

Contains Nonbinding Recommendations

Draft – Not for Implementation

Notifying FDA of a Permanent Discontinuance or Interruption in Manufacturing of a Device Under Section 506J of the FD&C Act

Draft Guidance for Industry and Food and Drug Administration Staff

DRAFT GUIDANCE

This draft guidance document is being distributed for comment purposes only.

Document issued on January 11, 2022.

You should submit comments and suggestions regarding this draft document within 90 days of publication in the *Federal Register* of the notice announcing the availability of the draft guidance. Submit electronic comments to <https://www.regulations.gov>. Submit written comments to the Dockets Management Staff, Food and Drug Administration, 5630 Fishers Lane, Room 1061, (HFA-305), Rockville, MD 20852. Identify all comments with the docket number listed in the notice of availability that publishes in the *Federal Register*.

For questions about this document regarding CDRH-regulated devices, contact CDRHManufacturerShortage@fda.hhs.gov. For questions about this document regarding CBER-regulated devices, contact the Office of Communication, Outreach, and Development (OCOD) at 1-800-835-4709 or 240-402-8010, or by email at ocod@fda.hhs.gov.

Contains Nonbinding Recommendations

Draft – Not for Implementation

Preface

Additional Copies

CDRH

Additional copies are available from the Internet. You may also send an email request to CDRH-Guidance@fda.hhs.gov to receive an additional copy of the guidance. Please include the document number 21003 and complete title of the guidance in the request.

CBER

Additional copies are available from the Center for Biologics Evaluation and Research (CBER), Office of Communication, Outreach, and Development (OCOD), 10903 New Hampshire Ave., Bldg. 71, Room 3128, Silver Spring, MD 20993-0002, or by calling 1-800-835-4709 or 240-402-8010, by email, ocod@fda.hhs.gov, or from the Internet at <https://www.fda.gov/vaccines-blood-biologics/guidance-compliance-regulatory-information-biologics/biologics-guidances>.

Table of Contents

I.	Introduction.....	1
II.	Background.....	2
III.	Policy for Notifying FDA of an Interruption or Permanent Discontinuance in Manufacturing.....	3
	A. Who Must Notify	3
	B. When to Notify.....	4
	(1) Permanent discontinuances, interruptions in manufacturing and meaningful disruptions in supply.....	6
	(2) During or in advance of a public health emergency.....	7
	C. What Information To Include in 506J Notifications	8
	D. How to Notify.....	10
	E. Failure to Notify	10
IV.	FDA’s Determination That a Device Is In Shortage.....	11
	A. How FDA Determines What Devices Are In Shortage.....	11
	B. FDA’s List of Devices Determined to Be In Shortage.....	11
	C. Expedited Inspections and Reviews.....	12
	Appendix A. Example 506J Notification.....	13

Notifying FDA of a Permanent Discontinuance or Interruption in Manufacturing of a Device Under Section 506J of the FD&C Act

Draft Guidance for Industry and Food and Drug Administration Staff

This draft guidance, when finalized, will represent the current thinking of the Food and Drug Administration (FDA or Agency) on this topic. It does not establish any rights for any person and is not binding on FDA or the public. You can use an alternative approach if it satisfies the requirements of the applicable statutes and regulations. To discuss an alternative approach, contact the FDA staff or Office responsible for this guidance as listed on the title page.

I. Introduction

The Food and Drug Administration (FDA or Agency) is issuing this guidance to implement section 506J of the Federal Food, Drug, and Cosmetic Act (FD&C Act) (21 U.S.C. 356j), as added by section 3121 of the Coronavirus Aid, Relief, and Economic Security Act (CARES Act), as it relates to notifying FDA of a permanent discontinuance or interruption in the manufacturing of a device that is likely to lead to a meaningful disruption in the supply of that device during or in advance of a public health emergency.

FDA plays a critical role in protecting the United States from threats, such as emerging infectious diseases, and other public health emergencies. Section 506J of the FD&C Act requires manufacturers to notify FDA, during or in advance of a public health emergency, of a permanent discontinuance in the manufacture of certain devices or an interruption in the manufacture of certain devices that is likely to lead to a meaningful disruption in supply of that device in the United States.¹ This guidance is intended to assist manufacturers in providing timely, informative notifications about changes in the production of certain medical device products that will help prevent or mitigate shortages of such devices. This guidance also recommends that manufacturers voluntarily provide additional details to better ensure FDA has the specific

¹ See section 506J(a) of the FD&C Act.

Contains Nonbinding Recommendations

Draft – Not for Implementation

33 information it needs to help prevent or mitigate shortages during or in advance of a public health
34 emergency.

35
36 FDA is issuing this guidance to assist stakeholders in the Agency’s implementation of section
37 506J of the FD&C Act outside of the COVID-19 public health emergency, and will serve as the
38 baseline for information about notifications under section 506J of the FD&C Act during or in
39 advance of any public health emergency. This draft guidance is not intended to supersede the
40 COVID-19 Public Health Emergency Guidance, “[Notifying CDRH of a Permanent](#)
41 [Discontinuance or Interruption in Manufacturing of a Device under Section 506J of the FD&C](#)
42 [Act during the COVID-19 Public Health Emergency](#)”², which will be withdrawn at the end of
43 the COVID-19 Public Health Emergency. Should this guidance be finalized before the COVID-
44 19 public health emergency declaration expires or is terminated, the [COVID-19 Public Health](#)
45 [Emergency Guidance](#) will be applicable for 506J related issues with respect to COVID-19.

46
47 The contents of this document do not have the force and effect of law and are not meant to bind
48 the public in any way, unless specifically incorporated into a contract. This document is intended
49 only to provide clarity to the public regarding existing requirements under the law. FDA
50 guidance documents, including this guidance, should be viewed only as recommendations, unless
51 specific regulatory or statutory requirements are cited. The use of the word *should* in Agency
52 guidance means that something is suggested or recommended, but not required.

53

54 **II. Background**

55 On March 27, 2020, the CARES Act was signed into law. Section 3121 of the CARES Act
56 amends the FD&C Act by adding section 506J to the statute. Section 506J provides the FDA
57 with new authorities intended to help prevent or mitigate medical device shortages³ “during, or
58 in advance of, a public health emergency declared by the Secretary under section 319 of the
59 Public Health Service (PHS) Act.”⁴

60
61 Under section 506J(a) of the FD&C Act, manufacturers of certain devices,⁵ as described in more
62 detail in Section III of this guidance, are required to notify FDA “of a permanent discontinuance
63 in the manufacture of the device” or “an interruption in the manufacture of the device that is
64 likely to lead to a meaningful disruption in supply of that device in the United States” during or
65 in advance of a declared public health emergency.⁶

66

² See FDA guidance on “Notifying CDRH of a Permanent Discontinuance or Interruption in Manufacturing of a Device Under Section 506J of the FD&C Act During the COVID-19 Public Health Emergency (Revised)” available at <https://www.fda.gov/regulatory-information/search-fda-guidance-documents/notifying-cdrh-permanent-discontinuance-or-interruption-manufacturing-device-under-section-506j-fdc>.

³ “Shortage” is defined as “a period of time when the demand or projected demand for the device within the United States exceeds the supply of the device.” See section 506J(i)(2) of the FD&C Act.

⁴ See section 506J(a) of the FD&C Act.

⁵ See section 506J(a) and (b) of the FD&C Act.

⁶ See section 506J(a) of the FD&C Act.

Contains Nonbinding Recommendations

Draft – Not for Implementation

67 If a manufacturer fails to submit the information required under section 506J(a) in accordance
68 with the timing set forth in section 506J(b) of the FD&C Act, section 506J(e) of the FD&C Act
69 requires FDA to issue a letter informing them of such failure.⁷ In addition, under section 506J(f)
70 of the FD&C Act, if FDA concludes that there is, or is likely to be, a shortage of a device, then
71 inspections as well as review of submissions may be prioritized and expedited to help mitigate or
72 prevent shortages. Section 506J(g) of the FD&C Act also requires FDA to establish and maintain
73 a publicly available, up-to-date list of the devices determined to be in shortage.

74
75 FDA is issuing this guidance to clarify and make recommendations regarding who should notify
76 FDA, what information to include in the notification, and how to notify FDA, during or in
77 advance of a public health emergency, regardless of the type of public health emergency. During
78 a specific public health emergency, FDA may issue additional supplemental information to this
79 guidance, through supplemental guidance, FDA’s website, or other communications, to assist
80 manufacturers in providing a notification under section 506J of the FD&C Act (hereafter referred
81 to as a “506J notification”).

83 **III. Policy for Notifying FDA of an Interruption or** 84 **Permanent Discontinuance in Manufacturing**

85 **A. Who Must Notify**

86 Under section 506J(a)(1) – (2) of the FD&C Act, manufacturers of the following devices must
87 submit notifications of a permanent discontinuance or an interruption in manufacturing that is
88 likely to lead in a meaningful supply disruption of that device:

- 89 • Devices that are critical to public health during a public health emergency, including
90 those that are life-supporting, life-sustaining, or intended for use in emergency medical
91 care or during surgery;⁸ or
- 92 • Devices for which FDA determines information on potential meaningful supply
93 disruptions is needed during, or in advance of, a public health emergency.⁹

94
95 During or in advance¹⁰ of a public health emergency, FDA may recommend to manufacturers
96 devices or device types we consider to be critical to public health during that public health
97 emergency under section 506J(a)(1) of the FD&C Act. For example, during the COVID-19
98 pandemic, FDA created a table of device types and corresponding product codes identifying
99 devices that FDA believes to be critical to the public health during a public health emergency
100 under section 506J(a)(1) of the FD&C Act, which manufacturers should consider to determine
101 whether they are required to notify FDA.¹¹ During or in advance of other public health

⁷ See section 506J(e) of the FD&C Act.

⁸ See section 506J(a)(1) of the FD&C Act.

⁹ See section 506J(a)(2) of the FD&C Act.

¹⁰ Refer to Section III.B.(2) “During or in advance of a public health emergency” of this guidance for more information.

¹¹ See FDA website on “Medical Device Types to Help Determine Section 506J Notification Obligations” available at <https://www.fda.gov/medical-devices/coronavirus-covid-19-and-medical-devices/medical-device-types-help-determine-section-506j-notification-obligations>.

Contains Nonbinding Recommendations

Draft – Not for Implementation

102 emergencies, FDA may take a similar approach, or other approaches, as appropriate. FDA may
103 also identify devices or device types for which we have determined that information on
104 meaningful supply disruptions is needed under section 506J(a)(2) of the FD&C Act.
105 Manufacturers of devices that FDA has identified under section 506J(a)(1) – (2) should consider
106 whether there is a permanent discontinuance or interruption in manufacturing and submit
107 appropriate notifications to FDA.

108
109 For purposes of this guidance, FDA interprets the term “manufacturer” to mean the entity that
110 holds the medical device marketing submission authorization, or, if a medical device marketing
111 submission is not required, the entity responsible for listing the medical device under section
112 510(j) of the FD&C Act. If a manufacturer makes a device described in section 506J(a)(1) – (2)
113 that has marketing authorization from FDA, or is listed under section 510(j) of the FD&C Act,
114 that device is subject to a 506J notification. Manufacturers of devices should use the term
115 “device” as defined in section 201(h) of the FD&C Act.

116
117 Section 506J of the FD&C Act requires manufacturers of devices that are critical to public health
118 during a public health emergency, or for which FDA determines information on potentially
119 meaningful supply disruptions is needed during a public health emergency, to notify FDA of an
120 interruption or permanent discontinuance in manufacturing of such devices. If manufacturers are
121 unsure of whether they are required to notify, FDA recommends that manufacturers evaluate the
122 following circumstances to determine whether they manufacture devices for which a notification
123 is required during or in advance of a public health emergency:

- 124 • Whether the device (with or without accessories) is life-supporting, life-sustaining, or
125 intended for use in emergency medical care (examples could include extracorporeal
126 life support, hemodialysis equipment, and automated external defibrillators);
- 127 • Whether the device (with or without accessories) is intended for use during surgery
128 (examples could include cardiopulmonary bypass oxygenators, and infusion pumps
129 and tubing);
- 130 • Whether the device (with or without accessories and/or testing supplies) is used to
131 diagnose, cure, treat, mitigate, or prevent a disease that is related to a pandemic or
132 other public health emergency (examples could include specific supplies from
133 diagnostic and serological specimen collection kits, pulse oximeters, and cardiac and
134 other monitoring equipment); or
- 135 • Whether the device (with or without accessories) would be in higher-than-typical
136 demand during the response to a pandemic or other public health emergency
137 compared to a similar period of time (examples could include personal protective
138 equipment and personal oxygen concentrators).

139
140 If a manufacturer is not certain whether to notify FDA about a particular device or interruption,
141 we recommend the manufacturer contact the Agency at
142 CDRHManufacturerShortage@fda.hhs.gov for devices regulated by CDRH or
143 cbershortage@fda.hhs.gov for devices regulated by CBER.

144 **B. When to Notify**

Contains Nonbinding Recommendations

Draft – Not for Implementation

146 Manufacturers must submit a notification at least six months in advance of a permanent
147 discontinuance in manufacturing of a device or an interruption in manufacturing of a device that
148 is likely to lead to a meaningful disruption in supply of the device in the United States.¹² If that
149 timeframe is not possible, notification should be done “as soon as is practicable.”¹³

150
151 For purposes of this guidance, FDA considers “as soon as practicable” to mean that a
152 manufacturer should notify FDA no later than 7 calendar days after an interruption in
153 manufacturing occurs, or no later than 7 calendar days after the manufacturer decides to
154 permanently discontinue the device, as applicable. In FDA’s experience, even if it is not possible
155 for an applicant to notify the Agency before a permanent discontinuance or an interruption that is
156 likely to lead to a meaningful disruption in supply of the device, it should generally be possible
157 for the applicant to provide notice within a day or two, and it should always be possible for the
158 applicant to notify the Agency no later than 7 calendar days after the permanent discontinuance
159 or meaningful interruption occurs. With sufficient notice, FDA can work with the manufacturer
160 and other stakeholders to potentially prevent and mitigate shortages, helping prevent negative
161 impacts to patients and healthcare personnel.

162
163 If the circumstances giving rise to a manufacturer’s 506J notification change after notifying
164 FDA, the manufacturer should notify FDA of this change in status. For example, if the situation
165 that caused an interruption in manufacturing has resolved, or the manufacturer has changed the
166 date on which the discontinuance will take effect, the manufacturer should notify FDA of this
167 information.

168
169 After the initial 506J notification of an interruption in manufacturing, FDA recommends that
170 manufacturers provide updates every two weeks unless otherwise indicated based on the nature
171 of the situation, including the expected timeline for recovery, even if the status remains
172 unchanged. These updates are important to ensure that FDA can act on the most current
173 information. We recommend such updates be submitted until the shortage risk has been resolved.
174 FDA may contact manufacturers that have not submitted updates and request that the
175 manufacturer provide the most current information on the situation.

176
177 FDA welcomes any information that manufacturers wish to provide voluntarily at any time to
178 help understand the status of the supply chain and help protect the public health.

179

¹² See section 506J(b)(1) of the FD&C Act.

¹³ See section 506J(b)(2) of the FD&C Act.

Contains Nonbinding Recommendations

Draft – Not for Implementation

180 **(1) Permanent discontinuances, interruptions in manufacturing**
181 **and meaningful disruptions in supply**

182 For purposes of this guidance, FDA interprets a “permanent discontinuance” to mean when the
183 manufacturer ceases manufacturing and distributing a product indefinitely for business or other
184 reasons.¹⁴

185
186 For purposes of this guidance, FDA interprets “interruptions in manufacturing” to include those
187 that occur as a result of a decrease in manufacturing capability or an increase in demand due to
188 the current or potential public health emergency. Manufacturers experiencing an increase in
189 demand of a device relating to a response in a public health emergency (e.g., for the detection,
190 treatment, or prevention of a disease relating to a pandemic, Chemical, Biological, Radiological,
191 Nuclear, or high yield Explosive (CBRNE) event, or natural disaster) should notify FDA of this
192 interruption. Manufacturers experiencing normal variations in product demand generally should
193 not submit a notification. Similarly, manufacturers experiencing an increase in demand for a
194 device due to a temporary market response (e.g., demand for a newer version or model) generally
195 should not submit a notification.

196
197 The term “meaningful disruption” is defined in section 506J(i)(1)(A) of the FD&C Act as “a
198 change in production that is reasonably likely to lead to a reduction in the supply of a device by a
199 manufacturer that is more than negligible and affects the ability of the manufacturer to fill orders
200 or meet expected demand for its product.” For purposes of this guidance, we interpret this to
201 mean that a manufacturer should base its reporting on its own capacity, supply, and orders, and
202 should not consider other manufacturers’ or competitors’ capacities or assumed capacities, or
203 what it understands about market demand for the device.

204
205 Section 506J(i)(1) of the FD&C Act also provides that the term “meaningful disruption” does not
206 include:

- 207
- 208 • “[I]nterruptions in manufacturing due to matters such as routine maintenance or
209 insignificant changes in manufacturing, so long as the manufacturer expects to resume
210 operations in a short period of time, not to exceed six months;”¹⁵
 - 211 • “[I]nterruptions in manufacturing of components or raw materials, so long as such
212 interruptions do not result in a shortage of the device, and the manufacturer expects to
213 resume operations in a reasonable period of time.”¹⁶ For purposes of this guidance, FDA
214 believes a “reasonable period of time” would not exceed one month.
 - 215 • “[I]nterruptions in manufacturing that do not lead to a reduction in procedures or
216 diagnostic tests associated with a medical device designed to perform more than one

¹⁴ Section 506J makes clear that manufacturers are not required to notify of permanent discontinuances that occur “as a result of an approved modification of the device.” See section 506J(a) (“A manufacturer of a device...shall...notify... of a permanent discontinuance in the manufacture of the device (*except for discontinuances as a result of an approved modification of the device*)...”) (emphasis added).

¹⁵ See section 506J(i)(1)(B) of the FD&C Act.

¹⁶ See section 506J(i)(1)(C) of the FD&C Act.

Contains Nonbinding Recommendations

Draft – Not for Implementation

217 procedure or diagnostic test.”¹⁷ For devices designed to perform more than one procedure
218 or diagnostic or serological test, manufacturers should provide notification of any
219 interruption that could lead to reduction in any of the procedures or testing capabilities.
220 For example, if a device can be used for five types of procedures, and the manufacturing
221 interruption means only four types of procedures can be performed, the manufacturer
222 should notify FDA.
223

224 Permanent discontinuances are required to be reported within the timeframe prescribed by
225 section 506J(b) of the FD&C Act through the process explained in Section III.D. of this
226 guidance. If a manufacturer is considering taking an action that may lead to a meaningful
227 disruption in the supply of a device (e.g., transfer of ownership, or holding production to
228 investigate a quality issue), FDA requests that the manufacturer notify FDA immediately through
229 the process explained in Section III.D. of this guidance. In addition, if a manufacturer is ordered
230 by another United States government entity to take an action that diverts supply from the
231 originally intended customer, FDA requests that the manufacturer notify FDA using the process
232 explained in Section III.D. of this guidance.
233

(2) During or in advance of a public health emergency

234
235 For purposes of this guidance, FDA interprets “during . . . a public health emergency” to mean
236 the time period when the Health and Human Services (HHS) Secretary declares a public health
237 emergency under section 319 of the PHS Act, and includes any renewals made by the HHS
238 Secretary in accordance with section 319(a)(2) of the PHS Act (42 U.S.C. 247d(a)(2)).
239

240 For purposes of this guidance, FDA interprets “in advance of a public health emergency” to
241 mean the time period before the Secretary may determine that a disease or disorder presents a
242 public health emergency or that a public health emergency including significant outbreaks of
243 infectious diseases or bioterrorist attacks otherwise exists. If certain conditions exist prior to the
244 occurrence of an outbreak or natural disaster that signal the potential for such event to occur and
245 that may lead to the declaration of a public health emergency, FDA considers such conditions to
246 be “in advance of a public health emergency.” When FDA becomes aware of such conditions
247 that are in advance of a public health emergency, the Agency may conduct outreach to or
248 otherwise notify manufacturers to alert them of the situation and the applicability of section 506J
249 of the FD&C Act.
250

251 Manufacturers should notify FDA of a potential discontinuance or interruption if any of the
252 following occur prior to a public health emergency being declared (note that this list is not
253 intended to be exhaustive):
254

- 255 • HHS activates the National Disaster Medical System or deploys the Strategic National
256 Stockpile without yet determining a public health emergency under section 319 of the
257 PHS Act;

¹⁷ See section 506J(i)(1)(D) of the FD&C Act.

Contains Nonbinding Recommendations

Draft – Not for Implementation

- 258 • HHS authorizes assistance for research, investigations, demonstration, and studies into
259 the causes, diagnosis, treatment, control, and prevention of a physical or mental disease
260 under section 301 of the PHS Act;
- 261 • HHS authorizes assistance in the prevention and suppression of communicable diseases
262 under section 311 of the PHS Act;
- 263 • HHS authorizes FDA to issue an Emergency Use Authorization (EUA) for a drug,
264 biological product, or device intended for use in an actual or potential emergency
265 (“emergency use;” under section 564 of the FD&C Act);
- 266 • HHS accesses the Public Health Emergency Fund and/or has enabled the Centers for
267 Disease Control and Prevention Director to access the Infectious Diseases Rapid
268 Response Reserve Fund prior to declaring a public health emergency;
- 269 • HHS determines that a disease or disorder, including a novel and emerging public health
270 threat, is significantly likely to become a public health emergency for purposes of
271 waiving the Paperwork Reduction Act under section 319(f) of the PHS Act;
- 272 • Other Federal or State agencies determine that there is an actual or significant potential
273 for a domestic emergency involving a heightened risk of attack with a biological,
274 chemical, radiological, or nuclear agent(s); or
- 275 • Other Federal or State agencies determine that there is a military emergency, or a
276 significant potential for a military emergency, involving a heightened risk to United
277 States military forces with a biological, chemical, radiological, or nuclear agent or agents.
278

279 In addition, because of the potential for a CBRNE event or widespread treatment-resistant
280 outbreaks (e.g., methicillin-resistant *Staphylococcus aureus* (MRSA) outbreak) leading to a
281 public health emergency, FDA recommends that manufacturers submit a notification with
282 respect to a CBRNE event to enable FDA to work more effectively with manufacturers and
283 entities to prevent or limit any negative impact on patients or healthcare providers.
284

285 A public health emergency may be identified in a specific geographical area that has the
286 potential to impact a larger geographical area. Due to the vulnerability of the medical device
287 supply chain, a localized interruption in the supply or demand of a product may have an impact
288 on the national availability of a product. Manufacturers experiencing an interruption during a
289 public health emergency related to a localized event that has the potential to lead to a meaningful
290 disruption of the supply of the device in the United States should notify the Agency under
291 section 506J of the FD&C Act.
292

293 If a manufacturer is not certain whether to notify FDA, we recommend the manufacturer contact
294 the Agency at CDRHManufacturerShortage@fda.hhs.gov for devices regulated by CDRH or
295 cbershortage@fda.hhs.gov for devices regulated by CBER.
296

C. What Information To Include in 506J Notifications

298 Per section 506J(a) of the FD&C Act,¹⁸ manufacturers of the devices identified in Section III.A.
299 of this guidance must submit notifications of:

¹⁸ See section 506J(a) of the FD&C Act.

Contains Nonbinding Recommendations

Draft – Not for Implementation

- 300
- 301
- 302
- 303
- 304
- “a permanent discontinuance in the manufacture of the device (except for discontinuances as a result of an approved modification of the device);” or
 - “an interruption of the manufacture of the device that is likely to lead to a meaningful disruption in the supply of that device in the United States;” and
 - “the reasons for such discontinuance or interruption.”

305

306 When providing a 506J notification, in addition to the information described in section 506J(a)

307 of the FD&C Act, the manufacturer should also provide FDA with appropriate identifying

308 information, such as marketing submission holder name, marketing submission number (if

309 applicable), manufacturer name (if manufacturer different from marketing submission holder),

310 FDA Establishment Identifier (FEI) number, device name, product code, and contact

311 information. Having this information enables FDA to appropriately identify the specific device

312 for which the 506J notification has been submitted.

313

314 It is important to note that manufacturers do not need to have all of the information before

315 submitting a 506J notification; 506J notifications can be updated at any time to include

316 additional information. Therefore, we recommend that manufacturers not delay notifying the

317 Agency until all information is available, but instead recommend that they provide initial 506J

318 notification as soon as is practicable and additional information as it becomes available. If

319 manufacturers do not notify FDA within the timelines specified in section 506J(b), FDA requests

320 that manufacturers explain why such timeline was not possible.

321

322 FDA recommends that manufacturers submit additional information that could inform the

323 Agency of current supply chain pressures, including indications of:

- 324
- 325
- 326
- 327
- 328
- 329
- 330
- 331
- 332
- 333
- 334
- Manufacturing pressures (e.g., labor shortages, delays in raw material supply, temporary plant closures, packaging or sterilization concerns, other unforeseen circumstances that prevent fulfillment);
 - Distribution pressures (e.g., shipping/transportation challenges, export/import challenges, procurement issues);
 - Increased or projected increased demand (e.g., backorder, allocation, low fulfillment rates);
 - Potential broader/connected interruptions (e.g., reliance on critical suppliers who are experiencing supply chain interruptions); and
 - Actions or circumstances affecting software-enabled devices that may disrupt healthcare operations (e.g., device cybersecurity vulnerabilities or exploits).

335

336 FDA also recommends that manufacturers submit information that could help the Agency better

337 assess the overall state of the market and help inform potential mitigations, including:

- 338
- 339
- 340
- 341
- 342
- 343
- Potential prevention or mitigation strategies, including stakeholder and customer communications; and
 - Inventory and production capacity, including potential expansion capabilities (e.g., estimated market share, historic and current production capacity, maximum production volume).

Contains Nonbinding Recommendations

Draft – Not for Implementation

344 This additional voluntary information is intended to enable us to work more effectively with
345 other agencies and supply chain partners to prevent or mitigate any negative impact on patients
346 or healthcare providers. FDA may on occasion request specific additional information depending
347 on the type of public health emergency. In addition, to inform possible mitigation efforts, FDA
348 may follow up with manufacturers or conduct targeted outreach where an interruption is cross-
349 cutting or may have the potential to impact users.

350
351 Appendix A of this guidance provides an example of the information that FDA recommends be
352 included in a 506J notification and examples of reasons for the discontinuance or interruption, as
353 well as the other voluntary information described above.

354
355 Any information provided to FDA that is trade secret or confidential information will be treated
356 as such, consistent with section 552(b)(4) of title 5, United States Code, section 1905 of title 18,
357 United States Code, and other applicable laws.¹⁹

358

D. How to Notify

359
360 [FDA's website](#)²⁰ contains information about submitting 506J notifications to CDRH. If you have
361 questions, you can contact CDRH at CDRHManufacturerShortage@fda.hhs.gov and include
362 "Question" in the subject line of the email. To notify CBER or ask questions about CBER-
363 regulated devices, you can contact the CBER at cbershortage@fda.hhs.gov and include
364 "Question" in the subject line of the email.

365

E. Failure to Notify

366
367 If a manufacturer fails to provide notification of a permanent discontinuance or an interruption in
368 manufacturing as required by section 506J(a) of the FD&C Act and in accordance with the
369 timelines set forth in section 506J(b) of the FD&C Act, FDA will issue a letter to that
370 manufacturer informing the manufacturer of such failure.²¹ The manufacturer must respond to
371 FDA's letter not later than 30 calendar days after issuance of FDA's letter, setting forth the basis
372 for noncompliance and providing the required information on the discontinuance or interruption
373 per section 506J(a) of the FD&C Act.²² Not later than 45 calendar days of issuance of the letter
374 to the manufacturer, FDA will make that letter and any response received available to the public
375 on FDA's website with appropriate redactions to protect trade secrets or confidential commercial
376 information.²³ However, FDA will not post the letter and response if the Agency determines that
377 the letter was issued in error or, after review of the manufacturer's response, that the
378 manufacturer had a reasonable basis for not notifying FDA as required.²⁴

379

¹⁹ See section 506J(d) of the FD&C Act.

²⁰ See FDA website on "Contact the FDA About a Medical Device Supply Chain Issue," available at <https://www.fda.gov/medical-devices/medical-device-safety/contact-fda-about-medical-device-supply-chain-issue>.

²¹ See section 506J(e)(1) of the FD&C Act.

²² See section 506J(e)(2) of the FD&C Act.

²³ See section 506J(e)(3) of the FD&C Act.

²⁴ See section 506J(e)(3) of the FD&C Act.

380 **IV. FDA’s Determination That a Device Is In Shortage**

381 “Shortage” is defined as “a period of time when the demand or projected demand for the device
382 within the United States exceeds the supply of the device.”²⁵

383
384 In determining whether a medical device is in shortage, FDA considers factors such as the
385 relevant information and data available to the Agency, including indications of supply
386 disruptions received through 506J notifications and voluntary manufacturer notifications.

387
388 The analysis of information related to potential device shortages informs FDA’s work related to
389 other measures FDA uses to help address the public health emergency, including issuance of
390 EUAs for products that play an important role in meeting demand.²⁶ The analysis of information
391 related to potential device shortages also informs FDA’s consideration of additional mechanisms
392 for addressing device supply availability, including use of enforcement discretion, expediting
393 inspections or premarket reviews, and working with other federal partners.

394

395 **A. How FDA Determines What Devices Are In Shortage**

396 FDA carefully reviews each 506J notification we receive, and uses this information, along with
397 additional information on the supply and demand of the device, to determine whether a device is
398 in shortage. The other information FDA reviews in making shortage determinations includes, but
399 is not limited to:

- 400 • Indications of supply disruptions (e.g., 506J notifications and voluntary manufacturer
401 information);
- 402 • Indications of distribution pressures (e.g., from distributors and group purchasing
403 organizations);
- 404 • Indications of demand or projected demand, such as availability issues reported from
405 users (e.g., patients, healthcare providers, hospitals and healthcare facilities, nursing
406 homes, and associations representing these groups);
- 407 • International factors (e.g., export restriction); and
- 408 • Certain actions taken to prevent or mitigate shortages including, but not limited to,
409 actions taken by manufacturers, FDA, or other stakeholders.

410

411 In determining whether a medical device is in shortage, FDA considers the entirety of relevant
412 and reliable information and data available to the Agency at the time of a decision.

413

414 **B. FDA’s List of Devices Determined to Be In Shortage**

415 Section 506J(g) of the FD&C Act requires the establishment and maintenance of an up-to-date
416 list of medical devices that have been determined to be in shortage. This list also identifies
417 medical devices for which there has been notification that manufacturing has been permanently

²⁵ See section 506J(i)(2) of the FD&C Act.

²⁶ During a public health emergency, certain products may only be available under an EUA, which requires, among other things, that there be no adequate, approved, and available alternatives. See section 564(c) of the FD&C Act.

Contains Nonbinding Recommendations

Draft – Not for Implementation

418 discontinued (“a discontinuance”). [FDA’s website](#)²⁷ contains a list that fulfills this statutory
419 obligation and will reflect the categories of devices FDA has determined to be in shortage. The
420 list will be maintained and updated as information relating to a shortage evolves. FDA publishes
421 this device shortages list to provide transparency to the American public, particularly those who
422 use and/or purchase medical devices.

423
424 As outlined by section 506J(g)(2) of the FD&C Act, this list includes the category or name of the
425 device in shortage, the name of each manufacturer, the reason for the shortage, and the estimated
426 shortage duration. The basis for the interruption identified on the list is determined by FDA
427 considering the following factors and categories:

- 428 • Requirements related to complying with good manufacturing practices (see section
429 506J(g)(2)(C)(i));
- 430 • Regulatory delay (see section 506J(g)(2)(C)(ii));
- 431 • Shortage or discontinuance of a component, part, or accessory of the device (see section
432 506J(g)(2)(C)(iii))
- 433 • Discontinuance of the manufacture of the device (see section 506J(g)(2)(C)(iv));
- 434 • Delay in shipping of the device (see section 506J(g)(2)(C)(v));
- 435 • Delay in sterilization of the device (see section 506J(g)(2)(C)(vi));
- 436 • Increase in demand for the device (see section 506J(g)(2)(C)(vii)); and/or
- 437 • Facility closure (see section 506J(g)(2)(C)(viii)).

438
439 As appropriate, FDA intends to work with manufacturers to ensure the accuracy and
440 appropriateness of information before posting publicly on its website. FDA may elect not to
441 make information collected under section 506J publicly available if the Agency determines that
442 disclosure of such information would adversely affect the public health (such as by increasing
443 the possibility of hoarding or other disruption of the availability of the device to patients).²⁸
444

C. Expedited Inspections and Reviews

445
446 If FDA concludes, based on 506J notifications and/or any other relevant information, that there
447 is, or is likely to be, a shortage of a device, the Agency will, as appropriate:

- 448 • “prioritize and expedite the review of a submission under section 513(f)(2), 515, review
449 notification under section 510(k), or 520(m) for a device that could help mitigate or
450 prevent such shortage; or”
- 451 • “prioritize and expedite an inspection or reinspection of an establishment that could help
452 mitigate or prevent such shortage.”²⁹

453
454 When prioritizing such work, FDA considers 506J notifications as well as other information
455 related to potential device shortages, including the information FDA reviews in making a
456 shortage determination, described in more detail in Section IV.A. of this document.

²⁷ See <https://www.fda.gov/medical-devices/coronavirus-covid-19-and-medical-devices/medical-device-shortages-during-covid-19-public-health-emergency>.

²⁸ See section 506J(g)(3)(C) of the FD&C Act.

²⁹ See section 506J(f) of the FD&C Act.

457

458 **Appendix A. Example 506J Notification**

459 *Note: This example is intended to illustrate the information that could be included in a*
460 *notification pursuant to section 506J of the FD&C Act. For different types of public health*
461 *emergencies, FDA may provide an appendix with specific inquiries relating to that public health*
462 *emergency.*

463

464 **Section 1: Type of 506J notification**

465

- 466 Initial 506J notification
- 467 Update to previous 506J notification

468

469 **Section 2: Identifier information**

470

- 471 • Are you submitting on behalf of another party?
- 472 • Submitter’s contact information (First Name, Last Name, Email Address, Phone)
- 473 • Marketing submission holder
- 474 • Marketing submission number (as applicable)
- 475 • Manufacturer name (if different from marketing submission holder)
- 476 • FDA Establishment Identification (FEI) number(s) (where device is manufactured)
- 477 • Generic device name
- 478 • Product code
- 479 • Device trade name
- 480 • UDI number
- 481 Yes; UDI numbers provided below

UDI number(s)

482

- No; model or catalog number(s) provided below

Model or catalog number(s)

483

- 484 • Contact name
- 485 • Contact email and phone number

486

487 **Section 3: Reason(s) for the discontinuance or interruption (*more than one may apply*)**

488

- 489 Requirements related to complying with good manufacturing practices
- 490 Regulatory delay
- 491 Order to divert devices from other U.S. government entities

Contains Nonbinding Recommendations

Draft – Not for Implementation

- 492 Shortage or discontinuance of a component, part, or accessory of the device (including
- 493 specific supplies from diagnostic and serological specimen collection kits or reagents for
- 494 extraction or PCR amplification or serological testing)
- 495 Discontinuance of the manufacture of the device
- 496 Delay in shipping of the device (e.g., transportation challenges)
- 497 Delay in sterilization of the device
- 498 Increase in demand for the device
- 499 Facility closure
- 500 Device is currently in shortage (i.e., demand currently exceeds supply)
- 501 Device is expected to be in shortage (i.e., projected demand exceeds projected supply)
- 502 Device on backorder (i.e., temporarily out of stock)
- 503 Device on allocation (i.e., limiting the quantity distributed to customers to extend the life
- 504 of the existing supply)
- 505 Device on export or import restrictions (e.g., another country is not allowing this device to
- 506 be exported from their country)
- 507 Longer than usual delay from order to delivery
- 508 Other reasons not listed above; description below.

Description of reason(s) for the discontinuance or interruption.

509 **Section 4: Duration of discontinuance or interruption**

510 *Estimated timeframe (i.e., dates) and/or duration (i.e., number of days) of the discontinuance*

511 *or interruption.*

512

513 *In addition to the information in Sections 1-4, it would be helpful to FDA, during a public health*

514 *emergency, to receive the following information to help enable FDA to better manage any*

515 *potential shortages or meaningful disruptions to the device supply chain.*

516

517 **Section 5: Manufacturing specific inquiries**

- 518
- 519 • Has the current situation further affected your ability to manufacture or distribute your
- 520 device(s)?
- 521
- 522 No
- 523 Yes; issue(s) described below
- 524 Labor shortages
- 525 Lack of protective equipment for employees
- 526 Shortage or delay in raw material supply
- 527 Temporary plant closure
- 528 Shipping/transportation challenges

Contains Nonbinding Recommendations

Draft – Not for Implementation

- 529 Export/import challenges
530 Other

Additional details of issue(s).

- 531
532 • Do you rely on any critical suppliers that might be affected by the public health
533 emergency?

- 534
535 No
536 Yes; impact and supplier(s) below.

Description of how reliance on critical suppliers affected by the public health emergency might adversely impact your ability to manufacture device(s). If you are willing/able, names of your critical supplier(s).

537
538 **Section 6: Additional information, including possible mitigations**
539

- 540 • Is this device manufactured on multiple lines?
541 No
542 Yes
543
544 • Is this device manufactured in multiple facilities?
545 No
546 Yes
547
548 • How much device inventory do you have?

Current device inventory.

- 549
550 • Have you provided, or will you provide, public information for your stakeholders and
551 patients regarding this actual or potential shortage (e.g., Dear Healthcare Provider
552 (DHCP) Letters, supply or shortage information posted on your website)?
553 No
554 Yes
555
556 • Do you have a proposal for FDA to review to expedite availability of your device?
557 What else do you think FDA can do to help prevent or mitigate a supply disruption?
558 No
559 Yes

Contains Nonbinding Recommendations

Draft – Not for Implementation

Proposal to expedite availability of device and/or for FDA to help prevent or mitigate a supply disruption.

560
561
562
563

- Do you have shortage mitigation plans in place that could be shared with FDA?
 No
 Yes; description below

Describe shortage mitigation plans or provide a copy as an attachment.

564
565
566
567

Section 7: Production Capacity & Market Share (for this FEI and product code)

Device descriptor	Estimated US market share (%)	Average historic production volume [# / mo]	Average historic US distribution [# / mo]	Current production volume [# / mo]	Current US distribution [# / mo]	Max production volume [# / mo]
<i>e.g., Generic Device</i>	<i>e.g., 10%</i>	<i>e.g., 300</i>	<i>e.g., 250</i>	<i>e.g., 100</i>	<i>e.g., 100</i>	<i>e.g., 500</i>

568