submitted in module 3.

Legislation

Category 1 and 2 applications are made under either s.23 (new registrations) or s.9D(3) (requests for variations) of the *Therapeutic Goods Act 1989* (the Act). Where the relevant legislative and business requirements are met, the applications are then approved under s.25 or s.9D(3), respectively.

Section 25(1)(d) of the Act requires that the TGA determine whether the quality, safety and efficacy of the goods for the purposes for which they are to be used have been satisfactorily established. Section 9D(3)(c) requires that “the Secretary is satisfied that the variation requested does not indicate any reduction in the quality, safety or efficacy of the goods for the purposes for which they are to be used.”

Assessing the quality of the goods includes establishing the quality of the active pharmaceutical ingredient. Any subsequent variations involving the active

pharmaceutical ingredient also need to be assessed to determine the impact on the quality of the goods. Where quality relating to the active pharmaceutical ingredient cannot be established solely by the information provided by the sponsor in Module 3.2.S, the sponsor may make reference to external sources to establish the quality. Acceptable external sources are a Drug Master File, Plasma Master File or an EDQM Certificate of Suitability.

As a condition of registration it is a requirement that, apart from any changes identified in Parts A and B of Appendix 12 to the ARGPM, no changes are made to the active pharmaceutical ingredient without the prior approval of the TGA. In order to receive approval for changes, revised and/or new DMFs, PMFs and/or CEPs need to be provided to the TGA and assessed by reference to s.9D(3) of the Act.

DRAFT

Module 1.7 Good manufacturing practice

Overview

When lodging a submission that requires information about the active substance, sponsors may include the full set of information in module 3.2.S or reference one or more external sources. Acceptable external sources are Drug Master Files (DMFs), Plasma Master Files (PMFs) and Certificates of Suitability of Monographs of the European Pharmacopoeia (CEPs).

This section of the module 1 holds multiple documents relating to the use of DMFs, PMFs and CEPs as references to establish the quality of active substances in the medicine.

The following information describes each document in the section, outlines when each document needs to be provided and any other requirements relating to the documents.

Contents

Summary of requirements	63
Module 1.7.1 List of Australian manufacturer names and licence numbers	63
Module 1.7.2 GMP clearance letters for all overseas manufacturing sites	64
Module 1.7.3 Copies of applications for TGA GMP clearances	65

DRK

Summary of requirements

Documentation					
Section	Description	Category 1/category 2		Category 3	
		New registration ¹⁶	Variation	New registration ¹⁶	Variation
1.7.1	List of Australian manufacturer names and licence numbers		i		i
1.7.2	GMP clearance letters for all overseas manufacturing sites		i		i
1.7.3	Copies of applications for TGA GMP clearances	i	i		

Key

| = mandatory i = requirement defined by application type and business rules – refer to this section for more information blank = not required

Module 1.7.1 List of Australian manufacturer names and licence numbers

When to include this document

- There are one or more Australian manufacturing sites involved in the production of the medicine and:
 - The submission is a category 1 or category 2 submission applying for a new registration that will result in the creation of a new AUST R (e.g. new chemical entity, New Dosage Form, additional trade name), or
 - The application is to vary the conditions of registration and Australian manufacturing sites are being added or the responsibilities of the Australian manufacturing sites are being changed.

How to prepare this document

- Before preparing the submission, confirm that all Australian manufacturing sites have current licences issued by the TGA for the necessary steps of manufacture and for the appropriate class of product. For example, a site that is licensed for packaging and labelling of solid dosage forms only cannot perform packaging and labelling for injections.
- If there are manufacturing sites are not licensed for the necessary steps of manufacture, then:
 - the manufacturers will need to apply to the TGA for an extension to their licences, or
 - alternative manufacturers with current licences for the necessary steps of manufacture will need to be located before lodging the pre-submission planning form (category 1 and category 2 submissions) or the submission/notification (category 3 and 'self assessable' notifications).

¹⁶ A new registration is one that requires a new ARTG entry by reason of being separate and distinct goods under s.16 of the *Therapeutic Goods Act 1989*. This includes new chemical entities, new strengths, new dosage forms, different directions for use, formulation changes, changes in trade name, extension of indication etc. By the provisions in the Therapeutic Goods (Groups) Order 2001, not all new registrations will result in a new AUST R number being allocated if they are taken to be grouped.

- Once the details of the Australian manufacturing sites have been finalised, obtain copies of each of the manufacturing sites licences and include them in module 1.7.1.
- For variations, licences only need to be provided for the new manufacturing sites and/or the manufacturing sites whose responsibilities are changing.

Points to note

- All manufacturers and finished product testing facilities involved in the active ingredient and/or product manufacture must have GMP licences or clearances or have an application lodged with the Office of Manufacturing Quality (OMQ).
- For biotechnology products, GMP licences or clearances are required for active drug substance manufacturing and testing sites unless otherwise agreed in the pre-submission phase.
- Australian manufacturing sites and the steps of manufacture for which they are licensed can be accessed from the [eBS website](#).
- Licences can be restricted to specific dosage forms, classes of medicines, and active ingredients.
- Licences are not required for manufacturers providing simple salts for use as active pharmaceutical ingredients.
- Refer to [Information for sponsors completing the pre-submission planning form](#) for more information about the TGA's GMP requirements at the pre-submission phase and sponsor's responsibilities.

Module 1.7.2 GMP clearance letters for all overseas manufacturing sites

When to include this document

- There are one or more overseas manufacturing sites involved in the production of the medicine and:
 - The submission is a category 1 or category 2 submission applying for a new registration that will result in the creation of a new AUSTR (e.g. new chemical entity, New Dosage Form, additional trade name), or
 - The application is to vary the conditions of registration and Australian manufacturing sites are being added or the responsibilities of the Australian manufacturing sites are being changed.

How to prepare this document

- Before preparing the submission, confirm that the overseas manufacturing sites have current GMP clearances issued by the TGA for the necessary steps of manufacture and for the appropriate class of product. For example, a site that is cleared for packaging and labelling of solid dosage forms only cannot perform packaging and labelling for injections.
- For category 1 and category 2 submissions where one or more manufacturing sites do not have current GMP clearance or do not have clearance for the appropriate steps or drug classes, then:
 - the sponsor will need to apply to the TGA for a renewed manufacturer's clearances and include copies of the renewal applications in module 1.7.3 , or
 - alternative manufacturers with appropriate licences/GMP clearances for the necessary steps of manufacture will need to be located before lodging the pre-submission planning form.
- For category 3 submissions where one or more manufacturing sites do not have current GMP clearance or do not have clearance for the appropriate steps or drug classes, then:

- the sponsor will need to apply to the TGA for a renewed manufacturer's clearances and delay the lodgement of the submission until the renewed clearance is available , or
 - alternative manufacturers with appropriate licences/GMP clearances for the necessary steps of manufacture will need to be located before lodging the category 3 submission.
- Once the details of the overseas manufacturing sites to be used for the submission have been finalised, make copies of the GMP clearances issued by the TGA for each site and include in module 1.7.2.
 - For variations, only the clearances for the new manufacturing sites or the manufacturing sites whose responsibilities are changing need to be provided.

Points to note

- Clearances for overseas manufacturing sites are specific to the sponsor.
- Clearances can be restricted to specific dosage forms, classes of medicines, and active ingredients.
- All manufacturers and finished product testing facilities involved in the product manufacture must have GMP licences or clearances or have an application lodged with OMQ.
- For biotechnology products, GMP licences or clearances are required for active drug substance manufacturing and testing sites unless otherwise agreed in the pre-submission phase.
- Category 3 submissions have a statutory 45 working day timeframe. In order to meet these timeframes, it is imperative that any relevant licences or GMP clearances are available at the time of lodging the submission. Thus, it is not acceptable to lodge copies of applications for GMP clearances with a category 3 submission.
- Clearances should be valid for at least 6 months, and preferably 24 months, at the time of submission lodgment. For category 1 and category 2 submissions where it is anticipated that a clearance will expire during the evaluation period, a renewal application should be lodged with OMQ and the details provided in module 1.7.3.
- Clearances are not required for manufacturers providing simple salts for use as active pharmaceutical ingredients.
- Refer to [Information for sponsors completing the pre-submission planning form](#) for more information about the TGA's GMP requirements at the pre-submission phase and sponsor's responsibilities.

Module 1.7.3 Copies of applications for TGA GMP clearances

When to include this document

- Category 1 or category 2 submissions where GMP clearances are expected to be provided (see module 1.7.2) but:
 - Not all GMP clearances are available or current or appropriate, and
 - Applications for new/renewed/updated GMP clearances have been lodged.

How to prepare this document

- Lodge the application for the new GMP clearance or renewal via [eBS](#).
- Print the relevant eBS screen showing the tracking number for the application. Include the printout in module 1.7.3.

- As soon as new/renewed/updated clearances are issued by the TGA, a copy must be forwarded to the Office of Medicines Authorisation.

Points to note

- Unless there are exceptional circumstances (e.g. a delay in providing an updated clearance at the TGA end), module 1.7.3 is not applicable for additional trade name applications.
- Module 1.7.3 is not applicable for Category 3 submissions or 'self assessable' Notifications (SANs). All relevant GMP clearances must be current and appropriate and included in the Category 3 submission/SAN dossier at lodgement.
- The TGA's [Guidelines on the GMP clearance of overseas medicine manufacturers](#) provides detailed information on how to obtain GMP clearance for overseas manufacturers.
- It is not necessary to include all the supporting documentation that is sent to the Office of Manufacturing Quality in module 1.7.3.
- Final approval of category 1 and category 2 application cannot be granted until the GMP clearances are submitted. Sponsors are responsible for ensuring that GMP clearances are available at the time the TGA Delegate makes a decision.
- As tracking numbers are required for inclusion in the category 1 and category 2 pre-submission planning form, applications must be lodged with OMQ before completing the pre-submission planning form.
- Refer to [Information for sponsors completing the pre-submission planning form](#) for more information about the TGA's GMP requirements at the pre-submission phase and sponsor's responsibilities.

Legislation

Applications for new registrations made as Category 1 and 2 applications are approved under s.25 of the *Therapeutic Goods Act 1989* (the Act) when the criteria under the section are met. These criteria include:

(g) if a step in the manufacture of the goods has been carried out outside Australia - whether the manufacturing and quality control procedures used in the manufacture of the goods are acceptable; and

(h) if the goods have been manufactured in Australia - whether the goods have been manufactured in accordance with Part 3-3;



In order for the TGA to assess whether the requirements in s. 25(1)(g) and s. 25(1)(h) are met, appropriate manufacturing licences and GMP clearances must be provided.

Category 1, Category 2 and Category 3 applications requesting a variation to an existing registration are made under s. 9D(3) of the Act. In order for a variation to be approved under

s. 9D(3), the Secretary must be “satisfied that the variation requested does not indicate any reduction in the quality, safety or efficacy of the goods for the purposes for which they are to be used.” Thus, any variations resulting in changes to manufacturing sites must be accompanied by the appropriate manufacturing licences and GMP clearances so that the impact on quality can be assessed.

DRAFT

Module 1.8 Compliance with meetings and pre-submission processes

Overview

When lodging a submission that requires information about the active substance, sponsors may include the full set of information in module 3.2.S or reference one or more external sources. Acceptable external sources are Drug Master Files (DMFs), Plasma Master Files (PMFs) and Certificates of Suitability of Monographs of the European Pharmacopoeia (CEPs).

This section of the module 1 holds multiple documents relating to the use of DMFs, PMFs and CEPs as references to establish the quality of active substances in the medicine.

The following information describes each document in the section, outlines when each document needs to be provided and any other requirements relating to the documents.

Contents

Summary of requirements	68
Module 1.8.1 Details of compliance with pre-submission meeting outcomes	69
Module 1.8.2 Details of any additional data to be submitted	69
Module 1.8.3 Declaration of compliance with pre-submission planning form and planning letter	70

Summary of requirements

Documentation					
Section	Description	Category 1/category 2		Category 3	
		New registration ¹⁷	Variation	New registration ¹⁷	Variation
1.8.1	Details of compliance with pre-submission meeting outcomes	i	i	i	i
1.8.2	Details of any additional data to be submitted	i	i	i	i
1.8.3	Declaration of compliance with pre-submission	i	i		

¹⁷ A new registration is one that requires a new ARTG entry by reason of being separate and distinct goods under s.16 of the *Therapeutic Goods Act 1989*. This includes new chemical entities, new strengths, new dosage forms, different directions for use, formulation changes, changes in trade name, extension of indication etc. By the provisions in the Therapeutic Goods (Groups) Order 2001, not all new registrations will result in a new AUST R number being allocated if they are taken to be grouped.

	planning form and planning letter				
--	--------------------------------------	--	--	--	--

Key

I = mandatory

i = requirement defined by application type and business rules –
refer to this section for more information

blank = not required

Module 1.8.1 Details of compliance with pre-submission meeting outcomes

When to include this document

- Where the sponsor has held one or more scientific advice meetings with the TGA that have resulted in outcomes that the sponsor must address.
- Where the sponsor has held one or more pre-submission meetings with the TGA (excluding scientific advice meetings) that have resulted in outcomes that the sponsor must address.

How to prepare this document

- Identify:
 - the date(s) of the meeting(s),
 - the outcomes arising from the meeting(s) requiring sponsor action,
 - how the outcomes from the meeting(s) have been addressed in the submission dossier, and
 - any agreements reached at the meeting (with the exception of additional data – see module 1.8.2).

Points to note

- The TGA keeps file records of meetings and their outcomes. Sponsors must ensure that the information provided in module 1.8.1 is an accurate reflection of the meeting(s).
- There may be multiple meetings before submission lodgement. Details of all meetings resulting in outcomes for the sponsor to address must be provided in module 1.8.1.

Module 1.8.2 Details of any additional data to be submitted

When to include this document

- Where pre-submission discussions have resulted in the TGA agreeing to accept additional data during the course of evaluation (see Section 3.1.3 of the [ARGPM](#)).

Important information on additional data

The TGA will only agree to the lodgement of additional data where the medicine is of critical importance to the Australian community to address emergency situations. This must be established at a pre-submission meeting prior to the lodgement of a submission.

How to prepare this document

- Identify the date on which the TGA agreed that additional data could be lodged.
- Identify the date on which the additional data is due to arrive at the TGA.
- Provide details of the additional data that the TGA has agreed to accept.

Points to note

- Acceptance of additional data may affect target timeframes. See Part 3 of the [ARGPM](#) for more information.
- Additional data will only be accepted in exceptional circumstances and must have prior agreement by the TGA.

Module 1.8.3 Declaration of compliance with pre-submission planning form and planning letter**When to include this document**

- The submission is a category 1 or category 2 submission for which a pre-submission planning form was lodged with the TGA.

How to prepare this document

- Review the pre-submission planning form and the submission dossier. Identify any inconsistencies between the two.
- Where inconsistencies are identified, confirm that they are not likely to cause the TGA to consider the submission to be not effective.

Important information on pre-submission and submission

Any conceptual inconsistencies between the information provided on the pre-submission planning form and the resulting submission that are considered to be an increase in scope and/or complexity may result in the TGA considering the submission to be not effective. For example, the inclusion of an additional indication in the application at the submission phase is considered to be an increase in scope and the TGA would consider the submission to be not effective. Significant changes that do not necessarily affect complexity and/or scope could also result in the submission being considered to be not effective.

- Review any issues identified in the TGA's pre-submission planning letter for the submission.
- For each issue in the TGA's pre-submission planning letter, confirm that it has been addressed and how it was addressed.
- Prepare a declaration that:
 - **Either** states that the submission is consistent with the pre-submission planning form lodged **OR** lists any inconsistencies with appropriate justifications for their inclusion in the submission, and
 - Lists any issues identified as requiring sponsor action in the TGA pre-submission planning letter and identifies how these issues have been addressed.

Points to note

- The TGA will check the submission for consistency with the pre-submission planning form. Extensive differences between the pre-submission planning form and the submission may result in the TGA considering the submission to be not effective i.e. will not be accepted for evaluation.
- Before lodging a submission with apparent inconsistencies with the corresponding pre-submission planning form that cannot be readily justified, sponsors are strongly advised to discuss the matter with the Office of Medicines Authorisation to determine the best path.

- Administrative changes (e.g. correction of spelling errors, repaginations) are not considered to be significant differences.

DRAFT

Module 1.9 Individual patient data

Overview

This section of the module 1 holds information regarding the applicant's ability to provide individual patient data to support the studies provided in the dossier should the need arise.

The following information describes each document in the section, outlines when each document needs to be provided and any other requirements relating to the documents

Contents

Summary of requirements	72
Module 1.9 Individual patient data	73

Summary of requirements

Documentation					
Section	Description	Category 1/category 2		Category 3	
		New registration ¹⁸	Variation	New registration ¹⁸	Variation
1.9	Individual patient data	i	i		

Key

l = mandatory

i = requirement defined by application type and business rules – refer to this section for more information

blank = not required

¹⁸ A new registration is one that requires a new ARTG entry by reason of being separate and distinct goods under s.16 of the *Therapeutic Goods Act 1989*. This includes new chemical entities, new strengths, new dosage forms, different directions for use, formulation changes, changes in trade name, extension of indication etc. By the provisions in the Therapeutic Goods (Groups) Order 2001, not all new registrations will result in a new AUST R number being allocated if they are taken to be grouped.

Module 1.9 Individual patient data

When to include this document

- For all category 1 and category 2 submissions where:
 - a full set of individual patient data has not been provided to the TGA with the submission, but
 - the submission dossier contains clinical studies or makes reference to another dossier containing clinical studies.

How to prepare this document

- Ensure that individual patient data are readily available in the format that would be acceptable for submission in the EU or the United States of America (USA).
 - In general this is tabulated patient data that includes clinical and laboratory monitoring results, presented in such a way as to enable a relation to individual patients.
- Prepare the statement for inclusion in module 1.9 stating:
 - that the individual patient data can be provided within 15 working days, and
 - any studies for which individual patient data are not available (where relevant).

Points to note

- Individual patient data (IPD) from each clinical trial are not required to be included in the documentation at the time of application, except where:
 - the submission contains any bioavailability studies where IPD for plasma concentrations and derived data are required
 - a marketing application for the medicine has been rejected in the USA or Canada before the Australian evaluation process, for reasons related to the clinical data in any way.
- IPD may also be included in the submission at lodgement if the sponsor considers it appropriate. It is acceptable to provide IPD in the electronic dossier only, provided that the absence of IPD in the hard copy is noted in the letter of application at module 1.0.1.
- Although in all other cases, it is not a requirement for IPD to be supplied in the submission dossier, IPD may be requested and must be available.
- IPD must be in a format suitable for submission in either the EU or USA. Generally this is tabulated patient data that includes clinical and laboratory monitoring results formatted to show a relationship to individual patients.
 - Note that Individual Case Report Forms are not accepted as individual patient data.
- Where not supplied with a submission, individual patient data may be requested by the TGA:
 - to support a particular study if, during the evaluation, there is any reason to doubt the analysis or conclusions reached;
 - where a marketing application for the medicine has been rejected in the USA or Canada during the Australian evaluation process, for reasons related to the clinical data in any way;
 - if, after registration, further review is required (e.g. an overseas rejection is being investigated).
- Where a request for individual patient data is not met within 15 working days, the application may lapse.
- If a marketing application for the medicine is rejected in the USA or Canada during the Australian evaluation process, for reasons related to the clinical data in any way, full individual

patient data must always be available and may need to be submitted to the TGA. Where this occurs, applicants must contact the Office of Medicines Authorisation to discuss.

- The appendices must be supplied in the electronic format.



Legislation

Category 1 and 2 applications are made under s.23 of the *Therapeutic Goods Act 1989* (the Act). Section 23 requires that applications are made in a form approved by the Secretary. The currently approved form is the CTD format, which incorporates the requirement for a statement relating to individual patient data.

DRAFT

Module 1.10 Overseas regulatory status

Overview

This section of the module 1 holds information regarding the overseas regulatory status for the medicine and the supporting data for this submission.

The following information describes each document in the section, outlines when each document needs to be provided and any other requirements relating to the documents.

Contents

Summary of requirements	75
Module 1.10.1 Overseas regulatory status	76
Module 1.10.2 Product information from Canada, the Netherlands, New Zealand, Sweden, UK and USA	76
Module 1.10.3 Data set similarities and differences	77

Summary of requirements

Documentation					
Section	Description	Category 1/category 2		Category 3	
		New registration ¹⁹	Variation	New registration ¹⁹	Variation
1.10.1	Overseas regulatory status				
1.10.2	Product information from Canada, the Netherlands, New Zealand, Sweden, UK and USA	i	i		
1.10.3	Differences in the data set in applications submitted in Australia, Canada, the Netherlands, New Zealand, Sweden, UK and USA	i	i		

Key

| = mandatory

i = requirement defined by application type and business rules – refer to this section for more information

blank = not required

¹⁹ A new registration is one that requires a new ARTG entry by reason of being separate and distinct goods under s.16 of the *Therapeutic Goods Act 1989*. This includes new chemical entities, new strengths, new dosage forms, different directions for use, formulation changes, changes in trade name, extension of indication etc. By the provisions in the Therapeutic Goods (Groups) Order 2001, not all new registrations will result in a new AUST R number being allocated if they are taken to be grouped.

Module 1.10.1 Overseas regulatory status

When to include this document

- Module 1.10.1 must be provided for all category 1 and category 2 applications, with the exception of additional trade name applications.

How to prepare this document

- This document requires a list of countries in which a similar application has been submitted, dates of submission (if available) and the status of these applications.
- The document must include the status of similar applications in the following countries:
 - European Union (if centralised procedure),
 - the Netherlands, Sweden and United Kingdom (if mutual recognition, decentralised or national applications),
 - United States of America,
 - Canada,
 - Switzerland, and
 - New Zealand.
- The document must detail approvals (with indications) and deferrals, withdrawals and rejections with reasons in each case.
- Where applications have been submitted to agencies in the European Union:
 - The type of application (centralised, mutual recognition, decentralised or national) must be identified.
 - For centralised applications the rapporteur and co-rapporteur must be identified.
 - For mutual recognition and decentralised applications, the reference member state must be identified.
- Where a similar application has not been lodged in any other country, this must be stated in module 1.10.1.

Points to note

- Prior to the Advisory Committee on Prescription Medicines (ACPM) meeting, sponsors are expected to provide an update on the overseas status of the application as part of their pre-ACPM response.
- For submissions not referred to ACPM, a similar update is to be provided to the TGA Delegate at the decision phase. For more information on the format of this update, refer to the [ARGPM](#).
- If the application is rejected by overseas authorities during the Australian evaluation process, the TGA must be informed.

Module 1.10.2 Product information from Canada, the Netherlands, New Zealand, Sweden, UK and USA

When to include this document

- Module 1.10.2 must be provided for all category 1 and category 2 applications (excluding additional trade name applications) where a similar application has been lodged in:
 - New Zealand, Canada and USA
 - European Union via centralised procedure
 - the Netherlands, Sweden and United Kingdom (UK) via mutual recognition procedure, decentralised procedure or national marketing authorisation.

How to prepare this document

- Prepare copies of each of the following documents from the similar overseas applications:
 - Canadian Product Monograph from Canada,
 - Summary of Product Characteristics (SPC) from the Netherlands, Sweden and UK (if approved via mutual recognition procedure, decentralised procedure or national marketing authorisation),
 - UK SPC (if approved via centralised procedure),
 - Data Sheet from New Zealand ,
 - Prescribing Information (PI) from USA.
- If the overseas SPC, monograph or PI has not been approved at the time the application is lodged in Australia, a draft document may be included. The approved overseas SPC, monograph or PI must then be supplied to the TGA as they become available.

Points to note

- As part of a pre-ACPM response, sponsors are expected to provide updated overseas PI documents or SPC documents. For submissions not referred to ACPM, these documents are to be provided to the TGA Delegate at the decision phase. For more information on the requirements, refer to the [ARGPM](#).

Module 1.10.3 Data set similarities and differences**When to include this document**

- Module 1.10.3 must be provided for all category 1 and category 2 applications (excluding additional trade name applications) for which a similar application has been lodged in:
 - New Zealand, Canada and USA,
 - European Union via centralised procedure,
 - the Netherlands, Sweden and UK via mutual recognition or decentralised procedure or national marketing authorisation.

How to prepare this document

- Prepare a summary of the similarities / differences between the data in this submission and the data packages submitted in:
 - New Zealand, Canada and USA,
 - European Union (if centralised procedure),
 - the Netherlands, Sweden and UK (if mutual recognition or decentralised procedure or national marketing authorisation).
- Where significant differences exist, these should be identified and commented upon in general terms.

Points to note

- For category 2 submissions, if any significant, undisclosed differences are subsequently found by the TGA, the application may be rejected.



Legislation

Category 1, Category 2 and Category 3 applications for new registrations are made under s.23 of the *Therapeutic Goods Act 1989* (the Act). Section 23 requires that applications are made in a form approved by the Secretary. The currently approved form is the CTD format, which incorporates Module 1.10 – Overseas regulatory status.

Category 1, Category 2 and Category 3 applications requesting a variation to an existing registration are made under s.9D(3) of the Act. This subsection requires that the sponsor request the Secretary to vary information in the Register entry relating to the affected goods.

The TGA requires that the request to the Secretary for a Category 1, Category 3 or Category 3 variation is also made in CTD format including Module 1.10 – Overseas regulatory status where required.

DRAFT

Module 1.11 Summary of biopharmaceutical studies

Overview

This section of the module 1 holds documents relating to the biopharmaceutical studies included in the applicant's dossier.

The following information describes each document in the section, outlines when each document needs to be provided and any other requirements relating to the documents

Contents

Summary of requirements	79
Module 1.11.1 Summary of a Bioavailability or Bioequivalence Study	80
Module 1.11.2 Justification for not providing appropriate biopharmaceutical studies	80

Summary of requirements

Documentation					
Section	Description	Category 1/category 2		Category 3	
		New registration ²⁰	Variation	New registration ²⁰	Variation
1.11.1	Summary of a Bioavailability or Bioequivalence Study	i	i		
1.11.2	Justification for not providing biopharmaceutical studies	i	i	i	i

Key

l = mandatory i = requirement defined by application type and business rules – refer to this section for more information

blank = not required

²⁰ A new registration is one that requires a new ARTG entry by reason of being separate and distinct goods under s.16 of the *Therapeutic Goods Act 1989*. This includes new chemical entities, new strengths, new dosage forms, different directions for use, formulation changes, changes in trade name, extension of indication etc. By the provisions in the Therapeutic Goods (Groups) Order 2001, not all new registrations will result in a new AUST R number being allocated if they are taken to be grouped.

Module 1.11.1 Summary of a Bioavailability or Bioequivalence Study

When to include this document

- A Summary of Bioavailability or Bioequivalence Study must be included in module 1.11.1 for each bioavailability or bioequivalence study provided in the supporting data.

How to prepare this document

- Download the [summary](#) form.
- Complete the [summary](#), following the directions on the form.
- The form can be completed electronically and then printed for inclusion in module 1.11.1.
- A separate [summary](#) needs to be completed for each study.

Points to note

- The summary form is designed to assist the OMA in examining the relevance and adequacy of biopharmaceutical data prior to acceptance of an application.
- Australia's requirements for biopharmaceutical studies are aligned with the [CHMP Note for Guidance on the Investigation of Bioavailability and Bioequivalence](#) (CPMP/EWP/QWP/1401/98) which has been formally adopted in Australia (with amendment).

Module 1.11.2 Justification for not providing appropriate biopharmaceutical studies

When to include this document

- A justification must be included in module 1.11.2 where:
 - Part 3 of Appendix 15 of the [ARGPM](#) indicates that biopharmaceutical studies are required, and
 - The biopharmaceutical studies indicated in Part 3 as required have not been provided.

For example, a justification is required for tablets containing a new medicine where the biopharmaceutical data provided does not cover all of the different strengths proposed for registration.

- A justification must be included in module 1.11.2 where the biopharmaceutical data provided for a generic medicine were not generated against a reference product obtained from Australia.

How to prepare this document

Biopharmaceutical studies not provided

- The justification must be prepared by addressing all of the points in Section 4 of Appendix 15.
- Where the biopharmaceutical data provided does not cover all of the different strengths of the product proposed for registration, the justification must make a case for extrapolating the results of the studies to other strengths in accordance with Appendix 15.
- Any references used to support the justification must be included in module 1.11.2 also.

Overseas reference product used for studies

- Where the biopharmaceutical data provided for a generic medicine were not generated against a reference product obtained from Australia, the justification must either:
 - provide a declaration that the reference product used was identical to the corresponding product in Australia in accordance with Section 7 of Appendix 15, or

- indicate that the requirements for an overseas reference product as defined in Section 7 of Appendix 15 have been met.
- Any references used to support the justification must be included in module 1.11.2 also.

Points to note

- A justification for not providing biopharmaceutic studies may also be provided for category 3 submissions that seek changes to formulation or other changes that may normally be expected to require biopharmaceutic studies to support the change (see section 2.5.3 of the [ARGPM](#)).

Legislation

Category 1, Category 2 and Category 3 applications for new registrations are made under s.23 of the *Therapeutic Goods Act 1989* (the Act). Section 23 requires that applications are made in a form approved by the Secretary. The currently approved form is the CTD format, which incorporates the requirement for the Summary of Biopharmaceutic Studies and the justification for not providing biopharmaceutic studies.



The requirement for biopharmaceutic studies arises from s. 25(1) of the Act which requires that the medicine be assessed for safety, quality and efficacy. Further, in order for an application to be considered an application to register a new generic, as defined in Regulation 2 of the *Therapeutic Goods Regulations 1990*, the sponsor must be able to demonstrate that the proposed medicine is bioequivalent to a registered medicine.

Category 1, Category 2 and Category 3 applications requesting a variation to an existing registration are made under s.9D(3) of the Act. In order for a variation to be approved under s.9D(3), the Secretary must be “satisfied that the variation requested does not indicate any reduction in the quality, safety or efficacy of the goods for the purposes for which they are to be used.” Variations that have the potential to affect the quality of the goods may require the provision of Module 1.11, as described above.

Module 1.12 Paediatric development program

Overview

This section of the module 1 holds a document relating to the applicant's paediatric development program.

The following information describes each document in the section, outlines when each document needs to be provided and any other requirements relating to the documents.

Contents

Summary of requirements	82
Module 1.12 References to paediatric development program	83

Summary of requirements

Documentation					
Section	Description	Category 1/category 2		Category 3	
		New registration ²¹	Variation	New registration ²¹	Variation
1.12	References to paediatric development program	i	i		

Key

l = mandatory

i = requirement defined by application type and business rules – refer to this section for more information

blank = not required

²¹ A new registration is one that requires a new ARTG entry by reason of being separate and distinct goods under s.16 of the *Therapeutic Goods Act 1989*. This includes new chemical entities, new strengths, new dosage forms, different directions for use, formulation changes, changes in trade name, extension of indication etc. By the provisions in the Therapeutic Goods (Groups) Order 2001, not all new registrations will result in a new AUST R number being allocated if they are taken to be grouped.

Module 1.12 References to paediatric development program

When to include this document

- This document must be included for category 1 and category 2 submissions for a new chemical entity, new combination, extension of indication, new dosage form or new route of administration.

How to prepare this document

- This document must advise:
 - whether or not there is a paediatric development program for this medicine, and
 - either:
 - § where there is a program in place, the relevant sections of the dossier to the program, or
 - § where there is not a program in place, a formal justification as to why the product is not appropriate for use in the paediatric population.

Points to note

- There is a recognised global problem with the availability of paediatric-specific formulations and a lack of information from proper investigations of the use of medicines in children. This problem leads to medicines being used outside of their approved indications, and, at times, being reformulated by pharmacists to make them more suitable for use by children. However, the basic precept that children should not be discriminated against by being supplied poorly investigated medicines has been accepted internationally.
- The TGA has adopted internationally recognised ICH/European guidelines dealing with paediatric data generation and facilitating the extrapolation of data from one patient population to another, including:
 - [Note for guidance on clinical investigation of medicinal products in the paediatric population](#) (CPMP/ICH/2711/95)
 - [Guideline on the role of pharmacokinetics in the development of medicinal products in the paediatric population](#) (EMEA/SHMP/EWP/147013/2004)
 - [Guideline on the investigation of medicinal products in the term and preterm neonate](#) (EMEA/536810/2008)
 - [Reflection paper: Formulations of choice for the paediatric population](#) (EMEA/CHMP/PEG/194810/2005)
- The CTD guidelines require that the safety and efficacy in the paediatric population be routinely analysed in applications for a proposed indication that occurs in children.
- The TGA also has a number of mechanisms in place to encourage sponsors with paediatric data and products to apply for registration. Refer to the [ARGPM](#) for more information.

Legislation



Category 1 and 2 applications are made under s.23 of the *Therapeutic Goods Act 1989* (the Act). Section 23 requires that applications are made in a form approved by the Secretary. The currently approved form is the CTD format, which incorporates the requirement for dossier references where a Paediatric Development Program is in place.

Module 1.13 Information relating to pharmacovigilance

Overview

This section of the module 1 holds documents relating to the pharmacovigilance activities for a new medicine or significant changes to a registered medicine.

The following information describes each document in the section, outlines when each document needs to be provided and any other requirements relating to the documents.

Contents

Summary of requirements	84
Module 1.13.1 Risk Management Plan for Australia	85

Summary of requirements

Documentation					
Section	Description	Category 1/category 2		Category 3	
		New registration ²²	Variation	New registration ²²	Variation
1.13.1	Risk Management Plan for Australia	i	i		

Key

l = mandatory

i = requirement defined by application type and business rules – refer to this section for more information

blank = not required

²² A new registration is one that requires a new ARTG entry by reason of being separate and distinct goods under s.16 of the *Therapeutic Goods Act 1989*. This includes new chemical entities, new strengths, new dosage forms, different directions for use, formulation changes, changes in trade name, extension of indication etc. By the provisions in the Therapeutic Goods (Groups) Order 2001, not all new registrations will result in a new AUST R number being allocated if they are taken to be grouped.

Module 1.13.1 Risk Management Plan for Australia

When to include this document

- A Risk Management Plan (RMP) must be included in module 1.13.1 when the submission seeks the registration of any of the following:
 - any product containing a new chemical entity
 - a similar biological medicinal product
 - a generic medicinal product where a safety concern requiring additional risk minimisation activities has been identified with the reference medicinal product.
- An RMP must also be included in module 1.13.1 for submissions involving:
 - a significant new registration (for example, new dosage form, new route of administration, significant change in indications, extension of paediatric population) or
 - a significant change in a registration (for example, new manufacturing process of a biotechnologically-derived product)unless it has been agreed with the TGA that submission is not required.
- In some circumstances, products which are not in the above categories which are seeking a new registration may require a RMP:
 - known active substances
 - literature based submissions
 - fixed combination applications.
- It is strongly recommended that discussions with the TGA on the need for, and content of, a RMP should take place in advance of the pre-submission planning form lodgement, especially for situations where the submission of a RMP is not mandatory.

How to prepare this document

- A detailed description of a risk management system should be provided, where appropriate, in the form of an RMP, as outlined in Chapter 1.3 of [Volume 9A – Guidelines on Pharmacovigilance for Medicinal Products for Human Use of the Rules Governing Medicinal Products in the European Union](#) (version September 2008).
- The RMP contains 2 parts:
 - Part I of the RMP incorporates the Safety Specification and the Pharmacovigilance Plan;
 - In Part II, on the basis of the Safety Specification, the sponsor should consider carefully the need for risk minimisation activities to be introduced. Risk minimisation activities may be “routine” or “additional”. Within the “evaluation of the need for risk minimisation activities,” the sponsor should discuss fully the use of routine risk minimisation activities and whether there is a need for additional risk minimisation activities. If only routine risk minimisation activities are required there is no need to submit a risk minimisation plan. If additional risk minimisation activities are thought necessary, the sponsor should provide a risk minimisation plan within Part II of the RMP. This risk minimisation plan should contain both the routine and additional activities for each safety concern.
- The RMP must be presented in a stand-alone format (separate volumes in paper) allowing circulation to, and evaluation by, pharmacovigilance and risk management experts. It should be accompanied by other relevant documents such as study protocols, where applicable.

Points to note

- An RMP must be submitted when requested by the TGA (both pre-and post-authorisation). This applies to medicines already registered in the ARTG.
- An RMP may also be submitted on the initiative of a sponsor when they identify a safety concern with a medicinal product at any stage of its life cycle.
- More information is available from the [RMP Q&As](#).

Legislation

Category 1 and 2 applications for new registrations are made under s. 23 of the *Therapeutic Goods Act 1989* (the Act). Section 23 requires that applications are made in a form approved by the Secretary. The currently approved form is the CTD format, which incorporates the requirement for a Risk Management Plan.

Category 1, Category 2 and Category 3 applications requesting a variation to an existing registration are made under s.9D(3) of the Act. The TGA also requires that such applications are provided in CTD format, which incorporates the requirement for a Risk Management Plan in certain situations (see above).

DRAFT

Annex I Antibiotic resistance data

Overview

This section of the module 1 holds the antibiotic resistance data for new antibacterial medicines, extensions of indication to currently registered antibacterial medicines and updated data for currently registered antibacterial medicines.

The following information describes each document in the section, outlines when each document needs to be provided and any other requirements relating to the documents.

Contents

Summary of requirements	87
Annex I Antibiotic resistance data	88

Summary of requirements

Documentation					
Section	Description	Category 1/category 2		Category 3	
		New registration ²³	Variation	New registration ²³	Variation
Annex I	Antibiotic resistance data	i	i		

Key

I = mandatory

i = requirement defined by application type and business rules – refer to this section for more information

blank = not required

²³ A new registration is one that requires a new ARTG entry by reason of being separate and distinct goods under s.16 of the *Therapeutic Goods Act 1989*. This includes new chemical entities, new strengths, new dosage forms, different directions for use, formulation changes, changes in trade name, extension of indication etc. By the provisions in the Therapeutic Goods (Groups) Order 2001, not all new registrations will result in a new AUST R number being allocated if they are taken to be grouped.

Annex I Antibiotic resistance data

When to include this document

- The Joint Expert Technical Advisory Committee on Antibiotic Resistance (JETACAR) Report (released in October 1999) and The Commonwealth Government Response to the Report of the Joint Expert Technical Advisory Committee on Antibiotic Resistance recommended that the TGA assess the propensity for promoting resistance and cross-resistance in applications for new antibiotics.
- While this document is currently optional, it is recommended that sponsors review the adequacy of data relating to the potential of an antibacterial medicine to promote resistance and cross-resistance for:
 - Submissions to register new antibacterial medicines
 - Extension of indication submissions for currently registered antibacterial medicines
 - Submissions to change the Australian product information document to include updated antibiotic resistance data.

How to prepare this document

- The risk assessment of microbial resistance should consist of the steps:
 - hazard characterization
 - exposure characterization
 - impact characterization
 - risk characterization.
- The 'risk assessment of microbial resistance' may be qualitative in part, although quantitative data should be provided where possible.
- A recommended format for this document is available from the TGA's *Guidelines on Antibacterial Resistance Risk Data* (Draft January 2007) document. It is available on request from the [TGA](#).
- It is acceptable for this document to refer to data supplied elsewhere in the submission dossier.

Points to note

- Annex I must be bound in a separate volume to the rest of module 1 and any other annexes supplied.
- Annex I applies to both topical and systemic antibacterial medicines.
- Annex I applies to combination products and composite packs that contain one or more antibacterial medicines.
- Any Australian human antibiotic-resistance prevalence data should be included in the Pharmacology section of the Australian product information document.

Annex II Overseas evaluation reports

Overview

This section of the module 1 holds the overseas evaluation reports for category 2 submissions.

The following information describes each document in the section, outlines when each document needs to be provided and any other requirements relating to the documents.

Contents

Summary of requirements	89
Annex II Overseas evaluation reports	90

Summary of requirements

Documentation				
Section	Description	Category 1	Category 2	Category 3
Annex II	Overseas evaluation reports	i		

Key

| = mandatory i = requirement defined by application type and business rules – refer to this section for more information blank = not required

Annex II Overseas evaluation reports

When to include this document

- The submission is a category 2 submission, or
- The submission is a category 1 submission for which an overseas evaluation report is available.

How to prepare this document

- For a category 2 submission:
 - Obtain copies of the independent evaluation reports from two acceptable countries where a similar application has already been approved (see below).
 - Include copies of each evaluation report in Annex II.
- For a category 1 submission:
 - Obtain copies of the independent evaluation reports that are available from the list of acceptable countries where a similar application has already been approved (see below).
 - Include copies of each evaluation report in Annex II.

Points to note

- Annex II must be bound in a separate volume to the rest of module 1 and any other annexes supplied.
- For further details about category 2 applications see Sections 2.5.2, 3.5.1 and 4.2 of the [ARGPM](#).
- The two overseas evaluation reports must be independent reports and the formulation, directions for use and indications of the medicine are identical to those evaluated and approved for marketing in those 2 countries.
- The countries currently identified by the Minister as *acceptable*, for the purposes of providing evaluation reports, are:
 - Canada
 - Sweden
 - the Netherlands
 - the United Kingdom
 - the United States of America.
- Any differences between the data set supplied to the TGA and the two acceptable countries must be clearly identified in module 1.10.3.
- Even where a category 2 classification is not being sought for an application, the sponsor is encouraged to provide copies of evaluations from other regulatory agencies or authorisation (via the application form) for the TGA to obtain evaluations from other regulatory agencies, as this may expedite the evaluation process.

**Legislation**

Regulations 16C and 16D of the *Therapeutic Goods Regulations 1990* provide for shorter evaluation timeframes than would ordinarily apply to a Category 1 submission if the medicine or variation to the medicine has been approved in two other acceptable countries and the sponsor is able to provide the evaluation reports from these countries. Submissions like this are classified as “Category 2” submissions.

DRAFT

Part C - Requests for confidentiality

What will the TGA regard as confidential information?

- The information below is not intended to constitute legal advice to sponsors. Sponsors should where appropriate seek their own legal advice in relation to any confidentiality issues. However, below is a guide as to the issues which the TGA takes into account when considering whether information submitted in relation to an application to which the Common Technical Document applies is confidential information.
- The TGA does not necessarily accept requests for confidentiality as binding on it. The statements made by a sponsor in this context are treated as indicia of what was regarded by sponsors as confidential. However whether that information is confidential under law is determined by whether the information meets the established legal test for confidential information.
- The Courts have established that for information to be classified as “confidential information” all the following elements must be present:
 - the information must be specifically identified and not merely global in its terms;
 - the information must be inherently confidential; and
 - the information must have been communicated and received in circumstances which imposed an obligation of confidentiality on the recipient.

These elements are not satisfied by simply marking documents as confidential or ~~COMMERCIAL-IN-CONFIDENCE~~. Sponsors must identify the specific documents or parts of documents that they regard as confidential and explain in their written statement why they are regarded as confidential. It is most unlikely that a general claim that an entire submission is confidential would satisfy the test for confidential information.

When may the TGA be required to release or use confidential information?

- If, based on the written statement provided by the sponsor, it appears to the TGA that certain information provided by the sponsor is confidential information, there are some circumstances in which the TGA may nevertheless be required to release or otherwise make use of that information. These are outlined in the following table.

Requests under Freedom of Information legislation	<p>In relation to requests for access to documents under the <i>Freedom of Information Act 1982</i> (FOI Act) decision makers in the Department of Health and Ageing must comply with all the requirements placed on them by that Act in making a decision whether or not to release the documents.</p> <p>Should a document or documents submitted with or as part of an application for registration appear to fall within the scope of an FOI request, and where the documents appear to contain information about the business, commercial or financial affairs of the sponsor, the TGA follows the third party consultation procedures required by the FOI</p>
---	---

	<p>legislation.²⁴ Any views that a sponsor provides in that consultation process about whether an exemption under the Act should be claimed in relation to any documents are taken into account, but are not necessarily binding on the TGA.</p> <p>Sponsors should refer to the FOI legislation for further details of the third party consultation process and third party review rights in respect of any decision being made to release documents which the sponsor asserts are exempt documents for the purposes of the FOI legislation.</p>
Other sources of a duty or discretion to release documents	<p>The TGA may be required to release, or may choose to release, confidential information under the provisions of the <i>Therapeutic Goods Act 1989</i> (the Act), the <i>Therapeutic Goods Regulations 1990</i>, and other Commonwealth laws or rules. Whilst the TGA will endeavour to protect confidential information that meets the legal tests, this obligation may be overridden or reduced where the TGA is under a contrary legal duty.</p> <p>Instances where the TGA may have a discretion or an obligation to release confidential information include:</p> <ul style="list-style-type: none"> • Where information is provided to a statutory committee such as the Advisory Committee on Prescription Medicines in order for it to make a recommendation relating to the criteria for registration of the goods; • Release to an external evaluator for the purposes of the evaluation of an application to register a good; • Where specific provisions of the Act authorise release. For example: <ul style="list-style-type: none"> – Information authorised for release under s. 61(5A) of the Act. – Australian Public Assessment Reports (AusPARs), product information and consumer medicines information documents are published on the TGA website under the Therapeutic Goods Specification 2009 under s.61(5C) and (5D) of the Act. – The public view of the ARTG is provided and maintained on the TGA website. Where a Court or Tribunal requires the information to be provided to it (for example under a subpoena); • Where the information is required to be disclosed to the Minister or to Parliament or to any Commonwealth agency or office which has powers to scrutinise the activities of the TGA (for example the Ombudsman or the Australian National Audit Office). <p>In these instances, where it is possible to ensure that confidentiality is protected without compromising the TGA's legal obligations or rights to disclose the information, the TGA will take reasonable steps to ensure that the information is protected.</p>

²⁴ See s.27 of the FOI Act.

Part D – Dossier documents matrix

Key	•	Mandatory
	○	Optional – there may be regulatory requirements that determine if it is required. Refer to part B of this document for module 1 requirements.
	<blank>	Not required

		Category 1 / Category 2 Submissions											Category 3 Submission						
TGA's Submission Fee type is...		A - NCE			B - New Combination	C - EOI	D - Generic	F - Major Variation					E - Additional Tradename	J - PI Change requiring evaluation	G - Minor Variation, new Register Entry			H - Minor variation, not resulting in a new Register Entry	
Applying for a ...		New chemical entity	New salt or ester of existing active ingredient	Biosimilar medicine				New Strength	New Dosage Form	New Route of administration	Change in Patient Group (not decrease)	Change of Dosage			Change of Formulation	New Container Type	Change of tradename		
Module 1																			
Module 1.0.0	Electronic lodgement cover page	•	•	•	•	•													
Module 1.0.1	Letter of Application (describing change)	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•
Module 1.0.2	Responses to questions																		

Module 1.0.3	Request for confidentiality																	
Module 1.0.4	Letters of Authorisation	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○
Module 1.1	Table of Contents	●	●	●	●	●	●	●	●	●	●	●	●	○	○	○	○	
Module 1.2.1	Application Form	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	
Module 1.2.2	Pre-Submission Details	●	●	●	●	●	●	●	●	●	●	●	●					
Module 1.2.3	Patent certification	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	
Module 1.3.1	Product Information	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	○	
Module 1.3.2	Consumer Medicine Information	●	●	●	●	●	●	●	●	●	●	●	○	○	○	○	○	
Module 1.3.3	Human Embryo / Embryonic Stem cell Declaration	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●		
Module 1.3.4	Mock-ups and labelling specimens	●	●	●	●	○	●	●	●	○	○	○	●	○	○	●	●	○
Module 1.4	Info on Experts & Expert Declarations	●	●	●	●	●	●	●	●	●	●	●	●	○			○	

Module 1.5.1	Literature-based submissions document	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					
Module 1.5.2	Orphan Drug designation letter	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					
Module 1.5.3	Genetically Modified Organisms Copy of Consents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					
Module 1.5.4	Additional Trade Name Declaration												<input checked="" type="radio"/>					
Module 1.5.5	Co-marketed Medicines Letter and Declaration	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Module 1.6	Drug and Plasma Master Files and Certificates of Suitability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Module 1.7	GMP Clearance	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>					<input type="radio"/>
Module 1.8	Compliance with Meetings and pre-submission processes	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Module 1.9	Individual Patient Data Declaration	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>					

Module 1.10	Overseas Regulatory Status	•	•	•	•	•	•	○	•	•	•	•	•					
Module 1.11	Summary of biopharmaceutical studies	•	•	•	•		○	○	•	•		○		○				
Module 1.12	References to Paediatric Dvpt Program	•	•	•	•	•			•	•								
Module 1.13	Information relating to pharmacovigilance	•	•	○	•	•	○	○	•	○	○	○						
Module 1 Annex I	Antibiotic Resistance Data	○	○		○	○							○					
Module 1 Annex II	Overseas Evaluation Reports	○	○	○	○	○	○	○	○	○	○	○	○					
Module 2																		
Module 2.1	Table of Contents	•	•	•	•	•	•	•	•	•	•	•	•	○	○	○		○
Module 2.2	Introduction	•	•	•	•	•	•	•	•	•	•	•	•	○	○	○		○
Module 2.3	Quality Overall Summary	•	•	•	•		•	•	•	○				○	○	○		○

Module 2.4	Non-clinical Overview	•	•	•	•	○	○	○	○	○	○	○	○					
Module 2.5	Clinical Overview	•	•	•	•	•	•	•	•	•	•	•	•	○				
Module 2.6	Non-clinical Summary	•	•	•	○	○	○	○	○	○	○	○	○	○				
Module 2.7	Clinical Summary	•	•	•	•	•	○	○	•	•	•	•	○					
Other Modules																		
Module 3 Quality		•	•	•	•	•	•	•	○						•	•		•
Module 4 Non-clinical		•	•	•	○	○	○	○	○	○	○	○	○					
Module 5 Clinical		•	•	•	•	•	○	○	•	•	•	•	○					
Module 5.3.1 Reports of Biopharmaceutical Studies		○	○	○	○	○	○	○	○	○	○	○	○					
Module 5.3.2 Pharmacokinetic Studies using Human Biomaterials		○	○	○	○	○	○	○	○	○	○	○	○					

Therapeutic Goods Administration

PO Box 100 Woden ACT 2606 Australia

Email: info@tga.gov.au Phone: 02 6232 8444 Fax: 02 6232 8605

www.tga.gov.au

Reference/Publication #