

**CENTER FOR DRUG EVALUATION AND
RESEARCH**

APPLICATION NUMBER:

218637Orig1s000

PRODUCT QUALITY REVIEW(S)

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Template Revision: 03

Office of Pharmaceutical Quality

New Drug Application (NDA) Integrated Quality Assessment Template

NDA Executive Summary

1. Application/Product Information

NDA Number	218637		
Applicant Name	Kamat Pharmatech LLC		
Drug Product Name	Trazodone Hydrochloride Oral Solution		
Dosage Form	Solution		
Proposed Strength(s)	10 mg/ 1 mL		
NDA Classification	Type 3 - New Dosage Form		
Route of Administration	Oral		
Maximum Daily Dose	600 mg		
Rx/OTC Dispensed	Rx		
Proposed Indication	For treatment of major depressive disorder (MDD)		
Drug Product Description	Clear, colorless solution		
Co-packaged product information	N/A		
Device information	N/A		
Storage Temperature/ Conditions	20°–25 °C		
Review Team	Discipline	Primary	Secondary
	<i>Drug Substance</i>	Sam Bain	Katie Duncan
	<i>Drug Product/ Labeling</i>	Eric Bow	Valerie Amspacher/Julia Pinto
	<i>Manufacturing</i>	Jing Fang	Tim (Tianhong) Zhou
	<i>Biopharmaceutics</i>	N/A	N/A
	<i>Microbiology</i>	Ryan Blower	Kelly Ann Miller

	Other (specify)	N/A	N/A
	RBPM	Teshara Bouie	
	ATL	Valerie Amspacher	
Consults	N/A		

2. Final Overall Recommendation - Approval

3. Action Letter Information

a. Expiration Dating: 24 month expiry is acceptable when stored at controlled room temperature: 20°–25° (68°–77° F)

b. Additional Comments for Action

4. Basis for Recommendation:

a. Summary of Rationale for Recommendation:

The CMC recommendation is approval based on drug substance, drug product, process and facilities and microbiology reviews.

b. Is the overall recommendation in agreement with the individual discipline recommendations? Yes

Recommendation by Subdiscipline:

Drug Substance	-	Adequate
Drug Product	-	Adequate
Quality Labeling	-	Pending
Manufacturing	-	Adequate
Biopharmaceutics	-	N/A
Microbiology	-	Adequate

Environmental Assessment: Categorical Exclusion - Adequate

QPA for EA(s): No

5. Life-Cycle Considerations

Established Conditions per ICH Q12: No

Comments:

Comparability Protocols (PACMP): No

Comments:

Additional Lifecycle Comments:

Submission(s) Assessed	Document Date	Discipline(s) Affected
Supporting document 6; eCTD 0006	29 Jan 2024	All, original submission
Supporting document 10; eCTD 0010	29 Apr 2024	Microbiology
Supporting document 13; eCTD 0013	5 Jul 2024	Process/facilities
Supporting document 17; eCTD 0017	28 Aug 24	Drug product
Supporting document 20; eCTD 0020	8 Oct 24	Drug product
Supporting document 21; eCTD 0021	16 Oct 24	Drug product
Supporting document 22; eCTD 0022	23 Oct 24	Drug product



Valerie
Amspacher

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CHAPTER IV: LABELING

For more details about the items in this template, please see [Chapter IV \(Labeling\) of the NDA IQA Guide \(OPQ-ALL-WI-0006\)](#)

NDA Number	218637
Assessment Cycle Number	1
Drug Product Name	Trazodone hydrochloride oral solution

Assessment Recommendation: Choose an item.

Item	Assessment Conclusion	SDN # where labeling is adequate ("N/A" otherwise)
Prescribing Information Labeling	Inadequate	n/a
Patient Information	Inadequate	n/a
Instruction for Use (IFU)	N/A	n/a
Container Labels	Inadequate	n/a
Carton Labeling	Inadequate	n/a

Brief Description of Outstanding Issues:

Submissions being reviewed:

Document Reviewed (eCTD #, SDN #)	Date Received	Information Provided
0006 (SD6)	1/12/2024	Labeling, carton/container labels

1.0 PRESCRIBING INFORMATION¹

Assessment of Product Quality Related Aspects of the Prescribing Information:

¹ [Labeling Review Tool \(LRT\) \(March 2022\)](#), including use of consistent terminology for dosage form and unit of measure for strength in the product title and DOSAGE FORMS AND STRENGTHS heading in Highlights, in the DOSAGE AND ADMINISTRATION, DOSAGE FORMS AND STRENGTHS, DESCRIPTION, and HOW SUPPLIED/STORAGE AND HANDLING sections (see page 2 of LRT)

1.1 HIGHLIGHTS OF PRESCRIBING INFORMATION

(copy of proposed text)

Item	Item in Proposed Labeling (choose "Adequate", "Inadequate", or "N/A")	Assessor's Comments (If an item is Inadequate, provide more details on the issues, as appropriate)
Product Title in Highlights² [21 CFR 201.57(a)(2)]		
Established name(s) ³	Adequate	"Raldesy (trazodone hydrochloride) oral solution"
Route(s) of administration	Adequate	"oral solution"
Controlled drug substance symbol (if applicable)	N/A	
Initial U.S. Approval [§201.57(a)(3)]	Adequate	"1981"
Dosage Forms and Strengths Heading in Highlights [§ 201.57(a)(8)]		
Dosage form(s) ⁴ and strength(s) in metric system ⁵	Adequate	"Oral Solution: 10 mg/mL"
If the drug product contains an active ingredient that is a salt, clearly state whether the strength is based on the active moiety (e.g., Tablets: 10 mg of drug-x) or active ingredient (e.g., Tablets: 10 mg of drug-x hydrochloride). ⁶	Adequate	
Assess if the tablet is scored. If product meets guidelines and criteria for a scored tablet, state "functionally scored." ⁷	N/A	

² Draft guidance: [Product Title and Initial U.S. Approval in the Highlights of Prescribing Information for Human Prescription Drug and Biological Products — Content and Format](#) (January 2018)

³ Established name = [Drug] [Route of Administration] [Dosage Form]. Do use not "USP" descriptor in the product title or within the Highlights (see page 3 of LRT).

⁴ Draft guidance: [Product Title and Initial U.S. Approval in the Highlights of Prescribing Information for Human Prescription Drug and Biological Products — Content and Format](#) (January 2018); USP <1151>; USP Nomenclature Guideline

⁵ Labeling Review Tool (March 2022, page 13), include limited packaging information; USP <7>

⁶ Guidance: [Naming of Drug Products Containing Salt Drug Substances](#) (June 2015); MAPP 5021.1

⁷ Guidance: [Tablet Scoring: Nomenclature, Labeling, and Data for Evaluation](#) (March 2013)

Item	Item in Proposed Labeling (choose "Adequate", "Inadequate", or "N/A")	Assessor's Comments (If an item is Inadequate, provide more details on the issues, as appropriate)
For injectable drug products for parenteral administration, use appropriate package type term (e.g., single-dose, multiple-dose, single-patient-use). Other package terms include pharmacy bulk package and imaging bulk package. ⁸	N/A	

Assessment: Choose an item.

(Provide any revision, if applicable, e.g., different color font, strikethrough, etc.) **Any issues should be listed at the end in "OUTSTANDING ISSUES AND RECOMMENDATIONS"**

1.2 FULL PRESCRIBING INFORMATION

1.2.1 Section 2 (DOSAGE AND ADMINISTRATION)⁹

(copy of proposed text)

Item	Item in Proposed Labeling (choose "Adequate", "Inadequate", or "N/A")	Assessor's Comments (If an item is Inadequate, provide more details on the issues, as appropriate)
DOSAGE AND ADMINISTRATION section		
Special instructions for product preparation (e.g., reconstitution and resulting concentration, dilution, compatible diluents and/or soft food ¹⁰ , storage conditions needed to maintain the stability of the reconstituted or diluted product).	N/A	

⁸ Guidance: [Selection of the Appropriate Package Type Terms and Recommendations for Labeling Injectable Medical Products Packaged in Multiple-Dose, Single-Dose, and Single-Patient-Use Containers for Human Use](#) (October 2018); USP <659>

⁹ See § 201.57(c)(3); draft guidance: [Dosage and Administration Section of Labeling for Human Prescription Drug and Biological Products — Content and Format](#) (January 2023); Labeling Review Tool (March 2022, page 25)

¹⁰ Draft Guidance: [Use of Liquids and/or Soft Foods as Vehicles for Drug Administration: General Considerations for Selection and In Vitro Methods for Product Quality Assessments](#)

Item	Item in Proposed Labeling (choose "Adequate", "Inadequate", or "N/A")	Assessor's Comments (If an item is Inadequate, provide more details on the issues, as appropriate)
Important administration instructions supported by product quality information (e.g., do not crush or chew extended-release tablets, instructions for mixing with food).	N/A	
For parenteral products: include statement: <i>"Parenteral drug products should be inspected visually for particulate matter and discoloration prior to administration, whenever solution and container permit."</i> ¹¹	N/A	
If there is a USP monograph for the drug product and it contains a labeling requirement, ensure the labeling requirement is fulfilled. ¹² Note the labeling requirement may be applicable to another section of the PI (e.g., Section 11).	N/A	
For radioactive products, include radiation dosimetry for the patient and healthcare practitioner(s) who administer the drug	N/A	
For hazardous products, include the statement <i>"DRUG X is a hazardous drug. Follow applicable special handling and disposal procedures."</i> ^x with x numerical citation to "OSHA Hazardous Drugs."	N/A	

Assessment: Adequate

(Provide any revision, if applicable, e.g., different color font, strikethrough, etc.) **Any issues should be listed at the end in "OUTSTANDING ISSUES AND RECOMMENDATIONS"**

¹¹ §201.57(c)(3)(iv)

¹² USP General Notices 2.30 Legal Recognition

1.2.2 Section 3 (DOSAGE FORMS AND STRENGTHS)¹³

(copy of proposed text)

Item	Item in Proposed Labeling (choose "Adequate", "Inadequate", or "N/A")	Assessor's Comments (If an item is Inadequate, provide more details on the issues, as appropriate)
DOSAGE FORMS AND STRENGTHS section		
Available dosage form(s)	Inadequate	
Strength(s) in metric system	Inadequate	(b) (4) (no mention of CCS sizes)
If the active ingredient is a salt, apply the USP Salt Policy per FDA Guidance . Clearly state whether the strength is based on the active moiety (e.g., Tablets: 10 mg of drug-x) or active ingredient (e.g., Tablets: 10 mg of drug-x hydrochloride). No equivalency statement.	N/A	
A description of the identifying characteristics of the dosage forms, including shape, color, coating, scoring, imprinting, and color and clarity of the solution, when applicable.	Inadequate	<i>Comment to Applicant: Add description of identifying characteristics, e.g, color and flavor.</i>
Assess if the tablet is scored. If product meets guidelines and criteria for a scored tablet, state "functionally scored."	N/A	
For injectable drug products for parenteral administration, use appropriate package type term (e.g., single-dose, multiple-dose, single-patient-use). Other package type terms include pharmacy bulk package and imaging bulk package (see USP <659>).	N/A	

Assessment: *Inadequate*

¹³ See § 201.57(c)(4); [Labeling Review Tool \(March 2022, page 29\)](#)

(Provide any revision, if applicable, e.g., different color font, strikethrough, etc.) **Any issues should be listed at the end in “OUTSTANDING ISSUES AND RECOMMENDATIONS”**

1.2.3 Section 11 (DESCRIPTION)¹⁴

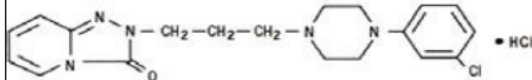
(copy of proposed text)

Item	Item in Proposed Labeling (choose “Adequate”, “Inadequate”, or “N/A”)	Assessor’s Comments (If an item is Inadequate, provide more details on the issues, as appropriate)
DESCRIPTION section		
Proprietary and established name(s) ¹⁵ [§ 201.57(c)(12)(i)(A)].	Adequate	“RALDESY contains trazodone hydrochloride”
Dosage form(s) and route(s) of administration [§ 201.57(c)(12)(i)(B)].	Adequate	“Oral Solution”
If the active ingredient is a salt, apply the USP Salt Policy and include the equivalency statement per Salt Guidance and MAPP . For example: “TRADENAME contains 100 mg of drug-x (equivalent to 123.7 mg of drug-x hydrochloride)” [§ 201.57(c)(12)(i)(C)].	Inadequate	<i>Salt statement was not included – comment to applicant in labeling</i>
List inactive ingredients (not required for oral use, except for colorant) by the USP/NF names in alphabetical order. ¹⁶ Avoid brand names. [§ 201.57(c)(12)(i)(C)].	Inadequate	“Glycerin, Propylene glycol, Sorbitol, Sodium benzoate, Sucralose, Propyl gallate, Disodium edetate, Ortho phosphoric acid and Purified Water.”

¹⁴ See § 201.57(c)(12); [Labeling Review Tool \(March 2022, page 56\)](#)

¹⁵ Use of “USP” descriptor is not required to be included next to the established name throughout Prescribing Information (PI) labeling. If an applicant wants to use the “USP” descriptor next to the established name in the PI, recommend limiting its use to the product quality sections of the Full Prescribing Information (FPI) (i.e., DOSAGE FORMS AND STRENGTHS, DESCRIPTION, HOW SUPPLIED/STORAGE AND HANDLING) (see page 3 of LRT).

¹⁶ Per § 201.100(b)(5)(i) and (ii), flavoring and colorants may be designated as such without naming their components except for FD&C Yellow No 5 and FD&C Yellow No 6, which must be listed per § 201.20. Per § 201.100(b)(5)(iii), trace amounts of harmless substances added solely for individual product identification need not be named. If an applicant wants to use the National Formulary (NF) descriptor next to excipients, recommend limiting its use to the product quality sections of the FPI (see page 3 of LRT). Do not list brand names, e.g., Opadry, Eudragit, Polistirex, etc.

Item	Item in Proposed Labeling (choose "Adequate", "Inadequate", or "N/A")	Assessor's Comments (If an item is Inadequate, provide more details on the issues, as appropriate)
		<i>Comment to applicant to alphabetize in labeling</i>
For parenteral injectable dosage forms, include the name and quantities of all inactive ingredients. For ingredients added to adjust the pH or make isotonic, include the name and statement of effect. [§ 201.100(b)(5)(iii)].	N/A	
If alcohol is present, must provide the amount of alcohol in terms of percent volume of absolute alcohol at 60 °F. (15.56 °C) [§ 201.10(d)(2)].	N/A	
Sterility statement (if applicable) [§ 201.57(c)(12)(i)(D)].	N/A	
Pharmacological/Therapeutic class ¹⁷ [§ 201.57(c)(12)(i)(E)].	Adequate	"a selective serotonin reuptake inhibitor and 5HT2 receptor antagonist"
Chemical name ¹⁸ , structural formula, molecular weight [§ 201.57(c)(12)(i)(F)].	Adequate	"2-[3-[4-(3-chlorophenyl)-1-piperazinyl]propyl]-1,2,4-triazolo [4,3-a]pyridin-3(2H)-one hydrochloride Molecular Formula: C₁₉H₂₂ClN₅O • HCl Molecular Weight: 408.33" 
If radioactive, statement of important nuclear characteristics [§ 201.57(c)(12)(i)(G)].	N/A	

¹⁷ Listed before "indicated for" in INDICATIONS AND USAGE of Highlights section [§ 201.57(a)(6)]; can also search the term "FDA EPC Text Phrases" in [FDA's Labeling Resources for Human Prescription Drugs](#) for the most recent EPC list.

¹⁸ Chemical names do not need to be capitalized unless it appears at the beginning of a sentence (see *Preferred IUPAC Names Provisional Recommendation*, September 2004; Chapter 1, par. 16 Name writing, p.80-90).

Item	Item in Proposed Labeling (choose "Adequate", "Inadequate", or "N/A")	Assessor's Comments (If an item is Inadequate, provide more details on the issues, as appropriate)
Other important chemical or physical properties (such as pKa or pH) [201.57(c)(12)(ii)].	Inadequate	<i>Comment to applicant to include pH in the labeling</i>
For oral prescription drug products, include gluten statement ¹⁹ (if applicable).	N/A	
Remove statements that may be misleading or promotional (e.g., "synthesized and developed by Drug Company X," "structurally unique molecular entity").	N/A	
If there is a USP monograph for the drug product and it contains a labeling requirement, ensure the labeling requirement is fulfilled. Note the labeling requirement may be applicable to another section of the PI (e.g., Section 2).	N/A	

Assessment: *Inadequate*

(Provide any revision, if applicable, e.g., different color font, strikethrough, etc.) **Any issues should be listed at the end in "OUTSTANDING ISSUES AND RECOMMENDATIONS"**

1.2.4 Section 16 (HOW SUPPLIED/STORAGE AND HANDLING)²⁰

(copy of proposed text)

Item	Item in Proposed Labeling (choose "Adequate", "Inadequate", or "N/A")	Assessor's Comments (If an item is Inadequate, provide more details on the issues, as appropriate)
HOW SUPPLIED/STORAGE AND HANDLING section		
Available dosage form(s) [§ 201.57(c)(17)].	Adequate	
Strength(s) in metric system. [§ 201.57(c)(17)(i)] If the active	Adequate	"RALDESY™ contains 10 mg/mL of trazodone hydrochloride"

¹⁹ Draft guidance: [Gluten in Drug Products and Associated Labeling Recommendations \(December 2017\)](#)

²⁰ See § 201.57(c)(17); [Labeling Review Tool \(March 2022, page 70\)](#). Consider including proprietary name and established name.

Item	Item in Proposed Labeling (choose "Adequate", "Inadequate", or "N/A")	Assessor's Comments (If an item is Inadequate, provide more details on the issues, as appropriate)
ingredient is a salt, apply the USP Salt Policy per FDA Guidance . Clearly state whether the strength is based on the active moiety. No equivalency statement.		
Available units (e.g., bottles of 100 tablets) [§ 201.57(c)(17)(ii)].	Adequate	“150 mL amber glass bottle • (b) (4) with child-resistant cap along with a 10 mL calibrated oral dosing syringe. 150 mL white, opaque, high-density polyethylene (HDPE) bottle • (b) (4) with child-resistant cap along with a 10 mL calibrated oral dosing syringe. 300 mL amber glass bottle • (b) (4) child-resistant cap along with a 10 mL calibrated oral dosing syringe. 300 mL white, opaque, HDPE bottle • (b) (4) with child-resistant cap along with a 10 mL calibrated oral dosing syringe. “
Identification of dosage forms (e.g., shape, color, coating, scoring, imprinting, and color and clarity of the solution, when applicable); Include NDC(s) [§ 201.57(c)(17)(iii)].	Adequate	“It is a clear, colorless solution”
Assess if the tablet is scored. If product meets guidelines and criteria for a scored tablet, state “functionally scored.”	N/A	

Item	Item in Proposed Labeling (choose "Adequate", "Inadequate", or "N/A")	Assessor's Comments (If an item is Inadequate, provide more details on the issues, as appropriate)
For injectable drug products for parenteral administration, use appropriate package type term (e.g., single-dose, multiple-dose, single-patient-use). Other package terms include pharmacy bulk package and imaging bulk package (see USP <659>).	N/A	
Special handling about the supplied product (e.g., protect from light, refrigerate). If there is a statement to "Dispense in original container," provide reason why (e.g., to protect from light or moisture, to maintain stability, etc.). For hazardous drugs, state "DRUG X is a hazardous drug. Follow applicable special handling and disposal procedures. ^x " with x numerical citation to "OSHA Hazardous Drugs." [§ 201.57(c)(17)(iv)]	Adequate	"Protect from light, Discard 20 days after opening."
Storage conditions. Where applicable, use USP storage range rather than storage at a single temperature. (see USP <659>).	Adequate	"Store at 20°C to 25°C (68°F to 77°F). Excursions permitted between 15°C to 30°C (59°F to 86°F) [see USP Controlled Room Temperature]."
Latex: If product does not contain latex and manufacturing of product and container did not include use of natural rubber latex or synthetic derivatives of natural rubber latex, state: "Not made with natural rubber latex. Avoid statements such as "latex-free." ²¹	N/A	

²¹ Guidance: [Recommendations for Labeling Medical Products to Inform Users that the Product or Product Container is not Made with Natural Rubber Latex](#) (December 2014)

Item	Item in Proposed Labeling (choose "Adequate", "Inadequate", or "N/A")	Assessor's Comments (If an item is Inadequate, provide more details on the issues, as appropriate)
Include information about child-resistant packaging ²² (if chosen by manufacturer).	Adequate	"with child-resistant cap"

Assessment: *Adequate*

(Provide any revision, if applicable, e.g., different color font, strikethrough, etc.) **Any issues should be listed at the end in "OUTSTANDING ISSUES AND RECOMMENDATIONS"**

1.2.5 Other Sections of Labeling

There may be other sections of labeling that contain product-quality related information. For example, there are specific required/recommended warnings for certain inactive ingredients [e.g., aspartame, aluminum in large and small volume parenterals, sulfites, FD&C Yellow Number 5 (tartrazine), and benzyl alcohol]. Please notify the prescription drug review division if the product contains any of these inactive ingredients.

Please include your comments about other sections of labeling if they contain product quality information.

²² Guidance: [Child-Resistant Packaging Statements in Drug Product Labeling \(August 2019\)](#)

1.2.6 Manufacturing Information After Section 17 (for drug products)²³

Item	Item in Proposed Labeling (choose "Adequate" or "Inadequate")	Assessor's Comments (If an item is Inadequate, provide more details on the issues, as appropriate)
Manufacturing Information After Section 17		
Name and location of business (street address, city, state, and zip code) of the manufacturer, distributor, and/or packer.	Adequate	(b) (4)

Assessment: *Adequate*

(Provide any revision, if applicable, e.g., different color font, strikethrough, etc.) **Any issues should be listed at the end in "OUTSTANDING ISSUES AND RECOMMENDATIONS"**

2.0 PATIENT LABELING

Assessment of Product Quality Related Aspects of Patient Labeling (e.g., Medication Guides, Instructions for Use, Patient Information):

Item	Item in Proposed Labeling (choose "Adequate", "Inadequate", or "N/A")	Assessor's Comments about Labeling (If an item is Inadequate, provide more details on the issues, as appropriate)
Established name ²⁴	Adequate	"trazodone hydrochloride"
Special preparation instructions (if applicable).	N/A	
Storage and handling information (if applicable).	Adequate	"How should I store RALDESY?" Store RALDESY at room temperature between 68°F to 77°F (20°C to 25°C). (b) (4)

²³ § 201.1(h)(5) and 201.1(i); [Labeling Review Tool \(March 2022, page 74\)](#)

²⁴ Established name = [Drug] [Route of Administration] [Dosage Form]

Item	Item in Proposed Labeling (choose "Adequate", "Inadequate", or "N/A")	Assessor's Comments about Labeling (If an item is Inadequate, provide more details on the issues, as appropriate)
		Safely throw away medicine that is out of date or no longer needed."
If the product contains a desiccant, ensure the desiccant has a warning (e.g., "Do not eat.") and the size and shape of the desiccant differ from the dosage form.	N/A	
Active ingredient(s) (if applicable).	Adequate	"Trazodone"
Alphabetical listing of inactive ingredients (if applicable).	Inadequate	"Glycerin, Propylene glycol, Sorbitol, Sodium benzoate, Sucralose, Propyl gallate, Disodium edetate, Ortho-phosphoric acid, Water" <i>Comment to applicant in labeling to alphabetize</i>
Name and location of business (street address, city, state, and zip code) of manufacturer, distributor, and/or packer.	Adequate	(b) (4)

Assessment: *Inadequate*

(Provide any revision, if applicable, e.g., different color font, strikethrough, etc.) **Any issues should be listed at the end in "OUTSTANDING ISSUES AND RECOMMENDATIONS"**

3.0 CONTAINER AND CARTON LABELING²⁵

²⁵ [Carton and Container Labeling Resources](#)

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Item	Item in Proposed Carton Labeling (choose "Adequate", "Inadequate", or "N/A")	Is item in Container Labels same as that of Carton Labeling?	Assessor's Comments about Container Labels and Carton Labeling (If an item is Inadequate or different, provide more details, as appropriate)
Proprietary name and established name ²⁷ , (font size and prominence) [§ 201.10(g)(2)].	Adequate	Yes	Raldesy (trazodone hydrochloride) oral solution
Strength(s) in metric system [§ 201.100(b)(4) & 201.100(d)]. ²⁸	Inadequate	Yes	(b) (4)
Route(s) of administration, not required for oral use [§ 201.100(b)(3)].	Adequate	Yes	Oral solution
If the active ingredient is a salt, include the equivalency statement per Salt Guidance and MAPP [§ 201.10(d)(1) & 201.100(b)(4), USP <1121>].	Inadequate	Choose an item.	
Net contents (e.g., tablet count, volume of liquid) [§ 201.51(a)]. ²⁹	Adequate	Yes	150 mL, 300 mL
"Rx only" displayed on the principal display [§ 201.100(b)(1)].	Adequate	Yes	
NDC (requested, but not required for all labels or labeling) [§ 201.2 & 207.35].	Adequate	Yes	
Lot number and expiration date [§ 201.18 & 201.17].	Adequate	Yes	
Storage conditions. If applicable, include a space on the carton labeling for the user to write the beyond-use-date (BUD).	Inadequate	Choose an item.	

²⁷ Established name = [Drug] [Route of Administration] [Dosage Form]

²⁸ Express as "XX mg per tablet" or "XX mg per capsule" for strength of professional samples of solid oral dosage form with small net quantities per container (e.g., 5 or less) or blister pack/carton. See [Guidance: Safety Considerations for Container Labels and Carton Labeling Design to Minimize Medication Errors \(May 2022\)](#)

²⁹ § 201.51(h): A drug shall be exempt from compliance with the net quantity declaration required by this section if it is an ointment labeled "sample", "physician's sample", or a substantially similar statement and the contents of the package do not exceed 8 grams.

Item	Item in Proposed Carton Labeling (choose "Adequate", "Inadequate", or "N/A")	Is item in Container Labels same as that of Carton Labeling?	Assessor's Comments about Container Labels and Carton Labeling (If an item is Inadequate or different, provide more details, as appropriate)
For injectable drug products for parenteral administration, use appropriate package type term (e.g., single-dose, multiple-dose, single-patient-use). Other package terms include pharmacy bulk package and imaging bulk package, and these products require a "Not for direct infusion" statement. (See USP <659>).	N/A	Choose an item.	
Name of all inactive ingredients, in alphabetical order [§ 201.10(a)] [except for oral drug per § 201.100(b)(5) or limited space per § 201.10(i)(2)].	N/A	Choose an item.	
For parenteral injectable dosage forms, include quantities of all inactive ingredients. For ingredients added to adjust the pH or make isotonic, include the name and statement of effect. [§ 201.100(b)(5)(iii)].	N/A	Choose an item.	
If alcohol is present, must provide the amount of alcohol in terms of percent volume of absolute alcohol at 60 °F. (15.56 °C) [§ 201.10(d)(2)].	N/A	Choose an item.	
Linear Bar code [§ 201.25(c)(2)]. ³⁰	Adequate	Yes	
Adequate directions for use: "Recommended Dosage: See Prescribing Information" [§ 201.5 & 201.55].	Adequate	Yes	Usual dosage: See package insert for full prescribing information

³⁰ See § 201.25(b)(1)(i) for a list where bar code is not required, e.g., prescription drug samples, medical gases, radiopharmaceuticals, etc.

Item	Item in Proposed Carton Labeling (choose "Adequate", "Inadequate", or "N/A")	Is item in Container Labels same as that of Carton Labeling?	Assessor's Comments about Container Labels and Carton Labeling (If an item is Inadequate or different, provide more details, as appropriate)
Name of manufacturer/distributor /packer [§ 201.1(a), 201.1(h)(5)].	Adequate	Yes	(b) (4)
"Keep out of reach of children" statement, optional for Rx, required for OTC [§ 201.66(c)(5)(x)].	N/A	Choose an item.	
If there is a Medication Guide, must include a statement about dispensing a Medication Guide to each patient.	Adequate	Yes	Pharmacist: Dispense the accompanying Medication Guidance to each patient or caregiver
No text on Ferrule and Cap overseal of a vial of injectable products unless a cautionary statement is required. (USP <7>).	Adequate	Yes	
If there is a USP monograph for the drug product and it contains a labeling requirement, ensure the labeling requirement is fulfilled.	N/A	Choose an item.	
When a drug product differs from the relevant USP standard of strength, quality, or purity, as determined by the application of the tests, procedures, and acceptance criteria set forth in the relevant compendium, its difference shall be plainly stated on its label. ³¹	N/A	Choose an item.	
And others if space is available.	N/A	Choose an item.	

³¹ USP General Notices 3.20 Indicating Conformance

Assessment of Carton Labels and Container Labeling: *Inadequate*

Any issues should be listed at the end in “OUTSTANDING ISSUES AND RECOMMENDATIONS”

Information Requests:

1. ***Change the strength labeling on the carton/container labels from (b) (4) to 10 mg/mL. Additionally, we note the text (b) (4) This text should also be updated to “Each mL contains: 10 mg Trazodone Hydrochloride, USP”.***
2. ***Include a space on the carton labeling for the user to write the beyond-use-date (BUD).***

4. OUTSTANDING ISSUES AND RECOMMENDATIONS

Assess consistency of product-quality information in prescription drug labeling (PI, c/c labeling, and FDA-approved patient labeling). See [Carton/Container Labeling Specific Resources](#) for a presentation about inappropriate inconsistencies of product quality information between labeling. If there are inappropriate inconsistencies between the labeling (e.g., established name, strength(s), package type term, discard statement, identifying characteristics, storage, reconstitution/dilution instructions), please list these issues in this section.

Primary Labeling Assessor Name and Date: Eric Bow, Ph.D.

Secondary Assessor Name and Date (and Secondary Summary, as needed): Julia Pinto, Ph.D.



Eric
Bow

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Julia
Pinto

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CHAPTER VII: MICROBIOLOGY

[IQA NDA Assessment Guide Reference](#)

Product Information	
NDA Number	218637
Assessment Cycle Number	01
Drug Product Name/ Strength	Trazodone Hydrochloride 100 mg / 10 mL
Route of Administration	Oral Solution
Applicant Name	Kamat Pharmatech LLC
Therapeutic Classification/ OND Division	CDER/OND/ON/DP
Manufacturing Site	Rubicon Research Private Limited J-4/2 Additional MIDC, Satara, Maharashtra, 415004, IN FEI: 3012953979
Method of Sterilization	N/A; non-sterile

Assessment Recommendation: Adequate

Assessment Summary: The application is adequate from the standpoint of product quality microbiology.

List Submissions being assessed (table):

Document(s) Assessed	Date Received
Seq 010	04/29/2024
Seq 005	01/12/2024
Seq 003	07/25/2023

Highlight Key Issues from Last Cycle and Their Resolution: N/A

Remarks: The drug product is a non-sterile clear, colorless oral solution indicated for the treatment of major depressive disorder (MDD) in adults that comes in 150 or 300 mL round high-density polyethylene (HDPE) bottle as well as 150- or 300-mL amber glass bottle. All four bottles are closed with a 28 mm (b) (4) child resistant closure. Trazodone Hydrochloride is a multi-dose product (b) (4) (b) (4)

Concise Description of Outstanding Issues: N/A

Supporting Documents: N/A

S DRUG SUBSTANCE

The manufacturing process for the drug substance is not reviewed because the drug substance is non-sterile.

P.1 DESCRIPTION OF THE COMPOSITION OF THE DRUG PRODUCT

- **Description of drug product** – Section [3.2.P.1](#). The drug product is a multi-dose non-sterile oral solution that contains 10 mg/mL Trazodone Hydrochloride.
- **Drug product composition** – Section [3.2.P.1](#)

Ingredient	Quantity per (mg/mL)	Function
Trazodone Hydrochloride	10.00	Drug Substance
Glycerin	(b) (4)	(b) (4)
Propylene glycol		
Sorbitol		
Sodium Benzoate		
Sucralose		
Propyl gallate		
Disodium Edetate		
Ortho Phosphoric Acid		
Purified Water	q.s. to mL	(b) (4)

- **Description of container closure system** – Section [3.2.P.1, p.9 of 9](#), [3.2.P.7](#)

Strength	Pack	Container	Closure	Manufacturer
100 mg / 10 mL (10 mg/mL)	150 mL	150 mL Amber Glass Bottle	28 mm Child Resistant (b) (4) Closure	(b) (4)
		150 cc White Opaque HDPE Bottle	28 mm Child Resistant (b) (4) Closure with	

			(b) (4)	(b) (4)
	300 mL	300 mL Amber Glass Bottle	28 mm Child Resistant (b) (4) Closure	
		300 cc White Opaque HDPE Bottle	28 mm Child Resistant (b) (4) Closure with (b) (4)	

Assessment: Adequate

The applicant provided an adequate description of the drug product composition and container closure system.

P.2 PHARMACEUTICAL DEVELOPMENT



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KellyAnn
Miller

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Valerie
Amspacher

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/s/

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