



August 8, 2011

Notice

Our file number: 11-113839-2

Re: Revised Draft Guidance Document: *Preparation of Drug Submissions and Applications in the Common Technical Document (CTD) Format*

Health Canada is pleased to announce the release of the revised draft *Guidance for Industry: Preparation of Drug Submissions and Applications in the Common Technical Document (CTD) Format* for a 60-day comment period. Once final, it will replace the 2003 *Draft Guidance for Industry: Preparation of New Drug Submissions in the CTD Format*.

This guidance document will assist sponsors in the preparation of drug submissions and applications in the Common Technical Document (CTD) format developed by the International Conference on Harmonisation (ICH). It defines the regional requirements of submissions in CTD format, found in Modules 1 and 3.

Noteworthy updates include:

- Extensive revisions made to the Canadian Module 1 format, allowing for the CTD format to be used for all submission and application types filed over a product's lifecycle, for example:
 - Post-authorization commitment tracking table;
 - Clinical Trial Applications and their amendments are now included in the proposed Module 1;
 - Regional Clinical information;
 - the addition of Module 3.2.R.4 for Yearly Biological Product Reports, submitted to the Biologics and Genetic Therapies Directorate only; and
 - Addition of clarification has been added to Module 5 regarding the placement of Periodic Safety Update Reports (PSUR).

In conjunction with this initiative, it should be noted that the *Guidance for Industry: Creation of the Canadian Module 1 eCTD Backbone File* and the *Document Type Definition (DTD) for the Canadian Module 1* are being updated and are targeted to be published in Winter 2011. This will allow for the transition of eCTD submissions to the proposed Module 1 format.

.../2

Comments provided to Health Canada should be submitted no later than October 7, 2011 in order to allow sufficient time for their assessment.

Comments should be submitted electronically and directed to:

Submission and Information Policy Division (SIPD)

Therapeutic Products Directorate

Health Canada

Finance Building 2,

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101 Tunney's Pasture Driveway

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REVISED DRAFT GUIDANCE DOCUMENT
Preparation of Drug Submissions and Applications in the Common
Technical Document (CTD) Format

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This guidance document is being distributed for comment purposes only.



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Published by authority of the
Minister of Health



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Draft Date	2011/07/08
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<p>Our mission is to help the people of Canada maintain and improve their health.</p> <p style="text-align: right;"><i>Health Canada</i></p>	<p>The Health Products and Food Branch's mandate is to take an integrated approach to the management of the risks and benefits to health related products and food by:</p> <ul style="list-style-type: none">• minimizing health risk factors to Canadians while maximizing the safety provided by the regulatory system for products and food; and• promoting conditions that enable Canadians to make healthy choices and providing information so that they can make informed decisions about their health. <p style="text-align: right;"><i>Products and Food Branch</i></p>
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***Également disponible en français sous le titre : Ébauche révisée de la ligne directrice :
Préparation des présentations et des demandes de drogues en format Common Technical
Document (CTD)***

49 **FOREWORD**

50

51 Guidance documents are meant to provide assistance to industry and health care professionals on
52 **how** to comply with governing statutes and regulations. Guidance documents also provide
53 assistance to staff on how Health Canada mandates and objectives should be implemented in a
54 manner that is fair, consistent and effective.

55

56 Guidance documents are administrative instruments not having force of law and, as such, allow
57 for flexibility in approach. Alternate approaches to the principles and practices described in this
58 document *may be* acceptable provided they are supported by adequate justification. Alternate
59 approaches should be discussed in advance with the relevant program area to avoid the possible
60 finding that applicable statutory or regulatory requirements have not been met.

61

62 As a corollary to the above, it is equally important to note that Health Canada reserves the right
63 to request information or material, or define conditions not specifically described in this
64 document, in order to allow the Department to adequately assess the safety, efficacy or quality of
65 a product. Health Canada is committed to ensuring that such requests are justifiable and that
66 decisions are clearly documented.

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68 This document should be read in conjunction with the accompanying notice and the relevant
69 sections of other applicable guidance documents.

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1 INTRODUCTION

The *Common Technical Document for Registration of Pharmaceuticals for Human Use* (International Conference on Harmonisation [ICH] Topic M4) was adopted by Health Canada, in 2003, for use in the preparation of drug submissions and applications.

The Common Technical Document (CTD) provides a globally harmonised format that is accepted in many regions, avoiding the need to compile different registration dossiers for different regulatory authorities. It is organized into five modules. Module 1 is region specific, while Modules 2, 3, 4, and 5 are intended to be common for all regions. A regional component is included in Module 3. The review of information provided in a well structured submission will improve the efficiency of the screening and review of a submission.

This guidance document has been updated to facilitate the use of a common format for submission filings and management of information over the lifecycle of a product. Once finalized, this guidance document will supersede the 2003 *Draft Guidance for Industry: Preparation of New Drug Submissions in the CTD Format* and all other references to the layout of Modules 1 and/or 3.2.R, where extensive changes have been made to provide placeholders for regional documents throughout the lifecycle of the product.

It is important to note that the implementation and use of the CTD represents a work in progress, and it is expected that future refinements of this guidance will continue to be necessary as a result of experience gained. Amendments will also be undertaken as a result of the migration to and implementation of the eCTD.

1.1 Policy Objective

To facilitate the preparation of a drug submission or application, pursuant to Part C of the *Food and Drug Regulations*, in the CTD format.

1.2 Policy Statement

The *Food and Drug Regulations* provides regulatory requirements for the approval and sale of drugs in Canada and prohibits the sale of drugs unless the manufacturer has filed a submission that is satisfactory to the Minister. Although the Regulations do not define format requirements, Health Canada has adopted the CTD format within the Canadian registration framework. This guidance document, once finalised, is to be used in the preparation of drug submissions and applications for human use filed to Health Canada.

1.3 Scope and Application

This guidance document applies to the preparation of all drug submissions and applications for human use, filed pursuant to the *Food and Drug Regulations*, including Clinical Trial Applications (CTA), their amendments (CTA-A) and Drug Master Files (DMF).

The CTD format is the expected format for all drug submissions and applications including drug/device combinations where the primary mechanism of action is drug-related. For cases where the combination product is classified as a device, the use of the CTD format for the drug component is encouraged. For medical devices, please see *Summary Technical Document for Demonstrating Conformity to the Essential Principles of Safety and Performance of Medical Devices* (STED), developed by the Global Harmonization Task Force (GHTF).

2 GUIDANCE FOR IMPLEMENTATION

This document outlines the CTD format for the submission of information in relation to drugs for human use, which is filed over the lifecycle of that product in Canada. **Table 1** below provides an overview of the presentation of the drug submission or application, outlining the modular structure and main headings, which should be used.

For a New Drug Submission (NDS), if no information is available or required under a specific heading, that section or subsection should be marked as “not applicable” or “not relevant” while retaining the section title and numbering. If necessary, a justification for the absence of information should be provided. It is not necessary, however, to include subsection headings when an entire section is designated as “not applicable”.

For submission types other than a NDS, if no information is provided under a specific heading, that section or subsection of the submission or application should be omitted and the section title and numbering should be retained. A rationale for the absence of information should be provided in a note to reviewer, as necessary.

The CTD Guidance indicates *where and how* available information is to be presented; however, it is not intended to indicate *what* is actually required. Therefore, when preparing a submission or application, it is necessary to consult relevant Health Canada guidance documents (including adopted ICH guidelines) on technical (data) requirements. Applicants are advised to consult the Health Canada website for the latest updates on guidance documents.

This guidance is intended to be used in conjunction with the most recent version of the following documents:

- ICH CTD guidelines and the corresponding *Questions and Answers* documents on the ICH website;

- 183 • The accompanying Health Canada *Notice* for supplementary and/or interim guidance; and
- 184 • Related Health Canada guidance documents and notices on Quality and comparative
- 185 bioavailability information.

186 For additional guidance, the applicant should consult the appropriate review Bureau in the

187 Therapeutic Products Directorate (TPD) or the Office of Regulatory Affairs in the Biologics and

188 Genetic Therapies Directorate (BGTD).

189

190 **Table 1: Presentation of Information in the Common Technical Document (CTD) Format**

Module Number	Title and Main Section Headings	Cross-Reference to Modules	Binder/Label colour	Number of Paper Copies
1 1.0 1.1 1.2 1.3 1.4 1.5 1.6 1.7 1.A	Administrative and Product Information Correspondence Table of Contents (Modules 1 to 5) Administrative Information Product Information Health Canada Summaries Environmental Assessment Statement Regional Clinical Information Clinical Trial Application (CTA) and Clinical Trial Application-Amendment (CTA-A) Specific Requirements Appendix	2, 3 and 5	Red	1*
2 2.1 2.2 2.3 2.4 2.5 2.6 2.7	Common Technical Document (CTD) Summaries CTD Table of Contents (Modules 2 to 5) CTD Introduction Quality Overall Summary Nonclinical Overview Clinical Overview Nonclinical Written and Tabulated Summaries Clinical Summary	2 to 5 2 to 5 3 2 and 4 2 and 5 2 and 4 5	Yellow	1*
3 3.1 3.2 3.3	Quality Table of Contents of Module 3 Body of Data Literature References		Blue	1*
4 4.1 4.2 4.3	Nonclinical Study Reports Table of Contents of Module 4 Study Reports Literature References		Green	1
5 5.1 5.2 5.3 5.4	Clinical Study Reports Table of Contents of Module 5 Tabular Listing of All Clinical Studies Clinical Study Reports Literature References		Black	1

191 * For combination products that require a joint review an additional copy of Modules 1, 2, and 3 is required.

192

193 **3 STRUCTURE OF DRUG SUBMISSIONS AND APPLICATIONS IN THE**
194 **COMMON TECHNICAL DOCUMENT (CTD) FORMAT**

195
196 **3.1 Module 1: Administrative and Product Information**
197

198 Module 1 identifies placeholders, defined by the numerical items listed in the Module 1 Table of
199 Contents (ToC), for all administrative and product information documentation.
200

201 **Module 1.0 Correspondence**
202

203 All correspondence-related documents submitted to Health Canada are to be placed in Module
204 1.0 unless otherwise indicated. Scientific information is not to be included in this Module.
205

206 **Module 1.0.1 Cover Letter**
207

208 Any data being submitted to Health Canada should be accompanied by a cover letter.
209 The cover letter should clearly state what is being submitted, including reference to the
210 request letter (if applicable) and a brief description of the package. For example, if a
211 Periodic Safety Update Report (PSUR) is to be submitted, one of the following types
212 should be indicated in the cover letter:
213

- 214 • Requested AD HOC PSUR - submitted as a one-time submissions request;
- 215 • Voluntary PSUR - unsolicited submission;
- 216 • Requested Periodic PSUR 0 requested by Health Canada, for example (e.g.) Risk
217 Management Plan (RMP) follow-up or post-authorization commitment;
- 218 • PSUR-C (confirmatory) - submitted to support the fulfilment of a Notice of Compliance
219 with Conditions (NOC/c).
220

221 The cover letter should not contain any scientific information. The Question and Answer
222 (Q and A) responses from Health Canada issued correspondence and the Note to Reviewer
223 are assigned a specific location (1.0.4 and 1.0.7) and should not be included in the cover
224 letter.
225

226 Any cross-referenced submission or application should be clearly stated in the cover letter,
227 and the following information should be included:
228

- 229 • Submission or application type;
- 230 • control number;
- 231 • brand name;
- 232 • manufacturer / applicant's name;
- 233 • Central Registry (CR) file number;

- 234 • date the submission or application was approved.
235

236 Module 1.0.2 Life Cycle Management (LCM) Table
237

238 The Life Cycle Management (LCM) Table is a specific requirement for filing a
239 submission or application in electronic Common Technical Document (eCTD) format,
240 and should be placed in this section.
241

242 Module 1.0.3 Copy of Health Canada Issued Correspondence
243

244 A Copy of all Health Canada issued correspondence should be placed in this section,
245 which includes (but are not limited to) the following:
246

- 247 • Clarifax (during screening or review);
248 • Notice of Deficiency (NOD);
249 • Notice of Non-Compliance (NON);
250 • Not Satisfactory Notice (NSN);
251 • Post-Notice of Compliance Letters (Post-NOC);
252 • No Objection Letter (NOL) comments;
253 • Screening Deficiency Notice (SDN).
254

255 Module 1.0.4 Health Canada Solicited Information
256

257 Solicited information is defined as information requested by Health Canada. Responses
258 to these requests are to be provided in Question and Answer format, and placed in this
259 section. The answers should summarise the response and cross-reference the supporting
260 data that is to be placed in the appropriate Module of the submission or application. **No**
261 **data** is to be provided in this section.
262

263 Module 1.0.5 Meeting Information
264

265 Any meeting related information and documentation, with the exception of Pipeline and
266 Reconsideration meetings, are to be placed in this section. This includes (but is not
267 limited to) the following:
268

- 269 • meeting information package;
270 • proposed meeting agenda;
271 • presentation slides;
272 • meeting minutes.
273
274

275 Module 1.0.6 Request for Reconsideration Documentation

276
277 Any documentation required as part of the Request for Reconsideration process is to be
278 placed in this section.

279
280 Module 1.0.7 General Note to Reviewer

281
282 The Note to Reviewer should be used to facilitate the review. These comments are **NOT**
283 to be included in the cover letter.

284
285 Notes relating to the entire submission or application (e.g., advising that the product is
286 referred to by a foreign trade name throughout the submission or application) should be
287 placed in this section.

288
289 Notes relating to a specific section of the submission or application should be placed at the
290 beginning of each pertinent section. For example, this note can be used to identify changes
291 in a section and/or document.

292
293 **Module 1.1 Table of Contents (ToC)**

294
295 The Table of Contents (ToC) for the entire submission or application should be placed in this
296 section. It should list all documents included in Modules 1-5.

297
298 **Module 1.2 Administrative Information**

299
300 Module 1.2.1 Application Forms

301
302 Completed and signed application forms should be placed in this section.

303
304 Module 1.2.2 Fee Forms

305
306 Completed fee forms should be placed in this section.

307
308 Module 1.2.3 Certification and Attestation Forms

309 Completed and signed forms are to be placed in this section. These include, but are not
310 limited to, the following:

- 311
- 312 • Submission Certification Form
 - 313 ○ Required as per section C.08.005.1 of the *Food and Drug Regulations*. The use
 - 314 of company letterhead is preferred. Please see the Health Canada website for
 - 315 an example of appropriate wording.

- 316 ○ To be signed and dated by the senior executive officer of the manufacturer in
317 Canada and the medical or scientific director of the manufacturer. If the
318 submission certification or any significant part of the certification was prepared
319 by an agent authorized by the manufacturer, the submission certification must
320 also be signed by that agent.
- 321 ○ Responses to Screening Deficiency Notices, Notices of Noncompliance and
322 Notices of Deficiency should include a revised submission certificate signed
323 and dated as described above.
- 324 ● Letter of Attestation
 - 325 ○ To be included for any submission or application that includes both paper and
326 electronic versions of information, confirming that the content contained in the
327 electronic submission or application is identical to the paper-based submission.
 - 328 ● Submission Disclosure Form (BGTD only)
 - 329 ● Certification of Electronic Signature (placeholder)
 - 330 ● Changes in Manufacturer's Name and/or Product Name Administrative Changes -
331 Certification Form
 - 332 ● Attestation of Pristine Product Monograph
 - 333 ● Product Monograph Translation Certification Form
 - 334 ● Bovine Spongiform Encephalopathy (BSE)/Transmissible Spongiform
335 Encephalopathy (TSE) Attestation Form
 - 336 ● Certification of Suitability to the Monographs of the European Pharmacopoeia
337 (CEP) issued by the European Directorate for the Quality of Medicines and
338 Healthcare (EDQM)
 - 339 ● Application Certification Form
 - 340 ● Statement of Commitment for Drug Master Files (DMF)

341 Module 1.2.4 Intellectual Property Information

342 Module 1.2.4.1 Patent Information

343 As per the *Patented Medicines (Notice of Compliance) Regulations (PM (NOC)*
344 *Regulations)*, an applicant (that is [i.e.] first person) who files or who has filed a new
345 drug submission or a supplement to a new drug submission may submit a patent list
346 in relation to the submission or supplement for addition to the Patent Register by
347 filing a Form IV: Patent List within the time limits and according to the conditions
348 set out in section 4 of the *PM (NOC) Regulations*.

349 A second person (i.e. subsequent entrant) must address all patents listed on the Patent
350 Register for the Canadian reference product used to establish bioequivalence for the
351 second person's submission by filing a Form V: Declaration Re: Patent List as per
352

356 section 5 of the *PM (NOC) Regulations*. Documents relating to the Notice of
357 Allegation, including proof of service and the Acknowledgement and Certification of
358 Receipt of Information and Material form, are also to be placed in this section.

359
360 Module 1.2.4.2 Data Protection Information

361
362 C.08.004.1 of the *Food and Drug Regulations* provides a term of data protection to
363 manufacturers of innovative drugs during which the Minister shall not approve a
364 subsequent entry submission submitted for a new drug on the basis of a comparison
365 between the new drug and the innovative drug. The term of data protection is
366 effective from the date of the issuance of the Notice of Compliance (NOC) and
367 extends to eight years (eight and one-half years if relevant paediatric clinical trial
368 data is submitted). Innovative manufacturers may place information that supports the
369 eligibility of their innovative drug for data protection in this section.

370
371 Module 1.2.5 Compliance and Site Information

372
373 Module 1.2.5.1 Clinical Trial Site Information Forms (CTSI)

374
375 Completed Clinical Trial Site Information Forms (CTSI) must be provided in this
376 section for each proposed clinical trial site.

377
378 Module 1.2.5.2 Establishment Licensing (EL)

379
380 Establishment Licensing (EL) information should be placed in this section.

381
382 Module 1.2.5.3 Good Clinical Practices (GCP)

383
384 Good Clinical Practices (GCP) related documentation should be placed in this
385 section.

386
387 Module 1.2.5.4 Good Laboratory Practices (GLP)

388
389 A statement of GLP compliance consistent with the Organisation for Economic Co-
390 operation and Development's (OECD) *Principles of Good Laboratory Practice*
391 (*GLP*) should be placed in this section.

392
393 Module 1.2.5.5 Good Manufacturing Practices (GMP)

394
395 Good Manufacturing Practices (GMP) compliance information should be placed in
396 this section. This may include the Certificate of Compliance (COC) issued by the
397

398 Health Products and Food Branch Inspectorate (HPFBI) when the foreign GMP
399 rating is accepted for a foreign site under a Mutual Recognition Agreement (MRA).

400

401 Module 1.2.5.6 Good Pharmacovigilance Practices (GPP)

402

403 Good Pharmacovigilance Practices (GPP) related documentation should be placed in
404 this section.

405

406 Module 1.2.5.7 Other Compliance and Site Information Documents

407

408 Any other regulatory compliance and site-related information which is not currently
409 covered under Module 1.2.5.1-1.2.5.6 should be placed in this section.

410

411 Module 1.2.6 Authorization for Sharing Information

412

413 Letters authorizing Health Canada to share information regarding the submission with
414 other regulatory authorities (or vice versa), and/or to access other (third party) drug
415 submissions and applications, DMF and Site Reference Files (SRF) should be provided
416 in this section.

417

418 Module 1.2.7 International Information

419

420 Information on the product application, approved indications and marketing status in
421 other countries/regions should be provided in this section. Depending upon the status
422 this may include, but not be limited to, the following:

423

- 424 • International registration, review and/or marketing status, including date of filing,
425 approval of product or supplemental changes in other jurisdictions, information
426 regarding the withdrawal, stop of sale and/or market recall;
- 427 • Regulatory GMP compliance and EL status issued by other jurisdictions, including Date
428 of last GMP and/or pre-approval inspection, and any observation-related information;
- 429 • Foreign refusals;
- 430 • Foreign clinical trial status;
- 431 • International Birth Date of the product and for all approved indications;
- 432 • Confirmation of filing or the date(s) of approval or withdrawal;
- 433 • Foreign review reports, including Question and Answer (Q and A) documents (**upon**
434 **request only**);
- 435 • Meeting minutes from other jurisdictions (**upon request only**).

436

437

438

439 Module 1.2.8 Post-Authorization Information

440

441 The following information should be included in this section:

442

443

- 444 • Market Notification Forms
 - 445 ○ As per part C.01.014.3 of the *Food and Drugs Regulations*, companies are required
 - 446 to notify Health Canada of a drug being sold.
 - 447 ○ For labels see section 1.3.2
- 448 • Post-Authorization Commitments
 - 449 ○ The commitment tracking table, as detailed in Appendix C should be provided here.
 - 450 ○ Data supplied in response to these commitments are to be placed in appropriate
 - 451 sections throughout Modules 1-5.
 - 452 ○ For NOC/c related documents, see Module 1.6.4.
- 453 • Notices of Change (Level III) forms
 - 454 ○ *Post-Notice of Compliance (NOC) Changes: Notices of Change (Level III) Forms* are
 - 455 to be placed in this section.
- 456 • Notice of Decision and Summary Basis of Decision
 - 457 ○ All revisions of the Notice of Decision and Summary Basis of Decision documents
 - 458 are to be placed in this section.

458

459 Module 1.2.9 Other Administrative Information

460

461 This section is for any administrative information that does not have a designated location
462 in the CTD format. This section should **NOT** contain any scientific information.

463

464 **Module 1.3 Product Information**

465

466 Module 1.3.1 Product Monograph

467

468 A copy of the non-annotated (clean) and annotated Product Monograph are to be placed
469 in this section.

470

471 The text of the annotated copy at the time of filing should be cross-referenced to
472 supporting information and study findings reported in Module 2 documents and, when
473 submitted, the Bioequivalence Summary (Module 1.4.2). Applicants may also choose to
474 include references to related information in Modules 3 to 5, as appropriate.

475

476 Within the sections of the annotated Product Monograph, the text should also be cross-
477 referenced by number to the *References or Selected Bibliography* section at the end of the
478 Product Monograph.

479

480 Articles from publications listed in the References section should be cited in accordance
481 with the current edition of the *Uniform Requirements for Manuscripts Submitted to*
482 *Biomedical Journals*, International Committee of Medical Journals Editors (ICMJE).
483 When reference is made to a publication not provided in Modules 2 - 5, copies of the
484 reference material should be provided in this section.

485
486 When revisions are requested during the course of the review, an annotated version of the
487 revised Product Monograph is required. The annotations should reflect all changes made.
488

489 Module 1.3.2 Inner and Outer Labels

490
491 All inner and outer labels should be provided in this section, including those submitted
492 with the Market Notification.

493
494 This should include the labels for all strengths, dosage forms and reconstitution diluents.
495 Typewritten or other draft label copy is acceptable for review purposes.
496

497 When additional revisions are requested during the course of the review, an annotated
498 version of the revised label is required. The annotations should reflect all changes made.
499

500 Module 1.3.3 Non-Canadian Labelling

501
502 If the drug product has been marketed outside Canada, the applicant is encouraged to
503 supply the monograph or package inserts approved in other jurisdictions, clearly
504 identifying them by country or region.

505 506 Module 1.3.4 Investigator's Brochure (IB)

507
508 Investigator's Brochure for CTA and CTA-As should be placed in this section.
509

510 Module 1.3.5 Reference Product Labelling

511
512 The Product Monograph for Canadian Reference Products is to be placed in this section.
513

514 Module 1.3.6 Certified Product Information Document (CPID)

515
516 A copy of the non-annotated (clean) and annotated CPID are to be placed in this section.
517 The text of the annotated copy at the time of filing should be cross-referenced to the
518 corresponding sections of Module 3, while any further revisions should reflect all changes
519 that have been made, including Level III changes. The clean version should not contain
520 any cross-referencing.

521 Module 1.3.7 Look alike/Sound alike Assessments (LA/SA)

522

523 The assessments are to be placed in this section.

524

525 Module 1.3.8 Pharmacovigilance Information

526

527 Module 1.3.8.1 Pharmacovigilance Plan

528 Pharmacovigilance plans or their equivalent are to be placed in this section.

529

530 Module 1.3.8.2 Risk Management Plan (RMP)

531 Risk management plans or their equivalent are to be placed in this section.

532

533 Module 1.3.8.3 Risk Communications

534 Risk Communications are to be placed in this section.

535

536 Module 1.3.8.4 Other Pharmacovigilance Information

537 Any other pharmacovigilance information should be placed in this section.

538

539 **Module 1.4 Health Canada Summaries**

540

541 Module 1.4.1 Protocol Safety and Efficacy Assessment Template - Clinical Trial
542 Application (PSEAT-CTA)

543

544 The completed Protocol Safety and Efficacy Assessment Template - Clinical Trial
545 Application (PSEAT-CTA) should be placed in this section.

546

547 Module 1.4.2 Comprehensive Summary: Bioequivalence

548

549 The completed Comprehensive Summary: Bioequivalence (CS-BE) for all *pivotal*
550 comparative bioavailability (bioequivalence) studies should be placed in this section.

551

552 Module 1.4.3 Multidisciplinary Tabular Summaries

553

554 This section is a placeholder for tables that contain information that is applicable to more
555 than one discipline.

556

557 **Module 1.5 Environmental Assessment Statement**

558

559 This section is for the Environmental Assessment Statement, required for new substances in
560 products regulated under the *Food and Drug Act* as per the New Substances Notification
561 Regulations (NSN) of the *Canadian Environmental Protection Act* (CEPA).

562

563 **Module 1.6 Regional Clinical Information**

564

565 Module 1.6.1 Comparative Bioavailability Information

566

567 Specific requirements for *pivotal* comparative bioavailability (bioequivalence) studies
568 should be placed in this section. These specific requirements include, but are not limited
569 to:

- 570
- 571 • Canadian Reference Product (CRP) Confirmation;
 - 572 • Requests for waivers and justification statements;
 - 573 • Verification of potency of the Test and Reference products (Certificates of Analysis);
 - 574 • Bioavailability/Bioequivalence (BA/BE) data sets (required for all types of *pivotal*
575 comparative bioavailability (bioequivalence) studies.

576

576 Module 1.6.2 Company Safety Core Data Sheets

577

578 Company Safety Core Data Sheets should be placed in this section.

579

580 Module 1.6.3 Priority Review Requests

581

582 All documents related to a Priority Review Request, including the cover letter, should be
583 placed in this section only.

584

585 Module 1.6.4 Notice of Compliance with Conditions (NOC/c)

586

587 All documentation relating to an NOC/c is to be placed in this section only. These
588 documents include, but are not limited to, the following:

589

- 590 • Letter of undertaking;
- 591 • Qualifying Notice;
- 592 • Dear Health Care Professional (DHCP) Letters;
- 593 • Product Specific Fact Sheets.

594

595 **Module 1.7 Clinical Trial Application (CTA) and Clinical Trial Application- Amendment**
596 **(CTA-A) Specific Requirements**

597

598 Module 1.7.1 Submission Rationale/Brief Summary

599

600 The Submission Rationale/Brief Summary for BGTD products are to be placed in this
601 section.

602

603

604 Module 1.7.2 Study Protocol

605
606 All required copies of the Study Protocol are to be placed in this section.

607
608 Module 1.7.3 Informed Consent Forms

609
610 The Informed Consent Forms are to be placed in this section.

611
612 Module 1.7.4 Canadian Research Ethics Board (REB) Refusals

613
614 Canadian Research Ethics Board (REB) refusals are to be placed in this section.

615
616 Module 1.7.5 Information on Prior-related Applications

617
618 Information on prior-related applications is to be placed in this section.

619
620 **Module 1.A Appendix**

621
622 Module 1.A.1 Electronic Review Documents

623
624 All electronic media submitted to support the drug submission or application should be
625 placed in this section.

626
627 **3.2 Module 2: Common Technical Document (CTD) Summaries**

628
629 Please consult the ICH M4 Guidelines.

630
631 **3.3 Module 3: Quality**

632
633 Please consult the ICH M4Q Guidelines.

634
635 **Module 3.2.R Regional Information**

636
637 To complete the regional section of Module 3 the applicant should refer to the appropriate Health
638 Canada CTD Quality guidance documents.

639
640 Module 3.2.R.1 Production Documentation

641
642 Module 3.2.R.2 Medical Devices

643
644 Module 3.2.R.3 Lot Release Documentation - BGTD

645

646 Module 3.2.R.4 Yearly Biologic Product Report (YBPR)-BGTD Only

647

648 The Yearly Biologic Product Report (YBPR), provided for BGTD only, is to be placed in
649 this section.

650

651 **3.4 Module 4: Nonclinical Study Reports**

652

653 The applicant should refer to the ICH M4S guidelines, as well as the appropriate
654 Health Canada guidance documents to complete this module.

655

656 **3.5 Module 5: Clinical Study Reports**

657

658 The applicant should refer to the ICH M4E guideline under *Module 5: Clinical Study Reports*,
659 and the ICH E3 guideline, *Structure and Content of Clinical Study Reports*.

660

661 In addition, the applicant should note the following in relation to cited modules of the CTD:

662

663 Module 5.3.1.2 Comparative Bioavailability (BA) / Bioequivalence (BE) Study Reports

664

665 The technical requirements for *pivotal* comparative bioavailability (bioequivalence) studies are
666 provided in the Health Canada *Guidance for Industry: Preparation of Comparative*
667 *Bioavailability Information for Drug Submissions in the CTD Format*.

668

669 Module 5.3.1.4 Reports of Bioanalytical and Analytical Methods for Human Studies

670

671 The technical requirements for *pivotal* comparative bioavailability (bioequivalence) studies are
672 provided in the Health Canada *Guidance for Industry: Preparation of Comparative*
673 *Bioavailability Information for Drug Submissions in the CTD Format*.

674

675 Module 5.3.6 Post Marketing Experience

676

677 Periodic Safety Update Reports (PSUR) should be placed in this section.

678

679 Module 5.3.7 Case Report Forms (CRF) and Individual Patient Listings

680

681 As per Section C.08.005.1(a) of the Food and Drug Regulations, Case Report Forms (CRF) are
682 required for any deaths, serious adverse reactions, unexpected adverse reactions, and for all
683 subjects who were unable to complete the study. All other CRFs, as outlined in the ICH
684 Guideline *Structure and Content of Clinical Study Reports* (E3), should be provided upon request
685 only.

686

687

688 All CRFs provided should be placed in this section, indexed by study and in the same order that
689 the clinical study reports were provided in the submission. All CRFs are to be provided in
690 electronic format only.

691

692 **4 PRESENTATION OF SUBMISSIONS AND APPLICATIONS**

693

694 This section describes the physical specifications for submitting paper submissions and
695 applications in CTD format. The paper format is to serve as the official Central Registry (legal)
696 copy for paper-based submissions and applications.

697

698 **4.1 Organization and Identification of Submission and Application Volumes**

699

- 700 • The submission or application should be bound in three-ring binders.
- 701 • Binders should be colour-coded as specified in **Table 1**. Alternatively, labels on the spines as
702 well as on the cover are to be colour-coded as indicated.
- 703 • The binder labels on the spine and the front cover should include the following information:
 - 704 ○ trade (brand) name of the drug product;
 - 705 ○ name of the manufacturer;
 - 706 ○ proper or common and code names;
 - 707 ○ sequential number, starting at Volume 1 for each module;
 - 708 ○ The volume number for that binder, out of the total number of volumes for that module, the
709 section(s) contained within each volume, and the date of submission or application (month
710 and year), should also be specified on the label.

711

712 For example, the label on a blue-coloured binder (Volume 1 of Module 3: Quality), would read
713 as follows:

714

Drug Product "ABC"

715

Applicant/Manufacturer "XYZ"

716

Volume 1 of 63

717

3.1-3.2.S.2.3

718

Month/year

719

720 **Note:** In the case of NCs containing small amounts of information it is recommended, where
721 possible, that all modules of the submission or application be provided in one (black) binder.

722

723 **4.2 Organization, Presentation and Identification of Information within Submissions** 724 **and Applications**

725

726 Information within the CTD is organized into a series of structured documents which are in turn
727 organized into modules. The M4 guidance *Organisation of the Common Technical Document*
728 and ICH General *Questions and Answers* provides the definition of a document and guidance on
729

730 ToC formatting, cross-referencing within the CTD and for document pagination, segregation and
731 section numbering.

732
733 Literature references should be cited in accordance with the current edition of the *Uniform*
734 *Requirements for Manuscripts Submitted to Biomedical Journals*, International Committee of
735 Medical Journals Editors (ICMJE).

736
737 Acronyms and abbreviations should be defined the first time they are used in each module.

738
739 Module 1 does not need to be paginated in full, but pagination within documents is useful. It is
740 not necessary to include a header or footer on Module 1 documents, except where already an
741 integral part of the document, (e.g. the Certified Product Information Document (CPID)
742 template), or to paginate Module 1 forms or labels.

743 744 **4.3 Language**

745
746 Information in the submission or application should be recorded in either English or French.
747 Material in a different language should be accompanied by an English or French translation with
748 the possible exception of Case Report Forms (consult the appropriate Bureau (TPD) or the Office
749 of Regulatory Affairs (BGTD) first).

750 751 **4.4 Legibility and Font Size**

752
753 Text and tables should be prepared using margins that allow the document to be printed on 8.5 x
754 11 inch paper. The left-hand margin should be sufficiently large that information is not obscured
755 by the method of binding. Font sizes for text, tables, flow diagrams and floor maps should be of
756 a style and size that are large enough to be easily legible, even after photocopying. Times New
757 Roman, 12-point font is recommended for narrative text.

758 759 **5 APPENDICES**

760 761 **APPENDIX A: CANADIAN MODULE 1**

Module #	Module Title
1	Administrative and Product Information
1.0	Correspondence
1.0.1	Cover letter
1.0.2	Life Cycle Management Table (LCM)
1.0.3	Copy of Health Canada issued correspondence
1.0.4	Health Canada Solicited Information
1.0.5	Meeting Information

1.0.6	Request for Reconsideration Documentation
1.0.7	General Note to Reviewer
1.1	Table of Contents (ToC)
1.2	Administrative Information
1.2.1	Application Forms
1.2.2	Fee Forms
1.2.3	Certification and Attestation Forms
1.2.4	Intellectual Property Information
1.2.4.1	Patent Information
1.2.4.2	Data Protection Information
1.2.5	Compliance and Site Information
1.2.5.1	Clinical Trial Site Information Form (CTSI)
1.2.5.2	Establishment Licensing (EL)
1.2.5.3	Good Clinical Practices (GCP)
1.2.5.4	Good Laboratory Practices (GLP)
1.2.5.5	Good Manufacturing Practices (GMP)
1.2.5.6	Good Pharmacovigilance Practices (GPP)
1.2.5.7	Other Compliance and Site Information Documents
1.2.6	Authorization for Sharing Information
1.2.7	International Information
1.2.8	Post- Authorization Information
1.2.9	Other Administrative Information
1.3	Product Information
1.3.1	Product Monograph
1.3.2	Inner and Outer Labels
1.3.3	Non-Canadian Labelling
1.3.4	Investigator's Brochure
1.3.5	Reference Product Labelling
1.3.6	Certified Product Information Document (CPID)
1.3.7	Look-alike/Sound-alike Assessment (LA/SA)
1.3.8	Pharmacovigilance Information
1.3.8.1	Pharmacovigilance Plan
1.3.8.2	Risk Management Plan (RMP)
1.3.8.3	Risk Communications
1.3.8.4	Other Pharmacovigilance Information
1.4	Health Canada Summaries
1.4.1	Protocol Safety and Efficacy Assessment Template – Clinical Trial Application (PSEAT-CTA)
1.4.2	Comprehensive Summary : Bioequivalence
1.4.3	Multidisciplinary Tabular Summaries

1.5	Environmental Assessment Statement
1.6	Regional Clinical Information
1.6.1	Comparative Bioavailability Information
1.6.2	Company Core Data Sheets
1.6.3	Priority Review Requests
1.6.4	Notice of Compliance with Conditions (NOC/c)
1.7	Clinical Trial Application (CTA) and Clinical Trial Application-Amendment (CTA-A) Specific Requirements
1.7.1	Submission Rationale/Brief Summary (BGTD only)
1.7.2	Study Protocol
1.7.3	Informed Consent Forms
1.7.4	Canadian Research Ethics Board (REB) Refusals
1.7.5	Information on Prior-related Applications
1.A	Appendix
1.A.1	Electronic Review Package

763

764 **APPENDIX B: CORRELATION OF ORIGINAL VERSUS PROPOSED MODULE 1**
 765

Original		Proposed	
Module #	Module Title	Module #	Module Title
1	Administrative Information and Prescribing Information	1	Administrative and Product Information
		1.0	Correspondence
		1.0.1	Cover letter
		1.0.2	Life Cycle Management Table
		1.0.3	Copy of Health Canada issued correspondence
		1.0.4	Health Canada Solicited Information
		1.0.5	Meeting Information
		1.0.6	Request for Reconsideration Documentation
		1.0.7	General Note to Reviewer
1.1	Table of Contents	1.1	Table of Contents
1.2	Application Information	1.2	Administrative Information
1.2.1	Drug Submission Application Form (HC-SC 3011)	1.2.1 Application	Forms
1.2.2	Drug Submission Fee Application Form	1.2.2 Fee	Forms
1.2.3	Submission Certification Form	1.2.3	Certification and Attestation Forms
1.2.4	Patent Information	1.2.4	Intellectual Property Information
		1.2.4.1	Patent Information
		1.2.4.2	Data Protection Information
1.2.5	GMP and Establishment Licensing (EL) Information	1.2.5	Compliance and Site Information
		1.2.5.1	Clinical Trial Site Information Form
		1.2.5.2	Establishment Licensing
		1.2.5.3	Good Clinical Practices
		1.2.5.4	Good Laboratory Practices
		1.2.5.5	Good Manufacturing Practices
		1.2.5.6	Good Pharmacovigilance Practices
		1.2.5.7	Other Compliance and Site Information Documents
1.2.6	Letter of Access	1.2.6	Authorization for Sharing Information
1.2.7	International Registration Status	1.2.7	International Information

Original		Proposed	
1.2.8 Other	Application Information	1.2.8	Post- Authorization Information
		1.2.9	Other Administrative Information
1.3	Product Labelling	1.3	Product Information
1.3.1	Product Monograph	1.3.1	Product Monograph
1.3.2	Inner and Outer Labels	1.3.2	Inner and Outer Labels
1.3.3	Non-Canadian Package Inserts	1.3.3	Non-Canadian Labelling
		1.3.4	Investigator's Brochure
		1.3.5	Reference Product Labelling
		1.3.6	Certified Product Information Document (CPID)
		1.3.7	Look-alike/Sound-alike Assessment (LA/SA)
		1.3.8	Pharmacovigilance Information
		1.3.8.1	Pharmacovigilance Plan
		1.3.8.2	Risk Management Plan (RMP)
		1.3.8.3	Risk Communications
		1.3.8.4	Other Pharmacovigilance Information
1.4	Health Canada Summaries	1.4	Health Canada Summaries
1.4.1	Certified Product Information Document (CPID)	1.4.1	Protocol Safety and Efficacy Assessment Template – Clinical Trial Application (PSEAT-CTA)
1.4.2 Com	prehensive Summary: BioEquivalence	1.4.2	Comprehensive Summary : Bioequivalence
		1.4.3	Multidisciplinary Tabular Summaries
1.5	Environmental Assessment Statement	1.5	Environmental Assessment Statement
1.6	Electronic Review Documents	1.6	Regional Clinical Information
		1.6.1	Comparative Bioavailability Information
		1.6.2	Company Core Data Sheets
		1.6.3	Priority Review Requests
		1.6.4	Notice of Compliance with Conditions(NOC/c)
		1.7	Clinical Trial Application (CTA) and Clinical Trial Application-Amendment (CTA-A) Specific Requirements
		1.7.1	Submission Rationale/Brief

Original		Proposed	
			Summary (BGTD only)
		1.7.2	Study Protocol
		1.7.3	Informed Consent Forms
		1.7.4	Canadian Research Ethics Board (REB) Refusals
		1.7.5	Information on Prior-related Applications
		1.A	Appendices
		1.A.1	Electronic Review Package

766

767 **APPENDIX C: POST-AUTHORIZATION COMMITMENTS**

768

769 Commitments are periodically made by the sponsors to provide additional information to Health
770 Canada in order to further support the approved submission or application.

771

772 Submissions and applications with Post-Authorization commitments that are not subject to the
773 NOC/c policy, either because they do not meet the requirements or because they are Level II
774 changes, should be tracked.

775

776 Some examples include (but are not limited to) the following:

- 777 • additional stability data;
- 778 • periodic updates of ongoing trials or surveillance programs;
- 779 • risk management studies (e.g. phase IV, pharmacoepidemiological, drug utilization
780 studies).

781

782 To track the status of outstanding commitments over the Lifecycle of the product, the following
783 table should be included in section 1.2.8 Post- Authorization Information.

784

Summary of Commitment	Date of No Objection Letter/ Notice of Compliance	Control #	Submission date of Outstanding Information	Date of commitment closure by Health Canada

785

786 Once the commitment has been closed off by Health Canada, it should remain in the table for at
787 least one subsequent submission or application and for a minimum of one year, after which it can
788 be removed.

789

790 **6 REFERENCES**

791

792 **6.1 Health Canada References**

793

794 The latest versions of these and other Health Canada guidance documents, policies, templates
795 and forms that should be consulted during the preparation of a drug submission or application
796 can be obtained from the Health Canada website at:

797

798 <http://www.HealthCanada-sc.gc.ca/hpfb-dgpsa/tpd-dpt/index-eng.php>799 <http://www.HealthCanada-sc.gc.ca/hpfb-dgpsa/bgtd-dpbtg/index-eng.php>

800

801

- 802 • Guidance for Industry: Management of Drug Submissions
- 803 • Guidance for Industry: Preparation of a Drug Submission in Electronic Common Technical
- 804 Document (eCTD) Format
- 805 • Guidance for Industry: Reconsideration of Final Decisions Issued for Human Drug
- 806 Submissions
- 807 • Guidance Document on Cost Recovery Submission Evaluation Fees
- 808 • Draft Guidance Document: Drug Master Files (DMF)
- 809 • Drug Good Manufacturing Practices (GMP), and the Establishment Licensing Enforcement
- 810 Directive (POL-0004).
- 811 • Good Manufacturing Practices (GMP) Guidelines
- 812 • Notice: Submission Filing Requirements - Good Manufacturing Practices (GMP) /
- 813 Establishment Licences (EL)
- 814 • Guidance document Non-Clinical Laboratory Study Data Supporting Drug Product
- 815 Applications and Submissions: Adherence to Good Laboratory Practice
- 816 • Guidance for Industry Product Monograph
- 817 • Guidance for Industry: Drug Name Review: Look-alike Sound-alike (LA/SA) Health Product
- 818 Names
- 819 • Guidance for Industry: Priority Review of Drug Submissions
- 820 • Guidance for Industry: Notice of Compliance with Conditions
- 821 • Quality Guidance: New Drug Submissions (NDSs) and Abbreviated New Drug Submissions
- 822 (ANDSs) for Chemical Entities (products containing drugs of synthetic or semi-synthetic
- 823 origin, excluding Schedule C and D drugs)
- 824 • Notice: Revised Quality Guidances on the Implementation of the Common Technical
- 825 Document for Biological Products
- 826 • Preparation of the Quality Information for Drug Submissions in the CTD Format:
- 827 Biotechnological/ Biological (Biotech) Products
- 828 • Preparation of the Quality Information for Drug Submissions in the CTD Format: Blood
- 829 Products
- 830 • Preparation of the Quality Information for Drug Submissions in the CTD Format:
- 831 Conventional Biotherapeutic Products
- 832 • Preparation of the Quality Information for Drug Submissions in the CTD Format: Vaccines
- 833 • Guidance for Industry: Preparation of Comparative Bioavailability Information for Drug
- 834 Submissions in the CTD Format
- 835 • Notice Regarding Implementation of Risk Management Planning including the adoption of
- 836 International Conference on Harmonisation (ICH) Guidance Pharmacovigilance Planning -
- 837 ICH Topic E2E
- 838 • Guidance for Clinical Trial Sponsors - Clinical Trial Applications
- 839 • Post-Notice of Compliance (NOC) Changes Guidance Documents
- 840 • Guidance for Sponsors: Lot Release Program for Schedule D (Biologic) Drugs
- 841

- 842 • Guidance for Sponsors: Information and Submission Requirements for Subsequent Entry
843 Biologics (SEBs)
- 844 • Notice: Common Technical Document - ICH Topic M4
845
- 846 The ICH M4 guidelines adopted by Health Canada can be obtained from the ICH website at
847 www.ich.org
848
- 849 M4 Organization of the Common Technical Document for the Registration of
850 Pharmaceuticals for Human Use
851
- 852 M4E (R1) The Common Technical Document for the Registration of Pharmaceuticals for
853 Human Use: Efficacy
- 854 • Clinical Overview and Clinical Summary of Module 2
 - 855 • Module 5: Clinical Study Reports
856
- 857 M4E (R4) Implementation Working Group Questions and Answers
858
- 859 M4Q (R1) The Common Technical Document for the Registration of Pharmaceuticals for
860 Human Use: Quality
- 861 • Quality Overall Summary of Module 2
 - 862 • Module 3: Quality
863
- 864 M4Q (R1) Implementation Working Group Questions and Answers
865
- 866 M4S (R2) The Common Technical Document for the Registration of Pharmaceuticals for
867 Human Use: Safety
- 868 • Non-Clinical Overview and Non-Clinical Summaries of Module 2
 - 869 • Organization of Module 4
870
- 871 M4S (R4) Implementation Working Group Question and Answers
872
- 873 **6.2 Other References**
874
- 875 *Uniform Requirements for Manuscripts Submitted to Biomedical Journals*, International
876 Committee of Medical Journals Editors (ICMJE).
877 <http://www.icmje.org/>
878
- 879 Summary Technical Document (STED), developed by the Global Harmonization Task Force
880 (GHTF).
881
- 882 (OECD) *Principles of Good Laboratory Practice (GLP)*