

Standard Operating Procedure Safety Communication to HCPs/non-HCPs SOP-PV-012_09-Jan-2023_v.00

Page 1 of 7

TABLE OF CONTENTS	
I. PURPOSE	
II. SCOPE	
III. RESPONSIBILITIES	
IV. DEFINITIONS	
V. PROCEDURE	
A. General Specification	
1. SC Aims	
2. SC to HCPs	
3. SC to non-HCPs	
4. SC Forms	
5. Initiation of SC	
B. Process	4
1. Request or Initiative	
2. Preparation Stage	4
3. Submission to RA	
4. Publication	5
5. Efficiency of Dissemination	
6. Storage and Archiving	6
VI. ANNEXURE.	
VII. INTERNAL REFERENCES	6
VIII. REVISION HISTORY, APPROVALS	7



Standard Operating Procedure Safety Communication to HCPs/non-HCPs SOP-PV-012_09-Jan-2023_v.00 Page 2 of 7

I. PURPOSE

This Standard Operating Procedure (SOP) describes the procedure for preparation and communicating safety information to Healthcare Professionals (HCPs) and non-Healthcare Professionals (non-HCPs) e.g. patients, consumers, non-specialists in pharmaceutical sector, general public, other interesting parties in accordance with the Good Pharmacovigilance Practices (GVP).

II. SCOPE

This procedure shall apply to staff of PharmExpert LLC (Pharmex) involved in Safety Communication (SC).

III. RESPONSIBILITIES

Role	Responsibility
Senior PV Specialist (SPVS)	 Receiving from RA request for SC to HCPs/non-HCPs Initiating SC to HCPs/non- HCPs Preparation and submission of SC documents to RA Systematically assessment and reporting of SC results
Marketing Authorization Holder's (MAH) Qualified Person responsible for Pharmacovigilance (QPPV)/ Head of PV Department (HPVD)	 Initiating SC to HCPs/non- HCPs Review and approval of SC documents
Quality Assurance Manager (QAM)	Compliance monitoringAssessment of SC results
System Administrator (SA)	• Publishing of the DHPC / Information material in the resources

IV. DEFINITIONS

Abbreviations used in the text are spelled out on its first mention.

Direct Healthcare Professional Communication (DHPC) – a communication intervention by which important safety information is delivered directly to individual healthcare professionals by a MAH or a RA, to inform them of the need to take certain actions or adapt their practices in relation to a medicinal product (MP).

For other terms and definitions refer to the SOP-QA-003 «Pharmacovigilance Glossary».



Standard Operating Procedure Safety Communication to HCPs/non-HCPs SOP-PV-012_09-Jan-2023_v.00

Page 3 of 7

V. PROCEDURE

A. General Specification

1. SC Aims

- Providing timely, evidence-based information on the safe and effective use of MPs.
- Facilitating changes to healthcare practices (including self-medication practices) where necessary.
- Changing attitudes, decisions and behaviors in relation to the use of MPs.
- Supporting risk minimization behavior.
- Facilitating informed decisions on the rational use of MPs. In addition to the above effective, highquality SC can support public confidence in the regulatory system.

2. SC to HCPs

- a) A DHPC should be disseminated when there is a need to take immediate action, or change current practice, in relation to a MP.
 - b) Situations when a DHPC may become necessary are the following:
 - a suspension, withdrawal or revocation of an MA for safety reasons;
- an important change to the use of a MP due to the restriction of an indication, a new contraindication, or a change in the recommended dose due to safety reasons;
- a restriction in availability or discontinuation of a MP with potential detrimental effects on patient
- c) Other situations where dissemination of a DHPC should be considered are:
- new major warnings or precautions for use in the product information;
- new data identifying a previously unknown risk or a change in the frequency or severity of a known adverse reaction;
- new evidence that the MP is not as effective as previously considered;
- new recommendations for preventing or treating adverse reactions or to avoid misuse or medication error with the MP;
- ongoing assessment of an important potential risk, for which data available at a particular point in time are insufficient to take regulatory action.

3. SC to non-HCPs

Communication material in lay language (e.g. using a questions & answers format) helps patients and the general public to understand the scientific evidence and regulatory actions relating to a safety concern. Lay language documents should contain the RA's recommendations and advice for risk minimisation for patients, and should be accompanied by relevant background information.

4. SC Forms

SC to HCPs/non-HCPs can be carried out in the following forms: