Policy document MEB 6

Labelling of pharmaceutical products

August 2017

1 Contents

2 Abbreviations and definitions

2D	Two-dimensional
GS	General Sales
CMDh	Coordination group for Mutual recognition and Decentralised procedures human *The European committee for mutual recognition and decentralised procedures*
CMS	Concerned Member State *An EU member state which does not have the lead when assessing a certain product.*
CBG	College ter Beoordeling van Geneesmiddelen *Medicines Evaluation Board*
DCP	Decentralised procedure
EAG	Unit Dispensing Suitable Packaging
EAV	Unit Dispensing Packaging
EMA	European Medicines Agency
EU	European Union
IGJ	Health and Youth Care Inspectorate
MEB	Medicines Evaluation Board *English translation of the College ter Beoordeling van Geneesmiddelen*
MRP	Mutual Recognition Procedure *European mutual recognition procedure*
OTC	Over the counter *This is the combined GS+PDO+PH legal status of supply which applies to medicinal products which are available over the counter, otherwise known as self-care medicinal products or OTC medicinal products.*
NtA	Notice to Applicants
OTC	Over the Counter *Another name for medicinal products for which no prescription is required.*
QR	Quick response
QRD	Quality review of documents
RMS	Reference Member State *An EU member state which has the lead when assessing a certain product.*
RVG number	Register Packaged Medicinal Products: Unique Dutch authorisation number for a medicinal product.
RVH number	Unique Dutch authorisation number for a homoeopathic medicinal product.
SmPC	Summary of Product Characteristics
PH	Pharmacy Only
PDO	Pharmacy and Drugstore Only
PO	Prescription Only
URL	Uniform Resource Locator *The URL is an Internet address and indicates where certain information such as a file or image is located on the Internet.*

3 Introduction

The presentation of the primary and secondary packaging of a medicinal product are determining factors in the recognition of a product and make a significant contribution to the correct use of the product.

The information on the outer packaging and primary packaging is intended for the patient (as a user of the medicinal product), or the parent or carer and for the pharmacist.

The European legislation concerning the labelling is discussed in Directive 2001/83/EC. Implementation took place in the Netherlands in the Dutch Medicines Act and the Medicines Act Regulation. Chapter 7 of the Medicines Act and chapter 4.a of the Medicines Act Regulation deal with the labelling and the package leaflet.

This policy document (MEB 6) clarifies the policy on the labelling of pharmaceutical products in the Netherlands. This policy is based on the aforementioned European and Dutch legislation.

The practical implementation of this legislation has been given shape in Europe in the QRD template. An English template, which includes comments and a further explanation is available. There is also a Dutch translation of the sections and standard sentences. Information that can be found in the template will not be repeated in this policy document.

The MEB tests the entire packaging, not just the compulsory text information. Packaging should therefore also be submitted to the MEB in finalised layout (as a mock-up, digital).

3.1 Other documents relevant to labelling

Via European Commission (Eudralex):

- Directive 2001/83/EC
- Notice to Applicants volume 2c:
- Guideline on the readability of the label and package leaflet
- Guidance concerning the Braille requirements for labelling and the package leaflet Article 56a of Directive 2001/83/EC as amended
- Guideline on the excipients in the label and the package leaflet of medicinal products for human use
- Blue box information for products authorised through the Central Procedure, see the Annex of the Guideline on the packaging information of medicinal products for human use authorised by the Union

- European Commission website on falsified medicines: with a reference to, among other things:
  - Commission Delegated Regulation (EU) 2016/161 (9 February 2016)
  - 'Questions and Answers' document
  - Implementation of the rules on the safety features for medicinal products for human use
- Dutch translation Europese Verordening Vervalste geneesmiddelen 2011/62/EU): (with annexes 1 and 2; black and white list)

- List of details of national competent authority to contact for requests of translation exemption falling under Art. 63.3 of Directive 2001/83/EC and cases of shortages

Via EMA:

- Quality review of documents (QRD templates)
- Guideline on declaration of herbal substances and herbal preparations in herbal medicinal products/traditional herbal medicinal products.
- Compilation of QRD decisions on stylistic matters in product information
- Recommendations for the implementation of the exemptions to the labelling and package leaflet obligations in the centralised procedure
- Quick Response (QR) codes in the labelling and package leaflet of centrally authorised medicinal products

Via CMDh

- Quality review of documents (QRD templates)
- Questions &Answers (for example '*Product Information / Information on medicinal products'*)
- Blue box requirements for products authorised through MRP/DCP (see CMD(h) website 'Blue-box' requirements): http://www.hma.eu/fileadmin/dateien/Human_Medicines/CMD_h_/procedural_guidance/Application_for_MA/CMDh_258_2012_clean.pdf
- Article 61(3) procedure
- CMDh Position paper on the use of QR codes to provide information about the medicinal product

Via MEB

- MEB-08 Guideline on the excipients in the label and the package leaflet of medicinal products for human use (Dutch translation)
- MEB 13 Nomenclature pharmaceutical products
- MEB 14 Parallel import: marketing authorisation and maintenance
- MEB 16 Duplex marketing authorisation
- MEB 21 Statements of 'abbreviated indications' packaging of OTC products
- Form for Braille declaration
- MEB 41 Policy on marketing authorisations without Dutch translations of the product information and/or mock-ups.
- Policy QR code
- QRD templates with reference to website for Central procedures and DCP/MRP procedures

Via Wetten.Overheid.nl

- Dutch Medicines Act (Gmw)
- Medicines Act Regulation (RGmw)

4 Legal framework

When applying for a marketing authorisation, a mock-up of the outer packaging and primary packaging must be submitted (section 3.7 of the Medicines Act Regulation and article 8(3)(j) of Directive 2001/83/EC).

Changes to the outer packaging and the primary packaging proposed by the marketing authorisation holder must be submitted to the MEB (section 50, subsection 2, of the Medicines Act).

If it becomes apparent after the awarding of a marketing authorisation that the packaging text does not meet the requirements set out in, by virtue of or pursuant to Chapter 7 of the Medicines Act, marketing authorisation may be withdrawn, suspended or amended (section 51, subsection 1, of the Medicines Act).

The labelling (packaging texts) must be set out in accordance with the Summary of Product Characteristics (SmPC) (section 4a.2, subsection 1, of the Medicines Act Regulation and article 54 of Directive 2001/83/EC). A consequence of this may be that new, amended packaging texts must be submitted simultaneously with any textual changes to the SmPC.

The text of the outer packaging and primary packaging must be worded in Dutch (article 4a.3, subsection 1, of the Medicines Act Regulation). Packaging texts in several languages are permitted, provided that a declaration is made that the information provided in all languages is the same, with the exception of the Blue Box requirements. In the case of a package text in several languages, the Blue Box requirements that only apply to the other countries do not have to be translated into Dutch.

Products accepted via mutual recognition procedure (MRP) and Decentralised Procedure (DCP) that will not be marketed in the Netherlands may be authorised without the Dutch product information. For more information, please refer to the Policy Document MEB 41 Policy concerning marketing authorisations without Dutch translations of the product information and/or mock-ups and MEB 5 Package leaflets of pharmaceutical products.

For products accepted via the Centralised Procedure, in some cases there is the option to submit a request to the MEB to market the product in question without the Dutch text on the packaging and/or the Dutch package leaflet. Please refer to the EMA website for further information about this and the procedure that should be followed.

Additional legal requirements apply for the labelling of homeopathic products and traditional herbal medicinal products: article 4a.1, subsection 1, of the Medicines Act Regulation and articles 68 and 69 of Directive 2001/83/EC.

5 Readability and Mock-ups

- 5.1 Readability and language

5.1.1 General

According to article 4a.3, subsection 1, of the Medicines Act Regulation the information on packaging must be clearly legible and non-erasable.

The MEB maintains the standard as set in the European Commission document 'Guideline on readability' concerning readability (including letter size, letter type, use of colour). Please refer to this Guideline for the current requirements.

It is permitted to present certain information (batch number, expiry date) in punched text rather than printed text on blister and strip packages (also refer to section 5.5 of this document).

5.1.2 Exemption Dutch language

Exemption of the use of Dutch language will only be granted in very exceptional cases, in accordance with the stipulations set out in article 4a.3, subsections 2 and 3, of the Medicines Act Regulation. In addition, the MEB permits marketing authorisation without a Dutch translation, see below in section 5.1.4.

Exemption of information in the Dutch language on the packaging of a product that is traded in the Netherlands can, in exceptional circumstances, be permitted for products which have to be administered by the professional groups in the event of
- a critical product that, due to a small number of users, would not be available on the Dutch market if a Dutch label text is required
or
- a manufacturing process whereby it is impossible for a batch to be packed in various packs with labels in different languages, for example in the case of certain radiopharmaceuticals.

It should be noted that, in the event of an exemption from the use of the Dutch language, English is the only permitted alternative foreign language on the label. The dossier must include an approved English text when the request is submitted.
If the patient has to administer the product himself, the text on the marketed packaging must always be in Dutch.

The marketing authorisation holder sends the request for exemption, along with argumentation and documentation including a mock-up with English text, to NLtranslationexemptionCP@cbg-meb.nl. As regards the criteria of a critical product, reference is made to the EMA document entitled 'Criteria for classification of critical medicinal products'. In addition, the marketing authorisation holder must provide reasons as to why a multilingual packaging for numerous countries, for example together with Belgium, is impossible.
A product with English text may only be marketed after approval by the MEB.

It should be noted that the dossier must always contain a Dutch text of the packaging in accordance with the QRD template which has been submitted to the MEB.

Exemption from using the Dutch language on the packaging of orphan medicinal products is arranged via the EMA.

A request for a temporary exemption of the Dutch language on packaging, for example in the case of shortages, is arranged via the Medicinal Products Shortages and Defects notification centre (www.medicineshortagesdefects.nl).

5.1.3 Packaging for more than one country

In principle it is possible to label packages in such a way that they are suitable for more than one country. In all instances the data on the packaging must, both as regards content and layout, complying with the requirements as laid down for the Netherlands. However, the information, except the administrative information such as marketing authorisation holder and authorisation numbers, must be the same in each language. The information must be stated per language on the packaging. For each language a clear indication must be given as to the country for which the information is intended in this language, for example by adding a country code.

5.1.4 Marketing authorisations without Dutch translations of the product information and/or mock-ups

As medicinal products are not always marketed immediately after authorisation, the MEB has decided to allow exceptions concerning the submission of the Dutch translations of the product information.

- There is the option of awarding a marketing authorisation in the Netherlands for a product accepted via a MRP or DCP without having to submit Dutch translations of the product information and mock-ups. The MEB will then issue a marketing authorisation subject to certain conditions. During the authorisation of the English SmPC and patient information leaflet will be determined, whereby sections 1 and 7-10 will be adapted and will contain specific national information. In principle, the label does not need to be adapted. The option not to submit Dutch translations of the product information and mock-ups also exists for products that are already authorised, but have not yet been marketed in the Netherlands.

- There is the option of awarding a marketing authorisation in the Netherlands for a product accepted via a MRP or DCP with a Dutch translation of the product information or accepted via a national recognition procedure without submitting mock-ups.
Please refer to the MEB 41 policy concerning marketing authorisations without Dutch translations of the product information and/or mock-ups'

• 5.2 Mock-ups

5.2.1 Mock-ups of the design for the labelling

A mock-up is a flat design, in colour with the final font type and the final font size and graphic design, which gives a clear impression of the three-dimensional presentation of the packaging. A mock-up must be submitted for assessment. An exception to this is listed in section 5.1.4 above.

The MEB will only accept digital submissions of mock-ups. Hence applicants are not meant to submit an actual (three-dimensional) cardboard box or a design on paper. However, a (three-dimensional) sample must be submitted for the so-called 'wallet packaging' (see section 7.1 of this document).

For products that will not be marketed in the Netherlands, but for which a Dutch mock-up is submitted, the mock-up of another product from the same series may be used, provided that the differences are clearly marked. This can be done using sticky notes in PDFs of mock-ups. Differences in the presentation of the text or differences in colours compared to the final packaging cannot be indicated in this manner. Experience has shown that a mock-up containing a lot of sticky notes and a lot of text in a small font size is difficult to evaluate. In such cases, the MEB would prefer to receive a separate declaration, explaining which text on the mock-up will be replaced with a different text.

There is a possibility that the MEB assesses the house style of the marketing authorisation holder. For this purpose a national article 61(3) notification should be submitted which clearly states that it relates to an assessment of a (new) house style. This notification should not be related to a single specific product but should be submitted with reference to 'new house style'. Such a notification should also be accompanied by mock-ups. The marketing authorisation holder can decide to submit a mock-up for all products involved. However, it is preferable to submit a number of mock-ups as an example and to submit the other mock-ups only after the house style has been approved. This is subject to the condition that the submitted mock-ups are representative of the other mock-ups so that the mock-ups not yet submitted do not contain any new elements. Examples in this context include mock-ups for PO en OTC products, for various pharmaceutical forms and/or for various dimensions of the packaging (including Single Unit Dispensing Packages (SUDP)).

The house style is assessed on the basis of this policy document. In addition, the 'Guideline on the readability of the label and package leaflet' (see NtA volume 2c) and the QRD template need to be taken into account.

An approved house style generally leads to less discussion about the layout of the packaging in the event of subsequent changes to product-specific mock-ups. However, the marketing authorisation holder must always fulfil the applicable conditions imposed on individual mock-ups. Policy changes may therefore mean it is essential to adapt the house style.

5.2.2 Mock-up should be sufficiently distinctive for each product
In order to prevent mix-ups, it is essential that the packaging of the various pharmaceutical forms and strengths and of other products from the same marketing authorisation holder can be clearly distinguished from one another.

5.2.3 Packaging with the same authorisation number
If various packaging sizes are marketed for a certain product (with one authorisation number), the layout of these packages (colour scheme, font, mutual relationship between font sizes, etc.) must correspond as closely as possible. The order of the text may be adjusted accordingly for 'vertical' packages versus 'horizontal' packages. However, the lay-out here will also have to be maintained as closely as possible. For example, if the text on one package is printed in a blue banner, this will also have to be the case on the other package, with the proportions of the text and the banner corresponding as closely as possible. The marketing authorisation holder should submit mock-ups for the different packaging forms. The mock-up for each packaging size does not have to be submitted, however, mock-ups must be submitted for the packaging sizes that are considerably different (e.g. horizontal versus vertical). The EAV/EAG packages form an exception to a lay-out similar to the other packaging sizes (see also section 7.5).

It is emphatically not the intention that packages of one product with entirely different colour schemes exist together. This is in order to prevent confusion. The only exception is a transitional situation, in which a variation procedure is implemented for the packaging and the packaging with the 'old' lay-out is sold out.

5.2.4 Strip/blister packaging with calendar indication and strip/blister packaging with various types of tablets in one product
These packages, including mock-up, may not cause any confusion about the use and the identity of the tablet, if there are different types of tablets.

5.2.5 Blank outer packaging with label sticker as secondary packaging
A blank outer package with a label sticker as secondary packaging is possible for both prescription and over-the-counter medicinal products. The criteria listed below do need to be met in this case. This will be assessed on a case-by-case basis.

- All compulsory information must be stated on the label that is affixed to the front of the packaging.
- The label sticker must meet all legal requirements as stated in this policy document (MEB 6) and the label sticker must also meet the requirements for pre-printed labelling texts on secondary packaging. The positioning of Braille text on the packaging must also be taken into consideration (on the label or on the blank outer packaging), unless exemption has been granted as discussed elsewhere in this document (see also appendix 1 point 16).
- Text on the labelling sticker must at all times conform to the Guideline on the readability of the labelling and package leaflet of medicinal products for human use. In addition to the font type, the font size and colour, the lay-out of the labelling text is essential to result in a readable labelling text. In the case of a small secondary packaging, it may be that the legally required information does not all fit on a label sticker due to the available space. In such cases, this method of packaging is not acceptable. A mock-up of the sticker must be submitted for assessment.

- Text on the labelling sticker must be indelible.
- The packaging, including the affixing of labelling stickers, should occur under GMP. A labelling sticker must remain properly attached to the packaging for at least the entire period of the shelf life of the medicinal product, as stated on the packaging, including under the storage conditions that apply for the relevant medicinal product.

6 Logos, signs, images, pictograms and other text information (claims)

- 6.1 Introduction

To clarify the information referred to in article 54 and article 59, subsection 1, of Directive 2001/83/EC, provisions are included in article 4a.1, subsection 1, of the Medicines Act Regulation and article 62 of Directive 2001/83/EC, for the outer packaging and the package leaflet to include signs or pictograms, as well as other information, provided it does not contradict the SmPC and provided it contributes to the health information, with the exception of anything which could have a promotional/commercial character.

The label may not contain any information, claims or logos, signs or pictograms that:
- contradict the SmPC text that has been approved by the MEB.
- concern information to promote the use of the product
- does not contribute to the health information

An image on the package of self-care medicinal products can simplify the decision-making process from the available selection. Graphic information can be important for users who do not have a good command of the Dutch language. In addition, graphic elements are important for marketing authorisation holders to distinguish between various products.

Over time the MEB has observed excessive creativity with regard to the indication of signs, images, logos and pictograms on the packaging.

In general, the MEB has always been hesitant about allowing the use of logos, images, signs and pictograms, but recognises the value of such elements on the packaging in clarifying the information. Signs, images or pictograms may therefore only be used on the packaging to clarify information and may not be used instead of the compulsory text or as a repetition of the information. The MEB will maintain this hesitant policy, based on definitions and admission criteria, which will be further set out in this chapter. The assessment will be performed based on the submitted mock-up.

- 6.2 Definitions

Signs and pictograms: The MEB defines these as standardised symbols and simple, styled images that unambiguously express a prohibition, indication or information.

Logos: The MEB defines these as the identifying mark or distinguishing mark of a specific legal entity (for example, the marketing authorisation holder) with a set design.

Images: The MEB defines these as all graphic representations that are not logos or signs/pictograms.

Information: Based on the definition as stipulated in article 69 of the Medicines Act, the MEB defines this as written text exclusively.

- 6.3 Assessment criteria

Signs, images or pictograms may only be used for clarification purposes and may not be used instead of the compulsory text. An image on a package must therefore always be evaluated in combination with the written information. If the marketing authorisation holder wishes to use signs, pictograms, logos, images or other information in addition to the compulsory text information on the packaging of a medicinal product, these should – based on the Medicines Act – meet the following general criteria:

1. *They should not contradict the approved SmPC text and the text on the packaging of the medicinal product*
   The SmPC text and the accompanying package leaflet form the basis for all communication about the medicinal product, including the information provided via the packaging. However, the SmPC text should not be copied literally. Where possible, the compulsory packaging information should be a user-friendly phrasing derived from the SmPC text. However, sometimes it is inevitable that the information on the packaging will contain elements that have not been derived directly from the SmPC text. This can involve both textual matters (for example batch number and expiry date) and images. If these characteristics are portrayed, they must of course be correct.

2. *They must be in agreement with the 'guideline on readability of the label and package leaflet of medicinal products for human use'*
   The colour scheme and clarity of the graphic elements may not have a negative effect on the readability of the compulsory text on the packaging. The graphic elements may not be larger than 1/3 of the side of the packaging on which they are displayed. Colour scheme and clarity must be secondary to the minimum compulsory text and may not draw the user's attention away from the compulsory text.

3. *Not misleading*
   Of course it is not permitted to use the packaging lay-out to suggest characteristics that the product does not contain, such as a broader indication area, or a higher efficacy of the medicinal product.

4. *Not confusing*
   The purpose of signs, pictograms and other images is – among others – to clarify the text information on the packaging of a medicinal product. If the user is unable to distinguish products as a result of the many 'visuals', then this will cause confusion instead of clarification. The same would also apply if an image is so complicated that the average consumer is unable to understand it. In certain cases – for example in combination – pictograms that are clear and correct on their own, could also result in confusion; this must be avoided. In order to avoid confusion about the set dosage, only one example of the pharmaceutical form may be shown. This image should correspond to the description of the characteristics in the SmPC.
   The product should also remain recognisable as a medicinal product and no images may result in misconceptions about the nature of the product (for example, the product being mistaken for a sweet or cosmetic).

5. *May not contradict the standards of good taste and decency*
   The design should take into consideration that images (or parts thereof) may not remind the users of any undesirable (insulting, racist, discriminatory, sexist, pornographic, blasphemous, etc.) associations.

6. *No advertising of the product*
   Every form of information about a product can contribute to the user preference for that product and can – to a certain extent – be perceived as recruiting in nature. The graphic design can also partly determine the attractiveness of the product. However, the aim of the image(s) must be to provide visual information to clarify the compulsory text. The MEB therefore has decided – as a general rule – not to permit photographs on the packaging (with the exception of the images of the pharmaceutical form).

The 'attractiveness' of a package as such does not have to be undesirable advertising. Just as taste, shape and colour of the tablet, capsule or syrup, it can even promote acceptance by the user.

7. *Contribution to health information*
   Information on a package is aimed at promoting correct use of the medicinal product by the user. In a few cases, written text can be supported by graphic elements and can thereby contribute to the health information.

- 6.4 Specific points of attention for logos, pictograms, signs, images and information

- 6.4.1 Logos

Only the logo of the marketing authorisation holder for the relevant product is permitted on the packaging. In the past, logos of the licensor, manufacturer and of the importer at the outer border of the EU were accepted. However, this is not permitted due to possible confusion and uncertainty about who is responsible for marketing of the product.

A logo must meet the same requirements and testing criteria as described above in section 6.3.

Examples

- *In the case of a merger of two companies, the company wants to maintain the logos of the individual companies for the relevant products.*
  As soon as the name of the merged company is listed on the packaging, then only the accompanying logo may be used. It is not permitted to use two logos.

- *In addition to using the logo of the marketing authorisation holder, the company also wants to use the logo of the parent company.*
  This is possible under strict conditions, but the starting point is that it must be absolutely clear which company is responsible for marketing the product.

  For example, for company X (marketing authorisation holder), company X's logo may be used on the packaging and the following information may also be included: *Part of 'Company Y group' + {logo of Company Y}.*

  In this case, it is permitted to place the logo of the parent company on the packaging, because it is clearly stated that this is the parent company and there can therefore be no confusion about who is the marketing authorisation holder.

  It is therefore permitted to
  - *mention 'part of'* and/or *'Y group company'* and possibly the logo of the parent company Y only in combination with the logo of the marketing authorisation holder company X.
    NB: Mention of just the logo of the parent company Y in combination with the statement that '*company X is part of company Y*' is therefore not permitted without the logo of the marketing authorisation holder being stated because a mention of just the logo of the parent company Y can cause confusion about who is the marketing authorisation holder.

- *Branding sentences such as 'We care for your health', directly or indirectly linked to a logo*
  This is written text that does not contribute to the health information and can be considered as advertising and will therefore be rejected.

- **6.4.2 Pictograms and signs**

There are currently no approved standardised pictograms, other than the bottle bank pictogram and the recycle pictogram. In order to avoid confusion and uncertainty, the bottle bank logo and other recycling logos should not be placed on the outside of the packaging. They may be placed on the sealing edge that only becomes visible after the package is opened. Concerning the bottle bank pictogram, it is also permitted to place the pictogram on the label of the primary packaging or in the glass itself.

- **6.4.3 Images**

A number of images are hard to standardise. Furthermore, standardisation is usually not deemed desirable by the marketing authorisation holders, as they are (partly) defining for the identity of the company or the product.

Without further specified conditions the following images (graphic elements) are permitted:

- abstract (styled) layout elements, such as stripes, arches, circles, background colours, etc., without further meaning are permitted, provided the readability of the textual information is not affected.

The following images are permitted **under further conditions**:

- *Pharmaceutical form (photograph if required)*
  Such an image may not cause any confusion about the pharmaceutical form. It must be unambiguously stated which pharmaceutical form is being referred to. Furthermore, the image of the pharmaceutical form must correspond exactly to the actual form and its appearance; this means that if a break line is present, this must also be present on the image. Only one example of the pharmaceutical form may be shown, in order to prevent confusion about the dosage.

- *Special administration devices*
  This is defined as a device that aids in the dosage and/or use of the product. The administration device must be included in the packaging and must be essential for correct and safe use.
  An image of the device is permitted, provided the image is subordinate to the compulsory elements on the packaging.

- *Packaging materials*
  Listing of the packaging materials on the packaging will be rejected if the listing contains superfluous information. Of course it is permitted if the material is included in the name of the product.

- *Indication of the target group*
  An image serving as identification of the target group is only permitted if this will not cause any confusion about the target group. This applies in particular to the identification of the target group children, for example by means of the image of a child's head. Particular attention should be paid to the identification of the age category. The image may in no way suggest a different age category than for which the product is intended. Therefore, the age category must be stated explicitly in or near the image.
  An image of toys is not sufficiently clear to identify the target group children and therefore not functional or acceptable. Furthermore, it can cause misunderstandings for children about the nature of the product and could be an undesirable recommendation for them.

- *Site of administration/treatment*
  This is an unambiguous, stylised image used to indicate the part of the body where the condition requiring treatment occurs and where the medicinal product is also administered; for example, an ear on a product to treat ear pain, a nose on a nasal decongestant or a foot on a product to treat athlete's foot. This is of course only permitted if the medicinal product has only one site where it may be administered in accordance with the set indication.

- *Portrayal of the indication*

An image of the indication will only be possible in a few cases and only if it concerns all authorised indications. This will avoid the placement of an image on the packaging that does not relate to all the authorised indications for the product. This will usually be the case for products that have only one indication. Only in this case can the visual information be complete and avoid confusion. For example, it is therefore not permitted to depict only headache or only back pain on an analgesic that is also authorised for pain such as menstrual pain or pain after vaccinations. It is also not permitted to depict several indication areas in one image. For example, for the above-mentioned analgesic, it is not permitted to use one image of the body and place circles around the head, abdomen, arms and legs to depict the multiple indication areas.

For self-care medicinal products, it is permitted to state an 'abbreviated indication' on the front of the packaging (see policy document MEB 21) in addition to the compulsory instructions for use (complete indication, article 4a.1, subsection 1, of the Medicines Act Regulation and article 54, letter n, of Directive 2001/83/EC). However, the product name on the packaging continues to be the most important distinguishable point and it should be prominently visible on the packaging. All other information is subordinate to this. The aim of the 'abbreviated indication' is to support the distinguishability of the application option of the product. Visual information could support the textual description in this matter.
A condition for this is that the visualisation must be in agreement with the abbreviated indication, but also be clear and meaningful on its own (for example, a coughing person may not be confused with a person who is vomiting).

If the image cannot provide any further detail of the indication (for example, a coughing person on a package of a medicinal product with abbreviated indication 'for expectorant cough due to viscid mucous'), one should firstly consider whether it is useful to place the image on the packaging. If a good motivating reason can be found for its presence, then the combination of the image and the abbreviated indication and/or product name must depict this indication unambiguously.

In no way may the image create the impression that the medicinal product can also be used for indications that it has not been authorised for. This could be the case, for example, if an oesophagus is pictured along with a stomach on a product that is only authorised for stomach pain and not for acid reflux.

Finally, the image should be a stylised representation of the indication.
The MEB will evaluate every proposal for an image on a case-by-case basis.

- **6.4.4 Safety features**

The coming into effect of the European Regulation on falsified medicinal products 2011/62/EU stipulated that certain medicinal products for human use must be accompanied by safety features.

These safety features are:
- a *'unique identifier'* (incorporated into a 2D Data Matrix code)
- an '*anti-tampering device'* (for example a seal on the packaging that demonstrates that the packaging has not previously been opened).

These safety features must be applied to the packaging of prescription-only medicinal products and in a number of cases also to the packaging of over-the-counter medicinal products (the latter are referred to in the so-called 'black list'). In a number of cases these safety features do not need to be reported on the packaging of prescription-only medicinal products, these are referred to in the so-called white list. More information is available on the website of the European Commission. In addition to the implementation plan for Centrally authorised products the *Questions & Answers document 'Implementation of the rules on the safety features for medicinal products for human use* can also be found here which has been drawn

up by the European Commission in collaboration with the member states in order to facilitate the implementation of this regulation.

Marketing authorisation holders are themselves responsible for ensuring that the safety features are included on the packaging and that they continue to meet the readability guideline.

The QRD template has been adapted through the addition of sections 17 and 18. The submission and approval of labelling texts with changed sections 17 and 18 must take place before the medicinal product is launched onto the Dutch market with these safety features, or within 3 years after the coming into effect of the European Regulation (in other words before February 2019). See Annex 1 to this document.

If the legal status changes from non-prescription to prescription (so from PH/PDO/GS to PO) the labelling must be adapted in accordance with QRD template sections 17 and 18: Implementation of 2D Data Matrix code and anti-tampering device.
Products with a different legal status in member states must follow the QRD template whereby the relevant sections must be shaded grey in the common text submitted.

- **6.4.5 Two-dimensional matrix of blocks e.g. QR code**

It is permitted to include a two-dimensional matrix of blocks code (2D Data Matrix code), such as a QR code, on the packaging and/or in the package leaflet. Given that the European Regulation on Falsified medicinal products (see 6.4.4) states that a 2D Data Matrix code must be applied to the packaging of prescription medicinal products and, in a number of cases, also to the packaging of non-prescription medicinal products, it is recommended that the QR code be included in the 2D Data Matrix code, wherever possible. As a result, less visible codes will be shown on the packaging and there will be a smaller risk of confusion when scanning. See also: *CMDh Position paper on the use of the Quick Response (QR) codes to provide information about the medicinal product*.

Appendix 3 at the end of this document describes the conditions that companies must meet for the use of the QR code on the packaging and/or in the package leaflet for products that have been /will be issued with a national marketing authorisation. This policy also applies to parallel-imported medicinal products and for marketing authorisations awarded via derived authorisation procedures.
For techniques that have a similar function as the QR code, the same approach applies as for the QR code.

- **4.4.6 Other information:**

Several barcodes can be stated on the packaging, provided this does not compromise the legibility of the mandatory information.

An overview of QRD agreements about style-related matters can be found in the EMA document *Compilation of QRD decisions on stylistic matters in product information* (doc ref. EMA/25090/2002 rev.18).

Information that is currently applied to the packaging in the form of stickers by the pharmacist (for example, a blue band containing the white text “niet om in te nemen” (not for oral use) may now be pre-printed on the packaging, provided that the general standard layout of the current stickers is used.

7 Special packaging

- 7.1 'wallets', 'cellophane sleeves as outer packaging', 'travel pharmacy cases'

A wallet is a special type of packaging that is supplied as an integrated part of the product. It usually contains a tablet strip, with an extra cardboard foldaway flap attached to it, which contains information. The advantage of a wallet is that if the patient only has one strip on his/her person, he/she still has access to more information than if only a classic tablet strip had been taken along. The MEB notes that the complete patient information always consists of the sum of the package leaflet and the information as required on outer packaging. The MEB recognises that the patient often only carries one strip and not the entire package, particularly for certain products such as oral contraceptives or simple painkillers. Therefore, the MEB will allow the wallet under certain conditions. However, for the time being this will be evaluated on a case-by-case basis.

The wallet forms part of the authorisation dossier and must be described in this document. In general, the wallet will not be given to the patient separately.
The wallet will be considered as outer packaging if the wallet is *not* surrounded by – for example – a cellophane sleeve. In general, this means that the wallet must meet all the labelling requirements set for outer packaging.
However, sometimes the wallet *is* surrounded by a completely transparent cellophane sleeve, which holds several wallets and a package leaflet together. This cellophane cover is considered to be outer packaging. The cellophane cover then forms part of the authorisation dossier and specifications must then be recorded in the dossier. The cellophane sleeve does not contain any labelling information of the manufacturer. One condition is that the packaging (wallet) under the cellophane sleeve lists all the legally required labelling information for an outer package. Of course the requirement that this information must be clearly legible through the cellophane also applies. It has been decided at a European level that it is not necessary for the information provided in Braille on the cardboard of the wallet to be tangible through the cellophane, as the cellophane will always be removed before use and the (blind or visually impaired) patient can then take note of the text in Braille after all.
Despite the fact that the manufacturer does not have to attach a label to the cellophane sleeve itself, a label will still be applied: namely the label from the pharmacy when the product is dispensed. The layout of the text on the packaging under the cellophane sleeve must therefore be set out in such a way that no information will be obscured if a pharmacy label is placed on the cellophane sleeve. A section of the packaging under the cellophane sleeve must be left blank intentionally, for the pharmacy label to be stuck on over the cellophane.
In the case of a non-resealable cellophane sleeve, it is preferable that this sleeve remains intact as far as possible after opening. This in order to prevent premature disposable of the sleeve and also the pharmacy label.

For the time being, the MEB expects a specimen of the wallet to be submitted for the assessment of the packaging form 'wallet' and a (two-dimensional) mock-up alone is not sufficient. However, the medicinal product does not actually have to be present in the specimen.

An alternative option is that the extra packaging – in whatever form – is also made available separately when the medicinal product is dispensed from the pharmacy. The extra outer packaging then does not form part of the product and therefore does not need to be described in the dossier. The 'travel pharmacy cases' are known examples, in which several different products can be stored. The MEB will not object in the case of examples as described above.

- 7.2 Combination packages

The combination package has its own authorisation number, in addition to the RVG numbers of the individual products, if these products are authorised separately. A special exception is the calendar package with various products. It is particularly important that the text on the immediate packaging does not cause any confusion about use.
If one package contains several products, a clear distinction must be made between the various products in the combination package. If they are packaged separately, a label text must be submitted for the individual products. If the products are packaged separately, the label text for the individual products should state only the RVG number for the combination packaging (and not the RVG number of the individually authorised product), as the whole is authorised under the RVG number for the combination package.

- 7.3 Parallel import

The requirements concerning labelling in general apply to pharmaceutical products marketed via parallel import. This also applies to the requirement that the product name must also be stated in Braille. However, if the product name in the country of origin differs from the name in the Netherlands, then the product name in the country of origin may still be written in Braille. It is not necessary to add the Dutch product name in Braille. It is important to ensure that the Braille remains legible when the labels of the parallel marketing authorisation holder are placed on the package. The Braille may be written over printed text.

The following applies to the labelling of *primary* packaging of parallel import products: if the application of a Dutch label on the primary packaging causes problems that could be detrimental to the patient and the relevant information has been translated correctly in the package leaflet, the MEB will not maintain the requirement that a Dutch label must be placed on the primary packaging. However, the outer packaging must be labelled in Dutch.

Example: A tablet strip states the days of the week with abbreviations in a foreign language. Applying an extra cover foil with Dutch text would make it much more difficult to release the tablets, which is detrimental to the patient. The foreign abbreviations are translated in the package leaflet and the outer packaging does contain a Dutch label. In this case, the MEB will not insist on the requirement for Dutch labelling on the primary packaging.

Example: An ampoule is placed in sterile 'inner blister', which is then packed in a cardboard outer package. The ampoule has not been labelled in Dutch. The information in the foreign language provided on the label of the ampoule is available in Dutch in the package leaflet. The blister would have to be opened in order to apply a Dutch label, which entails the risk of a loss of sterility. This is detrimental to the patient. In this case, the MEB will not insist on the requirement for Dutch labelling on the primary packaging.

For parallel products, it is *compulsory* to list the company (name + address) that accepts responsibility for the outer packaging on the label/the new outer packaging. It has to be clear who is responsible for the packaging. In practice, this means that either the actual packager must be listed, in addition to the marketing authorisation holder, or the marketing authorisation holder only must be listed stating 'marketing authorisation holder/packager'.

For OTC medicinal products, the indications, contra-indications, dosage, method of use and method of administration must be worded in the same manner on the packaging of the parallel product as the

information on the packaging of the Dutch reference product. Warnings on the packaging of the parallel product must be the same as the information on the packaging of the Dutch reference product.

If the indications, contra-indications and/or dosages from the country of origin are also stated on the package, they must be covered with a sticker if they differ from the approved specifications for the Dutch reference product. It is important to ensure that indications that have not been approved for the Dutch reference product cannot be read (in the foreign language) on the packaging. For further information, please refer to the policy document 'Parallel import; authorisation and maintenance' (MEB 14).

- 7.4 Stock / bulk packaging

The MEB recognises that marketing authorisation holders sometimes wish to market (very) large packages. These packages (for which the specifications must be set out in the authorisation dossier) are apparently not intended for dispensing (by the pharmacy) to the individual patient, but are intended as stock from which the pharmacy can dispense the required quantity to several patients. However, the Medicines Act does not provide for separate (reduced) labelling requirements for such packages. The labelling of the (very large) packages will have to meet the normal requirements for (primary) packages. The MEB will grant exemption for stating the product name in Braille on products that are exclusively administered by a medical professional and not by the patients themselves. However, the criterion then is the nature of the medicinal product and not the packaging size. *Administration* by the professional refers to the doctor who will administer certain administration forms (for example, injections) to the patient where the patient is unable to do this himself/herself. This does not apply to the *dispensing* of the medicinal product by the pharmacist.

- 7.5. Blister packaging / strip packaging (including EAV/EAG packaging)

Blister packages or strip packages consist of two layers in which capsules or tablets are packaged. Please refer to the QRD template for the requirements that apply to the labelling of primary packaging (such as strip packaging and blister packaging).

According to the QRD template, the name of the packaging must be followed by the strength, the pharmaceutical form and (on the second line) the active substance. In addition, the QRD requires the batch number and expiry date to be stated. This also applies to strip packaging and blister packaging. The MEB has included the above-mentioned recommendations in its national policy.

- It is permitted to present certain information (batch number, expiry date) in punched text rather than printed text on blister and strip packages.

- For strips and blisters of EAV/EAG (Unit Dispensing Packages / Unit Dispensing Suitable Packages), intended for hospitals and nursing homes, the above mentioned QRD requirements for primary packaging must be met on each individual packaging unit. If the EAV/EAG packaging deviates from the other packaging (for example number of items per package, materials, type of packaging (e.g. strip or blister), text/text per dispensing unit, mock-ups) in any way, then they must be included separately in the dossier and also reported in SmPC section 6.5.

  It is allowed to mention EAV packaging in the national text of the packaging text, if EAV packaging contains the same packaging materials/size as the already approved packaging mentioned in the EU SmPC and package leaflet. An EAV package can be included in the SmPC during the national implementation of an application procedure for marketing authorisation or during a variation if the SmPC is involved in this variation and the materials/size are in

accordance with the information about the strips/blisters mentioned in the SmPC. An MRP-variation is not necessary for addition of this information to the package leaflet/packaging text. A national article 61 (3) procedure can be used.

- The strip packaging and blister packaging may also include extra information such as a barcode, instructions concerning the use or the order in which the tablets must be taken (calendar packaging); all on condition that this does not detract from the primary information. The MEB does not have a preference concerning a standard for the barcode.

- The strip packaging and blister packaging must state the name of the marketing authorisation holder. This name may be abbreviated, provided that the marketing authorisation holder's identity is sufficiently clear. If the (abbreviation of) the marketing authorisations holder's name is incorporated in the trade name, it does not have to be listed separately.

- It is permitted to add a blister holder to the packaging. The blister holder is a type of cover intended to carry one blister/strip instead of several as packaged in a box. The same information must be stated on the blister holder as described in the QRD template for the outer packaging. The following details form an exception to this:
  - batch number and expiry date (the blister holder can be used again, also for different batches)
  - packaging size (the blister holder is intended for one blister/strip)

  Braille should be stated on the blister holder, in order to make the blister holder recognisable to blind and visually impaired individuals.

- 7.6 Small primary packaging (ampoule, pattern and other small packages)

For small primary packages (and possibly also for larger packaging), it is not necessary to list everything, provided there is a sound argument for dispensation. Please refer to the QRD template, the English annotated version and the '*Guideline on readability*'.

- 7.7 Intermediate packaging

The rules in accordance with the QRD template apply to the outer packaging and the label of the primary packaging. Sometimes there is another type of packaging between these two, the intermediate packaging. The requirements concerning the listing of information that apply to the outer packaging also apply to the intermediate packaging. A proposal must also be submitted for the intermediate packaging concerning the text on the packaging and a mock-up must be submitted. If these requirements are not met, a reason must be provided as to why there is a deviation from the requirements set for the outer packaging.

- 7.8 Childproof packaging/senior-citizen friendly packaging

The MEB is of the opinion that completely childproof packaging does not exist. The MEB therefore considers claims concerning child safety as misleading.
However, the packaging can ensure that it takes longer before a child can open the packaging. Therefore, the MEB will accept the following claim concerning child safety on the packaging "*Moeilijk te openen door kinderen*" (*Difficult for children to open*).

If, during a MRP/DCP procedure, a claim concerning child safety on the packaging is established, the MEB will only accept the claim "*Moeilijk te openen door kinderen*" (*Difficult for children to open)* on Dutch

packaging as a translation, irrespective of the term in the European adopted text (*child resistant, child safe* etc.).

Claims concerning '*seniorvriendelijke verpakking' (senior-citizen-friendly packaging)* are not permitted. The term 'senior' is subjective and does not provide a proper description of the target group.

8 Labelling of specific product groups

It should be taken into consideration that the European Pharmacopoeia and the Dutch Medicines Act requires additional requirements for labelling for a number of pharmaceutical forms:

- 8.1 Radiopharmaceutical products

The primary packaging of a radiopharmaceutical product must state:
- the name or the code of the medicinal product, including the name or chemical symbol of the radionuclide,
- the identification of the batch,
- the expiry date of the batch,
- the international symbol for radioactivity,
- the manufacturer's name,
- the amount of radioactivity, as indicated in section 2.

The primary packaging must meet the requirements set out in article 4a.1 of the Medicines Act Regulation and article 54 of Directive 2001/83. Article 66, subsections 1 and 2, of Directive 2001/83/EC also applies to these products. These provisions set out further rules for the information that has to be provided on the different types of packaging for this product. The label of a product that contains radionuclides must also provide a complete explanation of the codes that are used on the primary packaging. If necessary, the amount of radioactivity per dosage unit or per package must be stated for a certain time or date, as well as the number of dosage units or – for liquids – the millilitres contained in the object in which a radiopharmaceutical is dispensed.

- 8.2 Sera and vaccines

Additional requirements apply to sera and vaccines, as defined in the relevant monographies in the European Pharmacopoeia, please refer to that document.

- 8.3 Blood products

A number of additional labelling requirements have been formulated for blood products in the European Pharmacopoeia, please refer to that document.

- 8.4 Homeopathic pharmaceutical products

All homeopathic medicinal products must state on the outer packaging – or if this is missing, on the primary packaging – that this is a homeopathic medicinal product (article 4a.1, subsection 1, of the

Medicines Act Regulation and article 69 (1) of Directive 2001/83/EC). Pursuant to article 4a.1, subsection 1, of the Medicines Act Regulation and article 68 of Directive 2001/83, the labelling of a homeopathic medicinal product must also comply with the provisions of Part V of Directive 2001/83/EC and article 69 of Directive 2001/83/EC.

The following amended labelling requirements apply to homeopathic medicinal products for which no therapeutic indication is stated on the packaging and in the package leaflet, medicinal products that are intended for oral or external use and for medicinal products for which the degree of dilution meets certain requirements to guarantee that they are harmless (article 14, subsection 1 of Directive 2001/83/EC):

- the scientific name or other name of the homeopathic stock or stocks, followed by the degree of dilution, making use of the symbols of the pharmacopoeia used in accordance with article 1(5),
- name and address of the authorisation holder and, where appropriate, of the manufacturer,
- method of use and, if necessary, administration,
- expiry date, in clear terms (month, year),
- the pharmaceutical form,
- contents of the sales presentation,
- special storage precautions, if any,
- a special warning if necessary for the medicinal product,
- manufacturer's batch number,
- the authorisation number,
- 'homeopathic medicinal product without approved therapeutic indications',
- a warning advising the user to consult a doctor if the symptoms persist during the use of the medicinal product.
  (article 4a.1 Medicines Act Regulation and article 69(1) of Directive 2001/83/EC)

The normal labelling requirements apply to homeopathic products that do not fall into these categories.

- 8.5 Traditional herbal medicinal products

For traditional herbal medicinal products, the normal labelling requirements apply pursuant to article 4a.1 of the Medicines Act Regulation plus the requirements as set out in articles 54, 55 and 62 of Directive 2001/83/EC.

The outer packaging – or if this is missing, the primary packaging – of so-called traditional herbal medicinal products must state that this is a traditional herbal medicinal product. This packaging should also state that the user must consult a doctor or another suitably qualified professional (for example a dentist or midwife) in individual healthcare if the symptoms persist whilst using the traditional herbal medicinal product.

Appendix 1: Clarification of sections in the QRD template

The information below is intended as a supplement to the English annotated QRD template. The QRD templates can be found on the EMA website. Information that can be found there will not be repeated here.

Clarification is provided per section in the English annotated template. The Dutch template only contains translations of section titles, standard sentences and examples (and not the clarification).

The Dutch QRD template follows below, listing remaining points that are not (sufficiently) discussed in the above-mentioned documents.

A diagrammatic overview of the de QRD sections discussed below feature in the 'Checklist' in Annex 2 to this document.

- 1. Name of the medicinal product

According to the QRD template, the name, strength and pharmaceutical form must be stated on the first line. The product name consists of the name, strength and pharmaceutical form and this should be expressed on the mock-up of the packaging. The active substance(s) must be stated immediately below this, on the second line.

Refer to MEB 13 for details on the nomenclature.

Name for special age group
If a pharmaceutical product is exclusively intended for use by a certain age group, then the indication of this age group should *also* be stated additionally on the packaging (see article 54a of Directive 2001/83/EC). However, the information no longer needs to be included in the name. Please also refer to the document 'Nomenclature of Pharmaceutical Products', MEB 13.

- *Avoiding double entries*
- *General or scientific name of the active substance*
  If the name of the product is built up of the *general* or scientific name and the name of the marketing authorisation holder (or a [umbrella] brand), then it is *not* compulsory to state this general or scientific name of the active substance *again immediately after (below or next to)* the name on the packaging. In this case, the second line can be omitted in order to prevent repetition. Example: For the name 'Paracetamol Company X 500 mg tablet', the word 'paracetamol' does not have to be repeated immediately after the name on the packaging. If the name is a *fantasy name*, for example 'Panadol', then it must be included.

  The above-mentioned is separate from the requirement to list the qualitative and quantitative composition of the active substances per dosage unit separately on the package ('one tablet contains 500 mg paracetamol'). This listing per dosage unit must be stated on the most important side of the packaging, where the QRD block is also stated in any case.

  If an active substance is present in the medicinal product as a salt or an ester form, it may be necessary to state the active substance in the immediate vicinity of the name (on the 'second line') of the packaging, in order to give a correct representation of the nature of the incorporated substance (please also refer to section 2 below). This is clarified in the examples in Appendix 3 of this document.

- *Pharmaceutical form*
  If the pharmaceutical form is included in the name, it does not need to be stated again 'following the name' on the packaging. This is separate from the requirement to state the pharmaceutical form separately on the packaging (also refer to section 4 below).

  On small primary blister packaging it may be permitted, in connection with the space, to state a shortened pharmaceutical form in accordance with the patient-friendly terms of the EDQM which are generally shorter and which have been approved and authorised by the national authorities, as long as the pharmaceutical form is stated in full on the outer packaging.

- *Strength*
  If the strength (number AND strength unit) is included in the name, it does not need to be stated again 'following the name' on the packaging. However, again it is important to take into consideration salts and esters, as stated under 'Name, active substance and strength'. The composition *per dosage unit* will still have to be listed separately ('one tablet contains x mg of y').

The MEB does not object to the addition of the symbol ® or ™ to the product name when stating this product name on the *packaging* (the use of these symbols is not permitted when stating the product name in the Summary of Product Characteristics, please refer to the English annotated QRD template).

- 2. Statement of active substance(s)

Concerning the listing of the composition, this must also be viewed in combination with the name, strength and pharmaceutical form.
If the active substance in the product is present as a salt or an ester form, then this must be indicated clearly. This is clarified in the examples in Appendix 3 of this document.

Other points concerning the listing of the composition of active substances:

- For pharmaceutical products with one active substance, the listing of the composition and the quantity ('one tablet contains x mg of y') must be stated immediately with the name (and the subsequent listing of the strength and pharmaceutical form). If the name of the product is listed on various sides of the packaging, the reference to the composition ('one tablet contains x mg of y') needs only be listed on the most important side of the packaging.

- The MEB wishes to maintain the current policy, to consider it compulsory for products with a fantasy name and one active substance to list the qualitative composition of active substances and the name of the medicinal product on the same side of the packaging. The MEB also prefers that this qualitative and quantitative composition is always (also with several active substances) listed on the same side of the packaging as the name.

- The composition must be listed in the nomenclature recommended by the World Health Organisation (INN name Dutch). If there is no INN name, a common standard name such as a Pharmacopoeia name, USAN or BAN may be included.

- For new active substances, the strength indication must refer to the active part of the molecule.

- If a substance also occurs as a hydrate, it must be stated whether this is the hydrate or the anhydrous substance, even if this listing does not form part of the name of the substance in a pharmacopoeia.

- The concentration should not be expressed in percentages. It is permitted to list a concentration in percentages in the *name* for those products where the concentration determines the effect more than the total amount and where reporting the strength in percentages has been common practice for some time, for example Sodium Chloride 0.9%.

- If a substance is declared in micrograms, this strength unit must be written out in full in the declaration for safety reasons (mix-ups with milligrams). Only when this results in practical problems that cannot be solved with a smaller font size (<7 Didot points) may the abbreviation 'mcg' be used in the declaration. Under no circumstances may the abbreviation 'µg' be used in the declaration, as the Greek 'mu' for microgram poses too great a risk of being confused with the 'm' for mg. The MEB wants the above-mentioned concerning mcg to apply both to the outer packaging and the primary packaging, including blister packaging. Refer elsewhere in the document of the European Committee 'Guideline on readability'.

Liquid pharmaceutical forms

- For liquid pharmaceutical forms, it must be clear in which concentration the active substance is present:

  Oral forms
  The strength is indicated in mg/ml and also – in the case of a specific dosage unit (for example a measuring spoon of 5 ml) – per dosage unit, for example 400 mg/ 5 ml or 400 mg = 5 ml.

  Parenteral forms (single use)
  The concentration of the active substance is expressed in mg(IE)/ml or in mg(IE)/l for volumes greater than 500 ml and also in relation to the final volume of the product. So not only 40 mg/ml, but also 80 mg/ 2 ml or 80 mg = 2 ml. The same applies for 1 ml flacons/vials, etc. So, for example, not only 40 mg/ml, but also 40 mg/ 1 ml or 40 mg = 1 ml.

  Parenteral forms (multiple use)
  The labels of pharmaceutical products for multiple use deserve special attention.
  The concentration is stated both in mg/ml and as the total quantity calculated according to the final volume.
  It should also always be stated whether the pharmaceutical product is intended for multiple administrations.

  Parenteral forms as concentrates
  The total quantity in the concentrate and the quantity per ml are stated for the active substance, as well as the quantity per mL after dilution.

  Parenteral forms as powders
  The total quantity in the primary packaging and the quantity per ml after reconstitution are stated for the active substance.

  Solutions for dilution or for reconstitution
  The volume that is actually used, e.g. extracted from the vial, must be stated.

Administration forms for transdermal use

- The total quantity per administration form (for example per plaster) is stated for the active substance, as well as the quantity released per unit of time. The surface area per form must also be reported (for example, the surface area of the plaster).

Implants and intra-uterine devices

- The total quantity per administration form is stated for the active substance, as well as the quantity released per unit of time.

- 3. List of excipients

- *All* excipients must be listed qualitatively in the case of pharmaceutical products destined for parenteral administration and for local administration (including the ear and the eye). This obligation applies to both the outer packaging and the primary packaging. If the space available on the label is not sufficient, as can be the case for small ampoules, then this obligation expires for the primary packaging.

- For pharmaceutical forms other than the ones described above, the European Commission has published a list of excipients that must be stated (see the 'Guideline on the excipients in the label and package leaflet of medicinal products for human use').

  Of course the complete composition may always be stated on the label of any pharmaceutical product.

- Starting point is that only excipients that are present must be stated. Therefore, it is not permitted – for example – to state the description '*alcohol-free*' on the packaging. Several descriptions can be included in the **product name**. Also refer to the policy document 'Nomenclature of pharmaceutical products'.

- According to the guideline 'Excipients in the label and package leaflet of medicinal products for human use', the label must include a reference to the package leaflet in the case of an excipient that is listed in the guideline. This means that in some cases, the label needs to contain two references to the package leaflet, namely in section 3 of the QRD template for the excipients and in section 5 of the QRD template. The reference may be included twice on the mock-up, but this is not essential.

- 4. Pharmaceutical form and contents

The description of the pharmaceutical form must be in agreement with the recommendations in the Standard Terms, as set out by the European Pharmacopoeia. The Standard Terms apply to labelling texts for new authorisations. These terms should be taken into consideration during the revision or repeat authorisation of products already on the market. A Dutch translation has been included in the above-mentioned list of Standard Terms.

Small packaging, strips

The first preference is to state the entire pharmaceutical form. If this truly is not possible, an abbreviation of the Standard Term will be accepted. What is acceptable will have to be evaluated on a case-by-case basis.

Contents: Everything in the packaging (with the exception of the package leaflet) must be listed.

If applicable, enclosed devices (and their number) such as needles, disinfectant wipes (so-called 'swabs'), etc. must also be listed. The same information as listed in section 6.5 of the SmPC must be listed.

This includes the following case (example as an illustration):
There are two different packaging forms for the product Cernevit, powder for solution for injection. In addition to a standard aluminium capped vial, a vial with an alternative cap has been authorised that allows for direct connection to an infusion bag (called BIO-SET). A syringe with needle is required for the first packaging form. This is not necessary for the BIO-SET, as this can be connected directly to the infusion bag. The solvent is transferred to the vial by squeezing the bag. The dissolved product is then returned to the infusion bag.

As it is important for professionals to know which packaging form they are dealing with, the MEB strongly prefers that the information about this be included on both the outer packaging and the label. In this example, this has been performed correctly by including the following text:

'1 injection vial with BIO-SET'

It should be noted that such additional information about the packaging form may of course not be recruiting in nature, as this would contravene the Medicines Act.

- 5. Method and route(s) of administration

The standard sentence as referred to in the QRD template should *always* be included here.

- In general, it is essential to list the route of administration if this cannot be deduced from the pharmaceutical form.
  Technical instructions for the correct use of the medicinal product also fall under this category.

  Examples:
  For use under the tongue
  For vaginal use
  For rectal use
  Do not chew
  Shake before use

  It is very important that it is expressed clearly whether a product must be used as is, or only after dilution, dissolving, heating or similar.

  The following instructions should always be included if applicable:

  * Concentrate for solution for infusion
    Only administer after dilution with an infusion liquid.
    Name and quantity of any added preservatives.

  * Concentrate for solution for injection
    Dilute with x mL of y (recommended solvent) before administration.
    Name and quantity of any added preservatives.

  * Powder for solution for injection
    Name and quantity of any added preservatives.
    Method of preparing the solution for injection.

  Preparations in which a relatively large quantity of solid substance need to be dissolved result in volume expansion, meaning that the final concentration cannot be calculated as such. This final

concentration must be determined and the result must be reported. For example in the following manner: 'Addition of … ml of solvent results in … ml of solution at a concentration of … mg/ml'.

- The method of administration is listed on ampoules and cartridges. Use the terms in the List of Standard Terms for this purpose.

  Examples:
  Intravenous
  Intradiscal
  Epidural

  The method of administration should also be listed in this manner on other packages of products for parenteral use.

- The abbreviations I.V. (intraveneus) and I.M. (intramuscular) are permitted if the primary packaging does not offer enough space to list the full name of the route of administration.

- 6. Special warning that the medicinal product must be stored out of the sight and reach of children

The standard sentence from the QRD template must be included. This sentence must also be stated on products that are used in the hospital.

- 7. Other special warning(s), if necessary

If the relevant product has a quality requirement that it must be sterile and/or pyrogen-free, then it is permitted to list this on the label. The QRD template makes no mention of this, but the MEB has no objection to listing this.

Special warnings on the packaging can be deemed necessary by the MEB in special, not further specified cases. However, the MEB will be cautious in doing so.

- 8. Expiry date

The expiry date until which the product is deemed suitable for use must be listed in a clear annotation. The month must be listed with two figures or at least three letters and the year with four figures. Example: February-2018, Feb_2018, 02_2018.

In general, terms such as 'do not use after', 'preserved until', 'exp' may be listed on the packaging. If abbreviations such as 'exp' are used on the label or strip packaging, these abbreviations must be clarified in the package leaflet.

For some products (radiopharmaceuticals, vaccines), it may be necessary to specify the information for use even further.

In-use shelf life

If the in-use shelf-life of the primary packaging is not shorter than the expiry date for resealable packaging/packaging for multiple use, this does not explicitly have to be stated, such in accordance with the *'Note for Guidance on in-use stability testing of human medicinal products'*.

In contrast to European policy, however, the MEB is of the opinion that this information is important for the patient in the case of self-care medicinal products. Since September 2016 the MEB has applied the national policy referred to below with regard to the in-use shelf life of self-care medicinal products with a resealable packaging for:

- OTC medicinal products (GS, PDO, PH legal status of supply) with resealable packaging, authorised via the national or MR/DC procedure and regardless of authorisation date, with the exception of medical gases.
- Traditional herbal medicinal products;
- Homeopathic medicinal products.

The following standard sentences can be used:

If the in-use shelf life is at least **as long** as the entire shelf life, the expiry date must be followed by the following text:
This date also applies after opening of the <packaging><vial><tube><…>.

If the in-use shelf life is **earlier** than the expiry date of the unopened product, the following text should be included after the expiry date:
After opening of the <packaging><vial><tube><…> this product will expire in <XX days/weeks/months>.

The in-use shelf life must be stated on both the primary and outer packaging. What is more, this information must be included in the Summary of Product Characteristics and the package leaflet.

If necessary the Blue Box can be used for products which have been/are authorised via MRP/DCP.

Substantiation of the in-use shelf life
Directive 2001/83/EC states that details of the shelf life must be submitted along with the application for authorisation of a medicinal product. The *'Note for Guidance on in-use stability testing of human medicinal products*' states how applicants of a medicinal product for multiple use must investigate the in-use shelf life of the packaging, all how they can clarify why such an investigation is not necessary.

An exception to this applies to homoeopathic products which have been authorised in accordance with article 14 of Directive 2001/83/EC provided they:

- have a liquid pharmaceutical form with an ethanol content of > 30% V/V, or
- do not contain water.

No additional substantiation is necessary for these products if the proposed in-use shelf life corresponds with table 22.15 of Practical Pharmaceutics (see preference point 3 below).

In parallel-authorised OTC medicinal products, the package leaflet mentions the storage conditions of the foreign product, including the in-use shelf life. If the foreign package leaflet does not state any in-use shelf life, the package leaflet of the Dutch referenced product can be used. NB: this is only possible if it can be demonstrated that the Dutch reference product is equivalent to the parallel product.

For products which have been authorised before 2001 it was not yet obligatory, at the time of authorisation, to carry out an in-use stability study. For the in-use shelf life for these products, the applicant should *preferably* have obtained in-use stability data based on a study with the product itself. If there is no in-use stability data available for the product itself, the applicant can substantiate the information by providing (in declining order of preference):

1. In-use stability data of other, comparable products, whereby the applicant substantiates why this data is applicable to the product or why the applicant has deviated from it.
2. Literature which is as specific as possible for your product, with substantiation of the way in which the applicant applies this literature to the product (the literature referred to must be sent as well).
3. Practical Pharmaceutics: An International Guideline for the Preparation, Care and Use of Medicinal Products; Yvonne Bouwman, V'Iain Fenton-May, Paul Le Brun; Springer, 24 Aug. 2015. P.457 Table 22.15: assigned usage periods for dosage forms. When using this table the applicant must substantiate why the expiry date as mentioned in this table is applicable to the product or why the applicant has deviated from it.
   If additional storage conditions have been included in the table, the applicant must include these (in QRD terminology) in the product information.

Existing marketing authorisations
If a product is marketed in resealable packaging and no in-use shelf life has yet been stated on this medicinal product, the applicant is required to submit, well in advance of the marketing, an article 61(3) notification or a variation.
Notifications are only possible if the SmPC already includes information about the in-use shelf life. When changes to module 3 and/or adjustments to the SmPC are made, variations must be submitted. In this case a Type IB variation category B.II.f.1.z is applicable.
For products authorised via the MRP/DCP procedure, the notifications/variations must be submitted in the RMS and Cuss.

- 9. Special storage conditions

The standard sentences from the appendix in the QRD template must be followed.

The MEB has no objection to stating on the label that there are no special storage conditions (in accordance with the Package Leaflet). This option is not listed in the appendix to the QRD template.

- 10. Special precautions for disposal of unused medicinal products or waste materials derived from such medicinal products, if appropriate

No additions to the text of the QRD template are required for this section.

- 11. Name and address of the marketing authorisation holder

According to the Medicines Act, the party that is responsible for marketing the product must submit the application for authorisation in the register. This means that the person or legal entity listed on the packaging is the marketing authorisation holder. Examples of contact options are: correspondence address, telephone number, fax number, e-mail address.

The following applies to the address (including the correspondence address: a PO Box (plus city) is not acceptable. This cannot be considered an address in a legal context. The listing of the address should therefore consist of a street + street number (plus city). The country name 'The Netherlands' does not have to be added here, provided that the city is located in the Netherlands. The MEB is aware that this deviates from the QRD template, because this template does require the country to be mentioned. However, in order to save space and due to the fact that it may be assumed that patients in the Netherlands will not be impeded if they wish to visit the address of a city in the Netherlands, this exception is permitted. For the record: if the marketing authorisation holder is located in a foreign city,

then the country will have to be added. If the latter case (listing of country name, because city located in foreign country) results in a lack of space on the outer packaging, then it is acceptable by exception to omit the street + street number and only mention the place of business (city) and the country. Thus: 'Marketing authorisation holder X, Munich, Germany'. Of course this only applies in the case of a lack of space, because such a limited listing is generally not desirable.

The telephone number listed on the packaging must be the general telephone number for the marketing authorisation holder, on which anyone wishing to do so can get in touch. Listing of special telephone numbers that redirect the caller from the marketing authorisation holder to special 'patient information programmes' or 'patient support programmes' are not permitted.

For the sake of completeness, it is pointed out that it is permitted to state an alternative address for information and correspondence (and the accompanying representative), in *addition* to that of the marketing authorisation holder. This applies not only to the package leaflet but also to the packaging. Whether the marketing authorisation holder is located in the Netherlands or abroad is not relevant. Especially if the marketing authorisation holder is not based in the Netherlands, this additional information to that of the marketing authorisation holder may make correspondence and the provision of information easier.

The name of the distributor may not be explicitly listed in the capacity of 'distributor', because the distributor must be viewed as wholesale supplier and therefore carries no responsibility whatsoever for the marketing of the product. Listing the term distributor could create confusion about who is responsible for marketing the product. An exception applies if the marketing authorisation holder, whose contact details are listed as 'alternative address for correspondence and information', by coincidence *also* has the role of distributor. This representative may then of course be mentioned by name, however only in his role as 'representative for correspondence and information'. The role of the representative for correspondence and information should therefore be stated clearly, preceded by the name of this representative (see above).

In line with the policy about adding the symbol ® or ™ to the product name (see Annex 1, section 1 above) additions such as *'Trademark of <xxx>'* are accepted in the package leaflet and on the packaging, but not in the SmPC.

It is not permitted to list chemists or a licence holder on the trade packaging, as the Medicines Act does not offer scope for this. The Medicines Act does provide the opportunity to use a name for a medicinal product in which a brand has been included (that is not the marketing authorisation holder). This brand could be the name of a chain of chemists or a licence holder, assuming that they are the marketing authorisation holder for that brand.

- 12. Marketing authorisation number(s)

The marketing authorisation number consists of the designation RVG or RVH (capital letters, no full stops between the letters) followed by a number. However, for products authorised via the Centralised Procedure, the letters 'RVG' or 'RVH' are not included in the number of the marketing authorisation. In that case, the number starts with the designation EU/1/… for human medicinal products and with the designation EU/2/… for veterinary medicinal products.

If a product has a combined number, for example RVG 08916//104217 or RVG 55595=03869, then the entire number must be listed on the packaging.

- 13. Batch number

- The batch number should be a characteristic combination of numbers and/or letters that specifically identify a batch in accordance with the European GMP guide. Moreover, the information must be clearly readable, easy to understand and indelible (article 56 of Directive 2001/83/EC).

- For products marketed via parallel import that are repackaged, the batch number listed on the original packaging must be included on the new packaging.

- 14. General classification for supply

Although stated differently in the QRD template, the following classification applies to the Netherlands: PO, PH, PDO, GS (article 4a, subsection 1, Medicines Act Regulation).

The dispensing status of a product is determined by the MEB based on the Medicines Act Regulation. A choice should be made from one of the following designations on the packaging:

PO: for a medicinal product that may only be dispensed on prescription.
PH: for a medicinal product that may only be dispensed in a pharmacy.
PDO: for a medicinal product that may only be dispensed in a pharmacy or drugstore.
GS: for a medicinal product that may be sold in general sale.

- 15. Instructions on use

The instructions for use must be listed on the packaging for non-PO medicinal products. Instructions for use include at least: indications and contra-indications. Dosage may be added. The use of the 'abbreviated indication' is permitted on the most prominent side of the packaging, provided that the full indication is listed elsewhere on the packaging. Refer to MEB 21's relevant policy document for this.

It is not essential to list the use on the packaging of PO medicinal products. However, in some cases where the dosage differs from the usual dosage, for example *'once a week'*, it can be advisable to list the dosage on the packaging.

For the sake of completeness it should be noted that the standard sentence as referred to in section 5 of the QRD template must always be stated. (see above in section 5).

- 16. Information in Braille

The name of the medicinal product must be expressed in Braille format on the packaging (article 56a of Directive 2001/83/EC).

Chapter 2 of the '*Guideline on readability*' provides an explanation of the information that must be listed on the packaging/label in Braille.

In the Netherlands, the information in Braille is assessed by means of a template that must be completed by the applicant/marketing authorisation holder, the so-called Braille declaration. This template is provided on the MEB website. It is not necessary to submit a box/label with Braille text.

The product name must be represented on the outer packaging in Braille. This will usually be the outer packaging. However, if the product only has a primary packaging, the product name must be mentioned in Braille on this primary packaging. It is not necessary to create a special space for the Braille text; it may run over the original packaging text.

This obligation does not apply to products that are only administered by a medical professional and not by the patient himself/herself. If the Braille text is omitted, a reason for this must be submitted to the MEB for evaluation.

If the Braille text is too large for the relevant packaging, information from the name may be omitted: the salt (if this forms part of the name), the company name (if this forms part of the product name), and for OTC medicinal products: information about indication, taste, etc. Starting point is that the product must be recognisable.

For parallel products, the original foreign Braille text is sufficient. The parallel importer/distributor must ensure that the Braille text is presented in the correct language and that the original Braille text cannot result in confusion in the country of importation.

Technical information:
Braille is not a language, but a way of reading and writing a language. One basic character is called a Braille Cell. As there are no differences in Braille between countries, the Braille font (size of the Braille Cell) should be standardised. The use of the *Marburg Medium* is strongly recommended. Otherwise, the name should be written in uncontracted (Grade 1) Braille. This means that one letter occupies one Braille Cell. Contracted Braille (the contraction of characters in one Braille Cell) is not permitted, also not for packaging smaller than 10 mL, as this script is not well known in the Netherlands (used for less than 30 years).

- 17. Unique identifier – 2D Data Matrix code

Safety features must be displayed on outer packaging and, if there is no outer packaging, on the inner packaging.
If safety features are displayed on outer and inner packaging, the codes must be identical.

The following text options can be used literally in the label text which is submitted to the MEB. The real 2D Data Matrix code will, if applicable, be stated on the actual packaging.
<2D Data Matrix code with the unique identifier.>

For products for which the unique identifier is not required in accordance with article 54a(1) or article 54a(5) of Directive 2001/83/EC, the following must be stated in grey shading in this section:
<Not applicable.>

- 18. Unique identifier - data legible for people

The following text options can be used literally in the label text which is submitted to the MEB. The actual numbers and codes are to be stated on the actual packaging. See also comment under section 17 about the location of these characteristics.

<PC: {number} [product code]
SN: {number} [serial number]

NN: {number} [national reimbursement or national identification number]> (on the basis of national obligation)

For products for which the unique identifier is not required in accordance with article 54a(1) or article 54a(5) of Directive 2001/83/EC, the following must be stated in grey shading in this section:
<Not applicable.>

19. Other information essential for correct use and administration

- This relates to a special option, introduced by the QRD working group and adopted by the MEB, to list certain information on the blister packaging that is essential for correct use and administration. Example: calendar indications.
- A very reticent approach is adopted concerning the temporary placement of stickers on the packaging, for example, if the appearance or an excipient in the product is changed. The company must submit sound argumentation for this; the MEB will evaluate this on a case-by-case basis, together with the Health and Youth Care Inspectorate (IGJ).

20. Blue Box Information

For products authorised via MR/DC procedure or via the Centralised procedure, additional information may be required nationally in the package leaflet or on the packaging.
For further information:
- *products authorised via MR/DC Procedures: see website CMD(h) 'Blue-box' requirement*
- *products authorised via the Centralised Procedure: see Notice to Applicants volume 2c Guideline on the packaging information of medicinal products for human use authorised by the Community*.

These documents describe the blue box information per country.

Appendix 2: Overview of the items that must be listed on the various packaging forms

(the Checklist)

Medicines Act, art. 69	Outer packaging				
Ditto, art. 70 packaging	Ampoule, cartridge or section 2	other small packaging (must be on external packaging)			
Ditto, art. 70 external packaging)	Blister (Strip) packaging section 1	(must be on			
Ditto, art. 69	Primary packaging				
a. **Name,** followed by **strength**, **pharmaceutical form** and then **active substance*** (for which the listed active substance must correspond to the above-mentioned strength) In addition, insofar as applicable, the words **infants**, **children** or **adults** must be added. All this information must be depicted on the most important side of the packaging (usually the front).		x	x	x	x
* Listing of active substance(s): compulsory in accordance with a. if the medicinal product contains no more than three active substances. For more than three active substances, these do not have to be listed in accordance with a. The active substances do have to be listed in accordance with b. (see below) on the primary packaging (with the exception of blisters and small packaging) and on the outer packaging. In practice, the exemption from listing more than three active substances only applies to blisters and small packages, and not to other primary packages and outer packaging.					
b. Qualitative AND quantitative composition of active substances *('one tablet contains x mg of y').*		x			x
c. Pharmaceutical form *(do not list again separately, but include under a, see above)*		x	x	x	x
d. Contents of the trade packaging in units of mass or volume, in I.U. or in number		x		x	x
e. Excipients		x[1]			x[1]
f. The method of use and method of administration		x		x	x
g. Reference to package leaflet		x			x

Medicines Act, art. 69	Outer packaging			
Ditto, art. 70	Ampoule, cartridge or section 2 packaging	other small packaging (must be on external packaging)		
Ditto, art. 70	Blister (Strip) packaging section 1	(must be on external packaging)		
Ditto, art. 69	Primary packaging			
h. A warning that the pharmaceutical product should be kept out of sight and reach of children.	x			x
i. Special warnings [if necessary]	x			x
j. Expiry date (month/year), in understandable wording	x	x	x	x
k. Indications concerning storage [if necessary]	x			x
l. Indications for the disposal of unused products or waste products [if necessary].	x			x
m. The name and address of the marketing authorisation holder	x	x[2]		x
n. Authorisation number (marketing authorisation number)	x			x
o. Manufacturer's batch number	x	x	x	x
p. Dispensing status (PO, PH, PDO, or GS)	x			x
q. Instructions for use, including what the MEB considers indications, contra-indications, (in-use) shelf life and dosage, if necessary. This applies to a non-PO medicinal product.	x			x
r. Name of the medicinal product in Braille				x
s. Certain other information essential for correct use and administration		x		

[1] Only if the pharmaceutical product is intended for parenteral administration, for local application and for the eye; for the primary packaging if space permits (refer also to the 'Guideline on the excipients in the label and package leaflet of medicinal products for human use').

[2] The name of the marketing authorisation holder alone is sufficient. As part of the product name, containing the name of the marketing authorisation holder in abbreviated form (although the MEB does not prefer the latter).

Appendix 3: URL via two-dimensional matrix of blocks (for example QR code)

Introduction

The QR code presents a URL for a website with a two-dimensional matrix of blocks. The URL is encoded and printed on the outer packaging of, for example, a medicinal product and/or in the package leaflet. A special reader of such codes (application) on, for example, a smartphone, is used to scan the code. The application translates this scan to the URL and the device's browser opens the relevant website. This provides access to (digital) information about a certain medicinal product. An example of a two-dimensional matrix of blocks is the QR (quick response) code.

The policy for the QR code in the Netherlands that is described below applies to all medicinal products that will be or have been awarded a national marketing authorisation. This policy concurs with the policy as set out in the CMDh for products in the MRP and DCP. The policy also applies to parallel-imported medicinal products and to marketing authorisations awarded via derived authorisation procedures.

This policy only relates to the use of QR codes that refer to web pages containing information about the relevant medicinal product. 2D barcodes that are used exclusively for internal production processes and do not contain information about the medicinal product do not fall under the scope of this policy, see Chapter 6.4.4 of this document. For techniques that have a similar function as the QR code, the same approach applies as for the QR code.

Conditions for use of a QR code

In order to place a QR code on the packaging and/or in the package leaflet, the conditions listed in article 69 of the Medicines Act, the policy document 'Labelling of pharmaceutical products' (MEB 6) and/or the policy document 'Package leaflet for pharmaceutical products' (MEB 5) must be met. This includes that the QR code and the underlying information must not contradict the approved Summary of Product Characteristics, must be useful for the patient and must not promote the medicinal product. The content may not include public advertisements.

The following information can be stated below the QR code (called '*positive list*'):
- mandatory product information, such as the information in the SmPC, package leaflet and labelling
- information in relation to pharmacovigilance, such as educational material

The format in which the information is provided can be determined freely, provided that the requirements for the information underlying the QR code have been met.

The information from the positive list is made available via the QR code by the marketing authorisation holder. The marketing authorisation holder ensures that this information is kept up to date on the relevant website.

A QR code can be included on the packaging and in the package leaflet, on condition that this is secondary in prominence and position to the mandatory information that must be stated on the packaging. In the case of small packages, the QR code can also be positioned on the inside of the packaging. Several barcodes can be stated on the packaging, provided this does not compromise the legibility of the mandatory information.

In order to draw patients' attention to the potential differences between the last approved product information and the printed package leaflet, the following sentences should be stated in the package leaflet:
'Detailed and up-to-date information for this medicinal product can be obtained

by scanning the QR code with a QR reader, an application (app) for smartphone or a tablet. The same up-to-date information about the medicinal product is also available via the following URL: <…> and on the website of the Medicines Evaluation Board (www.geneesmiddeleninformatiebank.nl)'.
These sentences should be included at the end of the package leaflet (as the last sentences).

The entire URL to which the QR code refers is to be listed with the QR code so that the information can also be accessed by patients who are not able to scan the QR code.

The listing of the QR code is not dependent on the legal status of supply and can be used both for medicinal products that are only available with a prescription and for medicinal products that are available without a prescription.

Procedure for inclusion of a QR code

When applying for a marketing authorisation, the applicant must submit a declaration stating that the QR code meets and will continue to meet all the set requirements. In the case of a DCP or MRP, the declaration must be submitted no later than Day 106. In the case of a national procedure, the applicant must submit the declaration in the second round at the latest. After these time points, a declaration will no longer be accepted during the procedure of an application for a marketing authorisation.

By submitting this declaration, the applicant confirms that the content of the QR code conforms and will continue to conform to the relevant regulations. If a marketing authorisation has been awarded for a medicinal product already, an article 61(3) notification can be submitted for the addition of a QR code. Furthermore, the addition of a QR code can also be submitted in combination with another change in the product information in a type IB or type II variation of the C category or during a reauthorisation.

In the case of parallel-imported medicinal products, the QR code of the original applicant for the medicinal product must be covered with tape.

Documentation for submission

The following documentation must be submitted when applying for a QR code on the packaging and/or in the package leaflet:

1) Completed declaration for the QR code:
- For MRPs/DCPs: 'Appendix 2 - Applicant's declaration template'
- (http://www.hma.eu/90.html)
- For national procedures: 'Application for inclusion of a QR code in national procedures'

2) Full-size mock-ups of the packaging and/or the package leaflet (depending on where the QR code is displayed)
.

3) Package leaflet: Please take into consideration that the following text must be included:
'Detailed and up-to-date information for this medicinal product can be obtained by scanning the QR code with a QR reader, an application (app) for smartphone or a tablet. The same up-to-date information about the medicinal product is also available via the following URL: <…> and on the website of the Medicines Evaluation Board (www.geneesmiddeleninformatiebank.nl)'.

Appendix 4: Examples of Labelling

This Appendix provides several examples concerning labelling and listing the composition:

- Example 1:

Listing section 1 according to QRD template:

(invented) name 60 mg capsules toremifene

The product contains a quantity of toremifene citrate, which converts to 60 mg toremifene (base). Toremifene (base) is the active substance.

Listing section 2 according to QRD template:

one capsule contains toremifene citrate, corresponding to 60 mg toremifene

The MEB prefers this method of description. If this method of description is not possible, the following is acceptable:
'one capsule contains 60 mg toremifene (as citrate)'

- Example 2:

Listing section 1 according to QRD template:

Amlodipine (as malate) X 5 mg tablets amlodipine

The above-mentioned situation applies if the marketing authorisation holder has authorised various types of compounds (salts/esters). The use of the term '(as malate)' in the name (the first line) is essential in this case, because confusion may otherwise occur with the other forms of the compound with this active ingredient that have been authorised by this marketing authorisation holder (mesilate, besilate). The MEB has been approached from the field to ensure that the name should immediately clarify which type of compound is involved. There may be allergies to one type of compound and not to another type of compound. The MEB shares this opinion and has adjusted its policy accordingly.

Note that the listing 'amlodipine' on the second line may not be omitted here. The listing on the second line provides certainty about the question whether the product contains 5 mg amlodipine base or 5 mg amlodipine malate (it contains 5 mg base).

Listing section 2 according to QRD template:
It is also necessary to state elsewhere on the outer packaging:

one tablet contains amlodipine malate corresponding to 5 mg amlodipine

For more information about these deviations in listings, please refer to policy document MEB 13 '*Nomenclature of pharmaceutical products*'.