

**CENTER FOR DRUG EVALUATION AND
RESEARCH**

APPLICATION NUMBER:

214679Orig1s000

PROPRIETARY NAME REVIEW(S)

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:	July 23, 2021
Application Type and Number:	NDA 214679
Product Name and Strength:	Eprontia (topiramate) solution, 25 mg/mL
Product Type:	Single Ingredient Product
Rx or OTC:	Prescription (Rx)
Applicant/Sponsor Name:	Azurity Pharmaceuticals, Inc. (Azurity)
PNR ID #:	2021-1044723939
DMEPA Safety Evaluator:	Chad Morris, PharmD, MPH
DMEPA Acting Team Leader:	Celeste Karpow, PharmD, MPH
DMEPA Deputy Director:	Danielle Harris, PharmD

Contents

1	INTRODUCTION	1
1.1	Product Information.....	1
2	RESULTS.....	3
2.1	Misbranding Assessment	3
2.2	Safety Assessment	3
3	CONCLUSION	6
3.1	Comments to Azurity Pharmaceuticals, Inc.	6
4	REFERENCES.....	7
	APPENDICES	8

1 INTRODUCTION

This review evaluates the proposed proprietary name, Eprontia, 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. Azurity 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 April 26, 2021.

- Intended Pronunciation: ee-pron-tee-ah
- Active Ingredient: topiramate
- Indication of Use:
 - Epilepsy
 - Initial monotherapy for the treatment of partial-onset or primary generalized tonic-clonic seizures in patients 2 years of age and older
 - Adjunctive therapy for the treatment of partial-onset seizures, primary generalized tonic-clonic seizures, or seizures associated with Lennox-Gastaut syndrome in patients 2 years of age and older.
 - Preventive treatment of migraine in patients 12 years of age and older.
- Route of Administration: oral
- Dosage Form: solution
- Strength: 25 mg/mL
- Dose and Frequency:

Dosing in Monotherapy Epilepsy:

Adults and Pediatric Patients 10 Years of Age and Older: The recommended dose for Topiramate Oral Solution monotherapy in adults and pediatric patients 10 years of age and older is 400 mg/day in two divided doses. The dose should be achieved by titration according to the following schedule (Table 1):

Table 1: Monotherapy Titration Schedule for Adults and Pediatric Patients 10 years and older

	Morning Dose	Evening Dose
Week 1	25 mg	25 mg
Week 2	50 mg	50 mg
Week 3	75 mg	75 mg
Week 4	100 mg	100 mg
Week 5	150 mg	150 mg
Week 6	200 mg	200 mg

Pediatric Patients 2 to 9 Years of Age: Dosing in patients 2 to 9 years of age is based on weight. During the titration period, the initial dose of Topiramate Oral Solution (ANDA) is 25 mg/day nightly for the first week. Based upon tolerability, the dosage can be increased to

50 mg/day (25 mg twice daily) in the second week. Dosage can be increased by 25-50 mg/day each subsequent week as tolerated. Titration to the minimum maintenance dose should be attempted over 5-7 weeks of the total titration period. Based upon tolerability and clinical response, additional titration to a higher dose (up to the maximum maintenance dose) can be attempted at 25-50 mg/day weekly increments. The total daily dose should not exceed the maximum maintenance dose for each range of body weight (Table 2).

Table 2: Monotherapy Target Total Daily Maintenance Dosing for Patients 2 to 9 Years of Age

Weight (kg)	Total Daily Dose (mg/day)* Minimum Maintenance Dose	Total Daily Dose (mg/day)* Maximum Maintenance Dose
Up to 11	150	250
12 - 22	200	300
23 - 31	200	350
32 - 38	250	350
Greater than 38	250	400

* Administered in two equally divided doses

Dosing in Adjunctive Therapy Epilepsy:

Adults (17 Years of Age and Older):

The recommended total daily dose of Topiramate Oral Solution as adjunctive therapy in adults with partial onset seizures or Lennox-Gastaut Syndrome is 200 to 400 mg/day in two divided doses, and 400 mg/day in two divided doses as adjunctive treatment in adults with primary generalized tonic-clonic seizures. Topiramate Oral Solution should be initiated at 25 to 50 mg/day, followed by titration to an effective dose in increments of 25 to 50 mg/day every week. Titrating in increments of 25 mg/day every week may delay the time to reach an effective dose. Doses above 400 mg/day have not been shown to improve responses in adults with partial-onset seizures.

Pediatric Patients 2 to 16 Years of Age:

The recommended total daily dose of Topiramate Oral Solution as adjunctive therapy for pediatric patients 2 to 16 years of age with partial-onset seizures, primary generalized tonic-clonic seizures, or seizures associated with Lennox-Gastaut syndrome is approximately 5 to 9 mg/kg/day in two divided doses. Titration should begin at 25 mg/day (or less, based on a range of 1 to 3 mg/kg/day) nightly for the first week. The dosage should then be increased at 1- or 2-week intervals by increments of 1 to 3 mg/kg/day (administered in two divided doses), to achieve optimal clinical response. Dose titration should be guided by clinical outcome. The total daily dose should not exceed 400 mg/day.

Dosing for the Preventive Treatment of Migraine:

The recommended total daily dose of Topiramate Oral Solution as treatment for patients 12 years of age and older for the preventive treatment of migraine is 100 mg/day administered in two divided doses

(Table 3). The recommended titration rate for Topiramate Oral Solution for the preventive treatment of migraine is as follows:

Table 3: Preventive Treatment of Migraine Titration Schedule for Patients 12 Years of Age and Older

	Morning Dose	Evening Dose
Week 1	None	25 mg
Week 2	25 mg	25 mg
Week 3	25 mg	50 mg
Week 4	50 mg	50 mg

Dose and titration rate should be guided by clinical outcome. If required, longer intervals between dose adjustments can be used.

Dosing in Patients with Renal Impairment:

In patients with renal impairment (creatinine clearance less than 70 mL/min/1.73 m²), one-half of the usual adult dose of Topiramate Oral Solution is recommended.

Dosing in Patients Undergoing Hemodialysis:

To avoid rapid drops in topiramate plasma concentration during hemodialysis, a supplemental dose of Topiramate Oral Solution may be required. The actual adjustment should take into account 1) the duration of dialysis period, 2) the clearance rate of the dialysis system being used, and 3) the effective renal clearance of topiramate in the patient being dialyzed.

- How Supplied: 473 mL HDPE bottle
- Storage: 20°C to 25°C (68°F to 77°F); excursions permitted between 15°C to 30°C (59° to 86°F) [see USP Controlled Room Temperature]
- Reference Listed Drug/Reference Product: Topamax 25 mg capsule, NDA 020844

2 RESULTS

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

2.1 MISBRANDING ASSESSMENT

The Office of Prescription Drug Promotion (OPDP) determined that Eprontia would not misbrand the proposed product. The Division of Medication Error Prevention and Analysis (DMEPA) and the Division of Neurology 2 (DN 2) concurred with the findings of OPDP's assessment for Eprontia.

2.2 SAFETY ASSESSMENT

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

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

Azurity did not provide a derivation or intended meaning for the proposed proprietary name, Eprontia, in their submission. This proprietary name is comprised of a single word. We note the proposed name contains the letter strings “pr” and “tia”, which are commonly used medical abbreviations meaning “per rectum” and “transient ischemic attack” that may be used on a prescription or medication order. Although we typically discourage the inclusion of medical abbreviations within proprietary names, we determined the location of the abbreviations “pr” and “tia” within the name is unlikely to be separated from the surrounding letters in a manner that would lead to confusion or result in wrong route of administration errors in this case. Other than the abbreviations “pr” and “tia”, the proposed name, Eprontia, does not contain any components (i.e., a modifier, dosage form, etc.) that are misleading or can contribute to medication errors.

2.2.3 Comments from Other Review Disciplines at Initial Review

On May 17, 2021, the Division of Neurology 2 (DN 2) did not forward any comments or concerns relating to Eprontia at the initial phase of the review.

2.2.4 FDA Name Simulation Studies

One hundred thirty-six practitioners participated in DMEPA’s prescription studies for Eprontia. One CPOE participant erroneously chose the deactivated product, Empro, from a “Dynamic Begins” picklist. Empro is a deactivated phenylpropanolamine (75 mg extended release capsule) product and does not have any generic equivalents (See Appendix G). We note the participant typed “empr” instead of “epr”; therefore, the correct selection, Eprontia, was not displayed within the picklist. Since Eprontia was not displayed, it appears the participant attempted to select an answer that was closest to the response needed given the goal of the simulated study. Based on these factors, we determined the risk for a medication error between this name pair is adequately minimized.

Appendix B contains the results from the prescription simulation studies.

2.2.5 Phonetic and Orthographic Computer Analysis (POCA) Search Results

Our POCA search^b identified 330 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.

^a USAN stem search conducted on May 12, 2021.

^b POCA search conducted on May 12, 2021 in version 4.4.

2.2.6 Names Retrieved for Review Organized by Name Pair Similarity

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

Table 1. Names Retrieved for Review Organized by Name Pair Similarity	
Similarity Category	Number of Names
Highly similar name pair: combined match percentage score $\geq 70\%$	4
Moderately similar name pair: combined match percentage score $\geq 55\%$ to $\leq 69\%$	276
Low similarity name pair: combined match percentage score $\leq 54\%$	52

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

Our analysis of the 332 names contained in Table 1 determined none of the names will pose a risk for confusion with Eprontia 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 Neurology 2 (DN 2). At that time, we also requested additional information or concerns that could inform our review. On July 23, 2021, the Division of Neurology 2 (DN 2) stated no additional concerns with the proposed proprietary name, Eprontia.

3 CONCLUSION

The proposed proprietary name, Eprontia, is acceptable.

If you have any questions or need clarifications, please contact Casmir Ogbonna, OSE project manager, at 301-796-5272.

3.1 COMMENTS TO AZURITY PHARMACEUTICALS, INC.

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

If any of the proposed product characteristics as stated in your submission, received on April 26, 2021, 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. <https://www.nccmerp.org/about-medication-errors> Last accessed 10/05/2020.

***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.

Four 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, verbal pronunciation of the drug name or during computerized provider order entry. 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 vulnerability of the proposed name to be misinterpreted by healthcare practitioners during written, verbal, or electronic prescribing.

In order to evaluate the potential for misinterpretation of the proposed proprietary name during written, verbal, or electronic prescribing of the name, written inpatient medication orders, written outpatient prescriptions, verbal orders, and electronic orders are simulated, each consisting of a combination of marketed and unapproved drug products, including the proposed name.

- 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.

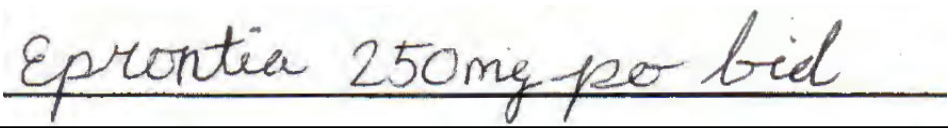
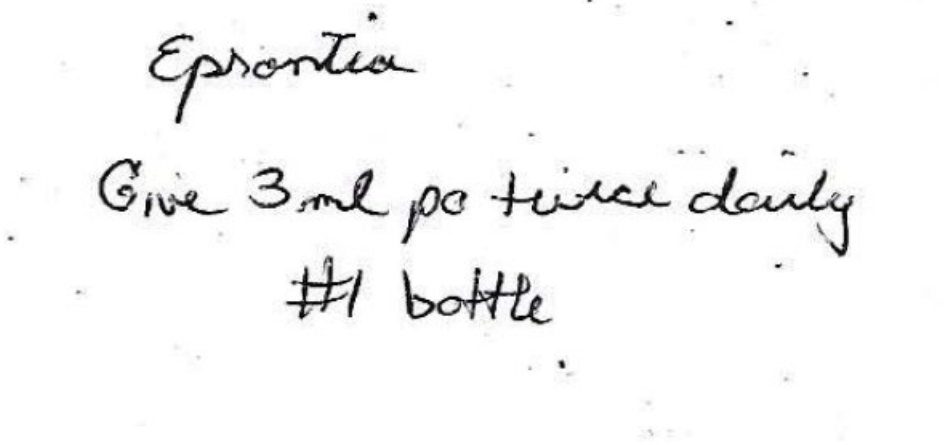
	Orthographic Checklist (Y/N to each question) - Do the names begin with different first letters? Note that even when names begin with different first letters, certain letters may be confused with each other when scripted. - Are the lengths of the names dissimilar* when scripted? *FDA considers the length 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?
--	--	---

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. Eprontia Study (Conducted on May 21, 2021)

Handwritten Medication Order/Prescription	Verbal Prescription
Medication Order: 	Eprontia Give 3 mL by mouth twice daily #1 bottle
Outpatient Prescription: 	
CPOE Study Sample (displayed as sans-serif, 12-point, bold font) Eprontia	

FDA Prescription Simulation Responses (Aggregate Report)

Study Name: Eprontia

As of Date 6/24/2021

256 People Received Study

136 People Responded

Study Name: Eprontia

Total	27	44	30	35	
INTERPRETATION	OUTPATIENT	CPOE	VOICE	INPATIENT	TOTAL
EMPRO	0	1	0	0	1
EPRANTIA	0	0	3	0	3
EPRATIA	0	0	2	0	2
EPRONTIA	26	43	21	33	123
EPRONTIO	1	0	0	0	1
EPRONTYA	0	0	1	0	1
EPROPTIA	0	0	0	1	1
EPRORTIA	0	0	0	1	1
EPROTHIA	0	0	1	0	1
EYPRONTIA	0	0	1	0	1
YPRONTIA	0	0	1	0	1

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

No.	Proposed name: Eprontia Established name: topiramate Dosage form: solution Strength(s): 25 mg/mL Usual Dose: 25 mg to 400 mg (b) (4)	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.	Eprontia***	100	Subject of this review.
2.	Pronto	72	This name pair has sufficient orthographic, phonetic, and product characteristic differences. Orthographically, the prefixes (Ep- vs Pr-) and suffixes (-tia vs -to) provide some differentiation. Specifically, the names begin with different first letters, and Eprontia contains the downstroke letter “p” in the second position whereas Pronto does not contain any downstroke letters. Further, Eprontia contains the dotted letter “i” in the suffix, whereas Pronto does not contain any dotted letters. In addition, Eprontia contains 8 letters whereas Pronto only contains 6 letters which gives the names different shapes when written. Phonetically, the first syllables (ee vs pron) and second syllables (pron vs toe) sound different. Eprontia also contains two additional syllables. Furthermore, none of the following product characteristics directly overlap: strength (25 mg/mL vs 4%/0.33%), dosage form (solution vs shampoo) route of administration (oral vs topical), dose (25 mg to 400 mg or (b) (4) vs apply liberally), and frequency of administration (once or twice daily vs one-time, may repeat in 7-10 days) which may provide additional differentiation if included.

No.	Proposed name: Eprontia Established name: topiramate Dosage form: solution Strength(s): 25 mg/mL Usual Dose: 25 mg to 400 mg _{(b) (4)}	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.
3.	Procentra	70	This name pair has sufficient orthographic, phonetic, and product characteristic differences. Orthographically, the prefixes (Ep- vs Pr-) and suffixes (-tia vs -tra) provide some differentiation. Specifically, the names begin with different first letters, and Eprontia contains the downstroke letter “p” in the second position whereas Procentra does not contain any downstroke letters. Further, Eprontia contains the dotted letter “i” in the suffix, whereas Procentra does not contain any dotted letters. Phonetically, the first syllables (ee vs pro), second syllables (pron vs sen), and third syllables (tee vs tra) sound different. Eprontia also contains an extra syllable. Furthermore, the product strength does not directly overlap (25 mg/mL vs 5 mg/mL), which may provide additional differentiation if included.
4.	Prometa	70	This name pair has sufficient orthographic, phonetic, and product characteristic differences. Orthographically, the prefixes (Ep- vs Pr-) and suffixes (-tia vs -ta) provide some differentiation. Specifically, the names begin with different first letters, and Eprontia contains the downstroke letter “p” in the second position whereas Prometa does not contain any downstroke letters. Further, Eprontia contains the dotted letter “i” in the

No.	Proposed name: Eprontia Established name: topiramate Dosage form: solution Strength(s): 25 mg/mL Usual Dose: 25 mg to 400 mg ^{(b) (4)}	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.
			suffix, whereas Prometa does not contain any dotted letters. Phonetically, the first syllables (ee vs pro), second syllables (pron vs meh), and third syllables (tee vs tah) sound different. Eprontia also contains an extra syllable. Furthermore, the product strength (25 mg/mL vs 0.4%, 0.6%, 2 mg/mL, 10 mg, and 20 mg) does not directly overlap, which may provide additional differentiation if included.

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 (%)
1.	Prempro	61
2.	Protopic	60
3.	Deponit	58
4.	Entresto	55
5.	Pine Tar	54
6.	Panretin	53
7.	Pentolair	52
8.	Retin-A	52
9.	Perox-A-Mint	50
10.	Preparation H	50

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: Eprontia Established name: topiramate Dosage form: solution Strength(s): 25 mg/mL Usual Dose: 25 mg to 400 mg (b) (4)	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
1.	(b) (4) ***	68	This name pair has sufficient orthographic and phonetic differences.
2.	Ceprotin	68	This name pair has sufficient orthographic, phonetic, and product characteristic differences. Orthographically, the prefixes (Ep- vs Ce-) and infixes (-ron- vs -pro-) provide some differentiation. Phonetically, the onset of the first syllables (ee vs see) and offset of the second syllables (pron vs pro) and third syllables (tee vs tin) sound different. Eprontia also contains an extra syllable. Furthermore, none of the following product characteristics directly overlap: strength (25 mg/mL vs 500 international units, 1,000 international units), dosage form (solution vs injection), and route of administration (oral vs intravenous) which may provide additional differentiation if included.
3.	Propecia	68	This name pair has sufficient orthographic and phonetic differences.
4.	Econtra	66	This name pair has sufficient orthographic and phonetic differences.
5.	Cerinta	64	This name pair has sufficient orthographic and phonetic differences.
6.	Neurontin	64	This name pair has sufficient orthographic and phonetic differences.
7.	Portia-21	64	This name pair has sufficient orthographic and phonetic differences.

No.	Proposed name: Eprontia Established name: topiramate Dosage form: solution Strength(s): 25 mg/mL Usual Dose: 25 mg to 400 mg 	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
8.	Portia-28	64	This name pair has sufficient orthographic and phonetic differences.
9.	Prolensa	64	This name pair has sufficient orthographic and phonetic differences.
10.	Promacta	64	This name pair has sufficient orthographic and phonetic differences.
11.	Prostin E2	64	This name pair has sufficient orthographic and phonetic differences.
12.	Proventil	64	This name pair has sufficient orthographic and phonetic differences.
13.	Intron A	63	This name pair has sufficient orthographic and phonetic differences.
14.	Peroxin A	63	This name pair has sufficient orthographic and phonetic differences.
15.	Peroxin A 10	63	This name pair has sufficient orthographic and phonetic differences.
16.	Eprosartan	62	This name pair has sufficient orthographic and phonetic differences. Orthographically, the infixes (-ron- vs -rosar-) and suffixes (-tia vs -tan) provide sufficient differentiation. In addition, Eprontia only has 8 letters whereas Eprosartan has 10 letters. Phonetically, the offset of the second syllables (pron vs pro), third syllables (tee vs sar), and offset of the fourth syllables (tia vs tan) sound different.
17.	Etrafon-A	62	This name pair has sufficient orthographic and phonetic differences.
18.	Yieronia	62	This name pair has sufficient orthographic and phonetic differences.
19.	Zarontin	62	This name pair has sufficient orthographic, phonetic, and product characteristic differences. Orthographically, the prefixes (Ep- vs Za-) provide some differentiation.

No.	Proposed name: Eprontia Established name: topiramate Dosage form: solution Strength(s): 25 mg/mL Usual Dose: 25 mg to 400 mg ^{(b) (4)}	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
			Phonetically, the first syllables (ee vs zah), and onset of the second syllables (pron vs ron) and offset of the third syllables (tia vs tin) sound different. Eprontia also contains an extra syllable. Furthermore, none of the following product characteristics directly overlap: strength (25 mg/mL vs 250 mg and 5 mg/mL), and dosage form (solution vs capsule and syrup), which may provide additional differentiation if included.
20.	Strontium	61	This name pair has sufficient orthographic and phonetic differences. Orthographically, the prefixes (Ep- vs St-) and suffixes (-tia vs -tium) provide sufficient differentiation. Phonetically, the first syllables (ee vs stron), second syllables (pron vs tee), and third syllables (ah vs um) sound different. Eprontia also contains an extra syllable.
21.	Strontium-89	61	See PFM for Strontium. Additionally, the modifier 89 is present in Strontium-89, which provides differentiation, if used.
22.	Aprodine	60	This name pair has sufficient orthographic and phonetic differences.
23.	Bronkaid	60	This name pair has sufficient orthographic and phonetic differences.
24.	Deproist	60	This name pair has sufficient orthographic and phonetic differences.
25.	Mepron	60	This name pair has sufficient orthographic and phonetic differences.

No.	Proposed name: Eprontia Established name: topiramate Dosage form: solution Strength(s): 25 mg/mL Usual Dose: 25 mg to 400 mg _{(b)(4)}	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
26.	Proactiv	60	This name pair has sufficient orthographic and phonetic differences.
27.	Proamatine	60	This name pair has sufficient orthographic and phonetic differences.
28.	Prohance	60	This name pair has sufficient orthographic and phonetic differences.
29.	Protac	60	This name pair has sufficient orthographic and phonetic differences.
30.	Protenate	60	This name pair has sufficient orthographic and phonetic differences.
31.	Protopam	60	This name pair has sufficient orthographic and phonetic differences.
32.	Repronex	60	This name pair has sufficient orthographic and phonetic differences.
33.	Sapropterin	60	This name pair has sufficient orthographic and phonetic differences.
34.	Brontex	59	This name pair has sufficient orthographic and phonetic differences.
35.	Promapar	59	This name pair has sufficient orthographic and phonetic differences.
36.	Edurant	58	This name pair has sufficient orthographic and phonetic differences.
37.	Esperoct	58	This name pair has sufficient orthographic and phonetic differences.
38.	Estro-Span	58	This name pair has sufficient orthographic and phonetic differences
39.	Ibrance	58	This name pair has sufficient orthographic and phonetic differences.
40.	Procardia	58	This name pair has sufficient orthographic, phonetic, and product characteristic differences. Orthographically, the prefixes (Ep- vs Pro-) provide some differentiation. Phonetically, the first syllables (ee vs pro) and second syllables (pron vs car), and the onset of the third syllables (dee vs tee) sound different.

No.	Proposed name: Eprontia Established name: topiramate Dosage form: solution Strength(s): 25 mg/mL Usual Dose: 25 mg to 400 mg (b) (4)	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
			Furthermore, none of the following product characteristics directly overlap: strength (25 mg/mL vs 10 mg and 20 mg), and dosage form (solution vs capsule), which may provide additional differentiation if included.
41.	Procto-Pak	58	This name pair has sufficient orthographic and phonetic differences.
42.	Profenal	58	This name pair has sufficient orthographic and phonetic differences.
43.	Prolia	58	This name pair has sufficient orthographic and phonetic differences.
44.	Proventil Hfa	58	This name pair has sufficient orthographic and phonetic differences.
45.	Tiopronin	58	This name pair has sufficient orthographic and phonetic differences.
46.	Utrona-C	58	This name pair has sufficient orthographic and phonetic differences
47.	(b) (4) ***	57	This name pair has sufficient orthographic and phonetic differences.
48.	Estropipate	57	This name pair has sufficient orthographic and phonetic differences.
49.	Etidronate	57	This name pair has sufficient orthographic and phonetic differences. Orthographically, the prefixes (Ep- vs Etid-) and suffixes (-tia vs -te) provide sufficient differentiation. Phonetically, the second syllables (pron vs tid), third syllables (tee vs ron), and fourth syllables (tia vs ate) sound different.
50.	Naproxen	57	This name pair has sufficient orthographic and phonetic differences.
51.	Periostat	57	This name pair has sufficient orthographic and phonetic differences.

No.	Proposed name: Eprontia Established name: topiramate Dosage form: solution Strength(s): 25 mg/mL Usual Dose: 25 mg to 400 mg (b) (4)	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
52.	Persantine	57	This name pair has sufficient orthographic and phonetic differences.
53.	Prometrium	57	This name pair has sufficient orthographic and phonetic differences.
54.	Celontin	56	This name pair has sufficient orthographic and phonetic differences.
55.	Egrifta	56	This name pair has sufficient orthographic and phonetic differences. Orthographically, the infixes (-ron- vs -rif-) and suffixes (-tia vs -ta) provide sufficient differentiation. Phonetically, the second syllables (pron vs grif) and offset third syllables (tee vs tah) sound different. Eprontia also contains an extra syllable.
56.	(b) (4) ***	56	This name pair has sufficient orthographic and phonetic differences.
57.	Epoetin Beta	56	This name pair has sufficient orthographic and phonetic differences.
58.	Estrostep 21	56	This name pair has sufficient orthographic and phonetic differences.
59.	Lupron Depot	56	This name pair has sufficient orthographic and phonetic differences.
60.	Peppermint Oil	56	This name pair has sufficient orthographic and phonetic differences.
61.	Ponatinib	56	This name pair has sufficient orthographic and phonetic differences.
62.	Procto-Kit	56	This name pair has sufficient orthographic and phonetic differences.
63.	Prolastin	56	This name pair has sufficient orthographic and phonetic differences.
64.	Promacot	56	This name pair has sufficient orthographic and phonetic differences.
65.	Promethegan	56	This name pair has sufficient orthographic and phonetic differences.
66.	Propinal	56	This name pair has sufficient orthographic and phonetic differences.

No.	Proposed name: Eprontia Established name: topiramate Dosage form: solution Strength(s): 25 mg/mL Usual Dose: 25 mg to 400 mg (b) (4)	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
67.	Protostat	56	This name pair has sufficient orthographic and phonetic differences.
68.	Reprexain	56	This name pair has sufficient orthographic and phonetic differences.
69.	Treprostinil	56	This name pair has sufficient orthographic and phonetic differences.
70.	Trientine	56	This name pair has sufficient orthographic and phonetic differences.
71.	Vitron-C	56	This name pair has sufficient orthographic and phonetic differences.
72.	(b) (4) ***	55	This name pair has sufficient orthographic and phonetic differences.
73.	Brontuss	55	This name pair has sufficient orthographic and phonetic differences.
74.	Eltroxin	55	This name pair has sufficient orthographic and phonetic differences.
75.	Procaine	55	This name pair has sufficient orthographic and phonetic differences.
76.	Ferotrin	54	This name pair has sufficient orthographic and phonetic differences.
77.	Maprotiline	54	This name pair has sufficient orthographic and phonetic differences.
78.	Protonix	54	This name pair has sufficient orthographic and phonetic differences.
79.	Pretomanid	53	This name pair has sufficient orthographic and phonetic differences.
80.	Parnate	52	This name pair has sufficient orthographic and phonetic differences.
81.	Paroxetine	52	This name pair has sufficient orthographic and phonetic differences.
82.	Pontocaine	52	This name pair has sufficient orthographic and phonetic differences.
83.	Tepotinib	52	This name pair has sufficient orthographic and phonetic differences.
84.	(b) (4) ***	51	This name pair has sufficient orthographic and phonetic differences.
85.	Interferon-Beta	51	This name pair has sufficient orthographic and phonetic differences.

No.	Proposed name: Eprontia Established name: topiramate Dosage form: solution Strength(s): 25 mg/mL Usual Dose: 25 mg to 400 mg (b) (4)	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
86.	Interferon Beta-1A	50	This name pair has sufficient orthographic and phonetic differences.
87.	Pamidronate	50	This name pair has sufficient orthographic and phonetic differences.
88.	Epoetin Alfa	49	This name pair has sufficient orthographic and phonetic differences.
89.	Metopirone	48	This name pair has sufficient orthographic and phonetic differences.
90.	(b) (4) ***	47	This name pair has sufficient orthographic and phonetic differences.
91.	Pentacarinat	47	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 (%)
	n/a	

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
1.	Prantal	68	Brand discontinued with no generic equivalents available. NDA 008114 withdrawn FR effective 11/15/1990.
2.	Eprident	66	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
3.	Prolintane	66	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
4.	Aprotinin	65	Name identified in RxNorm database. Product is deactivated and no generic equivalents are available.

No.	Name	POCA Score (%)	Failure preventions
5.	(b) (4) ***	64	Proposed proprietary name for NDA (b) (4) found unacceptable by DMEPA ((b) (4) dated (b) (4)). Subsequently, the proposed proprietary name (b) (4) *** was found conditionally acceptable for NDA (b) (4).
6.	Bronitin	64	Brand discontinued with no generic equivalents available. NDA 016126 withdrawn FR effective 06/18/2009.
7.	Drontal	64	Veterinary product.
8.	Prop-A-Tane	64	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
9.	Probeta La	63	International product formerly marketed in the United Kingdom
10.	Estrone Aq	62	Name identified in RxNorm database. Product is deactivated, and no generic equivalents are available.
11.	Profen Ii	62	Name identified in RxNorm database. Product is deactivated and no generic equivalents are available.
12.	Prostap 3	62	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
13.	Protease	62	Product is not a stand-alone drug name. Protease is an active ingredient in Pancrelipase, a multi-ingredient product containing the enzymes: amylase, lipase, and protease. Thus, "protease" cannot be used alone on a prescription.
14.	Protein C	62	Product is not a drug. It is autoprothrombin IIA and blood coagulation factor XIV.
15.	Protein S	62	Product is not a drug. It is a vitamin K-dependent plasma glycoprotein synthesized in the liver. In the circulation, Protein S exists in two forms: a free form and a complex form bound to complement protein C4b-binding protein. In humans, protein S is encoded by the PROS1 gene.
16.	Proteins	62	Product is not a drug. Chemically, proteins are composed of amino acids, which are organic compounds made of carbon, hydrogen, nitrogen, oxygen or sulfur. Proteins are the building blocks of body tissue and can serve as a fuel source.
17.	Pro-Vent	62	International drug product formerly marketed in Ireland and United Kingdom.
18.	Stepronin	62	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
19.	82 Strontium	61	Product is not a drug. It is a diagnostic radiochemical.
20.	85 Strontium	61	Product is not a drug. It is a diagnostic radiochemical.

No.	Name	POCA Score (%)	Failure preventions
21.	Epanutin	61	International product marketed in Austria, Czech Republic, Greece, Hungary, Ireland, Israel, Netherlands, Poland, South Africa, Spain, Sweden, Turkey, and the United Kingdom; and formerly marketed in Germany, Belgium, Spain, and Switzerland.
22.	Metronidale	61	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
23.	Promectin	61	Veterinary product.
24.	Edronax	60	International product marketed in Australia, Austria, Belgium, Denmark, Finland, Hungary, Ireland, Israel, Italy, Mexico, Norway, New Zealand, Poland, Portugal, South Africa, Sweden, Switzerland, Thailand, Turkey, and the United Kingdom, and formerly marketed in Germany, Russia, and the Czech Republic.
25.	Eprinex	60	Veterinary product.
26.	Fepron	60	International product formally marketed in Italy, Netherlands and Belgium
27.	Fipronil	60	Veterinary product.
28.	Iproniazid	60	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
29.	Meprospan	60	Brand discontinued with no generic equivalents available. NDA 011284 withdrawn FR effective 10/2/1996.
30.	Nupro Neutral	60	Name identified in RxNorm database. Product is deactivated and no generic equivalents are available
31.	Propane	60	Product is not a drug. It is a by-product of natural gas processing and petroleum refining, commonly used as a fuel.
32.	Promacet	59	Name identified in RxNorm database. Product is deactivated and no generic equivalents are available.
33.	Promit	59	Name identified in RxNorm database. Product is deactivated and no generic equivalents are available.
34.	Protilase	59	Name identified in RxNorm database. Product is deactivated and no generic equivalents are available.
35.	Serentil	59	Brand discontinued with no generic equivalents. NDA 016774, NDA 016775, and NDA 016997 withdrawn FR effective 03/26/2018.
36.	Tronothane	59	Name identified in RxNorm database. Product is deactivated and no generic equivalents are available.

No.	Name	POCA Score (%)	Failure preventions
37.	(b) (4) ***	59	Proposed proprietary name for IND 073916 found unacceptable by DMEPA (OSE# 2018-21548167-1 dated 04/22/2019). Subsequently, the proposed proprietary name, Rukobia*** was found conditionally acceptable for IND 073916 and NDA 212950.
38.	Cerenia	58	Veterinary product.
39.	Cyprostat	58	International drug product marketed in Australia and United Kingdom.
40.	Droncit	58	Veterinary product.
41.	Enterocina	58	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
42.	Eprazinone	58	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
43.	Eprozinol	58	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
44.	Estro-Span 40	58	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
45.	Etretinate	58	Brand discontinued with no generic equivalents available. NDA 019369 withdrawn FR effective 09/10/2003.
46.	Mepranix	58	International product formerly marketed in the United Kingdom.
47.	Nitronal	58	Brand discontinued with no generic equivalents available. NDA 018672 withdrawn FR effective 9/13/2000.
48.	Pentran	58	International product formerly marketed in the UK.
49.	Piperonal	58	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
50.	Pro Otic	58	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
51.	Profen La	58	Name identified in RxNorm database. Product is deactivated and no generic equivalents are available.
52.	Prompt	58	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
53.	Prondol	58	International product formerly marketed in the United Kingdom and Ireland.
54.	Pronestyl	58	Brand discontinued with no generic equivalents available. NDA 007335 and NDA 017371 withdrawn FR effective 03/13/2009.

No.	Name	POCA Score (%)	Failure preventions
55.	Pronto Spray	58	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
56.	Prostep	58	Brand discontinued with no generic equivalents available. NDA 019983 was withdrawn FR effective 06/18/2009.
57.	Protamone	58	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
58.	Protoprin	58	Brand discontinued with no generic equivalents available. NDA 019107 withdrawn FR effective 06/16/2006.
59.	Teronac	58	International product marketed in Indonesia, and formerly marketed in Hungary, Ireland, Israel, Netherlands, Singapore, Switzerland, Greece, the United Kingdom, Germany, and South Africa.
60.	Trionate	58	Name identified in RxNorm database. Product is deactivated and no generic equivalents are available.
61.	Emepromium	57	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
62.	Medronate	57	International product formerly marketed in Brazil.
63.	Propothesia	57	Veterinary product.
64.	Quibron-T	57	Brand discontinued with no generic equivalents available. ANDA 088656 withdrawn FR effective 06/18/2009.
65.	Brondil	56	International product marketed in the Philippines and formerly marketed in Thailand.
66.	Eprex	56	International product marketed in Canada, Hong Kong, Turkey, Australia, Belgium, Brazil, Czech Republic, Denmark, Finland, France, Greece, Ireland, Israel, Italy, Mexico, Netherlands, Norway, New Zealand, Poland, Portugal, Spain, Sweden, Switzerland, Thailand, United Kingdom, Venezuela, Malaysia, South Africa, Singapore, Indonesia, Philippines, France, India, and Russia; and formerly marketed in Argentina, Germany, Hungary, and Chile.
67.	Eprinomectin	56	Veterinary product.
68.	Eprizero	56	Veterinary product.
69.	Epsiprantel	56	Veterinary product.
70.	Ferronate	56	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.

No.	Name	POCA Score (%)	Failure preventions
71.	Ponstan	56	International product marketed in Australia, India, United Kingdom, Canada, Ireland, Brazil, Finland, Greece, Hong Kong, Indonesia, Malaysia, Mexico, New Zealand, Philippines, Portugal, South Africa, Switzerland, Thailand, Turkey, Venezuela, and formerly marketed in Singapore.
72.	Probanthine	56	Brand discontinued with no generic equivalents available. NDA 008732 was withdrawn FR effective 07/21/2017 and NDA 008843 was withdrawn FR effective 06/10/1999.
73.	Procanbid	56	Brand discontinued with no generic equivalents available. NDA 020545 withdrawn FR effective 06/18/2009.
74.	Prodip	56	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
75.	Prolactin	56	Product is not a drug. It is a hormone released from the anterior pituitary gland that stimulates milk production after childbirth.
76.	Propacet	56	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
77.	Propacet 100	56	Brand discontinued with no generic equivalents available. ANDA 070107 withdrawn FR effective 01/22/1999.
78.	Propade	56	Name identified in RxNorm database. Product is deactivated and no generic equivalents are available.
79.	Propan	56	Name identified in RxNorm database. Product is deactivated and no generic equivalents are available.
80.	Propet	56	Veterinary product.
81.	Propine	56	Brand discontinued with no generic equivalents available. NDA 018239 withdrawn FR effective 07/21/2017.
82.	Propionate	56	Product is not a drug. It is a salt or ester of propionic acid.
83.	Prothiaden	56	International drug product marketed in Australia, India, Malaysia, South Africa, Japan, United Kingdom, Belgium, Denmark, Ireland, France, Netherlands, and Czech Republic; and formerly marketed in several countries including Hong Kong, New Zealand, Philippines, Singapore, Thailand, and Spain.
84.	Reproterol	56	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
85.	Roferon-A	56	Name identified in RxNorm database. Product is deactivated and no generic equivalents are available

No.	Name	POCA Score (%)	Failure preventions
86.	Spiroctan	56	International drug product marketed in Brazil, and formerly marketed in Venezuela, Switzerland, Netherlands, France, and United Kingdom.
87.	Timpron 250 Ec	56	International product formerly marketed in the United Kingdom.
88.	Timpron 500 Ec	56	International product formerly marketed in the United Kingdom.
89.	1,3-propanediol	55	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
90.	Cyprodenate	55	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
91.	(b) (4) ***	55	Proposed proprietary name found conditionally acceptable under IND (b) (4) on (b) (4) (b) (4). IND (b) (4) was withdrawn effective (b) (4).
92.	Estroplan	55	Veterinary product.
93.	Kronofed-A	55	Name identified in RxNorm database. Product is deactivated and no generic equivalents are available.
94.	Naprofen	55	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
95.	Ospa Protein	55	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
96.	Pro Dine 5000C	55	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
97.	Pro1tek	55	Not a drug product. It is a hand sanitizer.
98.	Promace	55	Veterinary product.
99.	Propanix La	55	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
100.	Protamines	55	Product is not a drug. Protamines are small basic proteins that replace histones in the nucleus of the spermatozoa causing an increase in the folding of the DNA and thus leaving it more protected.
101.	Saffron Stain	55	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
102.	Potiga	54	Brand discontinued with no generic equivalents available. NDA 022345 withdrawn FR effective 11/02/2017.
103.	Propanix	54	International drug product formerly marketed in United Kingdom.

No.	Name	POCA Score (%)	Failure preventions
104.	Pricortin	53	Name identified in RxNorm database. Product is deactivated and no generic equivalents are available.
105.	Pri-Cortin 50	53	Name identified in RxNorm database. Product is deactivated and no generic equivalents are available.
106.	2-Nitropropane	52	Product is not a drug. It is a hydrocarbon used as a solvent.
107.	Aceprometazine	52	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
108.	Enaprilat	52	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
109.	Entaprin	52	Name identified in RxNorm database. Product is deactivated and no generic equivalents are available.
110.	Proketazine	52	Brand discontinued with no generic equivalents available. NDA 012768 was withdrawn FR effective 11/05/1992. NDA 014173 was withdrawn FR effective 09/04/1996.
111.	Propantheline	52	Name identified in RxNorm database. Product is deactivated and no generic equivalents are available
112.	Tropatepine	52	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
113.	Epoetin delta	52	Active ingredient of a withdrawn international investigational product.
114.	Therapentin-90	51	Name identified in RxNorm database. Product is deactivated and no generic equivalents are available.
115.	Piriton	50	International drug product marketed in Ireland, United Kingdom, Hong Kong, and Singapore, and formerly marketed in Australia and Thailand.
116.	Serotonin	50	Product is not a drug. It is a neurotransmitter.
117.	Tiaprofenate	50	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
118.	1,2-Propanedithiol	49	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
119.	Betaprone	49	Brand discontinued with no generic equivalents available. NDA 011657 withdrawn FR effective 04/26/1996.
120.	1,2-Propanediamine	48	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
121.	Pear Preparation	47	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.

No.	Name	POCA Score (%)	Failure preventions
122.	Diphtheria Protein	46	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
123.	Oats Preparation	46	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
124.	Persantin Retard	46	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
125.	Pro Pet Antiseptic	46	Veterinary product.
126.	Prothionamide	46	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
127.	Tuna Preparation	46	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
128.	Tripe Preparation	44	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
129.	Valepotriate	44	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.
130.	Empro	44	Name identified in FDA Prescription Simulation Study. Product is deactivated and no generic equivalents are available.
131.	Retinyl Propionate	41	Name identified in RxNorm database. Unable to find product characteristics in commonly used drug databases.

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

No.	Name	POCA Score (%)
1.	Kerendia***	65
2.	(b) (4) ***	64
3.	Orencia	64
4.	Atrovent	63
5.	Pramotic	63

^e 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

No.	Name	POCA Score (%)
6.	(b) (4) ***	62
7.	Aprindine	62
8.	Aptensio	62
9.	(b) (4) ***	62
10.	Prandimet	62
11.	Prandin	62
12.	Primatene	62
13.	Trental	62
14.	Primperan	61
15.	Brom Tann Pe	60
16.	Bromtapp	60
17.	Fybranta	60
18.	(b) (4) ***	60
19.	Iprindole	60
20.	Nitrotan	60
21.	Prenexa	60
22.	Pre-Op Ii	60
23.	Prestalia	60
24.	Preventeza	60
25.	Pyrantel	60
26.	Sprintec	60
27.	(b) (4) ***	60
28.	Trokendi	60
29.	Yutrepia***	60
30.	Atropine	59
31.	Atropine-1	59
32.	Principen	59
33.	Principen '125'	59
34.	Principen '250'	59
35.	Principen '500'	59
36.	Trandate	59
37.	Aphrodyne	58
38.	Atropen	58
39.	Bromatan	58
40.	Bromatapp	58
41.	Copper Edta	58
42.	Droxia	58
43.	(b) (4) ***	58
44.	Nitrostat	58
45.	Nitrotab	58
46.	(b) (4) ***	58
47.	Orlenta	58
48.	(b) (4) ***	58

No.	Name	POCA Score (%)
49.	Pentane	58
50.	Piroctone	58
51.	Predfoam	58
52.	Psorent	58
53.	Suprenza	58
54.	Triptone	58
55.	Ixempra	57
56.	Nitro-Par	57
57.	Pentasa	57
58.	Treanda	57
59.	Tripedia	57
60.	(b) (4) ***	56
61.	Aprepitant	56
62.	Aprinox	56
63.	Atrac-Tain	56
64.	Besponsa	56
65.	Bion Tears	56
66.	Brilinta	56
67.	Coro-Nitro	56
68.	Ircon-Fa	56
69.	Irenka	56
70.	Metrotop	56
71.	Orenitram	56
72.	Perestan	56
73.	Photrexa	56
74.	Prednicot	56
75.	Prezista	56
76.	Replesta	56
77.	Trinessa	56
78.	Trintex	56
79.	Votrient	56
80.	(b) (4) ***	56
81.	Zeposia	56
82.	Altorant	55
83.	Depandro 100	55
84.	Ditropan	55
85.	(b) (4) ***	55
86.	(b) (4) ***	55
87.	Intropin	55
88.	Irinotecan	55
89.	Krintafel	55
90.	Nephroscan***	55
91.	Pentopak	55

No.	Name	POCA Score (%)
92.	Pimtrea	55
93.	Pramosone	55
94.	Prinzide	55
95.	Pur-In Neutral	55
96.	Trandide	55

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/

JOHN C MORRIS
07/23/2021 01:23:11 PM

CELESTE A KARPOW
07/23/2021 01:43:45 PM

DANIELLE M HARRIS
07/23/2021 01:46:00 PM