Maldives Food and Drug Authority

Ministry of Health

Male', Maldives

Guideline for Product Registration Including Emergency Use Authorization

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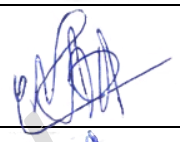
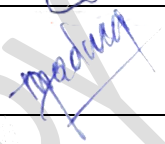
Approved By	Aishath Mohamed, Deputy Director General, Pharmaceuticals	
Authorized by	Thooma Adam, Deputy Director General, Laboratory Services (Acting Head of MFDA)	

SUMMARY OF CHANGES

Version No.	Issued Date	Section/Clause	Summary of Change	Changes Made by
1	09.08.2022	-	Creation of the document	Fathimath Shareefa, Pharmaceutical Officer
2	08.10.2023	-	Revision of checklist for product evaluation	Fathimath Fareesha, Pharmaceutical Officer Khadeeja Risaalath, Pharmaceutical Officer
3	03.06.2024	Overall document	Major procedural change with introduction of reliance pathways	Fathimath Fareesha, Pharmaceutical Officer Khadeeja Risaalath, Pharmaceutical Officer
4	12.11.2024	13.6	Addition of clause on Scientific Expert Committee	Fathimath Fareesha, Pharmaceutical Officer
5	17.12.2024	Overall Document	Changes to variation	Fathimath Fareesha, Pharmaceutical Officer
6	23.04.2025	Overall Document	Modifications to checklist and minor procedural changes related to validity	Fathimath Fareesha, Pharmaceutical Officer
7	01.10.2025	Overall Document	Modifications to checklist and minor procedural changes related to validity	Mohamed Fazeen, Director, Pharmaceuticals

Contents

ABBREVIATIONS

ADL	Approved Drugs List
API	Active Pharmaceutical Ingredient
BE	Bioequivalence
BP	British Pharmacopeia
CEP	Certification of Suitability
CoA	Certificate of Analysis
CoPP	Certificate of Pharmaceutical Product
CTD	Common Technical Document
DP	Drug Product
DS	Drug Substance
EUA	Emergency Use Authorization
FPP	Finished Pharmaceutical Product
GMP	Good Manufacturing Practices
ICH	International Conference on Harmonization
INN	International Non-Proprietary Name
MA	Market Authorization
MAH	Market Authorization Holder
MDI	Metered Dose Inhaler
MFDA	Maldives Food and Drug Authority
MTG	Medicine and Therapeutics Goods Division
NPB	National Pharmaceutical Board
NRA	National Regulatory Authority
PH. EUR	European Pharmacopeia

PIL	Patient Information Leaflet
PP	Primordial Products
PSUR **RMP** **SmPC**	Periodic Safety Update Report Reference Medicinal Product Summary of Product Characteristics
SRA	Stringent Regulatory Authority
USP	United States Pharmacopeia
WHO	World Health Organisation

Definitions

Active Pharmaceutical Ingredient (API) / Drug Substance	a. A substance or mixture of substances intended to be used in the manufacture of a pharmaceutical dosage form and that, when used so, becomes an active ingredient of that pharmaceutical dosage form. Such substances are intended to furnish pharmacological activity or other direct effect in the diagnosis, cure, mitigation, treatment or prevention of disease or to affect the structure and function of the body. b. A substance or compound that is intended to be used in the manufacture a drug product as a pharmacologically active compound (ingredient)
Applicant	The person or Company who submits a registration application or dossier of a product to the Authority and is responsible for the product information, recall etc., availability.
Adverse Drug Reaction	A response to a pharmaceutical product that is harmful and unintended and that occurs at doses normally used or tested in humans for prophylaxis, diagnosis, or treatment of disease, or for the modification of physiological function
Approved Drug List	A list of all medicinal products approved as drug product for use in Maldives.
Authority	Authority means Maldives Food and Drug Authority (MFDA)
Batch	A defined quantity of raw material, packaging material, or finished pharmaceutical product processed in a single process or series of processes so that it is expected to be homogeneous. It may sometimes be necessary to divide a batch into a number of sub-batches, which are later brought together to form a final homogeneous batch. In the case of terminal sterilization, the batch size is determined by the capacity of the autoclave. In continuous manufacture, the batch must correspond to a defined fraction of the production, characterized by its intended homogeneity. The batch size may be defined either as a fixed quantity or as the amount produced in a fixed time interval Source: World Health Organization WHO Technical Report Series, No. 863, 1996
Bioavailability	The extent to which, following administration of a medicine, fraction of the active form of a drug that reaches systemic circulation unaltered to exert an effect.

Bio-equivalence	Two pharmaceutical products are considered bioequivalent if they are pharmaceutically equivalent to their pharmaceutical alternatives, and their bio-availabilities (rate and extent of availability), in terms of peak (Cmax and Tmax) and total exposure (area under the curve (AUC)) after administration of the same molar dose under the same conditions. They are similar to such a degree that their effects can be expected to be essentially the same.
Certification of Analysis	It is a document that describes the list of tests applied to a particular sample with the result obtained and the acceptance criteria applied. It indicates whether the sample complies with the specifications. An authoritative document showing the results of analysis of a particular product batch.
Certification of Suitability	A certificate attesting that the quality of the substance is suitably controlled by the relevant monographs of the European Pharmacopoeia.
Collaborative Registration procedure (CRP)	Collaborative Registration procedure to accelerate the national registration of prequalified pharmaceutical products and vaccines, or the collaborative procedure to accelerate the national registration of products approved by stringent regulatory authorities (10, 11). The collaborative registration procedures cover initial registrations and post-registration variations/ post-approval changes.
Composition **Contamination**	Composition in relation to a medicinal product means the ingredients of which it consists, and the proportions, degree of strength, quality, and purity of those ingredients The undesired presence/appearance of impurities of a chemical or microbiological nature, or of foreign matter, into or on to a starting material or intermediate during production, sampling, packaging, or repackaging, storage or transport.
Container Closure System	A primary container closure system is a packaging component (for example, a vial) that is in, or may come into, direct contact with the final product dosage

	form, or components that contribute to the container/closure integrity of the primary packaging material for a sterile product. A secondary container closure system is a packaging component (for example, a carton) that is not, and will not be, in direct contact with the dosage form.
Cancellation, Suspension, Revocation of Registration	Registration is cancelled any time upon request by the MAH or when the validity of the registration certificate is reached and no application for renewal has been submitted. Registration may be suspended when information or reports are received by MFDA concerning serious adverse events and/or quality issues. Such reports can originate from national or international sources. Suspension is a temporary, precautionary measure aimed to protect public health while investigations on the reported issue(s) are undertaken. Registration is revoked when product, MAH, or finished product manufacturer are found to be no longer in conformity with the conditions of the marketing authorization.
Dosage Form	Formulation of an active ingredient(s) so that it can be administered to a patient in specified quantity, strength, e.g., tablets, capsules, injection solution, syrups, ointments, suppositories, etc.
Dossier	A detailed compilation of documents generated from the product manufacturer for the purpose of pharmaceutical product registration.
Drug Product / Finished Drug Product / Medicinal Product	Finished Drug Product or drug product or Medicinal Product means a finished dosage form that has undergone all stage of manufacturing including packaging in its final container and labelling. FPP may contains one or more active pharmaceutical ingredient / drug substance.
Emergency Use Authorization / Approval	A risk-based procedure for assessing and listing unlicensed medicines and vaccines with the ultimate aim of expediting the availability of these products in the public health emergency.
Evaluation	Assessment of submitted dossier for product registration based on parameters of safety, efficacy and quality.
Expiry Date	The date given on the individual container (usually on the label) of a drug product up to and including which the product is expected to remain within specifications, if stored correctly. It is established for each batch by adding

	the shelf-life period to the date of manufacture. Source: World Health Organization WHO Technical Report Series, No. 863, 1996
Excipient / Non-active ingredient	A substance or compound, other than the API and packaging materials, that is intended or designated to be used in the manufacture of a FPP. It also means any component of a finished dosage form that has no therapeutic value.
Formulation of Medicine	The validated composition of the finished pharmaceutical products i.e active pharmaceutical ingredients/ drug substance and excepient(s). A unique name identifying a particular pharmaceutical substance
Generic Name	Generic names are officially assigned by international medicines nomenclature commissions, and nowadays mostly conform to those assigned by the WHO program on the selection of INNs.
Generic Product	Generic product means a pharmaceutical product, usually intended to be interchangeable with the innovator product, which is manufactured without a licence from the innovator. The term should not be confused with generic names for APIs. Generic products may be marketed either under the approved non-proprietary name or under a brand (proprietary) name. Several products have been developed and marketed as generics without connection with the innovator in jurisdictions where it is/was legal to do so.
Good Manufacturing Practices	Good Manufacturing Practices is the aspect of quality assurance that ensures that medicinal product(s) are consistently manufactured and controlled to the quality standards appropriate to their intended use and as required by the product specifications.
Innovator Pharmaceutical Product	it is generally that which was first authorized for marketing (generally as a patented product) on the basis of documentation of efficacy, safety and quality (according to requirements valid at the time of the authorization). When an active substance has been available for many years, it may not be possible to identify or obtain an innovator pharmaceutical product.
International Nonproprietary Name	The shortened scientific name (also known as the generic name) of a pharmaceutical substance assigned by the WHO program on the selection of INNs, the INN is recognized worldwide.

Label	A printed text attached to or comprising part of a medicine container or package (primary and secondary excluding any outer shipping container), specifying the name, dosage form, composition, batch number, manufacturing date, and expiry date of the contents as well as the name and address of the manufacturing company and/or importer of the product, the product license holder, the permitted retail price, and other relevant information (e.g., recommended storage conditions).
Low-Risk Medicines	Products considered to lower risk than all other medicines. The key aspect of MFDA assessment focusses on labelling for appropriate use and claims substantiation (for more details see https://asean.org/wp-content/uploads/2017/09/ASEAN-Guidelines-on-Labelling-Req.-for-HS-2-Oct-2015-rev-with-discla....pdf and https://asean.org/wp-content/uploads/2017/09/ASEAN-Guidelines-on-Claims-Claims-Substantiation-HS-V2.0-with-discla....pdf). Examples of low-risk products are oral solid forms of: mild analgesics, cough and cold medicines, vitamins, minerals, herbal material, aromatherapy, and homoeopathic preparations. Low-risk medicines are nonprescription and are also known as alternative medicines, health supplements, or complementary medicines.
Manufacturer	A company that carries out any of the operation of manufacturing, packaging, labeling, quality control, final product release and quality assurance of the products.
Market Authorization/ Registration	An official document issued by the competent medicines regulatory authority for the purpose of marketing or free distribution of a product in Maldives after evaluation for safety, efficacy, and quality. It must set out, inter alia, the name of the product, the pharmaceutical dosage form, the quantitative formula (including excipients) per unit dose (using INNs or national generic names, where they exist), the shelf life and storage conditions, and the packaging characteristics. It specifies the information on which authorization is based (e.g., "The product(s) must conform to all the details provided in your

	application and as modified in subsequent correspondence"). It also contains the product information approved for health professionals and the public, the sales category, the name and address of the holder of the authorization, and the period of validity of the authorization. Once a product has been given marketing authorization, it is included on a list of authorized products (the register), and is often said to be "registered" or to "have registration." Market authorization may occasionally also be referred to as a license or product license (Please note that the terms market authorizations and registration is used interchangeably in this document.)
Market Authorization Validity	The duration in which the applicant is allowed to manufacture, import, distribute and market or sell the product in Maldives after being granted Market Authorization.
Marketing Authorization Holder	The local representative and/or applicant / firm that has the authorization to manufacture / import and/or market a medicinal product in Maldives. It also refers to a person or legal entity allowed to apply for a change to the marketing authorization or registration.
Medicinal Products / Drug Product	Any substance or combination of substances marketed or manufactured to be marketed for treating or preventing disease in human beings, or with a view to making a medical diagnosis in human beings, or to restoring, correcting, or modifying physiological functions in human beings. (WHO PQ definition). Any substance or combination of substances presented for treating or preventing disease in human beings. Any substance or combination of substances which may be administered to human beings with a view to making a medical diagnosis or to restoring, correcting, or modifying physiological functions in human beings is likewise considered a medicinal product. (The EU 2001/83/EC Directive)
Method validation	The documented process by which an analytical procedure (or method) provides a high degree of assurance that a specific process will consistently result in a product that meets its predetermined specifications and quality characteristics.

National Pharmaceutical Board	A board assigned by Regulation on National Pharmaceutical Board 2019/R-135 to provide technical advice on regulating medicine and medicinal products.
National Regulatory Authority	Authority responsible for ensuring medicinal products released for public distribution are evaluated properly and meet international standards of safety, efficacy and quality.
New Products	Pharmaceutical products new to Maldives are products containing active substances or fixed-dose combinations that have never been approved for marketing in Maldives before.
Packaging Material	Any material, including printed material, used in the packaging of a pharmaceutical product, excluding, any outer packaging used for transportation or shipment and packaging materials are referred to as primary or secondary according to whether or not they are intended to be in direct contact with the product.
Pharmacopeia	A publication issued by an authorized national or international commission / body that specifies quality standards and other properties of pharmaceutical substances and dosage forms
Pharmacovigilance	Pharmacovigilance is the science and activity relating to the collection, detection, assessment, monitoring, and prevention of adverse effects with pharmaceutical and biological drug products.
Post-market surveillance	Set of activities following the market authorization of a drug product including maintenance of product authorization and/or registration of variations or renewals; regular inspections of manufacturers, wholesalers, distributors, and retailers; quality control testing; pharmacovigilance; promotion control; public reporting of poor-quality products; handling of market complaints; and removal and disposal of non-compliant products.
Primordial Products	These are the medicinal products that have been on Approved Drug List from the beginning as approved products but not registered with a full dossier submission. These products are indicated with the letters “PP” in ADL.

Prescription Only Medicines	Medicines that may only be made available to the consumer through a written order signed by a duly qualified and registered medical prescriber and dispensed by a registered pharmacist.
Over-the-counter medicines	Medicines that are generally regarded as safe for the consumer to use by following the required label directions and warnings, and which may be purchased without a prescription
Pilot scale batch	A batch of an API or FPP manufactured by a procedure fully representative of and simulating that to be applied to a full production-scale batch, for example, for solid oral dosage forms, a pilot scale is generally, at a minimum, one-tenth that of a full production scale for 100,000 tablets or capsules, whichever is larger, unless otherwise adequately justified
Primary batch	A batch of an API or FPP used in a stability study, from which stability data are submitted in a registration application for the purpose of establishing a re-test period or shelf life, as the case may be. A primary batch of an API should be at least a pilot-scale batch. For an FPP, two of the three batches should be at least pilot-scale batches, and the third batch may be smaller if it is representative of the critical manufacturing steps. However, a primary batch may be a production batch.
Reference Regulatory Authorities	A national or regional authority or a trusted institution as adopted by the Maldives Food and Drug Authority for the purpose of reliance registration pathways.
Reliance	Reliance is the act whereby the regulatory authority in one jurisdiction takes into account and gives significant weight to assessments performed by another regulatory authority or trusted institution, or to any other authoritative information, in reaching its own decision. The relying authority remains independent, responsible and accountable for the decisions taken, even when it relies on the decisions, assessments and information of others. Full reliance means that the authority relies on the entire assessments/inspection and quality control reports performed by another NMRA. Partial reliance means that the authority relies on certain documents/parts of the assessments performed by another NMRA, while for

	the other part(s) an independent, full assessment of the documentation submitted by the Applicant is conducted. NRA remains independent, responsible, and accountable regarding the decisions taken, even when it relies on the decisions and information of others
Registered Products	These are medicinal products that are registered and approved with full dossier submission. These products are indicated with the letter "R" in ADL.
Registration Number	A number assigned to a medicinal product after being given marketing authorization.
Comparator / Reference Medicinal Product	A medicinal product that has been authorized for use on the basis of a full dossier, including the results of pre-clinical tests and clinical trials. Such products are used as a comparator for the demonstration of the safety, efficacy and quality of a generic drug product seeking marketing authorization.
Stability	The capacity of drug substance or drug product to remain within specification established to ensure its identity, strength, quality, and purity.
Stability study	The evidence on how the quality of a drug substance or drug product varies with time under the influence of a variety of environmental factors such as temperature, humidity, and light and to establish a re-test period for the drug substance or a shelf life for the drug product and recommended storage condition. Long-term and accelerated (and intermediate) studies undertaken on primary and/or commitment batches according to a prescribed stability protocol to establish or confirm the re-test period (or shelf life) of an API or the shelf life of an FPP
Stability tests (protocol)	A series of tests designed to obtain information on the stability of a pharmaceutical product in order to define its shelf life and utilization period under specified packaging and storage conditions.

Summary of Product Characteristics	A regulatory document of a medicinal product as it serves as the basis of information for healthcare professionals regarding the use of drug products, ensuring their safety, efficacy, and quality.
Ongoing Stability	The study carried out by the manufacturer on production batches according to a predetermined schedule in order to monitor, confirm, and extend the projected re-test period (or shelf life) of the API, or confirm or extend the shelf life of the FPP.
Accelrated Stability Studies **Real time/ Ongoing Stability Studies**	Studies designed to increase the rate of chemical degradation and physical change of an API or FPP by using exaggerated storage conditions as part of the stability testing program. The data thus obtained, in addition to data derived from long-term stability studies, may be used to assess long-term chemical effects under accelerated conditions and to evaluate the impact of short-term excursions outside the label storage conditions, as might occur during shipping. The results of accelerated testing studies are predictive of tentative shelf life of the drug product. Such studies are designed to simulate the rate of chemical and/or physical degradation of an active ingredient or dosage form or product, under exaggerated storage conditions. Experiments on the physical, chemical, biological, biopharmaceutical, and microbiological characteristics of an API or FPP, during and beyond the expected shelf life and storage periods of samples under the storage conditions expected in the intended market. The results are used to establish the re-test period or the shelf life, to confirm the projected re-test period or shelf life, and to recommend storage conditions.

Specification	A list of tests, references to analytical procedures, and appropriate acceptance criteria which are numerical limits, ranges, or other criteria for the tests described. It establishes the set of criteria to which any drug substance or any drug product should conform to be considered acceptable for its intended use.
Storing	The storage of drug products according to the different storage conditions for different drug substances according to their individual requirements.
Storage condition	The storage condition that guarantees the maintenance of the quality of the product in relation to its safety, efficacy, and acceptability throughout the shelf life, as may be predicted from the stability studies. The described conditions should indicate the temperature or temperature range in degree Celsius, as well as humidity, light, and other relevant conditions.
Strength	Strength of the medicinal product means the content of the active ingredient expressed quantitatively per dosage unit, per unit of volume or mass or weight, according to the dosage form
Stringent Regulatory Authority	National Regulatory Authorities that are recognized by WHO as having stringent regulatory practices.
Variation	A change to any aspect of a pharmaceutical product safety, efficacy and quality including but not limited to any change including but not limited to starting material, formulation (API/DS and exipients), method and site of manufacture, specifications for the finished product and ingredients, container, labeling, product information etc.
Validation	Documented act of proving that any procedure, process, equipment, material, activity, or system works correctly and actually leads to the expected results.
Variation Application	A variation application is an application for any intended change to already approved conditions of an existing registered product which has been previously registered as per the criteria laid down by MFDA

	PICs- The Pharmaceutical Inspection Co-operation Scheme (PIC/S) are organizations that play a key role in pharmaceutical regulation and the inspection of pharmaceutical manufacturing facilities. NDMA: N-nitroso dimethylamine (NDMA) EuDRA: European Union Drug Regulatory Authorities DEG: Diethylene Glycol is a toxic chemical that is used primarily as a solvent, antifreeze, and in the manufacturing of plastics and resins. It is a colourless, odourless, viscous liquid that is sweet tasting but highly poisonous if ingested, inhaled, or absorbed through the skin. EG: Ethylene Glycol is a colorless, odorless, and sweet-tasting liquid that is widely used as an antifreeze, coolant, and in the production of plastics and synthetic fibers. It is a common component in engine coolants and de-icing solutions, but it is also toxic when ingested. NCE: New chemical entity is any drug molecule which is not included in the Appropved Drug List in any form or any drug molecule which has not been imported to the Maldives.

1 INTRODUCTION

Maldives Food and Drugs Authority (MFDA) is responsible to regulate the medical products in the country under the Health Services Act (29/2015). The Medicine and Therapeutic Goods (MTG) Division of MFDA is mandated to implement a regulatory framework to ensure the accessibility of safe, quality assured and effective medical products for the people of Maldives.

The Health Services Act (29/2015) provides the legal provisions for establishing a national health system and standards for healthcare delivery services. The Health Services Act, Clause 65 (3) states that all medical products that are manufactured, imported, and sold in the country shall be registered by the Maldives Food and Drugs Authority. The Medicine Regulation further explains the procedures implemented for the registration of medicines including pharmaceutical and biological drug products in the country.

This "Guidelines for Medicine Registration including Emergency Use Authorization**"** will serve as the reference guide for the registration process including the pre-registration and post-marketing quality controls. However, this guideline shall be read in conjunction with the currently applicable laws and regulations together with other relevant legislation applicable to pharmaceutical and biological drug products in the Maldives.

2 OBJECTIVE

This guideline is aimed at supporting applicants for the registration/market authorization of pharmaceutical and biological drug products intended for human use in the Maldives.

3 SCOPE

The scope of this document encompasses the administrative requirements and procedures for submission, evaluation, and approval of registration applications of New Drug Products and Generic Drug Product (pharmaceutical and biological including vaccines), post-registration variations and renewal of registered drugs. It also covers the procedure for Emergency Use Authorization (EUA) applicable under public health emergency situations.

4 Legal Context

4.1 These guidelines shall be read in conjunction with the other applicable legislations on drug product (pharmaceutical and biological products) which include but not limited to: -

a. Medicine Regulation R-46 (2014)
b. Medicine Regulation Amendment R-49 (2016)
c. Health Service Act (29/2015)

5 RESPONSIBILITIES AND ACCOUNTABILITY

Medicine Regulatory Officers of Registration Unit	Responsible for verifying the documents, accepting the dossiers, evaluating the dossiers, submitting the summary of the evaluation to the National Board for Pharmaceuticals, preparing and issuing product registration certificates. Is also responsible for effective communication with the applicant in a timely manner
Director, Pharmaceuticals (Regulation Section)	Responsible for checking and verifying the product evaluation documents and to guide the pharmaceutical officers on evaluating the product.
Deputy Director General, Pharmaceuticals (Medicine Therapeutic Goods Division)	To approve or reject the medicines based on the technical advice from National Pharmaceutical Board
Director General (MFDA)	Final authorization of all the activities related to MFDA tasks
National Pharmaceutical Board	For Technical advice for decision making of medicine registration.

6 PRODUCT REGISTERATION

6.1 Medicines

6.1.1 All Applications for registration in Maldives are accepted if only the product is categorized as a medicine in the country of origin as well as in Maldives.

6.2 Pathways for Medicines Registration / Marketing Authorization.

6.2.1 Registration pathways: Table 1 below shows the registration pathway for medicines and vaccines with the scope of reliance and the criterial for reliance mentioned in the table. Reliance mechanism is applied to make use of the maximum benefits for the available resources.

6.3 Reliance Approach for Registration / Marketing Authorization

6.3.1 MFDA recognized the reliance approach in regulatory decision making in line with the WHO guidelines for Good Reliance Practices and as per Guidelines on Good Reliance Practices for Regulation of Medicines. It gives consideration and significant weight to the assessments performed by Reference Regulatory Authorities and WHO Prequalification team. The decisions and other related authoritative information from National Regulatory Authorities and other trusted institutions are also considered while reaching the regulatory decision for enhanced access to safe, efficacious and quality assured products.

6.3.2 MFDA applies reliance principles for the products registration that has already undergone full evaluation / assessment by the Reference Regulatory Authorities either in the country of origin or where the product is being exported based on the full dossier assessment performed by these reference regulatory authorities. In such cases, applications will be accepted with abridged data / limited documents as defined in this guideline.

6.3.3 PICs certified manufacturing sites are also included in this reliance process where limited documents are needed for registration as defined in this guideline.

6.3.4 Reliance pathways are mandatory for all vaccines, biological products, new chemical entities, generic-generics, high risk products like parenteral, ophthalmic preparations, oral liquid dosage forms and new fixed dose combinations.

6.3.5 Reliance pathway shall also be applied for all application with new manufacturers and manufacturing sites which are not approved before and which are not in ADL.

6.3.6 For medicines listed in the National Essential Medicines List, as well as for those that are not currently available on the market but have a clearly identified need, submission of a complete dossier may be considered, only when reliance pathways are not applicable or feasible. In such cases, all requirements for a full dossier application must be fully met.

6.3.7 Each of these applications will undergo case-by-case evaluation before acceptance. The decision to accept an application will be based on a combination of factors, including:

1. The public health needs for the product,

2. Its essentiality,

3. Unavailability in the local market, and

4. Verification of Good Manufacturing Practice (GMP) compliance.

6.3.8 It is important to note that even if a GMP certificate is submitted, the application will be rejected if the Authority is unable to verify its authenticity independently.

6.3.9 Furthermore, once such applications are accepted and the product is registered, the importer will be required to submit batch-specific quality control test reports for each batch imported. These reports must be issued by an independent, third-party laboratory accredited for such testing".

6.4 Reference Regulatory Authorities (RRAs) and organizations.

6.4.1 MFDA classifies all applications for registration of medicines products into the below mentioned categories as mentioned in the below table 1, based on the product origin and its approval status from other NRAs or other trusted organizations (e.g. WHO).

6.4.2 For this purpose, reference countries are identified based on criteria for stringent regulatory authorities, WHO listed regulatory authorities and those regulatory authorities which have achieved maturity level 3 and above. The documentation requirement is detailed for each reliance pathway in the table 1 below with the assessment duration and validity period.

6.4.3 Only the mentioned required documents shall be submitted under each registration pathway. If any additional information is required, MFDA shall inform the applicant to submit accordingly.

6.4.4 Refer to Annex-II for the reference countries for Reliance.

Table 1: Medicine Registration Pathways with requirements

General requirement for all applications	All Applications shall have this following information: ➢ Letter of Appointment as in Annex I of this document ➢ Letter from the manufacture to MFDA. (for all new registrations) ➢ Artwork, 360 angle picture of the product with package insert. ➢ Completed checklist as per registration pathway

	Registration Pathways			Requirements	Assessment duration from the date of receiving the submission fee	Registration validity
	A. Reliance	**1.1Reliance on approval by reference NRAs**	**1.1.1 Approved in a Reference NRA**	• **Evidence of approval in the country of manufacture.** • **Evidence of approval in one of the reference countries as mentioned in Annex II of this document.** **(For the above 2 points, a link should be provided to trace the evidence or registration or marketing authorization certificate.)** • **To facilitate the registration process while maintaining product quality and safety, registration certificates for generic products issued by National Regulatory Authorities (NRAs) in reference countries will be**	**Calendar 40 days**	**5 years with no variations except changes in artwork**

				accepted. **This is conditional upon the manufacturer providing a formal declaration confirming that both the branded and generic versions of the product are produced on the same production line, using identical processes, equipment, and quality control standards.** **This approach balances the need for regulatory rigor with practical facilitation, especially in the context of ensuring access to essential medicines while safeguarding product efficacy, safety, and quality.** • **Product information for reliance as in Annex III** • **Stability study report covering applicable climatic zone as mentioned in section F 2.1, F12, (2.1) and F3.** • Generic stability data cannot be accepted across different brands, even if those brands are manufactured at the same facility. • Each generic product must have its own product(brand)-specific stability data, as formulation characteristics and packaging		

				materials may vary, potentially affecting stability outcomes.		
		1.2 GMP verification	**1.2.1 Manufacturing site certified by PIC/S member NRA**	• **Evidence of PIC/S-GMP compliance for the site where the finished dosage form is manufactured and batch release takes place1.** • **Evidence of approval by the NRA of the country where the finished dosage form is manufactured, and batch release takes place. For this, a link should be provided to trace the evidence or registration or marketing authorization certificate.** • **Verifiable declaration of approval by at least 3 other NRAs. For this, a link should be provided to trace the evidence or registration or marketing authorization certificate. .(NRA website shall verify that the product is registered there even though CoPP is provided)**	**Calendar 40 days**	**5 years and no variations except changes in artwork**

[1] **PICs certified manufacturing sites from the EU and USA can be verified using the following links. Alternatively, GMP certificates from PIC/S authorities can also be provided:**

1. **http://eudragmdp.ema.europa.eu/inspections/displayWelcome.do;jsessionid=VSj9l6duvYdgIizmjw5ojlLTiRKH5-EwIbnUqabF2Ks1lh8NuukA!-1996855337**
2. **https://datadashboard.fda.gov/ora/index.htm**

				• **Product information for reliance as in Annex III** • **Stability study report covering applicable climatic zone as mentioned in section F 2.1, F12, (2.1) and F3**		
			1.2.2 Manufacturing site of a WHO prequalified products	• **Evidence that a WHO prequalified medicine or vaccine is manufactured and the batch released on the same site https://extranet.who.int/prequal/medicines/prequalified/finished-pharmaceutical-products** • **Evidence of approval by the NRA of the country where the finished dosage form is manufactured, and batch release takes place. For this, a link should be provided to trace the evidence or registration or marketing authorization certificate.** • **Verifiable declaration of approval by at least 3 other NRAs. For this, a link should be provided to trace the evidence or registration or marketing authorization certificate. (NRA website shall verify that the product is registered there**	**Calendar 45 days**	**5 years and no variations except changes in artwork**

				even though CoPP is provided) • **Product information for reliance as in Annex III** • **Stability study report covering applicable climatic zone as mentioned in section F 2.1, F12, (2.1) and F3**		
		1.3 Collaborative registration procedure (CRP)	**1.3.1CRP-PQ**	• **Letter of manufacturer showing interest in going for this pathway. Once letter is received from the manufacturer the information of the dossier will be retrieved from the relevant authorities/organization by MFDA to process the registration of the product.** • **Shall follow the requirements same as in 1.1.1 of this table**	**Working 90 days**	**5 years and no variations except changes in artwork**
			1.3.2 CRP-SRA	• **Letter of manufacturer showing interest in going for this pathway. Once letter is received from the manufacturer the information of the dossier will be retrieved from the relevant authorities/organization by MFDA to process the registration of the product** • **Shall follow the requirements same as in 1.1.1 of this table**	**Working 90 days**	**5 years and no variations except changes in artwork**

	B. Full procedure	**1.1 Full dossier**	• **Product full dossier with the document requirement in section 11.2** • **Regulatory status in other countries.** • **Full ICH M2 and M3 dossier parts.** • **Product information as per the information mentioned in section 12.3 B and Manufacturer information as per section C2 and C3** • **Samples**	**Assessment duration for this pathway is Working 150 days + any clock stop required for external expertise. The duration counts from the date of submission.**	**5 years + all variations**
	C. Notification	**These are for low-risk medicines like vitamins and vitamin preparation that are categorized as medicines. Those that falls under nutraceuticals shall follow the registration procedure for nutraceuticals.**	• **Evidence of approval by the NRA of the country where the finished dosage form is manufactured, and batch release takes place. For this, a link should be provided to trace the evidence or registration or marketing authorization certificate.** • **Verifiable declaration of regulatory status in at least 3 other NRAs. For this, a link should be provided to trace the evidence or registration or marketing authorization certificate.** • **Stability study report covering**	**Working 120 days**	**5 years + all variations**

				applicable climatic zone as mentioned in section F 2.1, F12, (2.1) and F3		
	D. Products for exclusive use in public health or disease control programmes			• **Copy of appeal, procurement, or request issued by the concerned programme.** • **Declaration of regulatory status in other countries;** • **Proof of approval and marketing in one or more reference country.** • **Detailed description of the product approved in the mentioned reference country OR evidence of PIC/S-GMP compliance for the site where the finished dosage form is manufactured and batch release takes place AND evidence of approval by the NRA of the country where the finished dosage form is manufactured and batch release takes place;** • **Stability study report covering applicable climatic zone.**		
	E.Donations			• **Copy of appeal or request for donation issued by a national institution.** • **Copy of marketing authorization in the donating**		

				country or declaration of conformity with national regulatory requirements by the NRA of the donating country. • **Document describing profile of donating entity.** • **Copy of contract between donating entity and product supplier**		

6.5 Import requirements

6.5.1 All applications once registered and approved shall fulfill the import requirements as assigned by the guidelines of MFDA.

6.5.2 This includes and is not limited to:

a. Tested reports on the DEG/EG for all cold and cough preparation and other preparations as indicated by MFDA.

b. NDMA reports for Ranitidine and its formulations

c. Batch certificates for all IV fluids and biological preparations

d. Export license for all Controlled medicines

7 Types of Application

7.1 New Drug Application / New Chemical Entity Application

7.1.1 The registration of a new active pharmaceutical ingredient that has not been previously approved by the authority and present in the most recent Approved Drug list (ADL), either as a single ingredient drug or as part of a combination product.

7.1.2 These applications will be subject to a high level of scrutiny in terms of efficacy, safety and their contribution to therapeutic improvement.

7.1.3 Only reliance pathways are accepted for these applications

7.2 Generic Drug Application (Generic –Generic and branded -Generic)

7.2.1 The registration of a medicine that has the same active ingredient as the innovator or patented medicine, including dosage and having the same safety, efficacy, stability and quality requirements.

7.2.2 Majority of the applications received falls under this category.

7.2.3 Only Reliance pathways are accepted for Generic-generic application and for high risk Branded generics

7.3 Registration of products that has already been registered by another party.

7.3.1 These are the products that has already undergone full evaluation by assessing the documents submitted as per the criteria defined, by another party.

7.3.2 Application for this shall be limited as already the product has been fully evaluated.

7.3.3 The Applicant shall ensure that exact same product is submitted and also shall submit the Product information for reliance as in Annex III by completing the information in points 2 to 13, 16 to 19, 21 , 24 to 25 and 27.

7.3.4 The applicant shall ensure the safety, quality and efficacy of the product and shall submit batches of tested reports as per the official monogram published from a WHO pre-qualified laboratory for each batch imported. The applicant shall provide evidence documents that the tests done are from WHO pre-qualified laboratories.

7.3.5 With the registration application, the applicant shall submit a declaration, mentioning that the batch tested reports shall be supplied during the import of the product. These tested reports shall be submitted to the ports for every batch that is imported.

7.3.6 Refer to the list of WHO pre-qualified laboratories from: https://extranet.who.int/prequal/medicines/quality-control-laboratories,

7.3.7 The registration period is also 5 years, during which time all imported batches shall be accompanied by the batch tested reports from a WHO pre-qualified laboratory.

7.4 Re-registration/renewal Application

7.4.1 This is the application for a product that has been registered previously under the same criteria set by the authority for medicine registration.

7.4.2 All these registered products will be indicated with the letter "R", in the Approved Drug List. The validity period for the registered product under the previous criteria is 5 years.

7.4.3 Before the expiry of the validity the client shall submit the application for re registration as per the current criteria.

7.4.4 Any product registered and approved under the previous criteria/s shall be considered as **new** registrations and shall follow the new criteria.

7.4.5 Re-registration shall also be considered based on the import of the product during the past 5 years.

7.4.6 Application for renewal of registered product shall be submitted at least 30 days before the expiry date of the current registration validity along with the processing fee.

7.4.7 The general procedure for the renewal of the reregistration is the same as the initial registration.

7.4.8 If the registration of the product is expired and the applicant did not apply for renewal, then product will be removed from ADL within 1 month after the expiry. If the applicant wants to register it again the application will be treated as a new application as per the criteria mentioned in this guideline.

7.4.9 Requirements for re-registration: Table 2 (below)

Table 2: Re-registration Requirements

Registration Pathways			**Re-registration Requirements**	**Assessment duration from the date of receiving the submission fee**	**Registration validity**
A. Reliance	1.1Reliance on approval by reference NRAs	1.1.1 Approved in a Reference NRA	• Updated Product information for reliance as in Annex III • Post approval changes or variations if any. • Evidence of Reference country approval in consistence with the initial registration requirement. Any change in the reference NRA registration shall be provided with justification. • Samples • Compiled Import data for the past 5 years	Calendar 20 days	5 years and no variations except changes in artwork
	1.2 GMP verification	1.2.1 Manufacturing site certified by	• Evidence of PIC/S-GMP compliance for the site where the finished dosage form is	Calendar 20 days	5 years and no variations except changes

		PIC/S member NRA	manufactured • Updated Product information for reliance as in Annex III • Post approval changes or variations in any. • Evidence of approval by the NRA of the country where the finished dosage form is manufactured • Verifiable approvals by at least 3 other NRAs. Which shall be inconsistence with the initial registration. Any change in the reference NRA registrations shall be provided with justification. • NRA website shall verify that the product is registered there even though CoPP is provided. • Samples • Compiled Import data for the past 5 years.		in artwork
		1.2.2 Manufacturing site of a WHO prequalified products	• •Updated Product information for reliance as in Annex III • Post approval changes or variations in any. • Evidence of approval by the NRA of the country where the finished dosage form is manufactured • Verifiable approvals by at least	Calendar 20 days	5 years and no variations except changes in artwork

			3 other NRAs, which shall be inconsistence with the initial registration. Any change in the reference NRA registrations shall be provided with justification. • Samples • Compiled Import data for the past 5 years.		
	1.3 Collaborative registration procedure (CRP)	1.3.1CRP-PQ	• Updated Product information for reliance as in Annex III • Post approval changes or variations in any. • Samples • Compiled Import data for the past 5 years.		
		1.3.2 CRP-SRA	• Updated Product information for reliance as in Annex III • Post approval changes or variations in any. • Samples • Compiled Import data for the past 5 years		
B. Full Dossier	1.Full procedure	1.1 Full dossier	• Product full dossier with the document requirement in section 11.2 • Regulatory status in other countries. • Full ICH M2 and M3 dossier parts. • Updated Product information	Working 90 days + any clock stop required for external expertise	5 years + all variations

			as per the information mentioned in section 12.3 B and Manufacturer information as per section C2 and C3 • Samples • Compiled Import data for the past 5 years		
	1.Notification	These are for low-risk medicines like vitamins and vitamin preparation that are categorized as medicines.	• Evidence of approval by the NRA of the country where the finished dosage form is manufactured and batch release takes place. For this, a link should be provided to trace the evidence or registration or marketing authorization certificate. • Verifiable declaration of regulatory status in at least 3 other NRAs. For this, a link should be provided to trace the evidence or registration or marketing authorization certificate. • Stability study report covering applicable climatic zone as mentioned in section F 2.1, F12, (2.1) and F3 • Samples • Compiled Import data for the past 5 years	Working 60 days	5 years + all variations

7.5 Variation Application

7.5.1 A variation is a change in the dossier of a product that has already been registered and granted Market Authorization (MA) under the criteria set by the authority for medicine registration.

7.5.2 These changes can include a change in label, shelf-life, excipients and stability data.

7.5.3 Any variation to a product that is listed as a primordial product (PP) or Preauthorization required product (PA) in ADL or a product which has not undergone a registration process will not be considered as a variation application.

7.5.4 Variation to a registered medicine can be considered as a new application based on the formulation change, change in the strength of the active ingredient and excipients or any other change as the authority may decide based on the product.

7.5.5 Variation application of any type shall take 30 to 35 working days to process it and be approved.

7.5.6 For details on variations and requirements refer to clause 15 of this document.

8 Conditional Marketing Approval.

8.1 Conditional marketing approval is a fast-track procedure for availability of new medicine and vaccines with a positive benefit-risk balance and has the potential to address unmet medical needs in the country. This program intends to provide a time limited approval to new drugs and vaccines for serious or life-threatening diseases that have no alternative treatments, based on the conditional or special approval in the reference authorities with limited clinical data or less comprehensive clinical data.

8.2 The conditional marketing approval can be converted to full registration based on the submission and review of full data and full registration status in reference countries.

8.3 The National Pharmaceutical Board (NPB) considers application under conditional marketing approval pathway with the intent to provides patients and healthcare professional with faster access to new drug products.

8.4 Application submission and Review Process.

8.4.1 Applicants must justify applicability of conditional marketing approval pathway in the cover letter of registration application, providing brief justification for fulfilling the eligibility criteria for consideration under this non-routine pathway along with the approval status in other regulatory authorities.

8.4.2 The MFDA evaluators will review the application, validate and assesses the application and gives a positive or negative opinion on the application within 120 days, taking into account the urgency and the public health need. Application may be rejected if the benefit-risk ratio is negative.

8.4.3 The applicant must fulfill the specific obligations and conditions attached to the authorization for submission of remaining data on completion of studies.

8.4.4 The MFDA will review the conditional authorization at least once a year, based on the data submitted by the applicant, and decide whether to renew, vary, suspend, or revoke it.

9 Emergency Use Authorization (EUA)

9.1 Emergency Use Authorization (EUA) is grant of conditional registration for a medical product on priority basis during declared health emergency situations.

9.2 As the routine registration regulatory process require complete clinical trials as per international harmonized requirements (like ICH guidelines) which cannot be followed in emergency health situation, thus EUA enables expedited authorization of an unapproved medical product and risk-benefit analysis depicts that its use will be helpful in reducing fatalities / mortality due to instant health emergency.

9.3 The procedure for granting EUA has been adopted by Reference Regulatory Authorities and also recommended by the World Health Organization.

9.4 To obtain EUA, a manufacturer / importer shall submit a request to MFDA with evidence from clinical trials or other adequate and well-controlled clinical investigations or approval of any Reference Regulatory Authority that suggests that the product can be effective in preventing, diagnosing, or treating the serious or life-threatening disease or condition.

9.5 After reviewing such evidence and being satisfied, MFDA may authorize the conditional use of the product under EUA once it is proven that the known and potential benefits outweigh the known and potential risks.

9.6 EUA is a temporary authorization and EUA holder shall continue to collect evidence of the safety, efficacy, and quality of the product along with updated status by Reference Regulatory Authorities and submit such data to MFDA for review and appropriate decision.

9.7 Criteria for consideration of Emergency Use Authorization application

9.7.1 Criteria for consideration of Emergency Use Authorization is as follows:

9.7.1.1 A declaration of a public health emergency by the relevant authorities of Maldives such as pandemics or natural disasters or rare diseases with no approved treatment options or life-threatening diseases with limited treatment options.

9.7.1.2 Medical products already registered by MFDA either cannot be used in prevailing health emergencies in the country or very limited alternative medical products are available for diagnosis, prevention, or treatment of disease.

9.7.1.3 If any Reference Regulatory Authority has registered any medicine for treatment and use in prevailing health emergency which has not been yet registered by MFDA, then MFDA will process case for priority consideration of registration of such medicine and will convene special meetings of National Pharmaceutical Board for priority decision.

9.7.1.4 If any Reference Regulatory Authority has not yet registered any medical products for use in prevailing health emergency but granted Emergency Use Authorization (at least completed or on-going Phase III that clearly demonstrates the safety and efficacy of the product), then these guidelines will enable MFDA to authorize the use of unapproved medical either through verification or Abridged pathway (as the case may be) by following Guidelines for Good Reliance Practices for Regulation of Medicines. Moreover, the applicant has provided sufficient data of demonstrated appropriate efficacy and safety in preliminary trials and risk-benefit analysis allows use of medicinal product with certain conditions.

9.7.1.5 Applicant of EUA (Manufacturer/importer) has adequate plan for monitoring the safety and efficacy of the product i.e. Risk Assessment Plan and Risk Management Plan.

9.8 Procedure for Processing of EUA Applications.

9.8.1 The initiation of the EUA by MFDA is based on the notification of emergency declaration by relevant authorities of Maldives.

9.8.2 Once the relevant authority notifies the nature of health emergency, MFDA will nominate a focal person for coordinating EUA procedures.

9.8.3 Establishment of a dedicated hotline and email address for manufacturers/importers to facilitate EUA submissions.

9.8.4 Focal point will be coordinating all activities regarding EUA application including coordination with stakeholders, Ministry of Public Health, and other government agencies to implement EUA procedures, submission of application by the company, prioritizing product dossier by MFDA, application assessment by Medicine Therapeutic Goods Division, convening of National Pharmaceutical Board and priority decision.

9.8.5 Medicine Therapeutic Goods Division, MFDA shall evaluate all EUA applications and will convey shortcomings (if any) to applicant on priority. After reply of the applicant, Medicine Therapeutic Goods Division will prepare agenda of National Pharmaceutical Board meeting and will mention all details of application, assessment report and any other relevant information in agenda for the consideration of National Pharmaceutical Board.

9.8.6 The National Pharmaceutical Board may co-opt relevant experts (if needed) like experts in pharmaceutical and vaccine regulation and manufacturing, medical experts, epidemiologists, clinical and pharmacovigilance experts etc.

9.8.7 National Pharmaceutical Board may exempt any requirement in registration application which in its opinion cannot be fulfilled in such health emergency situations and it has no or very limited impact or can be confirmed by MFDA through some other means like online data or communication with another NRA via email etc.

9.8.8 An EUA will only be granted if MFDA, after complete review, finds that the product meets all the applicable criteria of safety, efficacy, and quality. In the event of approval, letter will be issued immediately.

9.9 Process Timeline

9.9.1 Applications for pharmaceutical products during health emergency fulfilling conditions get priority review in 07 working days after complete application received.

9.10 EUA Validity

9.10.1 Emergency Use Authorization will be reviewed by the National Pharmaceutical Board every three months based on available safety, efficacy and quality data. Thereafter, the applicant will be required to submit the applicable data as per the routine registration pathway for conversion to full registration status and renewal accordingly.

9.11 Data Requirement for EUA

9.11.1 The minimum requirement for registration of drug products, biological and vaccines will be as specified in the Guidelines for regulation requirement for product registration and approval of vaccine in emergency (Doc Number: MTG/RE-LA/STD-TE 003) or as determined by National Pharmaceutical Board on case-to-case basis.

9.11.2 All Applications for registration in Maldives are accepted if only the product is categorized as a medicine or vaccine in the country of origin.

10 Pre-Application Process for product registration.

10.1 Applicants for Product Registration.

10.1.1 For registration of a product in Maldives, the manufacturing company shall have a local representative, or a locally incorporated company authorized by the manufacturer or Marketing Authorization Holder in the country of origin, who will be responsible for all the communications to the Authority. The local representative or the applicant shall have a valid medicine import license as per the criteria defined by the Authority.

10.1.2 The local representative and the applicant can be the same, but local representative or applicant shall be a Maldivian National.

10.1.3 It is the responsibility of the assigned local representative to furnish all the information required for product registration and all supporting documents as defined by the Authority and ensure that these documents are legitimate and valid.

10.1.4 Applicant/local representative shall verify that all the required documents are submitted by using the checklist provided in Annex-V or Annex VI to facilitate the acceptance of the documents for registration.

10.1.5 This Application Checklists mentioned in 10.1.4, shall be used to ensure the submission of a complete application.

10.1.6 Please note that not all documents mentioned in the checklist are mandatory and the required documents is dependent on the type pf application and the Pathway the product is applying under.

10.1.7 All documents required shall be submitted in coloured softcopy via Dhirithi portal. However, MFDA reserves the rights to request for the original or certified true copy of submitted documents if there is any doubt that a submitted scanned document is not an accurate reflection of the original document.

10.1.8 The initial acceptance of the application after screening does not ensure that all information provided are within the acceptance criteria. MFDA has the right to requests for additional documents or changes to the information/documents during evaluation.

10.1.9 This check list shall be filled and uploaded in excel format to Dhirithi Portal with relevant documents based on the registration pathway. (This form can be retrieved in Dhirithi Portal under publication).

10.1.10 If any section within the criteria of the form left unfilled, or/ and a mandatory document and the required information is not submitted, MFDA will reject the application.

10.1.11 The Authority may request additional information not described in this document that is deemed necessary to ensure the safety, efficacy and quality of the product. This will be informed by the Authority as a written request to the applicant or the local representative.

10.2 Responsibilities of Applicants.

10.2.1 The manufacturer in the country of origin, shall designate a local representative by issuing an authorization letter to MFDA, indicating that all responsibilities in communicating on behalf of the manufacturer shall be done by the local representative to the Authority which includes supplying all the relevant information for product registration.

10.2.2 The designated or assigned local representative can then take responsibility as the applicant in supplying the required information to the authority for the registration procedure.

10.2.3 The key responsibilities of applicants are as follows:

1. The applicant shall be registered as an authorized medicine importer under the Authority as per the criteria of medicine regulation.

2. The person or an authorized representative established in Maldives, shall take full responsibility of the medicine that they supply to the market, which includes, informing the authority of any variations in the product after issuance of MA, recalling the registered medicine if required, and providing PSUR's if needed. It is the responsibility of the applicant or MAH of the product to ensure that the medicine complies with the specification as approved by MFDA throughout the supply chain. The evidence of these shall be documented with the applicant and shared with the authority when needed.

3. The applicant shall have an established system for reporting and handling adverse drug reactions and for these focal points shall be identified and documented. The focal point shall closely liaise with the authority and shall provide the needed information to the authority. This system shall include market safety information of the drug product as well.

4. The Applicant or the MAH shall have a list of suppliers and manufacturers through which the medicines are imported. It is the responsibility of the Applicant to validate and verify the authenticity of the suppliers and notify MFDA when required.

5. It's the applicant's responsibility to provide the required information for registration and re-registration with in the required time lines.

6. The re-registration shall be submitted 30 days before the expiry of the product

7. It's the applicant's responsibility to ensure that the exact same product from the exact same site as registered, is imported to Maldives

11 Pre-Approval Process

11.1 General Considerations

11.1.1 All documents submitted for registration purpose shall be in English language and shall be signed and endorsed.

11.1.2 All electronic documents submitted shall be signed and endorsed unless such documents can be verified by the regulatory authorities.

11.1.3 The documents required for the registration of a product differ according to the Registration pathways as described in Table 1 of this document.

11.1.4 The acceptance criteria of each document are indicated below in Clause 11.2 for full dossier. Any application with missing documents or documents that do not meet the criteria set will be rejected.

11.1.5 The reason for the rejection will be indicated in the Dhirithi portal for the applicant to see.

11.1.6 A separate application is required for each drug product i.e., products containing the same ingredients but made to different specifications in terms of strength, content of API/DS, dosage form, description and pack size etc.

11.1.7 For tablets and capsules if it undergoes the same production and packing process under the same quality assurance system, it will be considered as a one drug product regardless of its pack size. Example: A having 12 tablets per strip and 10 tablets per strip will be considered as one product if the product undergoes the same process and has the same labelling information on the product.

11.1.8 MFDA shall reject the applications which do not fulfill the criteria as per applicable guidelines.

11.2 Data Requirement and Acceptance Criteria for full Dossier Preparation.

11.2.1 The table below contains a list of documents and required data in a full dossier along with the information that shall be included in each document for it to be accepted by the Authority.

11.2.2 As all applications do not require a full dossier, to determine the type of dossier application and the required documents, refer to Table 1 of this document to determine product application category and registration pathways.

11.2.3 The codes and document title stated under column-I and II respectively in the following table are consistent as they appear on the Dhirithi portal for ease of interpretation.

Code	Document Title	Acceptance Criteria
B	**Pharmaceutical Information Sheet**	The pharmaceutical information shall be supplied by the manufacture with signed and endorsed including the following information: **a. API information:** Shall include the API information as per one of the following criteria: i. Confirmation of API Prequalification document (CPQ) as specified in Annex-IX ii. Certificate of suitability of the European Pharmacopoeia (CEP) as specified in Annex-X. iii. Technical Information on the active pharmaceutical ingredient/s as specified in Annex-XI **b. Brand name, Trade name or Product name:** Shall provide this information in the format as provided by the manufacturer i. The product name shall be entered according to the submitted product label and shall be same with the product name mentioned in submitted Certificate of Pharmaceutical product (CoPP). ii. The strength of the active pharmaceutical ingredient / Drug substance shall generally be included as part of the product name to allow differentiation between different products containing the same active pharmaceutical ingredient / Drug substance. **c. International Nonproprietary Name (INN)** or the Active Pharmaceutical Ingredient (API) or Generic name: Shall provide the information with the details as mentioned below: i. The name and amount of active pharmaceutical ingredient(s) / Drug substance(s) present in the formulation and in the form of salts or chelates shall be clearly stated. Example: *Each film*

Code	Document Title	Acceptance Criteria
		coated tablet contains Calcium carbonate equivalent to elemental calcium 500mg. ii. If more than one active ingredient is present in the preparation, it shall be separated by a + between each active ingredient. *Example.: Calcium carbonate 500mg + Docosahexaenoic Acid 150mg+vitamin D3 200IU* **d. Non-active ingredient or Excipient**: Shall provide these details as mentioned below: i. All non-active ingredients and all proprietary ingredients (e.g., colorants, flavoring agents, etc.) used in the product shall be mentioned with the composition with the grade of the excipients. ii. In case of cough and cold preparations and paracetamol preparations, the exact grade of the excipients shall be mentioned with supporting documents. iii. For all the pediatric oral formulations including cough, cold, and paracetamol formulation the certificate of analysis (COA) shall be submitted for all the excipients used, specifically if glycerin or glycerol or propylene glycol or high risk excipients for DEG/EG is used, verifying that it does not contain the impurities diethylene glycol (DEG) and ethylene glycol (EG).Refer to Annex IV for the list of Excipients of high risk of contamination with DEG/EG iv. Manufacture validation protocols of the excipients shall be submitted specifically those that are at a risk for diethylene glycol (DEG) and ethylene glycol (EG) contamination. For such excipients each container of the excipients shall be tested for purity and validity and evidence documents shall be submitted. v. The test mentioned in point 4 of the clause shall be as per the official monogram for purity.

Code	Document Title	Acceptance Criteria
		vi. Registration holder will ensure that the manufacturer will perform impurity testing as identified by the manufacturer of innovator drug product like N-Nitroso dimethylamine (NDMA), N-Nitroso diethylamine (NDEA) in valsartan, metformin etc. **e. Pharmacopeia standard / Formulation of the product:** Shall provide the details as mentioned below i. All Active pharmaceutical ingredient(s) / drug substance(s) and all excipients in the product shall be listed with their Pharmacopeia standard i.e., British pharmacopeia (BP), US pharmacopeia (USP) or Indian pharmacopeia (IP) or any pharmacopeia of stringent regulatory authorities. ii. If there is no pharmacopeial formulation as mentioned in point 1), method validation report of the in-house method shall be provided which has to be endorsed by a third party. The third party can be an accredited laboratory, regulatory authority or any other external or internal assessment body as nominated by the Authority. **f. Pharmaceutical Dosage Form**: Pharmaceutical dosage form is defined as the physical form of the drug product which is intended for administration to the patients: i. Dosage form shall be as specific as possible with respect to the product's actual dosage form. *Example: Film-coated Tablet instead of Tablet, sustained release tablets instead of tablets*. ii. In certain cases, the dosage form may also include information about the container closure system. *Example: pre-filled syringe, spray pump and pressurized container*. **g. Strength:** Strength is defined as the amount of active pharmaceutical ingredient(s) / Drug substance(s) in the dosage form. Strength shall be provided for all APIs/DS including if the

Code	Document Title	Acceptance Criteria
		product is a combination drug. Each strength shall be separated with a "+" Example.: 500mg + 250mg **h.** Volume of the preparation: Applicable for liquid and semi solid dosage forms like oral liquids, injectables, creams and ointments etc and the volume shall be clearly mentioned as follows: i. Volume is not applicable for Tablet and capsules ii. For semi-solid dosage forms (i.e., ointments, pastes, cream, gels), liquid dosage forms (i.e., suspensions, syrup, liquid for injection), powders, suppositories and MDI's, volume shall be indicated as per product label. **i. Product description, Container type and Pack sizes**: shall provide this information: i. Description of primary packaging shall be defined with the pack size. *Example blister pack of 12 tablets* *ii.* Description of secondary packaging shall be defined with the pack size. Example *12 tablet blister pack of 10 blisters equal to total 120 tablets in 1 box* iii. Length, width, height of primary and secondary packaging shall be provided in detail. iv. Weight of drug product which is submitted for registration and shall also indicate the deviation level for the weight. v. Odor description of the product submitted for registration shall be submitted. vi. A visual description of the product shall be submitted including the shape, size, color any engraving or any other detail of the product. vii. Preparations whose primary packing is plastic or if the

Code	Document Title	Acceptance Criteria
		preparation comes in direct contact with the plastic container shall provide studies on such containers to demonstrate the safety of the material used to the preparation. **j. Route(s) of Administration:** All routes of administration proposed for the product shall be included and specified accordingly. **k. Indication or Use of the product:** The intended use or the indication of the product shall be clearly specified. *Example: Used for upper respiratory infections* **l. Therapeutic Class** according to WHO ATC Index shall be indicated with: i. The WHO ATC code ii. WHO ATC classification iii. Shall be provided for each therapeutic indication proposed for a product. **m. Storage conditions** of the product shall be provided: i. The condition in which the drug product shall be stored and kept shall be clearly specified. Example temperature, humidity etc. Of the product storage shall be specified ii. Non-numeral statements such as *"Store in a cool dry place"* is not encouraged. **n. Shelf life of the product:** The shelf life is the period between the execution of the preparation and its expiry date. Product Shelf life shall be specified in months. **o. Dispensing Category** in country of origin shall be specified. If the product is a prescription only medicine (POM), over the counter (OTC), Hospital use etc shall be defined as per the registration of the product in the country of origin

Code	Document Title	Acceptance Criteria
C2	**Manufacturer responsible for lot release of the Finished Product**	i. Full address of the manufacturer(s) shall be provided with site and country of origin including the phone number, fax, e-mail. ii. Contact details of the manufacturer(s) shall be provided that can be reachable if needed. iii. This contact shall provide further information and verification if needed by the authority and shall be responsive to the queries sent by the authority.
C3	**Manufacturer responsible for packaging / final** batch **release of the Finished Product, if different.**	i. Full address of the manufacturer shall be provided with site and country of origin including the phone number, fax, e-mail. ii. Contact details of the manufacturer shall be provided that can be reachable if needed. iii. This contact shall provide further information and verification if needed by the authority and shall be responsive to the queries sent by the authority.
C4	**Manufacturing License**	A manufacturing license is a permit issued by the regulatory authority of the country of origin to manufacture drug product. i. The manufacturing license shall be at least 6 months valid at the time of submission. ii. The manufacturing license shall contain date of issue, expiry, identity of issuing authority, the activities or the products covered under the license and full manufacturing site address. iii. The manufacturing license shall be self-attested and notarized copy.
C61	**Valid GMP certificate**	Good Manufacturing Practices (GMP, also referred to as 'cGMP' or 'current Good Manufacturing Practice') is the aspect of quality assurance that ensures that medicinal products are consistently produced and controlled to the quality standards appropriate to their intended use and as required by the product specification.

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		GMP defines quality measures for both production and quality control and defines general measures to ensure that processes necessary for production and testing are clearly defined, validated, reviewed, and documented, and that the personnel, premises and materials are suitable for the manufacturing of pharmaceuticals and biologicals including vaccines. GMP also has legal components, covering responsibilities for distribution, contract manufacturing and testing, and responses to product defects and complaints. Following documents related to GMP need to be provided. i. Proof of GMP compliance (valid GMP certificate) shall be submitted for all the sites involved in any step of manufacturing of the product ii. A color scanned copy of the original or certified true copy of GMP certification document issued by the relevant drug regulatory agency shall be submitted, certifying that the manufacturer concerned complies with current applicable GMP standard. iii. GMP Certificate shall have the following information; date of issue, identity of issuing authority or agency approving GMP certificate, validity of the GMP, manufacturing site address and dosage forms of productions. iv. GMP Certificate shall have the validity of 6 months at the time of submission. v. However, if the validity remains for 3 months at the time of submission the dossier will be accepted and processed. Nevertheless, the registration certificate will be issued upon submission of the renewed GMP. If failed to submit the renewed GMP within 6 months application will be rejected. vi. If the validity period or expiry date is not stated on the GMP Certificate, the applicant shall supply supporting documents

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		to confirm the validity period of the GMP certificate. vii. Commitment letters of GMP renewal are not accepted. viii. The names and addresses of manufacturer(s)/repacked(s)/batch releaser(s) shall be consistent with the information provided in the GMP certificate ix. The specific dosage form applied for registration shall be mentioned in the GMP x. The applicant shall submit with valid GMP certificate, the most recent GMP inspection report or a summary of the inspection report endorsed by the inspection authority.
C7	**Proof of Validation of the Manufacturing method**	As per ICH recommendations, copies of the validation process of Manufacturing method shall be provided including: i. Short description of the process with a summary of the critical processing steps or critical process parameters to be monitored during validation. ii. API /DS validation report iii. Excipients validation report iv. Finished product specification report v. Finished product specification report, specifically tested for Diethylene Glycol and Ethylene Glycol impurities in oral cough and cold preparations vi. Details of analytical methods vii. In-process controls proposed with acceptance criteria viii. Additional testing intended to be carried out (e.g., with proposed acceptance criteria and analytical validation as appropriate) ix. Sampling plan - where, when and how the samples are taken x. Details of methods for recording and evaluation of results

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		xi. Proposed timeframe. xii. Any variation from the validation protocol shall be documented with appropriate justification xiii. Following completion of the validation, a report containing the following information signed by the authorized person shall be provided: • Batch analytical data • Certificates of analysis • Batch production records • Report on any unusual findings, modifications or changes found necessary with appropriate rationale • Report of the validation studies shall be submitted with a conclusive statement of the results, comments on any deviations observed, including recommending changes to correct deficiencies. xiv. Refer to ICH Quality Guidelines Q7 Good Manufacturing Practice Guide for Active Pharmaceutical Ingredients Section 12 for further reference.
C8	**Standard Batch size Quantity**	i. Shall submit the information specifying Label claim, Batch size, Quantity of all active ingredients and excipients per batch and per dosage form at relevant stages of manufacture, Overages and other adjustments with justification ii. For multiple batch sizes, the batch formula for each batch size is to be provided
C9	**Technical Specification and source of all material(s)**	**Technical specification of all excipients and API(s) shall be provided indicating the pharmacopeial specification followed:** i. Specification provided shall be consistent with label claim ii. Certificate of analysis (CoA) of all ingredients (APIs/DS and excipients) shall be provided along with specifications iii. The quality of the ingredients used in the production of the drug substance (or drug product) shall meet standards appropriate

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		for their intended use. iv. The quality of the excipients used in the drug product formulation (and in some cases, in the drug substance), as well as the container/closure systems, shall meet pharmacopeia standards, where applicable and suitable acceptance criteria shall be established for the non-pharmacopeial excipients. v. Information on measures taken to ensure the quality and control of these materials shall be provided. vi. Source(s) of all excipients and API/DS shall be listed and the origin or source of the API/DS and excipients shall be approved by the manufacturer and this document shall be provided. vii. Shall submit documents stating that all excipients used are of pharmaceutical grade or grade approved for manufacturing the pharmaceutical product. viii. A signed `statement shall be provided by the manufacturer indicating that all excipients and API(s)/DS are obtained through approved vendor(s) in the country of origin. ix. The manufacturer shall submit document evidence on how vendor assessment is done for API/DS and excipients.
C10	**Brief profile of Manufacturer(s)**	i. A brief description of the manufacturer, when it was established and the products approved / manufactured shall be submitted. ii. Shall Provide a short description of accreditations, achievements and standards practices of the manufacturer. iii. Shall Provide list of products manufactured and specify those currently marketed in the country of origin. iv. Shall provide a list of products manufactured and exported to other countries, specifying which products are exported to which country.
CM1	**Company profile**	i. Shall include a detailed profile of the company including but not

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		limited to history, accreditations, and standards practices and international/national levels of recognition achieved, company information, staff, organizational chart, equipment used, quality control procedures used, etc for all new companies/applying first time to MFDA. ii. A detailed Company profile is not required for companies that already have a drug product(s) registered in Maldives. iii. For all new sites involved in any step of manufacturing also require company profile documentation. iv. Company profile is also required in instances of a major change brought to a company that has previously registered a product in Maldives v. Shall also state whether the company is manufacturing under loan license or not. If so, shall include all details of loan manufacturer including regulatory details of approving NRA.
C11.0	**Manufacturing plant layout and machinery involved**	i. Shall include a list of equipment which is relevant to the product under application along with details of water treatment, HVAC and waste disposal systems. ii. Manufacturing plant lay-out shall be clear, legible and relevant to the product under application
C11.1	**Manufacturing and Packaging process**	i. Process flow chart of the whole process of the manufacturing of the product shall be provided identifying the critical control points at every stage ii. Manufacturing monograph shall be provided iii. An executed Batch Manufacturing Record for the product under application shall be provided
C12	**List of personnel, their responsibilities and**	1) Name, qualification and experience (in years) of the authorized key personnel shall be provided including:

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	qualifications	• Head of Quality assurance, Quality Control, Storage and production etc., where possible shall provide signatures of the personnel • All such Information shall be up to date.
C13	**Letter from Manufacturer to MFDA**	The manufacture shall submit a letter to the authority identifying the responsible local representation for the product and this letter shall contain and not limited to: i. Manufacturer details ii. The name and address of local representative authorized to apply for product registration on the manufacturer's behalf iii. Product details iv. Name, designation and signature of the authorizing personnel of the manufacture
C14	**Regulatory decisions taken on this Finished Product from any drug regulatory authorities**	i. A formal, signed statement from the manufacturer and/or MAH is required stating that no regulatory actions such as recalls, bans or alerts have been issued for any batches of the product under applications by any National Regulatory Authorities including that of the country of origin. ii. If any actions as such have been taken by any National Regulatory Authorities regarding product quality, safety and/or efficacy, shall please provide full details with the endorsed statement of how the issue was resolved.
D3	**Certificate of a Pharmaceutical Product (CoPP)**	i. CoPP shall be in the format of the WHO Certification Scheme on the Quality of Pharmaceutical Products. ii. A color scanned copy of the original or certified true copy of CoPP certification document issued by the relevant drug

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		regulatory authority of the country of origin shall be submitted which necessarily does not require to be country specific iii. CoPP shall have the following information: • Date of issue • Expiry date • Product name • Label claim • Excipients (preferred) • Name and address of Manufacturer • Registration status in exporting country • Market availability of product in the exporting country • Name and address of issuing authority iv. CoPP Certificate shall have validity of 6 months from the time of submission of the application v. If the certificate is nearing its expiry, evidence of application or under process letter for renewal issued by the same licensing authority shall be submitted along with the current CoPP. vi. If the expiry of the CoPP is not mentioned in the certificate, evidence document shall be submitted for assurance of the validity
D4	**Registration status of Finished Product in countries other than country of origin**	A list of countries in which the product is registered, including the country of origin, shall be provided along with registration number and date of issue. For this purpose, preferably a weblink shall be provided with the documents for further verification.
D5	**Proof of registration of the Finished Product in Reference regulatory authority/ies**	i. This document shall be mandatory when applying under the criteria as mentioned in table 1 of this document. ii. This document shall have the same product as that of the product under application iii. For ease of application, a registration certificate of the product or preferably a weblink shall be provided for verification. If the documents are not in English an official, signed and endorsed

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		translation shall be provided.
E2	**Copy of the Finished Product specification**	i. The finished product specification report shall be based on a reference to an official monograph and if an in-house method is used it shall be endorsed by a third party. The third party can be an accredited laboratory, regulatory authority or any other external or internal assessment body notified by the authority. ii. As per ICH recommendations, finished product specification shall include the following information: * a. Description: a qualitative statement about the state (e.g., solid, liquid), shape and color of the drug substance b. Identification: Identification tests shall be specific for all API(s)/DS. c. Assay: A specific, stability-indicating assay to determine strength (content) in % shall be included for all active pharmaceutical Ingredient(s)/DS. d. Impurities and related substance: Acceptance limits shall be stated for specified degradation products, which may include both identified and unidentified degradation products as appropriate. e. Water content. f. Dissolution. g. Uniformity of dosage units. h. Microbial limits. i. All tests shall specify the pharmacopeial standard used j. Shall include reference pharmacopeial standard used for finished pharmaceutical product (FPP) **Please note the tests can vary based on the type of dosage form and additional tests/criteria shall be included in the specification when the tests are relevant to the quality of the drug substance.* Refer to ICH Quality Guidelines Q6A-Q6B Specifications.
E5	**Certificate of Analysis for batch release/ Certificate of Analysis of Finished Product**	i. This certificate shall be a notarized true copy ii. This certificate shall contain the following information: • Name and address of the certifying/notarizing authority • Batch details

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	(CoA)	iii. Batch analyses data from a minimum of 2 batches shall be submitted for the product submitted for registration. iv. Shall include a conclusion specifying that the product is in compliance. v. CoA should include result data, reference range and pharmacopeial references for each test parameter. For non-pharmacopeial test parameter, analysis of the samples will be performed using the analytical method and specifications as per validated method of analysis.
F. 2.1	**Real-Time Stability Data**	1) **Stability** is the ability of a drug product to retain its chemical, physical, microbiological and biopharmaceutical properties within specified limits throughout its shelf-life. 2) **Stability tests** are a series of tests designed to obtain information on the stability of a drug product in order to define its shelf-life and utilization period under specified packaging and storage conditions. 3) **Real-time (long-term) stability studies** refers to experiments on the physical, chemical, biological, biopharmaceutical and microbiological characteristics of a drug, during and beyond the expected shelf-life and storage periods of samples under the storage conditions expected in the intended market. The results are used to establish the shelf-life, to confirm the projected shelf life, and to recommend storage conditions. 4) For registration of the product, the authority shall require the manufacturer to submit information on the stability of the product derived from tests on the final dosage form in its final container and packaging. The data submitted is obtained from both accelerated and real-time studies. Published and/or recently obtained experimental supporting stability data may also be submitted, e.g.

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		on the stability of active ingredients and related formulations. 5) Both Real time and accelerated stability data shall be submitted separately. 6) The objective of stability testing is: 6.1 To select adequate (from the viewpoint of stability) formulations and container closure systems. This is done during the development stage of the product via accelerated stability testing 6.2 To determine shelf-life and storage conditions of the product. This testing is done during the development of the product and for the registration dossier via both Quality assurances in general, including quality control 6.3 To substantiate the claimed shelf-life of the product. This is done for Registration dossier and is done via real time stability testing. 6.4 To verify that no changes have been introduced in the formulation or manufacturing process that can adversely affect the stability of the product. This is done for quality assurance of the product process including quality control and this is done via both Quality assurance in general, including quality control 7) Where the product is to be diluted or reconstituted before being administered to the patient (e.g. a powder for injection or a concentrate for oral suspension), "in use" stability data must be submitted to support the recommended storage time and conditions for those dosage forms. 8) The design of the stability testing program shall take into account the intended market and the climatic conditions in the area in which the drug products will be used. As per ICH zones, following climatic zones are distinguished for the purpose of worldwide stability testing, as follows:

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		• Zone I: Temperate. • Zone II: Subtropical, with possible high humidity. • Zone III: Hot/dry. • Zone IV A: Hot humid / Tropical • Zone IV B: Hot/Higher humidity 9) In a stability study, the effect on the product in question of variations in temperature, time, humidity, light intensity and partial vapors pressure (in special cases) are investigated. The effective or mean kinetic temperature therefore reflects the actual situation better than the measured mean temperature; a product kept for 1 month at 20°C and 1 month at 40°C will differ from one kept for 2 months at 30°C. Moreover, the storage conditions are often such that the temperature is higher than the average meteorological data for a country would indicate. 10) For registration purposes, test samples of products containing fairly stable active ingredients shall be taken from two different production batches, in contrast, samples shall be taken from three batches of products containing easily degradable active ingredients or substances on which limited stability data are available. The batches to be sampled shall be representative of the manufacturing process, whether pilot plant or full production scale. Where possible, the batches to be tested should be manufactured from different batches of active ingredients. 11) Detailed information on the batches shall be included in the test records, namely the packaging of the drug product, the batch number, the date of manufacture, the batch size, etc. 12) For products containing new APIs/DS, data from stability studies shall be provided on at least three primary batches. Two of the three batches shall be at least pilot-scale batches and the third batch can be smaller (one tenth of full production scale or 100 000 tablets or capsules, whichever is the larger, if justified.

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		13) For products containing existing APIs (e.g., generics), data shall be provided on not less than two batches 14) Long term or Real-time stability data shall be provided for the duration of the proposed shelf life of the product with storage condition of 25 °C ± 2 °C/60% RH ± 5% RH or 30 °C ± 2 °C/65% RH ± 5% RH or 30 °C ± 2 °C/75% RH ± 5% RH. 15) Accelerated Stability Data shall be provided for minimum 6 months with storage condition of 40 °C ± 2 °C/75% RH ± 5% RH 16) For products intended for storage in a refrigerator (2-8°C): • Long term stability data shall be provided for the duration of proposed shelf life with storage condition of 5°C ± 3°C • Accelerated Stability Data shall be provided for minimum 6 months with storage condition of 25 °C ± 2 °C or 30 °C ± 2 °C 17) For products intended for storage in a freezer: • Long term stability data shall be provided for the duration of proposed shelf life with storage condition of –20 °C ± 5 °C • Accelerated Stability Data shall be provided for minimum 6 months with storage condition of 5 °C ± 3 °C. 18) The testing shall cover, as appropriate, the physical, chemical, biological and microbiological attributes, preservative content and functionality tests (e.g., Appearance, Average weight, Disintegrating time, pH, Dissolution time, Relative substance, Microbial Limit test and Assay) 19) Analytical procedures shall be fully validated including: • The orientation of the product during storage, i.e., upright, on the side or inverted, where relevant. • Date started and end date (Manufactured date/ Expired date) Signature of quality control • Packaging of the product 20) It is mandatory to include a conclusion statement in both real time

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		and accelerated stability data indicating that the stability data is acceptable for the specific climate zone. 21) Stability data submitted to this authority for registration purpose must not be more than 5 years after the completion of the study. 22) However, stability studies can be accepted beyond this period if there is no change in the shelf life of the product. For this the applicant shall provide a declaration from the manufacturer. *****The results shall be presented in an appropriate format such as tabular, graphical, or narrative description.***
F12 (2.1)	**Accelerated Stability Data**	1) **Accelerated stability testing** refers to studies designed to increase the rate of chemical degradation and physical change of a drug by using exaggerated storage conditions as part of the formal stability testing programme. The data thus obtained, in addition to those derived from real-time stability studies, may be used to assess longer-term chemical effects under non-accelerated conditions and to evaluate the impact of short-term excursions outside the label storage conditions, as might occur during shipping. The results of accelerated testing studies are not always predictive of physical changes. **Accelerated stability tests** provide a means of comparing alternative formulations, packaging materials, and/or manufacturing processes in short-term experiments. As soon as the final formulation and manufacturing process have been established, the manufacturer carries out a series of accelerated stability tests which will enable the stability of the drug product to be predicted and its shelf-life and storage conditions determined. Real-time studies must be started at the same time for confirmation purposes. Suitable measures should be

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		taken to establish the utilization period for preparations in multidose containers, especially for topical use.
F3	**Stability Report and statement**	1) A brief summary of stability report shall be established and shall be submitted with the dossier giving details of the design of the study, as well as the results and conclusions. The stability of a given product, and therefore the proposed shelf-life and storage conditions, must be determined on the basis of these results 2) An official statement issued by the manufacturer that all stability tests are performed of the same formula, manufactured at the same site(s) and packed in the same packing material as the product shall be provided with the dossier. This statement shall be signed and endorsed by the manufacturer.
G1 (1.1)	**In vivo Bioequivalence Study** **Required for all immediate release oral solid dosage forms only (i.e., tablets, capsules)**	The Bio equivalence study is the comparative analysis between the innovator or comparator or reference drug product with that of the product submit for registration to assure that the product submitted for registration can show the same efficacy as that of the innovator or comparator or reference drug product. 1.The reference product used in the BE study shall be: • An innovator drug OR • A similar drug product with existing BE studies against an innovator drug** **If reference product is not an innovator product, proof shall be provided that the reference product used in study has established bioavailability comparative to the innovator drug product 2.The study report shall contain the following information:

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		• Information about the reference and test products, such as the product name, strength, dosage form, batch number, manufacturing site, batch size of the test product, etc. The reference product shall have the exact same strength and in the exact same formulation the product submitted for registration. • Certificates of Analysis of the reference and test products used in the BE study, including the batch size of the test product and manufacturing/expiry date of both products (where applicable) • Bioanalytical study report summary and description of the bioanalytical method validation 3. A complete bioequivalence study report including all appendices and data and conclusive statement of the end results shall be provided. 4. A signed statement confirming that the test product used in the BE study is the same formulation and is manufactured by the same process as the product submitted for registration shall be provided
		5. Bio waiver requests: • The biopharmaceutics classification system (BCS) classified APIs into the following groups based on level of solubility and permeability. • BCS class I HIGH solubility and HIGH permeability • BCS class II LOW solubility and HIGH permeability • BCS class III HIGH solubility and LOW permeability • BCS class IV LOW solubility and LOW permeability • As per criteria set by WHO, products containing API's belonging to BCS class I and BCS class III qualify for a BCS-

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		based biowaiver request, provided that the following criteria is met and surrogate information is submitted. 6. Criteria for biowaiver** • The API shall belong to BCS class I, or BCS class III. • The product shall not be a narrow therapeutic index (NTI) drug. **Please note that biowaivers submitted for pharmaceutical products that do not fit the criteria described will not be accepted even if a comparative dissolution profile is provided. 7. Data to support requests for biowaiver. • Data supporting high solubility of product • Data supporting high permeability of product 8. A satisfactory dissolution study with reference product as per criteria described below: • Demonstrate that the excipients used are well-established and do not alter the pharmacokinetics of API. 9. Bio waiver request for multiple strength product • If the test product used in the BE study is of a different strength from that proposed for registration, a signed statement confirming that the test product used in the BE study has the same qualitative composition and quantitatively proportional composition and is manufactured by the same process as that proposed for registration shall be submitted. 10. Additional justifications and relevant supporting documents for bio waiver requests shall be submitted if requested by the authority. 11. A statement signed and endorsed by the manufacturer shall be submitted stating the conclusion of the bioequivalence study

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		indicating that the product applied for registration is bioequivalent to the innovator or the reference product
G1 (1.2)	**In vitro Dissolution Test**	1. The dissolution profiles shall be submitted by following the method described in the monograph of the relevant pharmacopoeia. **2.** If in-house method is used it shall be endorsed and validated by a third party. The third party can be an accredited laboratory, regulatory authority or any other external or internal assessment body as nominated by the Authority. **3. The following data shall be submitted:** 4. Information about the reference/innovator/comparator drug product and test products, such as the product name, strength, dosage form, batch number, manufacturing site, batch size of the test product, etc. **5.** The dissolution apparatus, media, results and the conditions at which it is operated shall be specified and in accordance with an established pharmacopeia dissolution test guideline. (e.g. European Pharmacopoeia (Ph. Eur.), United States Pharmacopeia (USP) etc.). 6. The reference/innovator/comparator drug product shall have the exact same strength and in the exact same formulation the product submitted for registration. • A complete Dissolution study report including all appendices and data and conclusive statement of the end results shall be provided. • A statement signed and endorsed by the manufacturer shall be submitted stating the conclusion of the dissolution study indicating that the product applied for registration is in compliant with the requirements stated.
H5	**Product Label/Packing**	**1. Product label shall contain the following information;** • Brand name, Generic name, strength and dosage form • Full manufacturing site address of the product.

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	insert	Exemptions: In case the manufacturer is not defined in the label, a specific code (bar code or QR code) shall be in the label to trace the manufacture name and address, and this shall be same as with the submitted document. • Direction for use • Special precaution if applicable • Shelf life • Storage condition • Shall be submitted in English. **2. The draft artwork of the outer carton labels shall be in the actual format, design and colour that are to be printed.** **3. Separate labels shall be submitted for each pack size of the product.**
		4. **Packing insert/Patient leaflet criteria: Packing** insert/ Patient leaflet/ SmPC shall be clear, concise and shall contain the following information: • **Name of the product:** The brand name shall be followed by both the strength and the pharmaceutical form. • The International Nonproprietary Name (INN) or the usual common name of the API/DS shall be used when referring to properties of the active substance(s) rather than the brand name. • **Strength:** The strength shall be the relevant quantity for identification and use of the product and shall be consistent throughout other sections of the packing insert/patient leaflet • **Pharmaceutical form/Dosage form:** The dosage form of a product shall be described by a single full standard term according to the relevant pharmacopeia used. • **Composition:** Full details of the qualitative and

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		quantitative composition in terms of the APIs/DS shall be provided as a separate subheading qualitatively and quantitatively. • The active substance shall be written in its recommended INN, accompanied by its salt or hydrate form if relevant. • The quantity of the active substance shall be expressed per dosage unit and in an internationally recognized standard term. • **Indication:** The indication(s) shall be stated clearly and concisely and shall define the target disease or condition distinguishing between treatment (symptomatic, curative or modifying the evolution or progression of the disease), prevention (primary or secondary) and diagnostic indication. • Where required, it shall define the target population especially when restrictions to the patient populations apply. • It shall be stated in which age groups the product is indicated, specifying the age limits • **Dosage:** The dosage shall be clearly specified for each method/route of administration and for each indication, as appropriate. • Dosage adjustments or other posology related information in specific patient groups shall be stated where necessary, in well-defined sub-sections, e.g. elderly population, renal impairment and other relevant special population • If the product is indicated in the pediatric population, dosage and administration recommendations shall be

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		given for each of the relevant subsets • If there is no indication for the product in some or all subsets of the pediatric population, no dosage recommendation can be made, but available information shall be provided using the following standard statements such as *"No data are available"* or *"The safety and efficacy of the product in children aged x to y has not been established"* • **Administration:** The route of administration and concise relevant instruction for correct administration and use shall be given here. Information on instructions for preparation or reconstitution shall be provided • Any specific recommendation for use related to the dosage form shall be explained e.g., Tablet shall not be crushed due to "xyz" • **Contraindications:** All situations and circumstances where the drug product shall not be given for safety reasons shall be clearly defined and explained • **Special warnings and precautions for use:** Special patient groups that are at increased risk or are the only groups at risk of experiencing product or product class-related adverse reactions • Any special precautions related to the administration or use of the drug product by the healthcare professionals, the patient or caregivers • Any need for specific clinical or laboratory monitoring • Any warnings necessary for excipients or residues from the manufacturing process • All particular risks associated with using the drug product shall be provided in this section.

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		• If the product is indicated in any subset of the pediatric population or special population, the risk associated with use of the product in the pediatric population or special population shall be present • Critically important safety information may be included in bold and/or within a box. • **Drug interactions and other forms of interactions:** This section shall have detail recommendations regarding the use of this drug product in relation to the potential for drug interactions to occur based on the pharmacodynamics properties and in vivo pharmacokinetic studies of the medicinal product. • Information on other relevant interactions such as with herbal medicinal products, food, alcohol, smoking, or pharmacologically active substances not used for medical purpose, shall also be given. • If no interaction studies have been performed, this shall be clearly stated • If there are patient groups in which the impact of an interaction is more severe, the details of such interactions shall be provided • **Fertility, pregnancy and lactation:** Recommendations for use in pregnant or lactating women and in women of childbearing potential shall be provided with reasoning and clinical/animal data where available. • Efforts shall be made to update the recommendations for use during pregnancy and lactation on the basis of increasing human experience in exposed pregnancies which eventually supersede the animal data. • If there is no data available at all, then this shall be

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		clearly stated. • **Side effects/Undesirable effects:** This section shall include all adverse reactions from clinical trials, safety studies and spontaneous reporting for which, after thorough assessment, a causal relationship between the medicinal product and the adverse event is at least a reasonable possibility. This section shall be regularly reviewed and, if necessary, updated with the aim to ensure appropriate information to health care professionals on the safety profile of the product. • **Overdose:** Describe acute symptoms and signs of different dose levels of the medicinal product based on all available information including accidental intake, mistakes and suicide attempts by patients. • Taking into account all relevant evidence, describe the management of an overdose e.g. in relation to monitoring or use of specific agonists/antagonists, antidotes (no dosage recommendations) or methods to increase elimination of the medicinal product such as dialysis. • **Pharmacodynamics/Pharmacokinetic properties:** Pharmacokinetic/Pharmacokinetic properties of the active substance(s) relevant for the advised dose, strength and the pharmaceutical formulation marketed shall be given in this section. • **Shelf life** • **Special precautions for storage** • **Date of publication/revision** **5. Innovator drug products shall follow the above information as per approval of SRA.**

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		6. Generic drug products shall follow and maintain the consistency in above information with the innovator drug products as approved by SRAs. ***Please note that the information listed above is not meant to be exhaustive and any information that is vital in the safe and effective administration of the product by healthcare professionals shall be included.***
I1	**Cost and Retail price**	1. Cost price (USD) shall be provided specifying the quantity. E.g., per tablet or per 5ml composition. 2. Proposed price for retail in Maldives (USD) be provided specifying the quantity. Eg. per tablet or per 5ml composition 3. The price structure shall include the name of the product.

11.3 Additional Requirements for Non-Pharmacopeial Products for full dossiers.

11.3.1 For in-house methods, other than official methods as per the official pharmacopeias, in house method validation report shall be submitted which shall have the parameters or validation characteristics for testing methods as under:

Testing Methods	Validation Parameters
1) Identification 2) Assay (content and dissolution measurement only) 3) Impurities (quantitative & limit test)	a. Specificity b. Accuracy c. Precision (repeatability, intermediate) d. Linearity & Range e. Detection Limit f. Quantitation Limit g. Robustness

11.3.2 In addition to method validation report, in-house method shall also provide documentary evidence for the identification of sources and quantitation of potential errors, determine if the method is acceptable for intended use and establish proof that a method can be used for decision-making.

11.3.3 The in-house method validation report shall be endorsed by a third party. The third party can be an accredited laboratory, regulatory authority or any other external or internal assessment body as approved by NRA.

11.4 Submission of Product Samples

11.4.1 Applicants are required to submit the product samples to the MFDA for all new products in the quantities as described below for each type for full dossier applications. However, MFDA can request for more quantities if required for analysis or as notified from time to time for various dosage forms and based on the tests available.

11.4.2 Samples are not required for reliance pathways registration. However, samples are required for re-registration for products under reliance pathways.

Type	Description	Quantity
Liquid dosage forms	These include solutions, syrups, elixirs, suspensions, emulsions etc.,	02 units shall be submitted. (e.g. 02 bottles of liquids.)
Solid dosage forms	These include tablets, capsules, , lozenges, etc.	20 units shall be submitted (e.g. 20 tablets, 20 capsules).
Semisolid dosage forms	These include creams, ointments, gels, pastes, and suppositories.	
Parental Preparations	These include ampules, vials, infusions, etc.	02 units shall be submitted (e.g. 02 vials or ampoules of injections)
Inhalational products	These include inhalers, nebulizers	
Others	Transdermal patches,	

11.4.3 Request for sample import shall be applied online through Dhirithi portal. MFDA considers requests for grant approval within 20 working days. Samples shall only be imported once sample authorization approval has been issued.

11.4.4 All imported sample (full quantity imported) shall be handed over to MFDA once it is cleared from the ports and these samples shall be handed over to the product registration unit. The Sample submission sheet. (Annex VII) shall be submitted via e mail *(medicine.registration@health.gov.mv)* before handing over the samples.

11.4.5 Samples shall be submitted to MFDA within working 10 (ten days) of the clearance from ports and it shall be submitted on Mondays and Thursdays from 10.00hours to 12.00hours.

11.4.6 Until it is submitted to MFDA, the temperature must be maintained as per the recommendation by the manufacturer.

11.4.7 Samples shall tally with the documents submitted for registration, otherwise the application shall be rejected.

11.4.8 In case an application is rejected, the samples shall be kept in MFDA for 60 days from the date of rejection and then they will be disposed of as per recommended method.

11.4.9 National Health Laboratory (NHL) is the designated national laboratory for testing pharmaceuticals. Samples that are submitted with the dossiers are also tested from NHL depending on the testing capacity of the laboratory for that specific product.

11.4.10 Upon testing, if the sample fails in any of the qualitative analysis parameters, the product will be rejected.

11.4.11 The product will also be rejected if the quantitative analysis fails.

11.4.12 The reason of rejection of the application will be informed and updated via the dhirithi portal.

12 Application Submission and Review Process

12.1 Product registration application submission.

12.1.1 All product registration Applications shall be submitted Online via Dhirithi portal 'https://dhirithi.egov.mv'.

12.1.2 The applicant shall first register as a user in Dhirithi portal using the form available on the MOH website, under, https://health.gov.mv/dv/downloads/dhirithi-portal-user-registration-form. The form is also available in Dhrithi portal under "Publications". If the applicant is an authorized medicine importer, they would already be registered as a Dhirithi user and hence can directly apply for medicine registration.

12.1.3 Once the applicant is registered in the Dhirithi portal, the applicant can then select "Pharmaceutical" and then "medicine registration" and submit the dossier.

12.1.4 To ensure all mandatory documents are submitted, the applicant shall refer to

1. Table 1 of this document to select the registration pathway and identify the required documents relevant to that pathway
2. Application checklists for reliance in Annex V
3. Application checklists for full dossier in Annex VI

12.2 Application submission fee

12.2.1 If all the requirements are complete, the application/dossier will be accepted and a submission fee of 100 MVR (hundred Maldivian Rufiyaa) shall be paid via Bandeyri Pay (https://bp.finance.gov.mv/), within 5 working days from the time of dossier acceptance to Dhirithi portal. If the payment is not made within the given 5 days, the dossier will be rejected.

12.2.2 This submission fee is non-refundable.

12.2.3 Once the payment is made the evaluation process of the application/ dossiers will be initiated with regards to safety, quality and efficacy of the product. The time lines for the process is indicated in Table 1 of this document.

12.3 Pre-Screening of Dossier

12.3.1 Once the application/dossier is submitted, it will be checked for document completion and legibility. If all the requirements as per the acceptance criteria are fulfilled, then only the dossier will be accepted.

12.3.2 MFDA shall have the right to reject incomplete dossiers and hence it's the applicant's responsibility to ensure that all are in accordance with the requirements as mentioned.

12.3.3 Applications/Dossiers that require further clarification will be put to "Need clarification" status on Dhirithi portal. The clarification requested by the Authority shall be resolved within 10 working days by the applicant, otherwise, the dossier will be rejected.

12.3.4 In the case of a rejection, the reason for the rejection will be specified.

12.3.5 The application/dossier evaluation process may be prolonged due to the time taken by the applicant to respond to the Authority's request to provide additional information or further clarification.

12.4 Assessment of Application

12.4.1 Pharmaceutical officers of Medicine Registration act as assessors and verify the required documents, accept the applications/dossiers, and evaluating the applications/dossiers as per approved criteria. In case further clarification is required, these officers are also responsible for effective communication with the applicant in a timely manner.

12.4.2 A summary of the evaluation is generated in the approved format by the Assessors and submitted before the National Pharmaceutical Board for Pharmaceuticals for decision-making.

12.4.3 The Director, Pharmaceuticals (regulation Section) is responsible for cross-review by checking and verifying the product evaluation documents submitted in the dossiers, and to guide the pharmaceutical officers on evaluating the product.

12.5 Decision by the National Pharmaceutical Board (NPB)

12.5.1 Upon successful evaluation of the applications/dossier, the documents are submitted to the National Pharmaceutical Board (NPB) for approval or rejection. The status will read as "Pending committee decision" at this stage on Dhirithi portal.

12.5.2 If recommended to approve the product by the NPB, the applicant will be notified to pay a registration fee of 300 MVR via Bandeyri Pay within 5 working days. If the payment is not made within the given five days, the client will be informed via email. If the payment is not made within 10 working days of the notification, the application will be rejected. The applicant must process this dossier as a new application again.

12.5.3 If recommended to reject the product by the NPB, the dossier will be rejected, and the applicant will be notified via Dhirithi portal indicating the reason for rejection within seven (07) working days.

12.5.4 The Deputy Director General (Medicine Therapeutic Goods Division) and Director General MFDA is responsible to finally approve and authorize the product after it's been approved by the National Pharmaceutical board.

12.6 Scientific Expert committee for Medicine Registration

12.6.1 The Authority shall establish an expert Committee to obtain scientific evidence and provide technical assistance to the National Pharmaceutical Board if required.

12.6.2 The main function of this committee is to obtain scientific evidence in determining the necessary measures and decisions regarding the safety of drugs and to recommend a decision based on this information after conducting a risk benefit assessment. In addition, the purpose of this committee is to:

1. Advice on taking the decision on the registration of Pharmaceuticals Products and Medical Devices.
2. Advice on taking all necessary steps to strengthen the inspection system.
3. Advice on conducting a risk benefit assessment to change the category of the drug and plan based on the results of this assessment.
3. Provide advice and guidance on adverse drug reactions, development and strengthening of the management system.

4. Advice on making decisions regarding the safety of vaccines and biologicals.

5. Scientific evidence and risk benefit assessment required for approval of a new drug.

6. Guide and advice on establish public awareness system on drug safety and to participate in awareness programs

7. Provide Guidance to take necessary steps to strengthen the regulatory system of drugs.

10.Technical advice in the preparation of drug related rules and regulations

12.7 Members of the Scientific Expert committee

12.7.1 The committee shall consist of a member representing the Pharmaceutical Board.

12.7.2 Technical members from the pharmaceutical or pharmaceutical sector shall be represented as members on the committee.

12.7.3 Committee meetings shall be held at least four times a year. The number of members of this committee is 05 (five). The quorum is 03(three).

12.7.4 The members of the committee shall be independent of the activities of the pharmaceutical industry (manufacturing, importing and trading of pharmaceuticals).

12.7.5 The Maldives Food and Drug Authority will be responsible for the secretariat of the committee.

12.7.6 An expert/experts may be invited to the meetings of this committee for advice on drug related matters.

12.7.7 A person in the field may be invited to attend a committee meeting to discuss a matter relating to alternative medicine as described in (a) of this Article. Veterinarians or a veterinary expert can be invited to the meeting to discuss the medication used for animals.

12.8 Issuance of Registration Certificate

12.8.1 After the registration fee has been paid, the Authority will issue a Certificate of Registration of a Drug Product and Agreement to the applicant within 20 working days.

12.8.2 The applicant will be notified via email to report to MFDA 2nd floor for the agreement signing and certificate issuance within this period. The applicant shall bear the responsibility of attending the signing and failure to attend within 15 working days of notification will result in cancellation of the agreement.

12.8.3 The product can only be imported, distributed and sold in the country once it has been registered and added to the Approved Drug List (ADL).

12.9 Validity of Registration

12.9.1 The validity period of the registration is mentioned in the table 1 of this document.

12.10 Classification of Medicine Registration

12.10.1 Registration will be issued under the following classifications which determine the level of access control.

Classification	Remark
Restricted for Hospital and Institutional (HI) use only	Medicinal products restricted to special expertise and Health facilities and clinics with registered medical practitioners. These products cannot be kept for sale in pharmacies. These products can only be imported by designated parties.
Restricted for Hospital use only (HO)	These medicinal products can only be imported and registered by designated parties. These products cannot be kept for sale in pharmacies. These products are restricted to special expertise for

Classification	Remark
	hospitals only
Controlled Drug C	These medicinal products are controlled and can only be imported by designated parties. Within this class, Narcotics cannot be kept in pharmacies for sale. Controlled Drugs include Narcotics and Psychotropic drugs (Internationally and Nationally Controlled).
Over The Counter Medicine (OTC)	These medicinal products can be sold without prescriptions.
Prescription Only Medicines (POM)	These medicinal products can only be prescribed by a registered medical practitioner. This product can only be sold with a valid prescription.

12.11 Cancellation, Suspension, Revocation of Registration

12.11.1 The Maldives Food and Drug Authority reserves the right to reject, cancel or suspend the registration of any product if:

a. There are deficiencies in safety, quality, or efficacy of the product.
b. Failure to comply with conditions of registration.
c. If the product has quality issues from Market surveillance.
d. If the product is removed from Approved Drug List due to any reason including safety and efficacy.
e. The information provided at the time of the submission of the application is later found to be false or insufficient.
f. If it is substantiated that the formulation has serious side effects and any of Reference Regulatory Authority or WHO or other national and international agency prohibited used of such formulation.
g. If it is found that the manufacturer is not in compliance with Good Manufacturing Practices (GMP), or for any other reasons, that the manufacturer has repeated violations like manufacturing of sub-standard drug products.
h. If any adverse regulatory action is taken against the manufacturer abroad by the regulatory authority of country of origin.
i. If the MAH fail to inform the MFDA of any serious adverse reactions of the registered product upon receipt of such reports.
j. If any post-registration variation has been done including the composition, label, packaging, manufacturing method, drug product specifications, indication or any other particulars of the product has been changed without the approval of the MFDA.
k. If foreign manufacturer of the registered product has decided to withdraw and not to sell the product.
l. Any of the conditions of registration of the product have been contravened.
m. Any report on adverse drug reactions of a serious nature has been received from national or international sources.
n. For any other matters as specified by the National Pharmaceutical Board at the time of cancellation.

12.12 Temporary and Permanent Ban of a Product and/or Manufacturer

12.12.1 A company or manufacturer can be temporarily or permanently banned if repeated incidents of quality failure are identified from their products.

12.12.2 If the company or manufacturer is permanently banned, the company will not be allowed to enter the Maldives market until a period of a minimum 5 years has passed. After 5 years from the date of the ban, they can apply for registration with the current criteria only. Reliance pathways is encouraged for such products.

12.12.3 The final decision for the product approval will be made based on the technical advice from National Pharmaceutical Board

12.12.4 If a company or manufacturer is temporarily banned, the products of that company can only enter back into the market as a new applicant under the current procedure. All products of that company shall be registered as per the criteria established by the MFDA.

12.12.5 Due to a quality issue, if a product is recalled from the market or product application rejected during registration or re-registration, these products can only be submitted with additional documents in addition to the documents required in the registration pathways. The additional documents shall include and is not limited to:

a. Product tested reports from a WHO prequalified laboratory

b. Manufacturer's declaration of the quality, safety and efficacy of the product.

c. Product assessment report from a Stringent NRA

12.12.6 If the products fail repeatedly (more than 2 times) as mentioned in point 12.12.5, the product shall be rejected, and it shall not be again submitted for a period of 5 years.

13 Post Registration Variations

13.1 Classification of Variations

13.1.1 Following are the basis of classification of post-registration variations.

a. An administrative change such as a change of company name and/or address.

b. A change to the characteristics of drug product that can affect its quality like change of storage condition.

c. A change to the safety, efficacy or pharmacovigilance information of the product.

13.1.2 Types of variations for a registered drug product are classified as Minor and Major.

13.2 Minor Variations (MiV)

13.2.1 Variation to a registered finished product in terms of changes which has minimal or insignificant impact on the aspects of safety, efficacy and quality. Minor variations are further divided into following sub types: -

1) Minor Variations – Notification (MiV-N)

a. Minor Variations – Notification (MiV-N) have little or no impact on the safety, efficacy and quality of registered drug product e.g. administrative modifications.

b. MiV-N procedures are classed a 'do-and-tell' procedure, means registration holder should implement the change and intimate / notify to MFDA by fulfilling the conditions and supporting documents.

c. Applicant should ensure this notification/intimation must reach relevant section of MFDA within 30 days of implementation of change for MFDA's record and it can be considered accepted if an objection is not issued by the MFDA within 30 working days of the date of submission of variation application.

1) Minor Variations – Prior Approval (MiV-PA)

a. If the change is more significant than (MiV-N) change but it does not fall under major variation category, then it is considered as MiV-PA change.

b. These changes need prior approval from MFDA before implementation. (e.g. Change in brand/proprietary name, title of firm, etc.).

c. Registration holder / MA holder is required to submit a variation application for the proposed change to relevant section of MFDA along with supporting documents and fulfill the conditions as described in these guidelines.

d. If the application fulfills the prescribed criteria, Medicine Therapeutic Goods Division will process the case for approval of the proposed change by Head of the Division.

2) Major Variations (MaV)

a. Variation to a registered pharmaceutical finished product that may affect significantly and/or directly the aspects of quality, safety and efficacy and it does not fall within the definition of minor variation are considered as major variations.

b. Registration holder needs to seek prior approval for major variations before they are made. Registration holder MA holder is required to submit an application for proposed variation to Medicine Therapeutic Goods Division, MFDA along with supporting documents and fulfill the conditions as described in these guidelines.

Details of Major variations (MaV-1)

MaV-1	**Change and/or additional indication/dosing regimen/patient population/inclusion of clinical information extending the usage of the product**
Conditions to be fulfilled	1. Product labeling refers to Package Insert (PI), Patient Information Leaflet (PIL), unit carton label, inner label and/or blister strips. 2. As a subsequent change due to revision of Summary of Product Characteristics (SmPC) or equivalent document (USPI)
Documents to be submitted	1. Approved product labeling. 2. Proposed product labeling, a clean and annotated version highlighting the changes made. 3. Approved PI/SmPC/PIL from an approved reference regulatory agency or the country of origin containing the proposed changes (where applicable). 4. Justifications for the changes proposed. 5. Approval letters from reference countries or country of origin which have approved the proposed indication or dosing regimen (where applicable). 6. Clinical expert reports and/or clinical trial reports (where applicable). 7. Clinical documents as per Common Technical Dossier (CTD) format (where applicable).
MaV-2	**Change of content of product labeling**
Conditions to be fulfilled	1. Product labeling refers to Package Insert (PI), Patient Information Leaflet (PIL), unit carton label, inner label and/or blister strips.

	2. The change is not a minor variation and not within the scope of MaV-1. 3. As a subsequent change due to revision of Summary of Product Characteristics (SmPC) or equivalent document (USPI).
Documents to be submitted	1. Approved product labeling. 2. Proposed product labeling, a clean and annotated version highlighting the changes made. 3. Approved PI/SmPC/PIL from an approved reference regulatory agency or the country of origin containing the proposed changes (where applicable). 4. Justifications for the changes proposed and supporting clinical documents when applicable.
MaV-3	**Change of batch size of sterile drug product**
Conditions to be fulfilled	1. The change does not affect the consistency of production. 2. The product formulation remains unchanged. 3. Release and shelf-life specifications of drug product remain unchanged. 4. Process validation scheme and/or report is available or validation of the manufacturing process has been successfully carried out according to protocol with at least three batches appropriate to the proposed batch size.
Documents to be submitted	1.Comparative tabulated format of approved and proposed batch manufacturing formula. 2. Validation scheme and/or report of the manufacturing process 3. Release and shelf-life specifications of the drug product. 4. Certificate of analysis and/or batch analysis data (in a comparative tabulated format) of drug product of at least two production batches manufactured according to approved and proposed batch sizes. 5. Stability data
MaV-4	**Change of batch size of non-sterile drug product**
Conditions to be fulfilled	1. The change does not affect consistency of production. 2. The product formulation remains unchanged. 3. Release and shelf-life specifications of drug product remain unchanged. 4. Process validation scheme and/or report is available or validation of the

	manufacturing process has been successfully carried out according to protocol with at least three batches.
Documents to be submitted	1. Comparative dissolution profile data of at least one pilot/production batch of the drug product manufactured in the approved and proposed batch size for oral solid dosage forms (where applicable). 2. Comparative tabulated format of approved and proposed batch manufacturing formula. 3. Validation scheme and/or report of the manufacturing process 4. Release and shelf-life specifications of the drug product. 5. Certificate of analysis and/or batch analysis data (in a comparative tabulated format) of drug product on a minimum of one production batch manufactured according to approved and proposed batch sizes and letter of undertaking to submit batch analysis data on the next one full production batch. 6. Stability data and Stability Study of Drug Product and report if any results fall outside shelf-life specifications (with proposed action).
MaV-5	**Major change in the manufacturing process for drug product**
Conditions to be fulfilled	1. The change does not cause a negative impact on the quality, safety and efficacy of the drug product. 2. The manufacturing site remains unchanged. If there is a change in manufacturing site.
Documents to be submitted	1. Description of the proposed manufacturing process and technical justification for the change. 2. Comparative dissolution profile data of at least one pilot/production batch of the drug product manufactured in the approved and proposed manufacturing process for oral solid dosage forms. 3. Validation scheme and/or report of the proposed manufacturing process 4. Copy of approved release and shelf-life specifications. Or, alternatively, copy of proposed release and shelf-life specifications that supports that the proposed process must lead to an identical or better product regarding all aspects of quality, safety and efficacy.

	5. Certificate of analysis and/or batch analysis data (in a comparative tabulated format) of drug product for a minimum of one production batch manufactured according to approved and proposed processes. 6. Stability data or Stability Study of Drug Product report if any results fall outside shelf-life specifications (with proposed action).
MaV-6	**Qualitative or quantitative change of excipient** **a) For immediate release oral dosage forms** **b) For modified release oral dosage forms** **c) For other critical dosage forms such as sterile preparations.**
Conditions to be fulfilled	1. Change will need to comply with the finished product specifications for example release and shelf-life specifications of the drug product remain unchanged, excluding product description except for update of product description with respect to appearance/odour/taste as a consequence of the change (where applicable). 2. Replacement of an excipient with a comparable excipient of the same functional characteristics. 3. The dissolution profile of the proposed product is comparable to that of the approved product. 4. Process validation scheme and/or report is available or validation of the manufacturing process has been successfully carried out according to protocol with at least three batches of the proposed product formula
Documents to be submitted	1. Revised drafts of the package insert and labeling incorporating the proposed variation. 2. A declaration that the proposed excipient does not interfere with the drug product release and shelf-life specifications test method. 3. Justification for the change must be given by appropriate development of pharmaceutics. 4. Comparative tabulated format of the approved and proposed product formulation with calculated changes highlighted (please state changes in the percentage of the proposed excipient out of the total target dosage form weight (where applicable).

	5.Comparative dissolution profile data of at least one pilot/production batch of the drug product manufactured in the approved and proposed formulation for oral solid dosage forms 6. Revised batch manufacturing formula. 7. Validation scheme and/or report of the manufacturing process 8. Specifications of the proposed excipient. 9..For proposed excipients made of ruminants source, Transmitting Animal Spongiform Encephalopathy (TSE)-free certificate or Bovine Spongiform Encephalopathy (BSE)-free cert issued from relevant authority of the issuing country and/or documentary evidence from the supplier (where applicable). 10. Drug product release and shelf-life specifications. 11. Certificate of analysis and/or batch analysis data (in a comparative tabulated format) of drug product on at least two productions (or one production batch and two pilot batches) according to approved and proposed product formula. 12. Stability data or Stability Study of Drug Product and report if any results fall outside shelf-life specifications (with proposed 13. For quantitative and qualitative changes in preservative, results of Preservative Effectiveness Test (PET) at lowest specified preservative level (where applicable).
MaV-7	**Quantitative change in coating of tablets and/or size of capsule shell for modified release oral dosage form**
Conditions to be fulfilled	1.The dissolution profile of the proposed product is comparable to that of the approved product. 2. The release and shelf-life specifications of the drug product remain unchanged except for the weight and/or size 3. For quantitative change in coating of tablets or weight and/or size of capsule shell for immediate release oral solid dosage forms
Documents to be submitted	1.Revised draft of product label incorporating the proposed change 2. A declaration that the change does not interfere with the drug product release and shelf-life specifications test method. 3. Comparative dissolution profile data of at least one pilot/production batch

	of the drug product manufactured in the approved and proposed composition for oral solid dosage forms 4. Approved and proposed product and batch manufacturing formula. 5. Revised release and shelf-life specifications of the drug product. 6. Stability data or Stability Study of Drug Product and report if any results fall outside shelf-life specifications (with proposed action).
MaV-8	**Change in primary packaging material for sterile product** **a) Qualitative and quantitative composition and/or** **b) Type of container and/or** **c) Inclusion of primary packaging material**
Conditions to be fulfilled	1. Release and shelf-life specifications of the drug product remain unchanged. 2. For change in the primary packaging material for non-sterile drug product
Documents to be submitted	1. Revised drafts of the package insert and labeling incorporating the proposed variation. 2. Appropriate scientific data on proposed packaging (comparative data on permeability, e.g. moisture, O2, CO2). 3. Proof must be provided that no interaction between the content and the packaging material occurs 4. Validation scheme and/or report of the manufacturing and sterilization process 5. Comparative tabulated format of specifications of the approved and proposed primary packaging material. 6. Stability data or Stability Study of Drug Product and report if any results fall outside shelf-life specifications (with proposed action).
MaV-9	**Change or addition of pack size/fill volume and/or change of shape or dimension of container or closure for sterile solid and liquid drug product**
Conditions to be fulfilled	1. The proposed pack size is consistent with the dosage regimen and duration of use as approved in the package insert.

	2. The packaging material remains unchanged. 3. Release and shelf-life specifications of the drug product are not affected, except pack size/fill volume specification. 4. Change or addition of pack size/fill volume and/or change of shape or dimension of container or closure for non-sterile drug product.
Documents to be submitted	1. Revised drafts of the package insert and labeling incorporating the proposed variation. 2. Justification that the proposed pack size is consistent with the dosage regimen and duration of use as approved in the package insert. 3. Validation data of the manufacturing process, sterilization and container closure system (where applicable). 4. Stability data or Stability Study of Drug Product and report if any results fall outside shelf-life specifications (with proposed action).
MaV-10	**Inclusion or replacement of the solvent/diluent for the drug product**
Conditions to be fulfilled	1. The proposed change does not result in any change in the dosage form, regimen, indication, method of administration of the product. 2. For deletion of the solvent/diluent. 3. For change of shelf-life and/or storage condition of the drug product after first opening and/or after dilution/reconstitution.
Documents to be submitted	1. Revised drafts of the package insert and labeling incorporating the proposed variation. 2. Documentary evidence to certify the manufacturing site of diluents/solvents complies with current applicable GMP standards. 3. Batch numbering system. 4. A letter of authorization from product owner to authorize the manufacturing site to manufacture and package the solvent/diluent. 5. A declaration from the marketing authorization holder that the release and shelf-life specifications of drug product are not affected. 6. In addition to section P for the solvent/diluent and reconstitution stability data, section S is also required (where applicable).
MaV-11	**Extension of shelf-life of the drug product**

	a) As a package for sale and/or **b) After first opening and/or** **c) After dilution/reconstitution**
Conditions to be fulfilled	1. For (a) & (b) - The studies must show conformance to the approved shelf-life specification. 2. For (c)–The studies must show conformance to the approved shelf-life specification for the reconstituted product.
Documents to be submitted	1. Revised drafts of the package insert and labeling incorporating the proposed variation (where applicable). 2. Technical justification for the proposed change (where applicable). 3. A letter of commitment from product owner or marketing authorization holder to inform users of the relevant change (where applicable). 4. Results of appropriate long term stability studies covering the duration of proposed shelf-life of the product in the authorized packaging material
MaV-12	**Change of storage conditions of the drug product (Lowering from the approved storage condition) a) As a package for sale and/or b) After first opening and/or c) After dilution/reconstitution**
Conditions to be fulfilled	1. For (a) & (b) - The studies must show conformance to the approved shelf-life specification. 2. For (c) – The studies must show conformance to the approved shelf-life specification for the reconstituted product.
Documents to be submitted	1. Revised drafts of the package insert and labeling incorporating the proposed variation. 2. Technical justification for the proposed change. 3. Results of appropriate long term stability studies covering the duration of approved shelf-life (at proposed storage condition) of the product and in the authorized packaging material a) as a package for sale and/or b) After first opening and/or c) after the dilution/reconstitution

	Stability Study of Drug Product, results of microbiological testing should be included.
MaV-13	**Major change in the manufacturing process of the drug substance**
Conditions to be fulfilled	1. The synthetic route is different with potential change in qualitative and/or quantitative impurity profile which would require further qualifications in safety studies. 2. Manufacturing process of drug substance does not use any materials of human/animal origin for which assessment is required of viral safety, unless otherwise justified. 3. Physicochemical characteristics and other relevant properties of drug substances remain unchanged. 4. Stability performance of drug substance remain unchanged. 5. If there are changes to the specification of drug substance.
Documents to be submitted	1. Relevant CTD section, or both the open and closed part of the Drug Master File with the Letter of Access or equivalent audit document/certification from reference country which is deemed appropriate by the Drug Regulatory Authority. 2. Comparative tabulated format of the approved and proposed processes with changes highlighted. 3. For sterile drug substance, process validation report (where applicable). 4. A letter of declaration from marketing authorization holder stating that no new impurities have been introduced at or above the accepted threshold for qualification of impurities or that there is no increase in the levels of impurities, which require further safety studies. 5. A letter of declaration from the marketing authorization holder stating that the specifications of the drug substance have not changed. 6. Certificate of analysis and/or batch analysis data (in a comparative tabulated format) for at least two pilot batches of the drug substance from the approved and proposed process. 7. A declaration from the marketing authorization holder that the relevant stability studies of the drug product. 8. Certificate of analysis and/or batch analysis data (in a comparative tabulated

	format) of drug product of at least two batches (pilot/production scale) manufactured with the drug substance according to the approved and proposed processes.
MaV-14	**Change or addition in the source of Active Pharmaceutical Ingredient / Drug Substance or Half-Finished Products i.e. Pellets / Granules / Ready to Fill Bulk etc.**
Conditions to be fulfilled	Specifications of drug substances remain unchanged.
Documents to be submitted	a. a. Real time and accelerated stability studies of DS / Half finished products (pellets / granules / ready to fill bulk) conducted by manufacturer of DS / half finished product as per conditions of zone IV-A or zone IV-B on 3 commercial scale batches. b. Comparative tabulated format of the approved and proposed drug substance manufacture information (where applicable). c. Certificate of analysis and/or batch analysis data (in a comparative tabulated format) for at least two pilot batches of the drug substance from the approved and proposed manufacturing sites. d. Documents confirming that the proposed source has valid permission for manufacturing of DS / pellets / granules / ready to fill bulk by the regulatory authority of country of origin. e. Copy of registration letter and last renewal status. f. A letter of commitment from marketing authorization/ registration holder to conduct long term and accelerated stability studies for the drug product manufactured with the drug substance from the proposed manufacturing site, and report if any results fall outside shelf-life specifications (with proposed action) or when requested.
MaV-15	**Change in Prescribing Information (PI) and labelling related to changes in Indications, Contraindications, dosage etc.**
Conditions to be fulfilled	These changes have already been approved by any reference authority and implemented by innovator drug product

Documents to be submitted	a. Justification of proposed changes and difference between existing and proposed information in tabulated form. b. Reference of prescribing information approved by Reference Regulatory Authorities and innovator product. c. Copy of registration letter and last renewal status. d. Copy of approval from regulatory agency / authority from country of origin for innovator's drug product. Copy of label outer pack in case of changes in indication/ dose/ administration etc.
MaV-16	**Change of specifications or method of analysis of finished drug product**
Conditions to be fulfilled	a. Proposed specifications or method of analysis are not included in any pharmacopeia except in cases where proposed manufacturer specifications are more stringent than pharmacopeial specifications. b. For change in specifications, method of analysis will remain same or with minor change. c. The change is not necessitated by failure to meet specifications resulting from unexpected events arising during manufacture, or because of stability concerns. d. There is no legal case / proceeding is pending at any forum / court of law concerning with the proposed change

Documents to be submitted	a. Justification for the proposed change, b. Comparative table of current and proposed specifications or method of analysis. c. Validated method of analysis in case of change of method of analysis. d. Copy of registration letter and last renewal status. e. Certificate of analysis of at least one batch and comparative summary of results, in tabular format, for one batch using current and proposed procedures. f. Undertaking that : i. No case is pending at any forum / court of law regarding this product. ii. In case of any quality complaint/ OOS result observed by the marketing authorization holder as a result of this change, the same will be reported to MFDA and all the stock will be recalled from the market immediately.

Any variation application shall be submitted through the online portal by submitting the Variation Applications of a Pharmaceutical Product as in Annex VIII.

If the application fulfills the prescribed criteria, Medicine Therapeutic Goods Division will process the case for consideration

13.3 Exclusion criteria for Post Registration Variations

13.3.1 The following cases of variations / changes shall not be considered as post-registration variations and require new product registration.

13.3.2 Change of Active Pharmaceutical Ingredient / Drug Substance

a. Change of the API to a different API including change in the salt or isomer form of API.
b. Inclusion or exclusion of an API to a multicomponent product.
c. Change in the strength of one or more APIs.

13.3.3 Change of Pharmaceutical Form /Dosage Form

a. Change in release profile of drug product like change from an immediate-release product to a slow-or delayed release dosage form and vice versa.
b. Change from a liquid to a powder for reconstitution, or vice versa.

13.3.4 Change in the route of administration.

13.3.5 Additional volume of already registered injectable drug products.

13.4 Procedure for submission of Post Registration Variations.

13.4.1 Variation applications can be submitted through Dhrithi portal.

13.4.2 The relevant information once received is evaluated and submitted to the technical committee of the authority for final approval or rejection. Once approved, the information is updated, and the applicant is informed via email or through Dhirithi portal.

13.4.3 Depending on the type of variation application it will take 30 to 35 working days for approval of the variation.

13.4.4 The validity for the variation shall be same as the validity of the original registration.

14 Details of Variations, Applicable conditions and Required Documents.

14.1 Applicable Conditions

14.1.1 For each variation, attempts have been made to identify conditions or circumstance that need to be fulfilled for submitting variation application. For all changes, it remains the responsibility of the applicant to provide all necessary documents to demonstrate that the change does not adversely affect the quality, safety and efficacy of the drug product.

14.2 Required Documents

14.2.1 The list of documents required to be submitted along with application is identified for each variation in this guideline. However, this list is not exhaustive and further documentation if required may be asked from the applicant by MFDA. Regardless of the documents specified, applicants shall ensure provision of all relevant information to support the applied variation. Alternative approaches to the principles and practices described in this document may be acceptable provided that such variations / changes / practices or proposed alternatives are being supported with adequate scientific justification.

14.3 Details of Minor Variation-Notification (MiV-N change)

Minor Variation-Notification (MiV-N)	
MiV-N 1	**Change in the name of Active Pharmaceutical Ingredient / Drug Substance, while the drug substance remains the same molecule(s)**
Conditions to be fulfilled	a. No change in Active Pharmaceutical Ingredient/Drug substance (s).
Documents to be submitted	a. Proof of acceptance by WHO or copy of the latest version of International Non-proprietary Names (INN) list mentioning proposed name of API/DS.
MiV-N 2	**Change of the name and/or address (e.g., street name) of a manufacturer of the drug substance (API)**
Conditions to be fulfilled	a. The manufacturing site of the drug substance remains unchanged. b. No other changes, except for the change of the name and/or address of a manufacturer of the drug substance
Documents to be	a. Updated information of the manufacturer of the drug substance. b. Official document/evidence when required

submitted	
MiV-N 3	**Change of manufacturing company`s owner**
Conditions to be fulfilled	a. The manufacturing and batch release site of the drug product remains the same. b. No other changes, except for change in the owner of manufacturer
Documents to be submitted	a. Declaration on the transfer of ownership. b. Official letter about change of old owner to new owner.
MiV-N 4	**Change in any part of the (primary) packaging material not in contact with the finished product formulation such as color of flip-off caps, color code rings on ampoules, change of needle shield (different plastic used).**
Conditions to be fulfilled	The change is not related to primary or secondary packaging material and shall not affects the delivery, use, safety or stability of the finished drug product
Documents to be submitted	a. Reason / justification for proposed change. b. Amendment of the relevant section(s) of the dossier, including revised product labeling as appropriate.
MiV-N 5	**Withdrawal/deletion of the alternative manufacturer(s) for drug substance and/or drug product**
Conditions to be fulfilled	An alternative manufacturer is registered
Documents to be submitted	Reason for withdrawal/deletion
MiV-N 6	**Minor change in the manufacturing process of an immediate release solid oral dosage form, semi solid or oral solutions**
Conditions to be fulfilled	a. The change includes following: i. Change from non-automated or non-mechanical equipment to automated or mechanical equipment to move ingredients. ii. Change to alternative equipment of the same design and operating principles of the same or of a different capacity. iii. Process changes including changes such as mixing times and operating speeds within application/validation ranges. b.No change in qualitative and quantitative impurity profile or in physio-chemical properties. c. The manufacturing principle for individual manufacturing steps remain unchanged, e.g., there are no changes in the processing intermediates

	and manufacturing solvent(s) used in the process. d.The proposed process must be controlled by relevant in-process controls used in the approved process and no changes (widening or deletion of limits) are required for these controls. e. The specifications of the finished product and/or process intermediates remain unchanged. f. The proposed process must lead to an identical product regarding all aspects of quality, safety and efficacy
Documents to be submitted	a. Amendment of the relevant section(s) of the dossier, as appropriate, including a direct comparison of the approved and proposed processes. b.Copy of approved drug product specifications. c. Certificate of analysis and/or batch analysis data (in a comparative tabulated format) on a minimum of one batch manufactured to both the approved and the proposed process. d.A declaration/ undertaking from registration holder that: i. Batch analysis data on the next two full production batches shall be made available upon request and reported by the marketing authorization holder if outside specification (with proposed action). ii. The relevant stability studies of the drug product shall be started and that the relevant stability studies shall be finalized; data shall be provided only if outside specification (with proposed action).
MiV-N 7	**Change of release and shelf-life specifications of the drug product, and/or drug substance, and/or excipient, following the inclusion in the compendium / pharmacopeia**
Conditions to be fulfilled	Drug products / Drug substances / excipients which are now included in the compendia / pharmacopeia and applicant intends to adopt these specifications

Documents to be submitted	a. Tabulation of the current and revised release and shelf-life specifications of the drug product, with changes highlighted. b. Revised release and shelf-life specifications. c. Copy of the relevant monograph from the compendium
MiV-N 8	**Change of imprints, bossing or other markings on tablets or printing on capsules including addition or change of ink used for product marking**
Conditions to be fulfilled	a. New markings do not cause confusion with other tablets or capsules. b. Any ink proposed for use must be edible. c. Release and shelf-life specifications of the drug product remain unchanged except appearance.
Documents to be submitted	a. Details and specifications of the proposed new ink (where applicable) b. Detailed drawing or written description of the current and proposed imprint/bossing/markings. c. Revised draft of package inserts and labeling incorporating the proposed variation (where applicable). d. Release and shelf-life specifications of drug product with new product description.
MiV-N 9	**Addition or replacement of measuring device for oral liquid dosage forms etc**
Conditions to be fulfilled	a. Size and accuracy of the proposed measuring device must be compatible with the approved posology. b. The new device is compatible with the drug product
Documents to be submitted	a. Justification for the proposed change. b. Revised draft of the package inserts and labeling incorporating the proposed variations (where applicable). c. Description of the device (where applicable)

	d. Composition of device material and the material should be of pharmacopeial / pharmaceutical grade. e. Justification that size and accuracy of the device are adequate for the posology as approved in the product labeling.

14.4 Details of Minor Variation- Prior Approval (MiV-PA change)

MiV-PA 1	**Change of the name/title or address (e.g., street name/number) of the manufacturer of drug product**
Conditions to be fulfilled	a. The manufacturing site remains the same. b. There is no legal case / proceeding is pending at any forum / court of law concerning with the proposed change c. No other changes, except for the change of the name and/or address of a manufacturer of the drug product. d. Ownership of the company is unchanged.
Documents to be submitted	a. For imported drug products, official letter from related NRA or municipality (for address only) or original legalized CoPP as per WHO format for new manufacturer's name, or original legalized GMP certificate of new manufacturing site with free sale certificate from regulatory body of country of origin or any legalized document of concerned regulatory authority confirming the change of name of Manufacturer without change in manufacturing site b. For local manufactured drug products, MFDA's approval letter for proposed variation. c. Copy of registration letter and last renewal status d. Revised drafts of the package insert and labeling incorporating the proposed variation (where applicable).
MiV-PA 2	**Change in the name / title and address of Registration Holder or MAH in exporting country (for finished imported products)**
Conditions to be fulfilled	a. Registration holder / MAH and manufacturer should be separate entities. b. The change in address refers to only documentary change in address and the manufacturing site remains the same. c. The name change refers to the renaming of a company or organization. d. The change shall not include transfer of marketing authorization to another company. e. There is no legal case / proceeding is pending at any forum / court of law concerning with the proposed change. f. No other changes, except for the change of the name / Title of

	Registration Holder or MAH of the drug product.
Documents to be submitted	a. Original legalized CoPP as per WHO format for new registration holder / MAH and/or address, or free sale certificate from regulatory body of country of origin or any legalized document of concerned regulatory authority confirming the change of name of Marketing Authorization Holder without change in manufacturing site. b. Evidence of the contract between registration / MA holder and manufacturer (with changed / new name), as the manufacturer and product license/registration holder are different entities. c. Copy of registration letter and last renewal status d. Revised notarized sole agency agreement with new registration holder. e. Revised draft of the package inserts and labeling incorporating the proposed variation (where applicable). f. An undertaking that the formulation, API source and Specifications, manufacturing process, release and shelf-life specifications have not changed.
MiV-PA 3	**Change of name and address of importer**
Conditions to be fulfilled	a. The manufacturer including batch release site of drug product remains the same.
Documents to be submitted	a. MFDA's Drug import License with new address. b. Revised drafts of the package insert and labeling incorporating the proposed variation (where applicable). c. Copy of registration letter and last renewal status d. An undertaking that the firm that no case is pending at any forum / court of law regarding previous name and/or address
MiV-PA 4	**Changes in Summary of Product Characteristics/Labelling/Patient Information Leaflet**
Conditions to be fulfilled	a. The changes shall be in accordance of the innovator drug products as approved by any of the Reference Authority
Documents to be submitted	a. Previously approved product labelling (SmPC, PIL etc) if any. b. Tabulated comparison in existing and proposed SmPC/PIL highlighting the changes made. c. Copy of registration letter and last renewal status d. Copy of approved SmPC/PIL from any of the Reference Authority. e. Latest version of SmPC/PIL of the Innovator product approved from any of the Reference Authority.
MiV-PA 5	**Change of drug product name**
Conditions to be	a. There shall be no change to the product specifications including formulation,

fulfilled	release, and shelf-life specifications, manufacturing process etc except change of product name. b. No litigation shall be pending at any forum / court of law concerning with the proposed change. c. The registration / MA holder will check the suitability of proposed names to ensure that no resemblance or phonetic matching with already registered products as per LASA so that the proposed names should not be liable to cause confusion in print, handwriting or speech with the (Proprietary / brand) name of another registered product. d. The proposed name shall not suggest greater safety or efficacy than supported by clinical data, convey misleading therapeutic use or imply superiority over another similar product or show the presence of substance(s) present or not present in the product.
Documents to be submitted	a. Justification for the proposed change b. Information regarding previous approvals of change of brand name since registration of drug product. c. Details (batch number, date of manufacture, quantity and stock position) regarding last batch manufactured / imported. d. Copy of registration letter and last renewal status e. An undertaking that the proposed names do not resemble with already registered brands and in case of resemblance /similarity with already registered drug, the applicant will be liable to change immediately. Moreover, no case is pending at any forum / court of law regarding this matter. Line extension f. Legalized CoPP or FSC in case of imported drug products. g. Revised draft package insert and labeling incorporating the proposed variation. h. Official letter from product owner or marketing authorization holder authorizing the change of product name and committing to inform users of the relevant changes (where applicable).
MiV-PA 6	**Change of importer/ MA holder in Maldives**
Conditions to be fulfilled	a. The manufacturing site remains unchanged. b. No litigation shall be pending at any forum / court of law concerning with the proposed change. c. Present importer has not imported registered drug product for more than

	3 years.
Documents to be submitted	a. Notarized authority letter/sole agent letter (original) from marketing authorization holder/ manufacturer (if both are separate) in name of new importer. b. Copy of registration letter and last renewal status c. Revised drafts of the package insert and labeling incorporating the proposed variation. d. Legalized Certificate of Pharmaceutical Product (CoPP) or other relevant documents as defined by MFDA for new registration
MiV-PA 7	**Change in Market Authorization Holder (MAH) in exporting country**
Conditions to be fulfilled	a. The manufacturing site remains unchanged. b. The registration holder in Maldives shall remain the same. c. Undertaking from new MA holder in exporting country that no litigation is pending at any forum / court of law concerning with the proposed change
Documents to be submitted	a. Notarized authority letter/sole agent letter (original) from new Market Authorization Holder (MAH) abroad. b. Approval of new MAH from regulatory body of exporting country or Legalized Certificate of Pharmaceutical Product (CoPP) mentioning new Market Authorization Holder (MAH). c. Copy of registration letter and last renewal status
MiV-PA 8	**Addition or replacement of alternative site for primary packaging (direct contact with drug product) for non-sterile product**
Conditions to be fulfilled	a. No other changes except for the addition or replacement of alternative site for primary packaging (direct contact with drug product)
Documents to be submitted	a. Justification for the proposed change. b. For imported products, proof that the proposed site is legally authorized for the packaging activity of the drug product concerned such as CoPP (legalized) which covers GMP certification. c. For locally manufactured drug products, MFDA's regulatory approval for the proposed variation. d. Copy of registration letter and last renewal status. e. Validation scheme and/or report of the manufacturing process to the

	proposed change of alternative site for primary packaging (where applicable). f. Revised drafts of the package insert and labeling incorporating the proposed variation (where applicable). g. Holding time studies testing of bulk pack during storage and transportation between the bulk production site to primary packager (where applicable). h. A letter of commitment from marketing authorization holder to conduct long term and accelerated stability studies for the first three batches of drug product packed at the proposed site, and report if any results fall outside shelf-life specifications (with proposed action) or when requested.
MiV-PA 9	**Change of batch size of drug product**
Conditions to be fulfilled	a. The change does not affect consistency of production. b. The product formulation remains unchanged. c. Shelf-life specifications of drug product remain unchanged. d. This is applicable to change of batch size up to 10-fold compared to the approved batch size. e. The manufacturing process shall remain unchanged
Documents to be submitted	a. Justification for the proposed change b. Comparative tabulated format of approved and proposed batch size and batch manufacturing formula. c. Validation scheme and/or report of the manufacturing process of the proposed batch size. d. Copy of registration letter and last renewal status. e. Specifications of the drug product f. Revised section of registration application form (where applicable). g. Release and shelf-life specifications of the drug product. h. Certificate of analysis and/or batch analysis data (in a comparative tabulated format) of drug product of at least two production batches manufactured according to approved and proposed batch sizes. i. For oral solid dosage forms, comparative dissolution profile for at least one production batch (where applicable). j. Appropriate real time and accelerated stability data to support proposed variation.
MiV-PA 10	**Quantitative change in coating of tablets and/or size of capsule shell**
Conditions to be fulfilled	a. The dissolution profile of the proposed product is comparable to that of the approved product. b. Specifications of the drug product remain unchanged except for the weight and/or size (where applicable).
Documents to be submitted	a. Justification for the proposed change. b. Comparative tabulated format of approved and proposed product and batch manufacturing formula. c. Comparative dissolution profile data of at least one production batch of the

	drug product manufactured in the approved and proposed composition for oral solid dosage forms. d. Revised draft of product label incorporating the proposed change (where applicable). e. For modified release oral products, stability data of the drug product and to report if any results fall outside shelf-life specifications (with proposed action) f. Copy of registration letter and last renewal status. g. Specifications of drug product. h. A declaration/ undertaking that: i. The change does not interfere with the drug product specifications test method. ii. The relevant stability studies of the drug product have been started and shall be reported if any results fall outside specifications (with proposed action).
MiV-PA 11	**Change of dimensions and/or shape of tablets, capsules, suppositories or Pessaries**
Conditions to be fulfilled	There will be no qualitative or quantitative change in API.
Documents to be submitted	a. Justification for the proposed change. b. Revised drafts of the package insert and labeling incorporating the proposed variation (where applicable). c. Copy of registration letter and last renewal status. d. Detailed drawing or written description of the approved and proposed appearance. e. Comparative dissolution profile data of at least one production batch of the drug product manufactured in the approved and proposed dimensions/shape for oral solid dosage forms. f. For scored tablets, data on test of uniformity of the subdivided parts of tablets at release as conformed to compendia requirement. g. Specifications of the drug product with proposed dimension and/or shape.
MiV-PA 12	**Change of secondary packaging materials**
Conditions to be fulfilled	The proposed packaging material must be at least equivalent to the approved material in respect of its relevant properties

Documents to be submitted	a. Justification for the proposed change. b. Tabulated differences between existing and proposed information. c. Copy of registration letter and last renewal status d. An undertaking that: i. The proposed color scheme / label has no resemble with already registered Products. In case of resemblance, new label will be changed immediately. ii. Proposed change has not impact on the shelf life of the product. iii. No case is pending at any forum / court of law regarding this matter.
MiV-PA 13	**Change in the design or color scheme of packaging material**
Conditions to be fulfilled	a. The proposed packaging design/color scheme must not resemble to already registered product. b. Packaging material shall remain same
Documents to be submitted	a. Justification for the proposed change. b. Tabulated comparison of differences between existing and proposed design. c. Regulatory approval of change from country of export in case of imported drug. d. Copy of registration letter and last renewal status e. An undertaking/ declaration that: i. No case is pending at any forum / court of law regarding this matter. ii. All information related to the product like dosage, administration, indication and direction for use etc. on the label are in line with the registration / marketing authorization. iii. The proposed label complies all provisions of relevant rules and regulations.
MiV-PA 14	**Change of the coloring agent /capsule shell color of the product**
Conditions to be fulfilled	a. Same functional characteristics / specifications including no change in dissolution profile for solid oral dosage forms. b. The proposed coloring agents /capsule shell are of pharmaceutical grade. c. The specifications of the drug product remain unchanged, except for the update of product description with respect to appearance/odor/taste as a consequence of the change (where applicable).
Documents to be submitted	a. Justification for the proposed change. b. Revised drafts of the package insert and labeling incorporating the proposed variation (where applicable).

	c. Revised product formulation and batch manufacturing formula. d. Copy of registration letter and last renewal status. e. Tabulated comparison of qualitative and quantitative information of the approved and proposed coloring agent /capsule shell color. f. For proposed excipients made of ruminant's source, Transmitting Animal Spongiform Encephalopathy (TSE)-free certificate or Bovine Spongiform Encephalopathy (BSE)-free certificate issued from relevant authority of the issuing country and/or documentary evidence from the supplier (where applicable). g. Revised specifications of the drug product. h. Certificate of Analysis of proposed coloring agent /capsule shell (where applicable). i. A declaration/ undertaking that: i. The proposed coloring agent/capsule shell color does not interfere with the drug product specifications test method. ii. A letter of commitment from marketing authorization holder to inform users of the relevant change (where applicable). iii. Stability study has been started and report if any results fall outside drug product specifications (with proposed action).
MiV-PA 15	**Addition/ change of flavoring agent of the product e.g oral liquid/ dry powder suspension/sachet**
Conditions to be fulfilled	a. Same functional characteristics, no change in dissolution profile for solid oral dosage forms. b. The proposed flavoring agents must be of pharmaceutical use. c. The specifications of the drug product remain unchanged, except for the update of product description with respect to flavor/taste as a consequence of the change (where applicable).
Documents to be submitted	a. Justification for the proposed change. b. Revised drafts of the package insert and labeling incorporating the proposed variation (where applicable). c. Revised product formulation and batch manufacturing formula. d. Tabulated comparison of qualitative and quantitative information of the approved and proposed flavoring agent. e. Copy of registration letter and last renewal status f. For proposed excipients made of ruminant's source, Transmitting Animal Spongiform Encephalopathy (TSE)-free certificate or Bovine Spongiform Encephalopathy (BSE)-free certificate issued from relevant authority of the issuing country and/or documentary evidence from the supplier (where applicable). g. Revised specifications of the drug product.

	h. Certificate of Analysis of proposed flavoring agent (where applicable). i. A declaration/ undertaking that: i. The proposed flavoring agent does not interfere with the drug product specifications test method. ii. A letter of commitment from marketing authorization holder to inform users of the relevant change (where applicable). iii. Stability study has been started and report if any results fall outside drug product specifications (with proposed action).
MiV-PA 16	**Change of shape or dimension of container closure system**
Conditions to be fulfilled	a. The change only concerns the same packaging type and material. b. The proposed pack size is consistent with the dosage regimen and duration of use as approved in the package insert. c. Change in the dimension of the primary packaging (where applicable). d. Specifications of the drug product remain unchanged.
Documents to be submitted	a. Justification for the proposed changes in container closure system. b. Information on the proposed container-closure system (e.g. description, materials of construction, and specifications). c. Copy of registration letter and last renewal status. d. Revised drafts of the package insert and labeling incorporating the proposed variation (where applicable). e. Re-validation studies for manufacturing process and sterilization process performed in case of sterile products which are terminally sterilized. f. Revised Sections of registration applications (where applicable). g. A declaration/undertaking that the relevant stability studies of the drug product have been started and that the relevant stability studies shall be finalized; data shall be provided only if outside specification (with proposed action). h. The proposed label complies all provisions of relevant rules and regulations. i. An undertaking that: i. Other specifications of the product would remain the same. ii. There is no change in the qualitative & quantitative composition of the product and manufacturer will conduct product development, accelerated and real time stability studies, validation of manufacturing process and method of analysis before sale of drug. iii. In the case of changes to the thickness of a packaging component or for sterile FPPs: stability data (as per conditions of zone IV-A), where applicable, results of photo-stability studies will be conducted on 03 lab scale batches or developmental scale batches. iv. In the case of a change in the headspace or a change in the surface/volume ratio for non-sterile FPPs, a commitment for the above

	studies to ensure appropriate delivery. v. In case of any quality complaint/ OOS result observed by the marketing authorization holder as a result of this change, the same will be reported to MFDA and all the stock will be recalled from the market immediately.
MiV-PA 17	**Replacement of the company or party responsible for batch release**
Conditions to be fulfilled	a. Only applicable for batch release. b. Method transfer from the currently approved to the proposed site or test laboratory has been successfully completed. c. The manufacturer of the drug product remains the same
Documents to be submitted	a. Justification for the proposed change. b. Official letter from manufacturing company that the batch release responsible is changed. c. Proof that the proposed site is appropriately authorized (accredited by the NRA) to be responsible for batch release, such as a valid GMP certificate or CoPP which covers the GMP certification for imported products and MFDA approval for locally manufactured products. d. Copy of registration letter and last renewal status. e. Document for method transfer to the proposed site along with validation of method and mock testing on already manufactured batches, f. Revised drafts of the package insert and labeling incorporating the proposed variation (where applicable).
MiV-PA 18	**Change of in-process controls applied during the manufacture of the drug product (including tightening and addition of new in- process test)**
Conditions to be fulfilled	a. Release and shelf-life specifications of drug product remain unchanged. b.The change does not result from unexpected events arising during manufacture (e.g., new unqualified impurity, change in total impurity limit)
Documents to be submitted	a. Justification for the proposed change. b. Copy of registration letter and last renewal status. c. A description of the analytical methodology and summary of validation data must be provided for all new analytical methods (where applicable). d. Revised in-process specifications together with justification and relevant process validation data. e. Comparative tabulated format change of the in-process controls. f. Certificate of analysis and comparative batch analysis data of drug product of at least two production/pilot batches
MiV-PA 19	**Change in the test procedure of the drug product (including replacement or addition of a test procedure)**
Conditions to be	a. Drug product specifications are not adversely affected unless the specifications are tightened.

fulfilled	b. Results of method verification/validation show new test procedure to be at least equivalent to the former procedure. c. The change should not be the result of unexpected events arising during manufacture or because of stability concerns
Documents to be submitted	a. Justification for the proposed change. b. Copy of registration letter and last renewal status. c. Description of the analytical methodology. d. Appropriate verification/validation data and comparative analytical results between the currently approved and proposed test. e. Comparative tabulated format of the currently approved and proposed release and shelf-life specifications of the drug product. f. Certificate of analysis and batch analysis data of the finished product of two production batches when made available
MiV-PA 20	**Change of release and shelf-life specifications of the drug product** **a) Specification limits are tightened** **b) Addition of new test parameter and limits**
Conditions to be fulfilled	a. Applicable to non-compendial / non-pharmacopeial methods. b. The change should not be the result of unexpected events arising during manufacture or because of stability concerns. c. The test methods remain the same or changes in the test methods are minor. d. If there are changes to the test procedure, then relevant conditions and documents will be required.
Documents to be submitted	a. **Specification limits are tightened** i. Tabulated comparison of the current and revised release and shelf-life specifications of the drug product with changes highlighted. ii. Certificate of analysis and comparative batch analysis data of the drug product for all tests in the new specification of at least two batches. b. **Addition of new test parameter and limits** i. Justification for the proposed change ii. Description of new test parameter and limits along with validated method and summary of analytical validation data for non-compendial method. iii. Stability data and report if any results fall outside shelf-life specifications (with proposed action) (where applicable).
MiV-PA 21	**Standardization of formulation in accordance with the Innovator's Drug Product/ Reference Authorities and Pharmacopeias**
Conditions to be fulfilled	Existing formulation shall remain the same
Documents to be submitted	a. Justification for the proposed change. b. Copy of registration letter and last renewal status. c. Document in support of proposed correction/evidence of approval status by Reference Authorities/ innovator drug product and/ or Pharmacopeias. d. Undertaking that the provided information/ documents is true/ correct.

MiV-PA 22	**Reduction or removal of overage**
Conditions to be fulfilled	a. Change of previously approved manufacturing overages of drug substance only. b. Release and shelf-life specification of drug product remain unchanged.
Documents to be submitted	a. Justification for the proposed change. b. Tabulated comparison of currently approved and proposed batch manufacturing formula. c. Certificate of analysis of 2 batches of finished drug product. d. Stability data and report, if any result fall outside shelf-life specification.
MiV-PA 23	**Change in source of empty hard capsule**
Conditions to be fulfilled	a. No change in formulation and manufacturing process of drug product. b. No applicable to change from hard capsule to soft gel. c. Formulation including excipients will remain unchanged d. Release and shelf-life specification of drug product remain unchanged.
Documents to be submitted	a. Comparative dissolution profile data of one batch representative of pilot/production batch of the drug product using hard capsule between two sources (where applicable). b. Certificate of analysis of empty hard capsule of the proposed source. c. Specification and composition of empty hard capsule of new source (including origin i.e. synthetic, vegetable or animal source). d. Stability data and report, if any result fall outside shelf-life specification.
MiV-PA 24	**Addition or removal of score / break line on tablet**
Conditions to be fulfilled	a. Innovator drug product has same score / break line on tablet. b. Release and shelf-life specifications of the drug product remain unchanged except appearance.
Documents to be submitted	a. Justification of the proposed change (including change in dosage regimen) b. Details and specifications of the proposed change. c. Detailed drawing or written description of the current and proposed score / break line on tablet. d. Revised draft of package inserts and labeling incorporating the proposed variation (where applicable). e. Release and shelf-life specifications of drug product with new product description. f. Certificate of analysis of two production /pilot scale batches.

14.5 General consideration for variations.

14.5.1 Variations that are not listed in the table will be reviewed and processed by the Authority using a risk-based approach and under the recommended guidance of WHO "Guidance on variations to a prequalified product dossier".

14.5.2 The list of documentation in the table is meant for guidance purposes and it shall be noted that the Authority reserves the right to request further information not explicitly described in the guideline.

14.5.3 For all changes it remains the responsibility of the applicant to provide all necessary documents to demonstrate that the change does not have a negative impact on the safety, efficacy or quality of the finished pharmaceutical product.

14.6 Variations which will be not acceptable

a. Incomplete or Insufficient Data

- Reason: Lack of adequate scientific evidence to support the proposed change.
- Examples:
  - Missing validation data for new manufacturing processes.
  - Absence of stability studies for a new formulation.
  - Inadequate clinical data for an expanded indication.

b. Non-Compliance with Regulatory Guidelines

- Reason: Proposed variations that violate regulatory standards or fall outside the allowed scope.
- Examples:
  - Changes submitted in an incorrect variation category (e.g., Type IA instead of Type II in the EU).
  - Non-compliance with quality, safety, or efficacy guidelines.
  - Missing mandatory documents like GMP certifications.

c. Significant Alteration of Product Identity

- Reason: Changes that fundamentally alter the pharmaceutical's approved identity.
- Examples:
  - Changing the active ingredient or its salt/ester form.

- Switching the product's intended route of administration (e.g., from oral to injectable).
- Modifications that lead to a completely different dosage form or strength not covered by the initial approval.

d. Risk to Safety or Efficacy

- Reason: Variations introducing risks that cannot be mitigated through testing or data.
- Examples:

  - Substitution of critical excipients leading to altered pharmacokinetics or reduced efficacy.
  - Changes in the manufacturing process introducing impurities or affecting bioavailability.
  - Introduction of a new indication with insufficient clinical evidence.

e. Unapproved or Poorly Documented Manufacturing Facilities

- Reason: Use of facilities that do not meet GMP requirements or lack regulatory approval.
- Examples:
  - Changing of manufacturing site
  - Use of unqualified third-party contract manufacturers.

f. Variations Impacting Intellectual Property (IP) or Exclusivity

- Reason: Changes violating IP laws or infringing on patent rights.
- Examples:
  - Proposing a variation that copies a patented formulation or process.
  - Unauthorized use of proprietary excipients or technologies.

g. Variations Conflicting with Regulatory Agreements

- Reason: Deviations from commitments made during the original approval process.
- Examples:
  - Alterations to post-marketing commitments (e.g., agreed pharmacovigilance plans).
  - Failing to maintain previously approved manufacturing standards.

h. Lack of Scientific or Regulatory Justification

- Reason: Failure to provide a clear rationale for the proposed change.

- Examples:
    - Introducing changes without demonstrating their necessity or benefit.
    - Modifications that are cosmetic or unnecessary (e.g., minor labeling tweaks not improving readability).

i. Variations Impacting Product Supply Chain

- Reason: Changes disrupting the integrity or traceability of the product.
- Examples:
    - Switching primary packaging to materials not validated for stability.
    - Introducing a distribution channel that violates cold chain requirements.

j. Timing or Scope of Variation Not Permitted

- Reason: Regulatory rules or agreements may restrict certain changes during specific periods or for specific products.
- Examples:
    - Proposing changes during ongoing product recalls or safety investigations.
    - Submitting variations for products under temporary approval conditions (e.g., emergency use authorizations).

k. Regulatory Considerations:

- Pre-Consultation: Consult with regulatory authorities before submitting complex or non-standard variations.
- Impact Analysis: Conduct thorough risk assessments to understand the variation's impact on safety, efficacy, and quality.
- Alternatives: If a variation is likely to be rejected, consider alternative approaches, such as filing a new marketing authorization.

15 Special Permissions and Exemptions

15.1 MFDA grants special permission for import of unregistered drugs to hospital to ensure access of drugs for the treatment of patients. These exemptions are granted in the form of Preauthorization in reference to the Guideline for Pre-Authorization Approval of Medicines (MTG-RE-PA/GLN-TE 010) and are exclusively granted to hospitals for use of medicines in their own facilities only.

15.2 These permissions are subjected to following points: -

a. For hospital use medicines that are essential and low in volume and quantity due to difficulties in acquiring the required documentation for registration, exemption approvals will be given to hospitals to import that specific product.
b. The approvals will be given under a set of conditions by means of a signed agreement between MFDA and the importing hospital.

16 Clinician's Request for Approval of New Medicine

16.1 This form is introduced to the doctors to request to add new chemicals, new dosage form or new strengths, to the Approved Drug List upon the requirement of the patients, and to make sure to maintain the uninterrupted availability of the medicines.

16.2 Required Documents

a. A completed "Clinician's Request for Approval of New Medicine" signed by the requesting doctor and approved by head of the applicants' organization/Health facility.
b. Additional information and the picture shots of the product.
c. Research Paper of the product

16.3 Process of clinician form

16.3.1 If the application is for a new chemical, new strength and new dosage form, and the form is filled in completely and provides the required document the application will be accepted.

16.3.2 The evaluation will be carried out within the next 45 (Forty-five) working days.

16.3.3 Once the product has been approved by NPB the product will be added to ADL and inform the client within 7 working days.

16.4 Rejection of Form

16.4.1 If the application is incomplete or if the application is form for an existing medicine in the ADL, the application will be rejected and informed to the applicant during working 7 days via email.

17 Post Marketing Surveillance

17.1 Once the product is registered, imported and introduced to the market, the product shall be on surveillance as to ensure that the same product registered is in the market and if the product is safe, of good quality and efficacy in accordance with the applied documents for registration.

17.2 Once registered, as part of the post market surveillance, samples will be collected from the market and tested from National Health Laboratory NHL as well as the assigned laboratory from abroad and these results will be published.

18 References

1. WHO Global Benchmarking Tool (GBT) for Evaluation of National Regulatory Systems of Medical Products, Revision VI. Geneva: World Health Organization; 2021.
2. World Health Organization, WHO Technical Report Series, No. 863, 1996.
3. WHO Technical Report Series No. 970, 2012
4. ICH Quality guidelines Q1A – Q1F Stability.
5. World Health Organization. *List of stringent regulatory authorities*. World Health Organization. Retrieved from https://www.who.int/initiatives/who-listed-authority-reg-authorities/SRAs#:~:text=The%20concept%20of%20a%20stringent,international%20regulatory%20and%20procurement%20community.
6. World Health Organization. (2017). (Technical Report Series). *WHO Expert Committee on Specifications for Pharmaceutical Preparations* (Fifty first, Ser. no. 1003, pp. 13–252) Retrieved from https://www.who.int/publications/i/item/9789241210034
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characteristics#:~:text=A%20document%20describing%20the%20properties,Abbreviated%20as%20SmPC.

EUA

10. ICH Expert Working Group. (2003). *Stability Guidelines Q1A-Q1F*. International Conference on Harmonization. Retrieved from https://database.ich.org/sites/default/files/Q1A%28R2%29%20Guideline.pdf
11. ICH Expert Working Group. (1999). *Specifications: Test Procedures and Acceptance Criteria for New Drug Substances and New Drug Products Q6A.* International Conference on Harmonization. Retrieved from https://database.ich.org/sites/default/files/Q6A%20Guideline.pdf
12. ICH Expert Working Group. (2000). *Good Manufacturing Practice Guide for Active Pharmaceutical Ingredients Q7*. International Conference on Harmonization. Retrieved from https://database.ich.org/sites/default/files/Q7%20Guideline.pdf

Annex-I

Letter of Appointment

Maldives Food and Drug Authority

Ministry of Health and Family

Male`, Republic of Maldives

Statement by the Local Applicant for submission of Application

1) I have received and accepted the entire dossier from **Company name and address** for the product **Name of the product, Brand/ Generic/ Dosage Form/ Strength**.

This dossier includes all data in support of the original documents as per the format of MFDA.

2) I hereby agree that I have sole responsibility for the mentioned product including obtaining approvals for any subsequent product variation and maintenance of the product registration.

3) I declare that information submitted in this application is correct and complete. I authorize the Maldives Food and Drug Authority to obtain information from any institution previously or currently associated with my company. If any information supplied by me is considered to be false, incomplete or misleading in any aspect, Maldives Food and Drug Authority has the right to take action as it believes necessary including the disclosure of the information to any person or body the Maldives Food and Drug Authority considers has a legitimate interest in receiving it and I consent to such disclosure. I understand the Maldives Food and Drug Authority reserves the right to vary or revoke any decision made on the basis of untrue, incomplete or misleading information. Moreover, I will co-

operate with any person representing the Maldives Food and Drug Authority, by providing additional information or making the manufacturing premises available for inspection as required.

4) I also acknowledge the responsibility in the event of pharmacovigilance issues or quality defects associated with the product that may occur after the registration.

5) The information provided to the Maldives Food and Drug Authority contain confidential information that can hinder our business and hence this information shall be kept confidential and shall not be disclosed to any third party without our consent.

6) I shall take the responsibility for updating any information relevant to the product/application and will take the initiative to inform MFDA in a timely manner any change in product information during the course of evaluation, and after product registration, especially if the information pertains to rejection/withdrawal and will provide, additional data on product efficacy and safety or current Good Manufacturing Practice (cGMP) compliance of the manufacturers (and repackers, if applicable).

7) I will also supply relevant information in case where the manufacturing facility is sold, merged or changed to another.

8) As the local agent for marketing the product, I shall take full responsibility for assuring the quality, safety and efficacy of this product throughout the supply chain.

Applicant representative information (whom MFDA will contact);

Name:

Phone number

Email:

Signed:
Full Name:
Identity Card Number:
Full Address:
Status of the signatory:

(To be signed by the managing director/president/CEO or an equivalent person who has overall responsibility for the company or organization)
Official company stamp:
Fax Number/Telephone Number:
E mail contact details:
Date:

Annex-II

Reference countries list for Reliance

#	Country	Authority	Reliance Scope	Reliance Criteria
1	Australia	Therapeutic Goods Administration	Medicines and Vaccines	A stringent regulatory authority (SRA)
2	Austria	Austrian Agency for Health and Food Safety (AGES)	Medicines and Vaccines	A stringent regulatory authority (SRA)
3	Belgium	Federal Agency for Medicines and Health Products (FAMHP)	Medicines and Vaccines	A stringent regulatory authority (SRA)
4	Bulgaria	Bulgarian Drug Agency	Medicines and Vaccines	A stringent regulatory authority (SRA)
5	Canada	Health Canada	Medicines and Vaccines	A stringent regulatory authority (SRA)
6	Croatia	Agency for Medicinal Products and Medical Devices of Croatia (HALMED)	Medicines and Vaccines	A stringent regulatory authority (SRA)
7	Cyprus	Ministry of Health — Pharmaceutical Services	Medicines and Vaccines	A stringent regulatory authority (SRA)
8	Czech Republic	State Institute for Drug Control (SUKL)	Medicines and Vaccines	A stringent regulatory authority (SRA)
9	Denmark	Danish Medicines Agency	Medicines and Vaccines	A stringent regulatory authority (SRA)
10	Estonia	State Agency of Medicines (Ravimiamet)	Medicines and Vaccines	A stringent regulatory authority (SRA)
11	Finland	Finnish Medicines Agency (Fimea)	Medicines and Vaccines	A stringent regulatory authority (SRA)

12	France	National Agency for the Safety of Medicine and Health Products (ANSM)	Medicines and Vaccines	A stringent regulatory authority (SRA)
13	Ghana	Food And Drugs Authority (FDA)	Medicines and Vaccines	Maturity Level 3, based on WHO GBT Assessment
14	Germany	Federal Institute for Drugs and Medical Devices	Medicines and Vaccines	A stringent regulatory authority (SRA)
15	Greece	National Organization for Medicines	Medicines and Vaccines	A stringent regulatory authority (SRA)
16	Hungary	National Institute of Pharmacy and Nutrition (OGYEI)	Medicines and Vaccines	A stringent regulatory authority (SRA)
17	Iceland	Icelandic Medicines Agency	Medicines and Vaccines	A stringent regulatory authority (SRA)
18	Indonesia	BADAN POM (Agency for Drug and Food Control, or Indonesian FDA)	Medicines and Vaccines	Maturity Level 3, based on WHO GBT Assessment
19	Ireland	Health Products Regulatory Authority	Medicines and Vaccines	A stringent regulatory authority (SRA)
20	Italy	Italian Medicines Agency (AIFA)	Medicines and Vaccines	A stringent regulatory authority (SRA)
21	Japan	Ministry of Health, Labour and Welfare/Pharmaceuticals and Medical Devices Agency	Medicines and Vaccines	A stringent regulatory authority (SRA)
22	Latvia	State Agency of Medicines	Medicines and Vaccines	A stringent regulatory authority (SRA)
23	Liechtenstein	Office of Health / Department of Pharmaceuticals	Medicines and Vaccines	A stringent regulatory authority (SRA)

24	Lithuania	State Medicines Control Agency (VVKT)	Medicines and Vaccines	A stringent regulatory authority (SRA)
25	Luxembourg	Ministry of Health	Medicines and Vaccines	A stringent regulatory authority (SRA)
26	Malta	Medicines Authority	Medicines and Vaccines	A stringent regulatory authority (SRA)
27	Netherlands	Health and Youth Care Inspectorate (IGZ)	Medicines and Vaccines	A stringent regulatory authority (SRA)
28	Nigeria	National Agency for Food and Drug administration and control (NAFDAC)	Medicines and Vaccines	Maturity Level 3, based on WHO GBT Assessment
29	Norway	Norwegian Medicines Agency	Medicines and Vaccines	A stringent regulatory authority (SRA)
30	Poland	Chief Pharmaceutical Inspectorate	Medicines and Vaccines	A stringent regulatory authority (SRA)
31	Portugal	National Authority of Medicines and Health Products (Infarmed)	Medicines and Vaccines	A stringent regulatory authority (SRA)
32	Republic of Korea	Ministry of Food and Drug Safety (MFDS)intlpharm@korea.kr	Medicines and Vaccines	Maturity Level 4, based on WHO GBT Assessment
33	Romania	National Agency for Medicines and Medical Devices	Medicines and Vaccines	A stringent regulatory authority (SRA)
34	Saudi Arabia	Saudi Food and Drug Authority (SFDA)	Medicines and Vaccines	Maturity Level 4, based on WHO GBT Assessment
35	Singapore	Health Sciences Authority (HSA)	Medicines and Vaccines	Maturity Level 4, based on WHO GBT Assessment

36	Slovakia	State Institute for Drug Control (SIDC)	Medicines and Vaccines	A stringent regulatory authority (SRA)
37	Slovenia	Agency for Medicinal Products and Medical Devices (JAZMP)	Medicines and Vaccines	A stringent regulatory authority (SRA)
38	Spain	Spanish Agency of Medicines and Medical Devices (AEMPS)	Medicines and Vaccines	A stringent regulatory authority (SRA)
39	Sweden	Medical Products Agency	Medicines and Vaccines	A stringent regulatory authority (SRA)
40	Switzerland	Swiss Agency for Therapeutic Products (Swissmedic)	Medicines and Vaccines	A stringent regulatory authority (SRA)
41	Tanzania	Tanzania medicines and Medical Devices Authority (TMDA)	Medicines and Vaccines	Maturity Level 3, based on WHO GBT Assessment
42	Türkiye	Turkish medicines and Medical Devices Authority (TITCK)	Medicines and Vaccines	Maturity Level 3, based on WHO GBT Assessment
43	United Kingdom	Medicines and Healthcare products Regulatory Agency (MHRA)	Medicines and Vaccines	A stringent regulatory authority (SRA)
44	United States of America	Food and Drug Administration	Medicines and Vaccines	A stringent regulatory authority (SRA)
45	Zimbabwe	Medicines Control Authority of Zimbabwe (MCAZ)	Medicines and Vaccines	Maturity Level 3, based on WHO GBT Assessment
46	China	National Medicines Products Administration (NMPA)	Vaccines only	Maturity Level 3, based on WHO GBT Assessment
47	India	Central Drugs Standard Control Organization (CDSCO)	Vaccines only	Maturity Level 3, based on WHO GBT Assessment

48	Thailand	Food and Drug Administration	Vaccines only	Maturity Level 3, based on WHO GBT Assessment

- ***A stringent regulatory authority (SRA) is a national drug regulation authority which the World Health Organization (WHO) considers to apply stringent standards for quality, safety, and efficacy in its process of regulatory review of drugs and vaccines for marketing authorization***
- ***Maturity level 3: Meaning "stable, well-functioning and integrated regulatory systems"***
- ***Maturity Level 4: Meaning "regulatory systems operating at advanced level of performance and continuous improvement***

Annex III

Product information required for Reliance

<table>
<tr><td colspan="2">Minimum information required for reliance for Market Authorization</td></tr>
<tr><td colspan="2">The following information should be accessible from the reference NRA (publicly, or shared by the NRA, e.g. upon request): ingredient (API)/drug substance</td></tr>
<tr><td>1.</td><td>Evidence of approval from the reference organization with sufficient details (in one or several documents, e.g. evidence of MA, public[1] evaluation reports or CoPP). This shall be submitted as a separate attachment.</td></tr>
<tr><td>2.</td><td>Proprietary product name /Brand Name:</td></tr>
<tr><td>3.</td><td>International Nonproprietary Name (INN) of the active pharmaceutical /Generic Name:</td></tr>
<tr><td>4</td><td>Composition:
<table>
<tr><th>Component and quality standard</th><th>Function of the component in the formulation</th><th>Quantity per unit (mg)</th><th>%</th></tr>
<tr><td></td><td></td><td></td><td></td></tr>
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<tr><td>Total</td><td></td><td></td><td></td></tr>
</table></td></tr>
<tr><td>5.</td><td>Strength:</td></tr>
<tr><td>6.</td><td>Pharmaceutical form (Dosage form):</td></tr>
<tr><td>7.</td><td>Indication or Use of the product:</td></tr>
<tr><td>8.</td><td>Storage conditions:</td></tr>
<tr><td>9.</td><td>Shelf life of the product:</td></tr>
<tr><td>10.</td><td>Attach Stability summary and conclusions (including the storage statement and shelf-life)</td></tr>
<tr><td>11.</td><td>Dispensing Category:</td></tr>
<tr><td>12.</td><td>Pack size / Volume:</td></tr>
<tr><td>13.</td><td>WHO ATCC code:</td></tr>
</table>

14.	Date of approval by the reference organization: Date of approval with Link to verify
15.	Marketing authorization number from the reference organization (if applicable):
16.	Name(s) and complete address(es) (including specific unit/blocks) of the manufacturer(s) of the finished pharmaceutical product(s) [FPP(s)] or biological drug products(s) (DP(s)), including the final product release if different from the manufacturer:
17.	Attach Detailed description of the primary and secondary packing including pack size or volume
18.	Attach Product information for healthcare professionals (SMPC)
19.	Provide a valid GMP certificate or incorporate the information in this sheet as per the mentioned information below, if providing a certificate, it must be attached separately. cGMP certificate information, including: o certificate number o applicable standards o site name o site address o issue date and validity o Scope: product o Scope: Manufacturing operations
20.	Attach Public[2] evaluation reports (for new medicines[3] only)
In addition, the following information is also required but would generally be accessed through the applicant as it may be considered to be confidential:	
21.	Attach Declaration of sameness of the product as that of the product registered and approved in the reference NRA
22.	Attach, as far as possible, the full unredacted assessment reports from the reference authority/institution
23.	Name and complete address (including specific unit/blocks) of the API/drug substance manufacturer(s):
24.	Attach detailed Description (visual appearance) of the finished pharmaceutical product (eg:color , texture etc of tablet, syrup etc)
25.	Attach Specifications for the finished product
26.	Attach Product information for patients including product artwork
27.	Cost and propose retail price in USD:

1 Unredacted assessment reports are also evidence of approval but are generally not accessible publicly. The sharing of such document would usually require a Memorandum of Understanding and/or a Confidential Disclosure Agreement

2 Unredacted assessment reports would be ideal but they are generally not accessible publicly. The sharing of such document would usually require a Memorandum of Understanding and/or a Confidential Disclosure Agreement.

3 In the context of this document, new medicines/vaccines refer to either a substance, association of substances, pharmaceutical form, dosage, indication, or posology which has never been granted a marketing authorization in the country.

References:

Members can refer to the Template/ checklist for countries to conduct "Recognition" OR "Verification of the product sameness for MA/RI": Appendix 2, Verification for product submitted under the WHO collaborative procedure (page 259*), https://apps.who.int/iris/bitstream/handle/10665/312316/9789241210287-eng.pdf?sequence=1&isAllowed=y#page=249&zoom=auto,-182,680*

Model certificate of a Certificate of a pharmaceutical product*: https://www.who.int/teams/regulation-prequalification/regulation-andsafety/regulatory-convergence-networks/certification-scheme/modelcertificate-of-a-pharmaceutical-product*

Annex IV

Excipient at risk for DEG and EG

These are the list of excipients added to oral liquid preparations which are at risk for DEG/EG contamination and Adulteration

1. **Glycerin or Glycerol**
2. **Saccharide and Polysaccharide solutions**
3. **Sorbitol solutions.**
    - Noncrystallizing sorbitol solution
    - Sorbitol sorbitan solution
    - Maltitol solution
    - Liquid products of hydrogenated starch hydrolysate
4. **Propylene glycol**
5. **Ethoxylated excipients**
    - Polyethylene glycol 200
    - Polyethylene glycol 300
    - Polyethylene glycol 400
    - Polyethylene glycol 600
    - Polyethylene glycol 1000
    - Polysorbate 20
    - Polysorbate 40
    - Polysorbate 60
    - Polysorbate 80
    - Polyethylene glycol monomethyl ether 350
    - Polyethylene glycol monomethyl ether 550
    - Polyoxyl 35 castor oil
    - Polyoxyl 15 hydroxystearate
    - Polyoxyl 20 cetostearyl ether
    - Polyoxyl 8 stearate; Octoxynol 9
    - Nonoxynol 9

Annex-V

Checklist for Reliance Applications

Maldives Food and Drug Authority

Ministry of Health

Male`

Republic of Maldives

Rec.No: MTG/RE-ES/Re-0005/2024 - 000

1. Registration Pathways		
Reliance Option 1.1.1. Reliance on MA (approved by reference NRAs)	**5 years**	☐
Reliance Option1.2.1 GMP verification (manufacturing site certified by PIC/S member NRA) Abridge	**5 years**	☐
Reliance Option 1.2.2 WHO prequalified products/manufacturers	**5 years**	☐

Reliance Option 1.3.1 Collaboraive registration procedure (CRP-PQ)	**5 years**	☐
Reliance Option 1.3.2 Collaboraive registration procedure (CRP-SRA)	**5 years**	☐
Notification: These are for low-risk medicines like vitamins and vitamin preparation that are categorized as medicines.	**5 years**	☐

2. Registration type (to be filled by MFDA)

Date of Submission	
Date of Acceptance	
A) New Registration	
B) Re-registration	

3. Product Evaluation Summary

	Client submitted information	Evaluation Remarks	Check and verified
A. General Information for all applications			
Letter of appointment from the local agent			
Letter from manufacturer to MFDA			
Artwork, 360 angle picture of the product with package insert.			
B. Information required for Reliance: Option 1.1.1. Reliance on MA (approved by reference NRAs)			
1) Evidence of approval from the country of manufacture (A link should be provided to trace the evidence or registration or marketing authorization certificate.)			
2) Evidence of approval and marketing in one reference country as mentioned in Annex II. (A link should be provided to trace the evidence or registration or marketing authorization certificate.)			
3)Product information for reliance as in Annex III:			

3.1 Evidence of approval from the reference organization with sufficient details (in one or several documents, e.g. evidence of MA, public1 evaluation reports or CoPP). This shall be submitted as a separate attachment. (THIS IS SAME AS IN POINT 2 OF THIS CLAUSE)			
3.2 Proprietary product name /Brand Name:			
3.3 International Nonproprietary Name (INN) of the active pharmaceutical /Generic Name:			
3.4 Compositions including all active and non-active ingredients:			
Component and quality standard	**Function of the component in the formulation**	**Quantity per unit (mg) %**	**%**

Total			
3.5 Strength:			
3.6 Pharmaceutical form (Dosage form):			
3.7 Indication or Use of the product:			
3.8 Storage conditions:			
3.9 Shelf life of the product:			
3.10 WHO ATCC code:			
3.11 Stability summary and conclusions (including the storage statement and shelf-life) This to be attached			
3.12 Dispensing Category:			
3.13 Pack size / Volume:			
3.14 Date of approval by the reference organization: Date of approval with Link to verify			

3.15 Marketing authorization number from the reference organization (if applicable):			
3.16 Name(s) and complete address(es) (including specific unit/blocks) of the manufacturer(s) of the finished pharmaceutical product(s) [FPP(s)] or biological drug products(s) (DP(s)), including the final product release if different from the manufacturer:			
3.17 Detailed description of the primary and secondary packing including pack size or volume to be attached			
3.18 Attach Product information for healthcare professionals (SMPC)			
3.19 Provide a valid GMP certificate or incorporate the information in this sheet as per the mentioned information below, if providing a certificate, it must be attached separately. cGMP certificates information, including:			
3.19.1 certificate number			
3.19.2 applicable standards			
3.19.3 site name			
3.19.4 site address			
3.19.5 issue date and validity			

3.19.6 Scope: products			
3.19.7 Scope: Manufacturing operations			
3.19.8 Authorizating organization:			
3.20 Attach Public assessment reports (for new medicines only)			
3.21 Attach Declaration of sameness of the product as that of the product registered and approved in the reference NRA			
3.22Attach, as far as possible, the full unredacted assessment reports from the reference authority/institution or a link to verify this information.			
3.23 Name and complete address (including specific unit/blocks) of the API/drug substance manufacturer(s):			
3.24 Attach detailed Description (visual appearance) of the finished pharmaceutical product (eg:color , texture etc of tablet, syrup etc)			
3.25 Attach Specifications for the finished product			
3.26 Attach Product information for patients.			
3.27 Cost and propose retail price in USD:			
4) Stability study report covering applicable climatic zone as mentioned in section F 2.1, F12, (2.1) and F3			

B. Information required for Reliance: Option 1.2.1 Manufacturing site certified by PIC/S member NRA			
1) Submit the evidence of PIC/S-GMP compliance for the site where the finished dosage form is manufactured and batch release takes place.			
2)Submit Evidence of approval by the NRA of the country where the finished dosage form is manufactured, and batch release takes place. For this, a link should be provided to trace the evidence or registration or marketing authorization certificate			
3) Submit verifiable declaration of approval by at least 3 other NRAs. For this, a link should be provided to trace the evidence or registration or marketing authorization certificate. (NRA website shall verify that the product is registered there even though CoPP is provided)			
4)Product information for reliance as in Annex III :			
4.1Evidence of approval from the reference organization with sufficient details (in one or several documents, e.g. evidence of MA, public1 evaluation reports or CoPP). This shall be submitted as a separate attachment. (THIS IS SAME AS IN POINT 2 OF THIS CLAUSE)			
4.2Proprietary product name /Brand Name:			

4.3International Nonproprietary Name (INN) of the active pharmaceutical /Generic Name:			
4.4 Compositions:			
Component and quality standard	**Function of the component in the formulation**	**Quantity per unit (mg) %**	**%**
Total			
4.5 Strength:			
4.6 Pharmaceutical form (Dosage form):			

4.7 Indication or Use of the product:			
4.8 Storage conditions:			
4.9 Shelf life of the product:			
4.10 WHO ATCC code:			
4.11 Stability summary and conclusions (including the storage statement and shelf-life) This to be attached			
4.12 Dispensing Category:			
4.13 Pack size / Volume:			
4.14 Date of approval by the reference organization: Date of approval with Link to verify			
4.15 Marketing authorization number from the reference organization (if applicable):			
4.16 Name(s) and complete address(es) (including specific unit/blocks) of the manufacturer(s) of the finished pharmaceutical product(s) [FPP(s)] or biological drug products(s) (DP(s)), including the final product release if different from the manufacturer:			
4.17 Detailed description of the primary and secondary packing including pack size or volume to be attached			

4.18 Attach Product information for healthcare professionals (SMPC)			
4.19 Provide a valid GMP certificate or incorporate the information in this sheet as per the mentioned information below, if providing a certificate, it must be attached separately. cGMP certificates information, including:			
4.19.1 certificate number			
4.19.2 applicable standards			
4.19.3 Site name			
4.19.4 Site address			
4.19.5 Issue date and validity			
4.19.6 Scope: products			
4.19.7 Scope: Manufacturing operations			
4.20 Attach Public evaluation reports (for new medicines only)			
4.21 Attach Declaration of sameness of the product as that of the product registered and approved in the reference NRA			
4.22Attach, as far as possible, the full unredacted assessment reports from the reference authority/institution			

4.23 Name and complete address (including specific unit/blocks) of the API/drug substance manufacturer(s):			
4.24 Attach detailed Description (visual appearance) of the finished pharmaceutical product (eg:color , texture etc of tablet, syrup etc)			
4.25 Attach Specifications for the finished product			
4.26 Attach Product information for patients including product artwork			
4.27 Cost and propose retail price:			
5)Stability study report covering applicable climatic zone as mentioned in section F 2.1, F12, (2.1) and F3			
B. Information required for Reliance: Option 1.2.2 Manufacturing site of a WHO prequalified products			
1) Submit Evidence that a WHO prequalified medicine or vaccine is manufactured and the batch released on the same site https://extranet.who.int/prequal/medicines/prequalified/finished-pharmaceutical-products			
2) Submit Evidence of approval by the NRA of the country where the finished dosage form is manufactured, and batch release takes place. For this, a link should be provided to trace the evidence or registration or marketing authorization certificate.			

3) Submit Verifiable declaration of approval by at least 3 other NRAs. For this, a link should be provided to trace the evidence or registration or marketing authorization certificate. (NRA website shall verify that the product is registered there even though CoPP is provided)			
4)Product information for reliance as in Annex III:			
4.1Evidence of approval from the reference organization with sufficient details (in one or several documents, e.g. evidence of MA, public1 evaluation reports or CoPP). This shall be submitted as a separate attachment. (THIS IS SAME AS IN POINT 2 OF THIS CLAUSE)			
4.2Proprietary product name /Brand Name:			
4.3International Nonproprietary Name (INN) of the active pharmaceutical /Generic Name:			
4.4 Compositions:			
Component and quality standard	**Function of the component in the formulation**	**Quantity per unit (mg) %**	**%**

Total			
4.5 Strength:			
4.6 Pharmaceutical form (Dosage form):			
4.7 Indication or Use of the product:			
4.8 Storage conditions:			
4.9 Shelf life of the product:			
4.10 WHO ATCC code:			
4.11 Stability summary and conclusions (including the storage statement and shelf-life) This to be attached			
4.12 Dispensing Category:			
4.13 Pack size / Volume:			

4.14 Date of approval by the reference organization: Date of approval with Link to verify			
4.15 Marketing authorization number from the reference organization (if applicable):			
4.16 Name(s) and complete address(es) (including specific unit/blocks) of the manufacturer(s) of the finished pharmaceutical product(s) [FPP(s)] or biological drug products(s) (DP(s)), including the final product release if different from the manufacturer:			
4.17 Detailed description of the primary and secondary packing including pack size or volume to be attached			
4.18 Attach Product information for healthcare professionals (SMPC)			
4.19Provide a valid GMP certificate or incorporate the information in this sheet as per the mentioned information below, if providing a certificate, it must be attached separately. cGMP certificates information, including:			
4.19.1 certificate number			
4.19.2 applicable standards			
4.19.3 Site name			

4.19.4 Site address			
4.19.5 Issue date and validity			
4.19.6 Scope: products			
4.19.7 Scope: Manufacturing operations			
4.20 Attach Public evaluation reports (for new medicines only)			
4.21 Attach Declaration of sameness of the product as that of the product registered and approved in the reference NRA			
4.22Attach, as far as possible, the full unredacted assessment reports from the reference authority/institution			
4.23 Name and complete address (including specific unit/blocks) of the API/drug substance manufacturer(s):			
4.24 Attach detailed Description (visual appearance) of the finished pharmaceutical product (eg:color , texture etc of tablet, syrup etc)			
4.25 Attach Specifications for the finished product			
4.26 Attach Product information for patients including product artwork			
4.27 Cost and propose retail price:			

B. Information required for Reliance: Option 1.3.1 Collaborative registration procedure (CRP) - prequalified (PQ/SRA)

1)Letter of manufacturer showing interest in going for this pathway.			
4.2Proprietary product name /Brand Name:			
4.3International Nonproprietary Name (INN) of the active pharmaceutical /Generic Name:			
4.4 Compositions:			
Component and quality standard	**Function of the component in the formulation**	**Quantity per unit (mg) %**	**%**

Total			
4.5 Strength:			
4.6 Pharmaceutical form (Dosage form):			
4.7 Indication or Use of the product:			
4.8 Storage conditions:			
4.9 Shelf life of the product:			
4.10 WHO ATCC code:			
4.12 Dispensing Category:			
4.13 Pack size / Volume:			
4.16 Name(s) and complete address(es) (including specific unit/blocks) of the manufacturer(s) of the finished pharmaceutical product(s) [FPP(s)] or biological drug products(s) (DP(s)), including the final product release if different from the manufacturer:			
4.17 Detailed description of the primary and secondary packing including pack size or volume to be attached			

4.23 Name and complete address (including specific unit/blocks) of the API/drug substance manufacturer(s):			
C. Notification			
1) Evidence of approval by the NRA of the country where the finished dosage form is manufactured and batch release takes place. For this, a link should be provided to trace the evidence or registration or marketing authorization certificate.			
2) Verifiable declaration of regulatory status in at least 3 other NRAs. For this, a link should be provided to trace the evidence or registration or marketing authorization certificate.			
3) Stability study report covering applicable climatic zone as mentioned in section F 2.1, F12, (2.1) and F3			
4) Product information for reliance as in Annex III			
If the product is already available in ADL provide the product number			
Cost price in USD:			
Retail price in USD:			

FOR MTG TO USE		
Prepared by:		**Checked and Verified by:**
Pharmaceutical Officer		Senior Pharmacist
Date:		Date:
TECHNICAL DECISION OF THE NATIONAL PHARMACEUTICAL BOARD:		
APPROVED		
REJECTED		
NPB Chairman's Signature:		
Name:		
Date:		

Approved by:		**Authorized by:**
Pharmaceutical Specialist		Deputy Director General, Health Laboratory Services
Date:		Date:

Annex VI

Checklist for full dossier Applications

Rec.No: MTG/RE-ES/Re-0005/2024 - 000

Maldives Food and Drug Authority

Ministry of Health

Male`

Republic of Maldives

1. Registration Pathway

Full procedure 1.1 Full dossier **5 years** ☐

2. Registration type

Date of submission	-	- -
Date of Acceptance	-	- -
A) New Registration	☐	
B) Re-registration	☐	

3. Product Evaluation Summary -

- -

	Client submitted information	**Evaluation Remarks**	**Check and verified**
A) Legal status		-	-
Letter of appointment as the local agent if the applicant is local	**Statement by Applicant (local) Submitted**		
Letter from manufacturer to MFDA			

B) General Product Information			
a) API information under any of the mentioned criteria			
b) Product name			
c) International Nonproprietary Name (INN) or the Active Pharmaceutical Ingredient (API) or Generic name including e. Pharmacopeia standard / Formulation of the product			
d) Non-active ingredient or Excipient including e. Pharmacopeia standard / Formulation of the product			
iii. For all the pediatric oral formulations including cough, cold and paracetamol formulation the certificate of analysis (COA) shall be submitted for all the excipients used, specifically if glycerin or glycerol or propylene glycol is used, verifying that it does not contain the impurities diethylene glycol (DEG) and ethylene glycol (EG).			

iv. Manufacture validation protocols of the excipients shall be submitted specifically those that are at a risk for diethylene glycol (DEG) and ethylene glycol (EG) contamination. For such excipients each container of the excipients shall be tested for purity and validity and evidence documents shall be submitted			
v. The test mentioned above shall be as per the official monogram for purity.			
vi. Registration holder will ensure that the manufacturer will perform impurity testing as identified by the manufacturer of innovator drug product like N-Nitroso dimethylamine (NDMA), N-Nitroso dimethylamine (NDEA) in valsartan, metformin etc.			
e. ii) ii. If there is no pharmacopeial formulation as mentioned in point c and d method validation report of the in-house method shall be provided which has to be endorsed by a third party. The third party can be an accredited laboratory, regulatory authority or any other external or internal assessment body as nominated by the Authority.			
f) Dosage form of the product			

g) Strength(s) of the product			
h) Volume of the preparation			
i. Product description, Container type and Pack sizes			
j. Route(s) of Administration			
k. Indication or Use of the product			
l. Therapeutic Class	ATC classification and code: Contraindication: Precaution:		
m. Storage conditions			
n. Shelf life of the product			
o. Dispensing Category			

C2) Manufacturer responsible for lot release of the finished dosage form			
C3) Manufacturer responsible for packaging of the finished product, if different			
C4) Manufacturing License number			
Sample /artwork, Full package picture provided?			
Documents as per registration pathway			
Whether the Full ICH M2 and M3 dossier parts provided?			
4. Is the formulation acceptable?			
Is the packaging acceptable? primary container, and packaging material label, box, blister/ strip foil			
Product information Literature/ Product package insert acceptable?			

5. Is quality acceptable?			
API Validation report			
If applicable bioavailability studies against a benchmark product provided?			
Proof of Validation of the manufacturing method provided?			
Standard batch size quantity with label claim, Batch size, quantity of all active ingredients and excipients provided?			
Technical specifications and sources of all raw material(s) with pharmacopeia specification provided?			
Brief profile of manufacturer with products manufactured provided?			
Company profile (for newly registering manufacturers) provided?			
Manufacturing plant layout and machinery involved provided?			
Manufacturing and packaging process Provided?			

List of personnel, their responsibilities and qualifications (Name, qualification and experience (in years) of the authorized key personnel)			
Regulatory decisions taken on this finished product from any regulatory authorities (A formal, signed statement from the manufacturer and/or MAH)			
Copy of the finished product specification (based on a reference to an official monogram and if an in-house method is used, it shall be endorsed by a third party)			
Shelf life validated by stability studies for climatic zone IV	Real-time:		
	Accelerated:		
Whether the stability report statement Provided?			
6. Documents for quality verification			
Certificate of Analysis for batch release, Certificate of Analysis of Finished product (CoA)			

Certificate of a Pharmaceutical product (CoPP)			
Registration status of Finished product in countries other than country of origin and country of origin			
Proof of registration of the finished product in a Category 1 country (for CAT 2.1)			
Valid GMP certificate attesting to the status of the manufacturer as to competency, of personnel, equipment and facilities.			
7. Other factors considered			
For cough/cold, paracetamol preparations: -Tests for DEG/EG submitted for all excipients and source validation of excipients submitted			
Can the medicine be used with the facilities and professional expertise available			
If the product sample is testable at NHL, does the product pass?			

Is the medicine available in ADL, If provide the Product number			
Price of the product in USD	**A) Cost price in USD:**		
	B) Retail price in USD:		

FOR MTG TO USE

Prepared by:

……

Pharmaceutical Officer

Date: ……..

Checked and verified by:

……..

Senior Pharmacist

Date:

TECHNICAL DECISION OF THE NATIONAL PHARMACEUTICAL BOARD:

APPROVED	

REJECTED		

Chairman's Signature:

Name:

Date:

Approved by:

Authorized by:

.....

Pharmaceutical Specialist

Date:

.....

Deputy Director General, Health Laboratory Services

Date:

Annex-VII

MTG/RE-VA/Re 0125/2024

Registration of a Pharmaceutical Product

Format for Sample submission 2024

No.	Brand Name	Generic Name (Including formulation if given eg. BP, IP, USP)	Batch No.	Strength	Dosage form	Full Name of the Manufacturer (as in the product label)	Country of origin	Ex. Date	Quantity	Remarks (Importer details)

For office use only		
Received by	**Signature**	**Date**

Annex-VIII

MTG/RE-SU/Re 0124/2024

Maldives Food and Drug Authority

Ministry of Health

Male`

Republic of Maldives

Variation Applications of a Pharmaceutical Product

Product Details	
Brand Name:	
Generic Name:	
Strength:	

Dosage Form:	
Product No:	
Registration No:	
Registered Date:	
Expiry Date:	
Date of submission:	

Importer Details: **(write the product importer details)**

Type of Variation

(insert Variation number)(Refer to the guideline for the variation number)), Mention if it is a change in artwork , label,manufacturing adress, Product specification , change in packing insert or any…. (Also highlight the specific change from the document before and after. For this purpose no need to submit the full document if its large only the document name and the highlighted information changed(Before and after.)

As Per Registered Product	Proposed Change In Detail	Variation Remarks	Check and verified
1.Brick Red colored capsule shaped biconvex film coated tablets having lip break line on one side and plain on other side. (please highlight the specific change)	Brick Red colored capsule shaped biconvex coated tablets and plain on both side.(please highlight the specific change),		
2.If it is a change in product label, specific information of product label as per registered product must be mentioned.(in this case previously submited label must be provided by highlighting specific change) (Description of the original artwork or label)(Description of the original artwork or label)	If it is a change in product label mention the specific change in product label.(in this case proposed product label must be provided by highlighting specific change) (Description of the updated artwork or label)		

FOR MTG TO USE		
Checked by:	Checked and verified by:	Approved by:
	Mohamed Fazeen	Aishath Mohamed
Pharmaceutical Officer	Senior Pharmacist	Pharmaceutical Specialist
Date:	Date:	Date:
Sign:	Sign:	Sign:

Annex-IX

CONFIRMATION OF API PREQUALIFICATION DOCUMENT

A complete copy of the Confirmation of API Prequalification document shall be provided, and it shall contain the following information.

- **General properties** - discussions on any additional applicable physicochemical and other relevant API properties that are not controlled by the API manufacturer's specifications e.g., solubilities and polymorphs.
- **Sterility-**If the sterility of the FPP is based upon the sterile manufacture of the API then data on the sterilization process together with full validation data shall be provided.
- **Specification** - the specifications of the FPP manufacturer including all tests and limits of the API manufacturer's specifications and any additional tests and acceptance criteria that are not controlled by the API manufacturer's specifications such as polymorphs and/or particle size distribution.
- **Batch analysis** - results from two batches of at least pilot scale, demonstrating compliance with the FPP manufacturer's API specifications.
- **Reference standards or materials** – information on the FPP manufacturer's reference standards.
- **Stability** - data to support the retest period if either the proposed retest period is longer or the proposed storage conditions are at a lower temperature or humidity to that of the Prequalified API.

Annex-X

CERTIFICATES OF SUITABILITY (CEP)

CEP stands for certification of the suitability of European Pharmacopoeia monographs/Certificate of Pharmacopoeia.

The CEP is a document that is used to demonstrate the purity of a given API produced by a given manufacturer is suitably controlled by the relevant monograph(s) of the European Pharmacopoeia. By demonstrating grant a CEP for a given API, the suppliers of the API can prove such suitability to their pharmaceutical industry clients and Regulatory authority.

Certificate of Suitability of the European Pharmacopoeia (CEP) A complete copy of the CEP (including any annexes) shall be provided. The declaration of access for the CEP shall be duly filled out by the CEP holder on behalf of the FPP manufacturer or applicant who refers to the CEP.

In addition, a written commitment shall be included that the applicant will inform MFDA in the event that the CEP is withdrawn. It shall also be acknowledged by the applicant that withdrawal of the CEP would require additional consideration of the API data requirements to support the application. The written commitment shall accompany the copy of the CEP.

Along with the CEP, the applicant shall supply the following information

- **General properties** - discussions on any additional applicable physicochemical and other relevant API properties that are not controlled by the CEP and Ph.Eur. monograph, e.g. solubilities and polymorphs
- **Specification** - the specifications of the FPP manufacturer including all tests and limits of the CEP and Ph.Eur. monograph and any additional tests and acceptance criteria that are not controlled in the CEP and Ph.Eur. monograph, such as polymorphs and/or particle size distribution.

- **Analytical procedures and validation** – for any methods used by the FPP manufacturer in addition to those in the CEP and Ph.Eur. monograph.
- **Batch analysis** - results from two batches of at least pilot scale, demonstrating compliance with the FPP manufacturer‟s API specifications.
- **Reference standards or materials** – information on the FPP manufacturer's reference standards.
- **Container closure system** - specifications including descriptions and identification of primary packaging components. Exception: where the CEP specifies a container closure system and the applicant declares to use the same container closure system.
- **Stability** - exception: where the CEP specifies a re-test period that is the same as or of longer duration, and storage conditions which are the same or higher temperature and humidity as proposed by the applicant. In the case of sterile APIs, data on the sterilization process of the API, including validation data, shall be included.

Annex-XI

TECHNICAL INFORMATION ON THE ACTIVE PHARMACEUTICAL INGREDIENT

The documentation shall also contain the following information:

1. **General information:**
    a) International Non-Proprietary Name.
    b) Chemical name
    c) Synonyms with complete reference
    d) Molecular and structural formulas
    e) Molecular weight
    f) Physical form
    g) Melting or boiling point
    h) Solubility
    i) Loss on drying
    j) Physical characteristics (crystalline, amorphous, particle size, solvation, etc.)
    k) pka and pH
    l) Preservation measures
    m) Organoleptic properties

2. **API manufacturing process:**
    a) Manufacturer(s): name, full address, company responsible for each manufacturing process step and quality
    b) control (including contracted companies, third parties).
    c) Description of the production process, including materials, equipment and operating conditions (for example,

d) temperature, pressure, pH, time ranges, stirring speed, etc.); and of the in-process controls.
e) Identification of the critical steps including the respective tests and acceptance criteria
f) Production process flowchart indicating the formation of intermediates and possible impurities, including the
g) clarification of the respective chemical structures.
h) Indication of the raw materials, solvents, catalysts, etc…
i) Indicate the production scale and yield.
j) Specifications of the raw materials and packaging materials.

3. Characterization:

Physicochemical tests allowing elucidation of the API structure:

a) Analyses of an industrial batch evidencing the functional groups, the chemical structure and the molecular formula expected for the API.
b) Possible Isomers.
c) Polymorphism, describing the characteristics of the polymorph used and of others related to the active pharmaceutical ingredient.

4. Impurity profile:

a) Description of the potential impurities, resulting from the synthesis, with a brief description and indicating the origin.
b) Organic Impurities (of the process and related substances): raw materials (starting), related products,
c) intermediate products, degradation products, reagents and catalysts.
d) Inorganic Impurities: reagents and catalysts, heavy metals, inorganic salts.
e) Residual solvents.

5. Quality Control of the API:

a) Appearance
b) Identification
c) Assay
d) Impurities (organic, inorganic and residual solvents)
e) Physicochemical properties (pH, melting point, etc.).
f) Particle size distribution.
g) Polymorphism, including the adopted analytical methodology and results of the tests intended to determine the probable polymorphs of the ingredient.
h) For chiral ingredients, data on the stereoisomer content.
i) Water determination
j) Microbiological limits: sterility, endotoxins (if applicable).
k) Specific optical rotation (if applicable

6. Description of the analytical methodology:

a) Validation of analytical methodology according to the current specific technical regulation for the validation of analytical and bioanalytical methods when the pharmacopeial methodology is not used.
b) In case of pharmacopeial methodology, the company shall submit the method co-validation.

7. Packaging Material:

a) Description and specification of the primary packaging

b) Stability and Photostability Report
c) photostability studies shall be conducted in compliance with the specific technical regulation /standard