

BLA APPROVAL July 5, 2018

Our STN: BL 125667/0

Grifols Diagnostic Solutions, Inc. Attention: Ms. Amanda Doe 10210 Genetic Center Drive San Diego, CA 92121

Dear Ms. Doe:

Please refer to your Biologics License Application (BLA) for the Procleix Zika Virus Assay dated November 29, 2017, received November 29, 2017, and submitted under section 351 (a) of the Public Health Service Act (PHS Act).

## LICENSING

We have approved your BLA for the Procleix Zika Virus Assay effective this date. You are hereby authorized to introduce or deliver for introduction into interstate commerce, the Procleix Zika Virus Assay under your existing Department of Health and Human Services U.S. License No. 2032.

The Procleix Zika Virus Assay is a qualitative *in vitro* nucleic acid test for the detection of Zika Virus (ZIKV) RNA in plasma specimens from individual human donors, including volunteer donors of whole blood and blood components for transfusion. It is also intended for use in testing plasma or serum specimens to screen other living (heartbeating) donors of organs and Human Cells, Tissues, and Cellular and Tissue-Based Products (HCT/Ps), and in testing blood specimens to screen cadaveric (non-heartbeating) donors. It is not intended for use on cord blood specimens.

The assay is intended for use in testing individual donor samples. It is also intended for use in testing pools of human plasma composed of equal aliquots of not more than 16 individual specimens from volunteer donors of whole blood components.

This assay is not intended for use as an aid in the diagnosis of Zika virus infection.

## MANUFACTURING LOCATIONS

Under this license, you are approved to manufacture the Procleix Zika Virus Assay at your facilities located at

(b) (4)

and the Procleix Panther System at (b) (4)

(b) (4)

You may

label your product with the proprietary name Procleix Zika Virus Assay and market it as approved in your license application.

We did not refer your application to the Blood Products Advisory Committee because our review of the information submitted in your BLA, including the clinical study design and trial results, did not raise concerns or controversial issues that would have benefited from an advisory committee discussion.

## **DATING PERIOD**

The dating period for the Procleix Zika Virus Assay shall be twelve months from the date of manufacture when stored at the appropriate temperature indicated for each component. The date of manufacture shall be defined in accordance with 21 CFR 610.50.

#### FDA LOT RELEASE

Please submit final container samples of the product in final containers together with protocols showing results of all applicable tests. You may not distribute any lots of product until you receive a notification of release from the Director, Center for Biologics Evaluation and Research (CBER).

## **BIOLOGICAL PRODUCT DEVIATIONS**

You must submit reports of biological product deviations under 21 CFR 600.14. You should identify and investigate all manufacturing deviations promptly, including those associated with processing, testing, packaging, labeling, storage, holding and distribution. If the deviation involves a distributed product, may affect the safety, purity, or potency of the product, and meets the other criteria in the regulation, you must submit a report on Form FDA 3486 to the Director, Office of Compliance and Biologics Quality, at the following address:

Food and Drug Administration Center for Biologics Evaluation and Research Document Control Center 10903 New Hampshire Ave. WO71-G112 Silver Spring, MD 20993-0002

## **MANUFACTURING CHANGES**

You must submit information to your BLA for our review and written approval under 21 CFR 601.12 for any changes in, including but not limited to, the manufacturing, testing, packaging or labeling of Procleix Zika Virus Assay, or in the manufacturing facilities.

#### **LABELING**

We hereby approve the draft package insert labeling submitted under 125667/amendment 14 dated June 22, 2018. This is a reminder that as of September 24, 2014, medical devices that are licensed under the PHS Act are subject to certain provisions of the final Unique Device Identifier (UDI) rule. These provisions include the requirement to provide a UDI on the device label and packages (21 CFR 801.20), format dates on the device label in accordance with 21 CFR 801.18, and submit data to the Global Unique Device Identification Database (GUDID) (21 CFR 830 Subpart E). Additionally, please identify each device identifier implemented for the subject device, and the device identifiers that have been discontinued for the subject device as a labeling change in an annual report consistent with 21 CFR 601.12(f)(3). For more information on these requirements, please see the UDI website, <a href="http://www.fda.gov/udi">http://www.fda.gov/udi</a>.

Please submit all final printed labeling as a PDF electronic copy (eCopy) at the time of use and include implementation formation on Form FDA 356h as appropriate.

Two draft copies of the proposed introductory advertising or promotional labeling may be voluntarily submitted for advisory comment with a completed Form FDA 2253 to the Advertising and Promotional Labeling Branch at the following address:

Food and Drug Administration Center for Biologics Evaluation and Research Document Control Center 10903 New Hampshire Ave. WO71-G112 Silver Spring, MD 20993-0002

## ADVERSE EVENT REPORTING

You must submit adverse experience reports in accordance with the Medical Device Reporting (MDR) requirements for medical devices (21 CFR 803) as required by 21 CFR 600.80(k)(2). Since your product is characterized as a device as well as a biologic, submit these reports to the MedWatch System using MedWatch Reporting Form 3500A or an electronic equivalent. Please refer to the February 2014 document *Questions and Answers about eMDR – Electronic Medical Device Reporting – Guidance for Industry, User Facilities and FDA Staff* at

 $\frac{http://www.fda.gov/MedicalDevices/DeviceRegulationandGuidance/PostmarketRequir}{ements/ReportingAdverseEvents/eMDR-}$ 

ElectronicMedicalDeviceReporting/UCM2019327.htm.

# Required reports are to be submitted to:

Food and Drug Administration Center for Devices and Radiological Health MDR Policy Branch 10903 New Hampshire Avenue WO Bldg. 66, Room 3217 Silver Spring, MD 20993-0002

Sincerely,

Nicole Verdun, MD Acting Director Office of Blood Research and Review Center for Biologics Evaluation and Research