

**CENTER FOR DRUG EVALUATION AND
RESEARCH**

APPLICATION NUMBER:

213135Orig1s000

PROPRIETARY NAME REVIEW(S)

PROPRIETARY NAME MEMORANDUM
Division of Medication Error Prevention and Analysis (DMEPA)
Office of Medication Error Prevention and Risk Management (OMEPRM)
Office of Surveillance and Epidemiology (OSE)
Center for Drug Evaluation and Research (CDER)

*** This document contains proprietary information that cannot be released to the public***

Date of This Review:	July 21, 2020
Application Type and Number:	NDA 213135
Product Name and Strength:	Sutab (sodium sulfate, magnesium sulfate, potassium chloride) tablets, 1.479 g, 0.225 g, and 0.188 g per tablet
Product Type:	Multiple Ingredient Product
Rx or OTC:	Prescription (Rx)
Applicant/Sponsor Name:	Braintree Laboratories, Inc (Braintree)
Panorama #:	2020-39876460
DMEPA Safety Evaluator:	Sarah K. Vee, PharmD
DMEPA Team Leader:	Idalia E. Rychlik, PharmD

1 INTRODUCTION

This memorandum is to reassess the proposed proprietary name, Sutab, which was found conditionally acceptable under NDA 213135 on August 9, 2019.^a Thus, Braintree submitted the name, Sutab, under NDA 213135 for review on May 12, 2020. We note that all product characteristics remain the same.

2 METHODS AND DISCUSSION

2.1 MISBRANDING ASSESSMENT

The Office of Prescription Drug Promotion (OPDP) determined that Sutab would not misbrand the proposed product. The Division of Medication Error Prevention and Analysis (DMEPA) and the Division of Gastroenterology (DG) concurred with the findings of OPDP's assessment for Sutab.

2.2 SAFETY ASSESSMENT

For re-assessment of the proposed proprietary name, we evaluated the previously identified names of concern considering any lessons learned from recent post-marketing experience, which may have altered our previous conclusion regarding the acceptability of the proposed proprietary name. Additionally, we searched the United States Adopted Name (USAN) stem list to determine if the proposed proprietary name contains any USAN stems as of the last USAN updates. The May 19, 2020 search of USAN stems did not find any USAN stems in the proposed proprietary name, Sutab.

2.3 COMMUNICATION OF DMEPA'S ANALYSIS AT MIDPOINT OF REVIEW

We communicated our findings to the Division of Gastroenterology (DG) via e-mail on July 21, 2020. At that time we also requested additional information or concerns that could inform our review. Per e-mail correspondence from the Division of Gastroenterology (DG) on July 21, 2020, they stated no additional concerns with the proposed proprietary name, Sutab.

3 CONCLUSION

Our re-assessment did not identify any names that represent a potential source of drug name confusion. Therefore, we maintain that the proposed proprietary name, Sutab, is acceptable.

If you have any questions or need clarifications, please contact Alvis Dunson, OSE project manager, at 301-796-6400.

3.1 COMMENTS TO BRAINTREE LABORATORIES, INC

We have completed our review of the proposed proprietary name, Sutab, and have concluded that this name is acceptable.

^a McMillan, T. Proprietary Name Review for Sutab (NDA 213135). Silver Spring (MD): FDA, CDER, OSE, DMEPA (US); 2019 AUG 09. Panorama No.: 2019-31730654.

If any of the proposed product characteristics as stated in your submission, received on May 12, 2020, are altered prior to approval of the marketing application, the name must be resubmitted for review.

4 REFERENCE

1. USAN Stems (<https://www.ama-assn.org/about/united-states-adopted-names-approved-stems>)
USAN Stems List contains all the recognized USAN stems.

This is a representation of an electronic record that was signed electronically. Following this are manifestations of any and all electronic signatures for this electronic record.

/s/

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07/21/2020 10:16:41 AM

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07/21/2020 11:33:57 AM

PROPRIETARY NAME REVIEW

Division of Medication Error Prevention and Analysis (DMEPA)
Office of Medication Error Prevention and Risk Management (OMEPRM)
Office of Surveillance and Epidemiology (OSE)
Center for Drug Evaluation and Research (CDER)

***** This document contains proprietary information that cannot be released to the public*****

Date of This Review:	August 9, 2019
Application Type and Number:	NDA 213135
Product Name and Strength:	Sutab (sodium sulfate, magnesium sulfate, potassium chloride) Tablet, (b) (4) grams; 2.7 grams; 2.25 grams
Product Type:	Multiple Ingredient Product
Rx or OTC:	Prescription (Rx)
Applicant/Sponsor Name:	Braintree Laboratories, Inc (Braintree)
Panorama #:	2019- 31730654
DMEPA Safety Evaluator:	Teresa McMillan, PharmD
DMEPA Team Leader:	Idalia E. Rychlik, PharmD

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1 INTRODUCTION

This review evaluates the proposed proprietary name, Sutab, from a safety and misbranding perspective. The sources and methods used to evaluate the proposed proprietary name are outlined in the reference section and Appendix A respectively. Braintree did not submit an external name study for this proposed proprietary name.

1.1 PRODUCT INFORMATION

The following product information is provided in the proprietary name submission received on May 15, 2019.

- Intended Pronunciation: Soo'tab
- Active Ingredient: sodium sulfate, magnesium sulfate, potassium chloride
- Indication of Use: for the cleansing of the colon as a preparation for colonoscopy in adults
- Route of Administration: Oral
- Dosage Form: Tablet
- Strength: (b) (4) grams; 2.7 grams; 2.25 grams
- Dose and Frequency:

Split Dose (2-Day) Regimen



- How Supplied: Two bottles containing 12 tablets each. One (b) (4) container with a 16-ounce fill line.
- Storage: Store at 20° to 25°C (68° to 77°F). Excursions permitted between 15° to 30°C (59° to 86°F).

2 RESULTS

The following sections provide information obtained and considered in the overall evaluation of the proposed proprietary name, Sutab.

2.1 MISBRANDING ASSESSMENT

The Office of Prescription Drug Promotion (OPDP) determined that Sutab would not misbrand the proposed product. The Division of Medication Error Prevention and Analysis (DMEPA) and

the Division of Gastroenterology and Inborn Errors Products (DGIEP) concurred with the findings of OPDP's assessment for Sutab.

2.2 SAFETY ASSESSMENT

The following aspects were considered in the safety evaluation of the proposed proprietary name, Sutab.

2.2.1 United States Adopted Names (USAN) Search

There is no USAN stem present in the proposed proprietary name^a.

2.2.2 Components of the Proposed Proprietary Name

Braintree did not provide a derivation or intended meaning for the proposed proprietary name, Sutab, in their submission. This proprietary name is comprised of a single word. We note that the proposed name Sutab contains the letter string '-tab' which is an abbreviation for the dosage form 'tablet', which may be used on a prescription. We note that the product is a tablet, and therefore it is unlikely that this could lead to any confusion or errors. Beyond this abbreviation, we note that the proposed name Sutab does not contain any additional components (i.e., modifier, route of administration, etc.) that are misleading or can contribute to medication error.

2.2.3 Comments from Other Review Disciplines at Initial Review

In response to the OSE, May 29, 2019 e-mail, the Division of Gastroenterology and Inborn Errors Products (DGIEP) did not forward any comments or concerns relating to Sutab at the initial phase of the review.

2.2.4 FDA Name Simulation Studies

Ninety-four practitioners participated in DMEPA's prescription studies for Sutab. The responses did not overlap with any currently marketed products nor did the responses sound or look similar to any currently marketed products or any products in the pipeline. Appendix B contains the results from the verbal and written prescription studies.

2.2.5 Phonetic and Orthographic Computer Analysis (POCA) Search Results

Our POCA search^b identified 87 names with a combined phonetic and orthographic score of $\geq 55\%$ or an individual phonetic or orthographic score $\geq 70\%$. These names are included in Table 1 below.

2.2.6 Names Retrieved for Review Organized by Name Pair Similarity

Table 1 lists the number of names retrieved from our POCA search. These name pairs are organized as highly similar, moderately similar or low similarity for further evaluation.

^a USAN stem search conducted on June 3, 2019.

^b POCA search conducted on June 3, 2019 in version 4.3.

Table 1. Names Retrieved for Review Organized by Name Pair Similarity	
Similarity Category	Number of Names
Highly similar name pair: combined match percentage score $\geq 70\%$	7
Moderately similar name pair: combined match percentage score $\geq 55\%$ to $\leq 69\%$	78
Low similarity name pair: combined match percentage score $\leq 54\%$	2

2.2.7 Safety Analysis of Names with Potential Orthographic, Spelling, and Phonetic Similarities

Our analysis of the 87 names contained in Table 1 determined none of the names will pose a risk for confusion with Sutab as described in Appendices C through H.

2.2.8 Communication of DMEPA's Analysis at Midpoint of Review

DMEPA communicated our findings to the Division of Gastroenterology and Inborn Errors Products (DGIEP) via e-mail on August 6, 2019. At that time, we also requested additional information or concerns that could inform our review. Per e-mail correspondence from the Division of Gastroenterology and Inborn Errors Products (DGIEP), they stated no additional concerns with the proposed proprietary name, Sutab.

3 CONCLUSION

The proposed proprietary name, Sutab, is acceptable.

If you have any questions or need clarifications, please contact Shawnetta Jackson, OSE project manager, at 301-796-4952.

3.1 COMMENTS TO BRAINTREE LABORATORIES, INC

We have completed our review of the proposed proprietary name, Sutab, and have concluded that this name is acceptable.

If any of the proposed product characteristics as stated in your submission, received on May 15, 2019, are altered prior to approval of the marketing application, the name must be resubmitted for review.

4 REFERENCES

1. USAN Stems (<https://www.ama-assn.org/about/united-states-adopted-names-approved-stems>)

USAN Stems List contains all the recognized USAN stems.

2. *Phonetic and Orthographic Computer Analysis (POCA)*

POCA is a system that FDA designed. As part of the name similarity assessment, POCA is used to evaluate proposed names via a phonetic and orthographic algorithm. The proposed proprietary name is converted into its phonemic representation before it runs through the phonetic algorithm. Likewise, an orthographic algorithm exists that operates in a similar fashion. POCA is publicly accessible.

Drugs@FDA

Drugs@FDA is an FDA Web site that contains most of the drug products approved in the United States since 1939. The majority of labels, approval letters, reviews, and other information are available for drug products approved from 1998 to the present. Drugs@FDA contains official information about FDA-approved *brand name* and *generic drugs*; *therapeutic biological products*, *prescription* and *over-the-counter* human drugs; and *discontinued drugs* (see Drugs @ FDA Glossary of Terms, available at http://www.fda.gov/Drugs/InformationOnDrugs/ucm079436.htm#ther_biological).

RxNorm

RxNorm contains the names of prescription and many OTC drugs available in the United States. RxNorm includes generic and branded:

- Clinical drugs – pharmaceutical products given to (or taken by) a patient with therapeutic or diagnostic intent
- Drug packs – packs that contain multiple drugs, or drugs designed to be administered in a specified sequence

Radiopharmaceuticals, contrast media, food, dietary supplements, and medical devices, such as bandages and crutches, are all out of scope for RxNorm (<http://www.nlm.nih.gov/research/umls/rxnorm/overview.html>).

Division of Medication Errors Prevention and Analysis proprietary name consultation requests

This is a list of proposed and pending names that is generated by the Division of Medication Error Prevention and Analysis from the Access database/tracking system.

APPENDICES

Appendix A

FDA's Proprietary Name Risk Assessment evaluates proposed proprietary names for misbranding and safety concerns.

1. **Misbranding Assessment:** For prescription drug products, OPDP assesses the name for misbranding concerns. For over-the-counter (OTC) drug products, the misbranding assessment of the proposed name is conducted by DNDP. OPDP or DNDP evaluates proposed proprietary names to determine if the name is false or misleading, such as by making misrepresentations with respect to safety or efficacy. For example, a fanciful proprietary name may misbrand a product by suggesting that it has some unique effectiveness or composition when it does not (21 CFR 201.10(c)(3)). OPDP or DNDP provides their opinion to DMEPA for consideration in the overall acceptability of the proposed proprietary name.
2. **Safety Assessment:** The safety assessment is conducted by DMEPA, and includes the following:
 - a. Preliminary Assessment: We consider inclusion of USAN stems or other characteristics that when incorporated into a proprietary name may cause or contribute to medication errors (i.e., dosing interval, dosage form/route of administration, medical or product name abbreviations, names that include or suggest the composition of the drug product, etc.) See prescreening checklist below in Table 2*. DMEPA defines a medication error as any preventable event that may cause or lead to inappropriate medication use or patient harm while the medication is in the control of the health care professional, patient, or consumer. ^c

^c National Coordinating Council for Medication Error Reporting and Prevention.
<http://www.nccmerp.org/aboutMedErrors.html>. Last accessed 10/11/2007.

***Table 2- Prescreening Checklist for Proposed Proprietary Name**

	Answer the questions in the checklist below. Affirmative answers to any of these questions indicate a potential area of concern that should be carefully evaluated as described in this guidance.
Y/N	Is the proposed name obviously similar in spelling and pronunciation to other names?
	Proprietary names should not be similar in spelling or pronunciation to proprietary names, established names, or ingredients of other products.
Y/N	Are there inert or inactive ingredients referenced in the proprietary name?
	Proprietary names should not incorporate any reference to an inert or inactive ingredient in a way that might create an impression that the ingredient's value is greater than its true functional role in the formulation (21 CFR 201.10(c)(4)).
Y/N	Does the proprietary name include combinations of active ingredients?
	Proprietary names of fixed combination drug products should not include or suggest the name of one or more, but not all, of its active ingredients (see 21 CFR 201.6(b)).
Y/N	Is there a United States Adopted Name (USAN) stem in the proprietary name?
	Proprietary names should not incorporate a USAN stem in the position that USAN designates for the stem.
Y/N	Is this proprietary name used for another product that does not share at least one common active ingredient?
	Drug products that do not contain at least one common active ingredient should not use the same (root) proprietary name.
Y/N	Is this a proprietary name of a discontinued product?
	Proprietary names should not use the proprietary name of a discontinued product if that discontinued drug product does not contain the same active ingredients.

- b. Phonetic and Orthographic Computer Analysis (POCA): Following the preliminary screening of the proposed proprietary name, DMEPA staff evaluates the proposed name against potentially similar names. In order to identify names with potential similarity to the proposed proprietary name, DMEPA enters the proposed proprietary name in POCA and queries the name against the following drug reference databases, Drugs@fda, CernerRxNorm, and names in the review pipeline using a 55% threshold in POCA. DMEPA reviews the combined orthographic and phonetic matches and group the names into one of the following three categories:
- Highly similar pair: combined match percentage score $\geq 70\%$.
 - Moderately similar pair: combined match percentage score $\geq 55\%$ to $\leq 69\%$.

- Low similarity: combined match percentage score $\leq 54\%$.

Using the criteria outlined in the check list (Table 3-5) that corresponds to each of the three categories (highly similar pair, moderately similar pair, and low similarity), DMEPA evaluates the name pairs to determine the acceptability or non-acceptability of a proposed proprietary name. The intent of these checklists is to increase the transparency and predictability of the safety determination of whether a proposed name is vulnerable to confusion from a look-alike or sound-alike perspective. Each bullet below corresponds to the name similarity category cross-references the respective table that addresses criteria that DMEPA uses to determine whether a name presents a safety concern from a look-alike or sound-alike perspective.

- For highly similar names, differences in product characteristics often cannot mitigate the risk of a medication error, including product differences such as strength and dose. Thus, proposed proprietary names that have a combined score of ≥ 70 percent are at risk for a look-alike sound-alike confusion which is an area of concern (See Table 3).
- Moderately similar names are further evaluated to identify the presence of attributes that are known to cause name confusion.
 - Name attributes: We note that the beginning of the drug name plays a significant role in contributing to confusion. Additionally, drug name pairs that start with the same first letter and contain a shared letter string of at least 3 letters in both names are major contributing factor in the confusion of drug names^d. We evaluate all moderately similar names retrieved from POCA to identify the above attributes. These names are further evaluated to identify overlapping or similar strengths or doses.
 - Product attributes: Moderately similar names of products that have overlapping or similar strengths or doses represent an area for concern for FDA. The dose and strength information is often located in close proximity to the drug name itself on prescriptions and medication orders, and the information can be an important factor that either increases or decreases the potential for confusion between similarly named drug pairs. The ability of other product characteristics to mitigate confusion (e.g., route, frequency, dosage form) may be limited when the strength or dose overlaps. DMEPA reviews such names further, to determine whether sufficient differences exist to prevent confusion. (See Table 4).
- Names with low similarity that have no overlap or similarity in strength and dose are generally acceptable (See Table 5) unless there are data to suggest that the name might be vulnerable to confusion (e.g., prescription simulation study suggests that the name is likely to be misinterpreted as a marketed product). In these instances, we would reassign

^d Shah, M, Merchant, L, Characteristics That May Help in the Identification of Potentially Confusing Proprietary Drug Names. Therapeutic Innovation & Regulatory Science, September 2016

a low similarity name to the moderate similarity category and review according to the moderately similar name pair checklist.

- c. FDA Prescription Simulation Studies: DMEPA staff also conducts a prescription simulation studies using FDA health care professionals.

Three separate studies are conducted within the Centers of the FDA for the proposed proprietary name to determine the degree of confusion of the proposed proprietary name with marketed U.S. drug names (proprietary and established) due to similarity in visual appearance with handwritten prescriptions or verbal pronunciation of the drug name. The studies employ healthcare professionals (pharmacists, physicians, and nurses), and attempts to simulate the prescription ordering process. The primary Safety Evaluator uses the results to identify orthographic or phonetic vulnerability of the proposed name to be misinterpreted by healthcare practitioners.

In order to evaluate the potential for misinterpretation of the proposed proprietary name in handwriting and verbal communication of the name, inpatient medication orders and/or outpatient prescriptions are written, each consisting of a combination of marketed and unapproved drug products, including the proposed name. These orders are optically scanned and one prescription is delivered to a random sample of participating health professionals via e-mail. In addition, a verbal prescription is recorded on voice mail. The voice mail messages are then sent to a random sample of the participating health professionals for their interpretations and review. After receiving either the written or verbal prescription orders, the participants record their interpretations of the orders which are recorded electronically.

- d. Comments from Other Review Disciplines: DMEPA requests the Office of New Drugs (OND) and/or Office of Generic Drugs (OGD), ONDQA or OBP for their comments or concerns with the proposed proprietary name, ask for any clinical issues that may impact the DMEPA review during the initial phase of the name review. Additionally, when applicable, at the same time DMEPA requests concurrence/non-concurrence with OPDP's decision on the name. The primary Safety Evaluator addresses any comments or concerns in the safety evaluator's assessment.

The OND/OGD Regulatory Division is contacted a second time following our analysis of the proposed proprietary name. At this point, DMEPA conveys their decision to accept or reject the name. The OND or OGD Regulatory Division is requested to provide any further information that might inform DMEPA's final decision on the proposed name.

Additionally, other review disciplines opinions such as ONDQA or OBP may be considered depending on the proposed proprietary name.

When provided, DMEPA considers external proprietary name studies conducted by or for the Applicant/Sponsor and incorporates the findings of these studies into the overall risk assessment.

The DMEPA primary reviewer assigned to evaluate the proposed proprietary name is responsible for considering the collective findings, and provides an overall risk assessment of the proposed proprietary name.

Table 3. Highly Similar Name Pair Checklist (i.e., combined Orthographic and Phonetic score is $\geq 70\%$).

Answer the questions in the checklist below. Affirmative answers to some of these questions suggest that the pattern of orthographic or phonetic differences in the names may render the names less likely to confusion, provided that the pair does not share a common strength or dose.			
<u>Orthographic Checklist</u>		<u>Phonetic Checklist</u>	
Y/N	Do the names begin with different first letters? <i>Note that even when names begin with different first letters, certain letters may be confused with each other when scripted.</i>	Y/N	Do the names have different number of syllables?
Y/N	Are the lengths of the names dissimilar* when scripted? <i>*FDA considers the length of names different if the names differ by two or more letters.</i>	Y/N	Do the names have different syllabic stresses?
Y/N	Considering variations in scripting of some letters (such as z and f), is there a different number or placement of upstroke/downstroke letters present in the names?	Y/N	Do the syllables have different phonologic processes, such as vowel reduction, assimilation, or deletion?
Y/N	Is there different number or placement of cross-stroke or dotted letters present in the names?	Y/N	Across a range of dialects, are the names consistently pronounced differently?
Y/N	Do the infixes of the name appear dissimilar when scripted?		
Y/N	Do the suffixes of the names appear dissimilar when scripted?		

Table 4: Moderately Similar Name Pair Checklist (i.e., combined score is $\geq 55\%$ to $\leq 69\%$).

Step 1	Review the DOSAGE AND ADMINISTRATION and HOW SUPPLIED/STORAGE AND HANDLING sections of the prescribing information (or for OTC drugs refer to the Drug Facts label) to determine if strengths and doses of the name pair overlap or are very similar. Different strengths and doses for products whose names are moderately similar may decrease the risk of confusion between the moderately similar name pairs. Name pairs that have overlapping or similar strengths or doses have a higher potential for confusion and should be evaluated further (see Step 2). Because the strength or dose could be used to express an order or prescription for a particular drug product, overlap in one or both of these components would be reason for further evaluation. For single strength products, also consider circumstances where the strength may not be expressed. For any i.e. drug products comprised of more than one active ingredient, consider whether the strength or dose may be expressed using only one of the components. To determine whether the strengths or doses are similar to your proposed product, consider the following list of factors that may increase confusion: • Alternative expressions of dose: 5 mL may be listed in the prescribing information, but the dose may be expressed in metric weight (e.g., 500 mg) or in non-metric units (e.g., 1 tsp, 1 tablet/capsule). Similarly, a strength or dose of 1000 mg may be expressed, in practice, as 1 g, or vice versa. • Trailing or deleting zeros: 10 mg is similar in appearance to 100 mg which may potentiate confusion between a name pair with moderate similarity. • Similar sounding doses: 15 mg is similar in sound to 50 mg
Step 2	Answer the questions in the checklist below. Affirmative answers to some of these questions suggest that the pattern of orthographic or phonetic differences in the names may reduce the likelihood of confusion for moderately similar names <u>with</u> overlapping or similar strengths or doses.

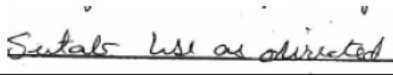
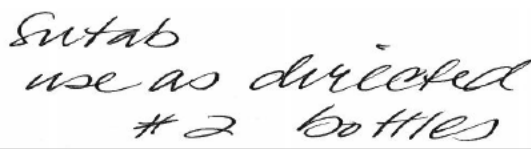
	Orthographic Checklist (Y/N to each question) • Do the names begin with different first letters? Note that even when names begin with different first letters, certain letters may be confused with each other when scripted. • Are the lengths of the names dissimilar* when scripted? *FDA considers the length of names different if the names differ by two or more letters. • Considering variations in scripting of some letters (such as z and f), is there a different number or placement of upstroke/downstroke letters present in the names? • Is there different number or placement of cross-stroke or dotted letters present in the names? • Do the infixes of the name appear dissimilar when scripted? • Do the suffixes of the names appear dissimilar when scripted?	Phonetic Checklist (Y/N to each question) • Do the names have different number of syllables? • Do the names have different syllabic stresses? • Do the syllables have different phonologic processes, such vowel reduction, assimilation, or deletion? • Across a range of dialects, are the names consistently pronounced differently?
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Table 5: Low Similarity Name Pair Checklist (i.e., combined score is $\leq 54\%$).

Names with low similarity are generally acceptable unless there are data to suggest that the name might be vulnerable to confusion (e.g., prescription simulation study suggests that the name is likely to be misinterpreted as a marketed product). In these instances, we would reassign a low similarity name to the moderate similarity category and review according to the moderately similar name pair checklist.

Appendix B: Prescription Simulation Samples and Results

Figure 1. Sutab Study (Conducted on June 7, 2019)

Handwritten Medication Order/Prescription	Verbal Prescription
<u>Medication Order:</u> 	Sutab Use as directed #2
<u>Outpatient Prescription:</u> 	

FDA Prescription Simulation Responses (Aggregate Report)

220 People Received Study
 94 People Responded

Study Name: Sutab

Total	54	15	25	
INTERPRETATION	OUTPATIENT	VOICE	INPATIENT	TOTAL
DUKET	0	1	0	1
SATAB	0	0	1	1
SENTAB	0	0	1	1
SERTAB	0	0	7	7
SERTALS	0	0	6	6
SIRTALS	0	0	1	1
SUBTAB	1	0	0	1
SUITAB	1	0	0	1
SULTALS	0	0	1	1
SUTAB	52	12	4	68
SUTALS	0	0	4	4
SUTAT	0	1	0	1
ZUTAB	0	1	0	1

Appendix C: Highly Similar Names (e.g., combined POCA score is $\geq 70\%$)

No.	Proposed name: Sutab Established name: sodium sulfate, magnesium sulfate, potassium chloride Dosage form: Tablet Strength(s): ^{(b) (4)} grams; 2.7 grams; 2.25 grams Usual Dose: Split Dose (2-Day) Regimen ^e	POCA Score (%)	Orthographic and/or phonetic differences in the names sufficient to prevent confusion Other prevention of failure mode expected to minimize the risk of confusion between these two names.
1.	Sutab	100	This is the subject of this review.
2.	Suttar	76	This name was identified by the RxNorm database and has been discontinued without any generic equivalents.
3.	Suttar 2	76	This name was identified by the RxNorm database and has been discontinued without any generic equivalents.
4.	Sinutab	72	The length of the names differs by 2 letters and the infix ('nu') in Sinutab provides some orthographic differences. Sinutab has an additional syllable and the 2nd syllable in Sinutab ('nu') provides sufficient phonetic differences. This is the root name of the currently marketed product 'Sinutab Sinus'. Differences in the product characteristics may help mitigate the potential for an error to reach the patient if the names were confused. Sutab is given in 2 distinct doses of 12 tablets at once on Day 1 and Day 2 prior to a colonoscopy and may be written as 'use as directed'. Sinutab (Sinus) is taken as two capsules/tablets

(b) (4)

colonoscopy.

Appears this way on original

6.	Sudo-tab	72	The length of the names differs by 2 letters and the infix ('do') in Sudo-tab provides some orthographic differences. Sinutab has an additional syllable and the 2nd syllable in Sudo-tab ('do') provides sufficient phonetic differences. Additionally, differences in the product characteristics and settings of use may help mitigate the potential for an error to reach the patient if the names were confused. Sutaab is given in 2 distinct doses of 12 tablets at once on Day 1 and Day 2 prior to a colonoscopy and may be written as 'use as directed'. The dose of Sudo-tab is 60 mg (2 tablets) every 4 to 6 hours. There is no overlap in dose or frequency.
7.	Sumtan	70	This name was identified by the RxNorm database and no product characteristics could be found using the commonly used databases.

Appendix D: Moderately Similar Names (e.g., combined POCA score is $\geq 55\%$ to $\leq 69\%$) with no overlap or numerical similarity in Strength and/or Dose

No.	Name	POCA Score (%)
8.	K-tab	67
9.	sutent	66
10.	Sustiva	60
11.	(b) (4) ****	58
12.	Estratab	56
13.	Keftab	56
14.	Lortab	56
15.	Sonata	56
16.	Subsys	56

Appendix E: Moderately Similar Names (e.g., combined POCA score is $\geq 55\%$ to $\leq 69\%$) with overlap or numerical similarity in Strength and/or Dose

No.	Proposed name: Sutab Established name: sodium sulfate, magnesium sulfate, potassium chloride Dosage form: Tablet Strength(s): ^{(b) (4)} grams; 2.7 grams; 2.25 grams Usual Dose: Split Dose (2-Day) Regimen ^f	POCA Score (%)	Prevention of Failure Mode In the conditions outlined below, the following combination of factors, are expected to minimize the risk of confusion between these two names
17.	Ibutab	69	This name pair has sufficient orthographic and phonetic differences.
18.	Ibu-tab	69	This name pair has sufficient orthographic and phonetic differences.
19.	Ibu-tab 200	69	This name pair has sufficient orthographic and phonetic differences.
20.	Sustac	69	This name pair has sufficient orthographic and phonetic differences.
21.	Alu-tab	68	This name pair has sufficient orthographic and phonetic differences.
22.	Supac	68	The suffixes of this name pair (-tab vs. -pac) look different. The 2nd syllables (-tab vs. -pac) of this name pair sound different. Additionally, differences in the product characteristics and settings of use may help mitigate the potential for an error to reach the patient if the names were confused. Sutab is given in 2 distinct doses of 12 tablets at once on Day 1 and Day 2 prior to a colonoscopy. Supac is given as 200 mg every 4 to 6 hours as needed. There is no overlap in dose or frequency.
23.	D-tab	67	This name pair has sufficient orthographic and phonetic differences.

(b) (4)

No.	Proposed name: Sutab Established name: sodium sulfate, magnesium sulfate, potassium chloride Dosage form: Tablet Strength(s): ^{(b) (4)} grams; 2.7 grams; 2.25 grams Usual Dose: Split Dose (2-Day) Regimen ^f	POCA Score (%)	Prevention of Failure Mode In the conditions outlined below, the following combination of factors, are expected to minimize the risk of confusion between these two names
24.	T-Stat	66	This name pair has sufficient orthographic and phonetic differences.
25.	Tussitab	66	This name pair has sufficient orthographic and phonetic differences.
26.	Tusstat	66	This name pair has sufficient orthographic and phonetic differences.
27.	Sinustab	65	This name pair has sufficient orthographic and phonetic differences.
28.	Nasatab	64	This name pair has sufficient orthographic and phonetic differences.
29.	Stabec	64	This name pair has sufficient orthographic and phonetic differences.
30.	Tol-tab	64	This name pair has sufficient orthographic and phonetic differences.
31.	Potaba	62	This name pair has sufficient orthographic and phonetic differences.
32.	Seudotabs	62	This name pair has sufficient orthographic and phonetic differences.
33.	Sustain	62	This name pair has sufficient orthographic and phonetic differences.
34.	Cotab A	61	This name pair has sufficient orthographic and phonetic differences.
35.	Mb-tab	60	This name pair has sufficient orthographic and phonetic differences.
36.	Serutan	60	This name pair has sufficient orthographic and phonetic differences.
37.	Sulten-10	60	This name pair has sufficient orthographic and phonetic differences.
38.	Cutar	58	This name pair has sufficient orthographic and phonetic differences.
39.	Foltabs	58	This name pair has sufficient orthographic and phonetic differences.
40.	Fortabs	58	This name pair has sufficient orthographic and phonetic differences.
41.	Guaitab	58	This name pair has sufficient orthographic and phonetic differences.

No.	Proposed name: Sutab Established name: sodium sulfate, magnesium sulfate, potassium chloride Dosage form: Tablet Strength(s): ^{(b) (4)} grams; 2.7 grams; 2.25 grams Usual Dose: Split Dose (2-Day) Regimen ^f	POCA Score (%)	Prevention of Failure Mode In the conditions outlined below, the following combination of factors, are expected to minimize the risk of confusion between these two names
42.	Statuss	58	This name pair has sufficient orthographic and phonetic differences.
43.	Tussi-12D	58	This name pair has sufficient orthographic and phonetic differences.
44.	Curretab	56	This name pair has sufficient orthographic and phonetic differences.
45.	Flura-tab	56	This name pair has sufficient orthographic and phonetic differences.
46.	Lortab 10	56	This name pair has sufficient orthographic and phonetic differences.
47.	Neo-tab	56	This name pair has sufficient orthographic and phonetic differences.
48.	Salsitab	56	This name pair has sufficient orthographic and phonetic differences.
49.	Septa	55	This name pair has sufficient orthographic and phonetic differences.
50.	Suprep	55	This name pair has sufficient orthographic and phonetic differences.
51.	Pseudotabs	54	This name pair has sufficient orthographic and phonetic differences.
52.	Scrub-Stat	52	This name pair has sufficient orthographic and phonetic differences.

Appendix F: Low Similarity Names (e.g., combined POCA score is $\leq 54\%$)

No.	Name	POCA Score (%)
53.	Xoten	48
54.	Zoton	46

Appendix G: Names not likely to be confused or not used in usual practice settings for the reasons described.

No.	Name	POCA Score (%)	Failure preventions
55.	Sudal	63	This name was identified by the RxNorm database and has been discontinued without any generic equivalents.
56.	Sudal 12	63	This name was identified by the RxNorm database and has been discontinued without any generic equivalents.
57.	Bio-tab	59	This name was identified by the RxNorm database and has been discontinued without any generic equivalents.
58.	Ethatab	58	This name was identified by the RxNorm database and has been discontinued without any generic equivalents.
59.	Quin-tab	58	This name was identified in the RxNorm database and no product characteristics could be found using the commonly used databases.
60.	Socumb	58	This is a veterinary drug product.
61.	Subq***	58	This is an abbreviation for the term subcutaneous.
62.	Surpass	58	This is a veterinary drug product.
63.	Surgam	57	This is an international drug product.
64.	Su-Tuss Hd	57	This drug has been discontinued and there are no generic equivalents.
65.	utac	57	This drug has been discontinued and there are no generic equivalents.
66.	Butane	56	This is a chemical compound.
67.	Espotabs	56	This drug has been discontinued and there are no generic equivalents.
68.	Histatab	56	This drug has been discontinued and there are no generic equivalents.
69.	Lortab 0.5/33.3	56	This name was identified in the RxNorm database and no product characteristics could be found using the commonly used databases.
70.	Sudatuss 2	56	This name was identified in the RxNorm database and no product characteristics could be found using the commonly used databases.
71.	Sulpak	56	This name was identified in the RxNorm database and no product characteristics could be found using the commonly used databases.
72.	Supred	56	This drug has been discontinued and there are no generic equivalents.

No.	Name	POCA Score (%)	Failure preventions
73.	Symtan	56	This drug has been discontinued and there are no generic equivalents.
74.	Vitabee 12	56	This drug has been discontinued and there are no generic equivalents.
75.	Butabarb	55	This drug has been discontinued and there are no generic equivalents.

Appendix H: Names not likely to be confused due to absence of attributes that are known to cause name confusion^g.

No.	Name	POCA Score (%)
76.	Tuss Tan	64
77.	Tustan	64
78.	Bupap	60
79.	Tusal	60
80.	Tussar	58
81.	Tussar-2	58
82.	Ib-Stat	57
83.	Tuss Da	57
84.	Leustat	56
85.	Vasad	56
86.	Duotan	55
87.	Tussbid	55

^g Shah, M, Merchant, L, Chan, I, and Taylor, K. Characteristics That May Help in the Identification of Potentially Confusing Proprietary Drug Names. Therapeutic Innovation & Regulatory Science, September 2016

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