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Transition Plan for Medical Devices Issued Emergency Use Authorizations (EUAs) During the Coronavirus Disease 2019 (COVID-19) Public Health Emergency

Draft Guidance for Industry and Food and Drug Administration Staff

DRAFT GUIDANCE

This draft guidance document is being distributed for comment purposes only.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 December 2021.

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draft document within 90 days of publication in the *Federal Register* of the notice announcing the availability of the draft guidance.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, contact the Regulation, Policy, and Guidance Staff at RPG@fda.hhs.gov. For general questions about emergency use authorizations, contact the Office of the Commissioner/Office of the Chief Scientist/Office of Counterterrorism and Emerging Threats at AskMCMi@fda.hhs.gov.



U.S. Department of Health and Human Services
Food and Drug Administration
Center for Devices and Radiological Health

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Preface

Additional Copies

Additional copies are available from the FDA webpage titled “COVID-19-Related Guidance Documents for Industry, FDA Staff, and Other Stakeholders,” *available at* <https://www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/covid-19-related-guidance-documents-industry-fda-staff-and-other-stakeholders>, and the FDA webpage titled “Search for FDA Guidance Documents,” *available at* <https://www.fda.gov/regulatory-information/search-fda-guidance-documents>. You may also send an email request to CDRH-Guidance@fda.hhs.gov to receive a copy of the guidance. Please include the document number 20042 and complete title of the guidance in the request.

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1 **Transition Plan for Medical Devices**
2 **Issued Emergency Use Authorizations**
3 **(EUAs) During the Coronavirus**
4 **Disease 2019 (COVID-19) Public**
5 **Health Emergency**

7 **Draft Guidance for Industry and**
8 **Food and Drug Administration Staff**

10 *This draft guidance, when finalized, will represent the current thinking of the Food and Drug*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

16 **I. Introduction**

17 FDA plays a critical role in protecting the United States (U.S.) from threats such as emerging
18 infectious diseases, including the Coronavirus Disease 2019 (COVID-19) pandemic. FDA is
19 committed to providing timely guidance to support response efforts to this pandemic.

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20 FDA recognizes that it will take time for device¹ manufacturers,² healthcare facilities, healthcare
21 providers, patients, consumers, and FDA to adjust from policies adopted and operations
22 implemented during the declared COVID-19 public health emergency (PHE) to normal
23 operations.³ To provide a clear policy for all stakeholders and FDA staff, the Agency is issuing
24 this guidance to describe FDA’s general recommendations for this transition process with respect
25 to devices issued Emergency Use Authorizations (EUAs) during the COVID-19 PHE, including
26 recommendations regarding submitting a marketing submission, as applicable, and taking other
27 actions with respect to these devices.

28
29 FDA is concurrently issuing a companion guidance to describe FDA’s recommendations for
30 transitioning devices that fall within enforcement policies issued during the COVID-19 PHE.⁴
31 FDA believes these transition guidances will help prepare manufacturers and other stakeholders
32 for the transition to normal operations and foster compliance with applicable requirements under
33 the FD&C Act and implementing regulations when the relevant EUAs and COVID-19-related
34 enforcement policies cease to be in effect. This guidance is based on our current understanding
35 of the COVID-19 PHE and may be updated as the PHE evolves.

36
37 The contents of this document do not have the force and effect of law and are not meant to bind
38 the public in any way, unless specifically incorporated into a contract. This document is intended
39 only to provide clarity to the public regarding existing requirements under the law. FDA
40 guidance documents, including this guidance, should be viewed only as recommendations, unless
41 specific regulatory or statutory requirements are cited. The use of the word *should* in FDA
42 guidance means that something is suggested or recommended, but not required.

¹ Section 201(h)(1) of the Federal Food, Drug, and Cosmetic Act (FD&C Act) provides that the term “device” means:

“an instrument, apparatus, implement, machine, contrivance, implant, in vitro reagent, or other similar or related article, including any component, part, or accessory, which is—
(A) recognized in the official National Formulary, or the United States Pharmacopeia, or any supplement to them,
(B) intended for use in the diagnosis of disease or other conditions, or in the cure, mitigation, treatment, or prevention of disease, in man or other animals, or
(C) intended to affect the structure or any function of the body of man or other animals, and
which does not achieve its primary intended purposes through chemical action within or on the body of man or other animals and which is not dependent upon being metabolized for the achievement of its primary intended purposes. The term ‘device’ does not include software functions excluded pursuant to section 520(o) of the FD&C Act.”

² Throughout this guidance, when describing policies for devices that have been issued an Emergency Use Authorization (EUA), FDA uses the term “manufacturer” to refer to any person who designs, manufactures, fabricates, assembles, or processes a finished device. See 21 CFR 820.3(o). Other entities, including those that introduce such devices into commercial distribution, such as initial importers and certain distributors, should ensure they understand, and where applicable they should follow, the recommendations that pertain to such devices.

³ Throughout this guidance, FDA refers to “normal operations” as a shorthand for the circumstances when the COVID-19 PHE under section 319 of the Public Health Service Act has expired and/or the relevant device COVID-19 emergency use declarations under section 564 of the FD&C Act are terminated.

⁴ The FDA draft guidance document “Transition Plan for Medical Devices That Fall Within Enforcement Policies During the Coronavirus Disease 2019 (COVID-19) Public Health Emergency” will be referred to as the “companion guidance” in the remainder of this guidance document.

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44 **II. Background**

45 There is currently an outbreak of respiratory disease caused by a novel coronavirus. The virus
46 has been named “SARS-CoV-2,” and the disease it causes has been named “Coronavirus Disease
47 2019” (COVID-19). On January 31, 2020, the Department of Health and Human Services (HHS)
48 issued a declaration of a PHE related to COVID-19 and mobilized the Operating Divisions of
49 HHS.⁵ In addition, on March 13, 2020, the President declared a national emergency in response
50 to COVID-19.⁶

51

52 In response to the COVID-19 PHE, the device supply chain has been stressed because the
53 demand for certain devices has exceeded available supply. FDA recognized early in the COVID-
54 19 PHE the importance of maintaining the availability of certain devices. FDA’s policies have
55 helped to facilitate the availability of devices intended to diagnose, treat, and prevent COVID-19
56 and associated conditions – including mitigating exposure to the SARS-CoV-2 virus – and to
57 help address current manufacturing limitations or supply chain issues due to disruptions caused
58 by the COVID-19 PHE.

59

60 FDA authorized, and continues to authorize, the emergency use of devices under section 564 of
61 the FD&C Act.⁷ Section 564 of the FD&C Act authorizes FDA, after the HHS Secretary has
62 made a declaration of emergency or threat justifying authorization of emergency use (an “EUA
63 declaration”), to authorize the emergency use of an unapproved product⁸ or an unapproved use of
64 an approved product for certain emergency circumstances.⁹ FDA may issue an EUA to allow a

⁵ Secretary of Health and Human Services, Determination that a Public Health Emergency Exists (originally issued on Jan. 31, 2020, and subsequently renewed), *available at* <https://www.phe.gov/emergency/news/healthactions/phe/Pages/default.aspx>.

⁶ Proclamation on Declaring a National Emergency Concerning the Novel Coronavirus Disease (COVID-19) Outbreak (Mar. 13, 2020), *available at* <https://trumpwhitehouse.archives.gov/presidential-actions/proclamation-declaring-national-emergency-concerning-novel-coronavirus-disease-covid-19-outbreak/>. On February 24, 2021, there was a Presidential Declaration continuing the national emergency concerning the COVID-19 pandemic beyond March 1, 2021. See Continuation of the National Emergency Concerning the Coronavirus Disease 2019 (COVID-19) Pandemic (February 24, 2021), *available at* <https://www.federalregister.gov/documents/2021/02/26/2021-04173/continuation-of-the-national-emergency-concerning-the-coronavirus-disease-2019-covid-19-pandemic>.

⁷ A list of all authorized COVID-19 device EUAs is available at <https://www.fda.gov/emergency-preparedness-and-response/mcm-legal-regulatory-and-policy-framework/emergency-use-authorization>.

⁸ Under sections 564(a)(2)(A) and 564(a)(4)(D) of the FD&C Act, an unapproved product is one that “is not approved, licensed, or cleared for commercial distribution under section 505, 510(k), 512, or 515 of [the FD&C] Act or section 351 of the Public Health Service Act or conditionally approved under section 571 of [the FD&C] Act.”

⁹ Pursuant to section 564 of the FD&C Act, and on February 4, 2020, the HHS Secretary determined that there is a public health emergency that has significant potential to affect national security or the health and security of United States citizens living abroad, and that involves the SARS-CoV-2 virus that causes COVID-19. On the basis of such determination, the HHS Secretary declared on that same day, that circumstances exist justifying the authorization of emergency use of in vitro diagnostics for detection and/or diagnosis of the SARS-CoV-2 virus that causes COVID-19 (85 FR 7316), *available at* <https://www.federalregister.gov/documents/2020/02/07/2020-02496/determination-of-public-health-emergency>. Based on the February 4, 2020 determination, the Secretary issued two (2) more declarations justifying emergency uses related to devices: on March 2, 2020, for certain personal respiratory

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65 product to be used to diagnose, treat, or prevent a serious or life-threatening disease or condition
66 referenced in the EUA declaration, when the statutory criteria are met, including FDA’s
67 determination that, based on the totality of scientific evidence, the product may be effective for
68 such use, the known and potential benefits outweigh the known and potential risks for such use,
69 and that there are no adequate, approved, and available alternatives.¹⁰

70
71 An EUA issued under section 564 of the FD&C Act will remain in effect for the duration of
72 the relevant EUA declaration, unless FDA chooses to revoke the EUA because the criteria for
73 issuance are no longer met or revocation is appropriate to protect public health or safety.¹¹ An
74 EUA declaration under section 564 of the FD&C Act is distinct from, and is not dependent on,
75 the declaration by the HHS Secretary of a PHE under section 319 of the Public Health Service
76 Act. Therefore, an EUA may remain in effect beyond the duration of the declared PHE.

77
78 Given the magnitude of the COVID-19 PHE, FDA recognizes that continued flexibility, while
79 still providing necessary oversight, will be appropriate to facilitate an orderly and transparent
80 transition back to normal operations. Further, FDA is taking into account that the
81 manufacture, distribution, and use of devices in the context of the COVID-19 PHE raises
82 unique considerations. These unique considerations include, for example, the manufacturing
83 of devices by non-traditional manufacturers to address supply issues and the distribution and
84 use of capital or reusable equipment (e.g., ventilators, extracorporeal membrane oxygenation
85 systems) under an EUA.

86
87 FDA developed this guidance to describe a transition plan, among other things, to help avoid
88 disruption in device supply and ensure that devices authorized under an EUA meet applicable
89 FD&C Act requirements after the termination of the relevant COVID-19 EUA declaration
90 under section 564(b) of the FD&C Act, if their manufacturers wish to continue distributing
91 them.

92
93 Section 564 of the FD&C Act provides a statutory framework describing the circumstances in
94 which an EUA declaration may terminate and the process for such termination.¹² Under section
95 564(b) of the FD&C Act, the Secretary of HHS is required to provide advance notice that an
96 EUA declaration will be terminated and to publish such notice in the Federal Register.¹³ When
97 an EUA declaration is terminated, all EUAs issued under that declaration also terminate. After an

protective devices (85 FR 13907), available at <https://www.federalregister.gov/documents/2020/03/10/2020-04823/emergency-use-declaration>, and on March 24, 2020 for devices, including alternative products used as devices (85 FR 17335), pursuant to section 564 of the FD&C Act, subject to the terms of any authorization issued under that section, available at <https://www.federalregister.gov/documents/2020/03/27/2020-06541/emergency-use-authorization-declaration>.

¹⁰ For more information on FDA’s emergency use authorities under section 564 of the FD&C Act, see FDA’s guidance for Industry and Other Stakeholders “Emergency Use Authorization of Medical Products and Related Authorities,” available at <https://www.fda.gov/regulatory-information/search-fda-guidance-documents/emergency-use-authorization-medical-products-and-related-authorities>.

¹¹ See section 564(f)-(g) of the FD&C Act.

¹² Section 564(b)(2) of the FD&C Act.

¹³ Section 564(b)(3) and (4) of the FD&C Act.

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98 EUA terminates, it ceases to be in effect and the emergency use of the product(s) are no longer
99 authorized.

100
101 Pursuant to section 564(b)(2)(B) of the FD&C Act, when an EUA for an unapproved product
102 ceases to be effective as a result of the termination of an EUA declaration, FDA must consult
103 with the manufacturer of such product with respect to the appropriate disposition of the product.
104 FDA believes that issuing this guidance in draft with a proposed transition policy and requesting
105 public comment (including from manufacturers of authorized devices) may help the Agency to
106 satisfy, or otherwise determine how to best satisfy, this requirement while also effectively
107 managing Agency resources.

108
109 This guidance contemplates that the advance notice of termination of each EUA declaration
110 pertaining to devices will be published in the Federal Register 180 days before the day on which
111 the EUA declaration is terminated. For the purposes of this guidance, FDA refers to the date on
112 which an EUA is terminated as the “EUA termination date.” For the time between the advance
113 notice of termination of an EUA declaration and the EUA termination date, manufacturers of
114 devices with EUAs authorized pursuant to such an EUA declaration and others¹⁴ must continue
115 to comply with the terms of the devices’ respective EUAs, including applicable Conditions of
116 Authorization identified in the EUA letters of authorization for the devices.

117
118 In addition, FDA recommends that manufacturers of devices authorized under EUAs plan now,
119 while the pandemic is ongoing, their post-EUA regulatory and disposition strategies. When an
120 EUA declaration is terminated, the Agency intends to promptly publish notice of the termination
121 in the Federal Register and an explanation of the reasons for the termination.¹⁵ FDA requests
122 public comment on the timeline proposed in this guidance from all interested stakeholders.
123

124 **III. Scope**

125 This guidance applies to devices that have been issued an EUA under section 564 of the FD&C
126 Act on the basis of a device-related COVID-19 EUA declaration. Current good manufacturing
127 practice deviations authorized under section 564A(c) of the FD&C Act are outside the scope of
128 this guidance.

129
130 This guidance does not apply to devices for which FDA has revoked the EUA under section
131 564(g)(2)(B)-(C) of the FD&C Act because the criteria under section 564(c) of the FD&C Act
132 were no longer met or because other circumstances made such revocation appropriate to
133 protect the public health or safety.

134
135

¹⁴ Certain EUAs include conditions of authorization for parties other than the manufacturer, such as healthcare facilities or distributors.

¹⁵ Section 564(h)(1) of the FD&C Act.

136 **IV. Guiding Principles**

137 In developing this guidance and its companion guidance regarding devices that fall within
138 enforcement policies issued during the COVID-19 PHE, several guiding principles were
139 followed. Some derive from existing policies and are widely known, and others are key to
140 understanding the specific approach set forth in this guidance. Thus, anyone using this guidance
141 should bear in mind the following guiding principles:
142

- 143 • This guidance is intended to help facilitate continued patient, consumer, and healthcare
144 provider access to devices needed in the prevention, treatment, and diagnosis of COVID-
145 19.
- 146 • FDA believes an orderly and transparent transition is appropriate for devices that fall
147 within the scope of this guidance. FDA’s policies and recommendations in this guidance
148 are consistent with the Agency’s statutory mission to both protect and promote the public
149 health.¹⁶
- 150 • FDA’s policies and recommendations follow, among other things, a risk-based approach
151 with consideration of differences in the intended use and regulatory history of devices,
152 including whether the device is life-supporting or life-sustaining,¹⁷ capital or reusable¹⁸
153 equipment, a single-use device,¹⁹ and whether the device was previously FDA-cleared or
154 approved.
- 155 • As in other situations, if the Agency deems appropriate, FDA may, at any time, take
156 action regarding a specific device or device type, including revocation or revision of an
157 EUA, withdrawal or revision of an enforcement policy, or enforcement action.
158

159 **V. Transition Plan for Devices Authorized Under an EUA**

160 As previously stated, FDA recognizes that it will take time for device manufacturers, healthcare
161 facilities, healthcare providers, patients, consumers, and the Agency to adjust from policies
162 adopted and operations implemented during the COVID-19 PHE to normal operations. FDA
163 intends to encourage and facilitate an appropriate transition period to avoid exacerbating product
164 shortages and supply chain disruptions. This transition plan takes into account the advance notice
165 of termination of the EUA declarations pertaining to devices, and the discussion below contains

¹⁶ See section 1003 of the FD&C Act.

¹⁷ Life-supporting or life-sustaining devices are defined in 21 CFR 860.3(e). A list of life-supporting or life-sustaining devices can be found by searching FDA’s product classification database:
<https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfPCD/classification.cfm>.

¹⁸ A reusable device is intended for repeated use either on the same or different patients, with appropriate cleaning and other reprocessing between uses. For additional information see the guidance “Reprocessing Medical Devices in Health Care Settings: Validation Methods and Labeling” available at <https://www.fda.gov/regulatory-information/search-fda-guidance-documents/reprocessing-medical-devices-health-care-settings-validation-methods-and-labeling>.

¹⁹ A single-use device is a device that is intended for one use or on a single patient during a single procedure. For additional information see the guidance “Reprocessing Medical Devices in Health Care Settings: Validation Methods and Labeling” available at <https://www.fda.gov/regulatory-information/search-fda-guidance-documents/reprocessing-medical-devices-health-care-settings-validation-methods-and-labeling>.

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166 recommendations regarding the preparation and submission of marketing submissions (including
167 the timing of such submissions),²⁰ manufacturers’ actions if they do not wish to continue
168 distributing their product beyond the EUA termination date, and the distribution²¹ of devices
169 within the scope of this guidance.

170
171 FDA understands that there may be scenarios that are not specifically addressed in this guidance.
172 In certain circumstances, manufacturers may wish to initiate discussions with the Agency
173 through the Q-Submission Program, including Pre-Submissions, to develop a plan to address
174 their specific scenario if it is not discussed in this guidance. Manufacturers should submit any
175 Pre-Submissions with the understanding that their device will no longer be authorized for
176 emergency use beginning on the EUA termination date. Therefore, if the manufacturer’s intent is
177 to continue to distribute its device after the EUA for the device is no longer in effect, FDA
178 encourages the manufacturer to work toward, and FDA intends to help facilitate, submission of a
179 marketing submission before the EUA termination date. For details on the Q-Submission
180 Program, refer to the guidance “[Requests for Feedback and Meetings for Medical Device
181 Submissions: The Q-Submission Program](#).”²²
182

A. “Notifications of Intent” for Certain Reusable Life-Supporting or Life-Sustaining Devices

183
184
185 Given the public health significance of certain reusable life-supporting or life-sustaining devices
186 that have been issued an EUA, FDA recommends that manufacturers of such devices submit to
187 FDA information regarding whether or not they intend to submit a marketing submission to
188 continue distributing their product after the EUA termination date. This information will assist
189 the Agency in resource planning for marketing submission review and providing increased
190 support to manufacturers. This request applies to EUA-authorized devices with a product code
191 listed in Table 1:

192
193 **Table 1**

Product Code	Device Type	Classification Regulation
BSZ	Gas-machine, anesthesia	21 CFR 868.5160
CAW	Generator, oxygen, portable	21 CFR 868.5440

²⁰ For the purposes of this guidance, “marketing submission” includes a premarket approval application (PMA), PMA supplement, premarket notification (510(k)) submission, humanitarian device exemption (HDE) application, or De Novo classification request. For devices that are class I or II and exempt from premarket notification (e.g., shoe covers, face shields), no 510(k) submission is required unless the limitations of exemptions are exceeded (see, e.g., 21 CFR 878.9).

²¹ Throughout this guidance, FDA uses the term “distribution” to broadly refer to any distribution of a device within the scope of this guidance and, where applicable, actions taken in furtherance of distribution such as marketing.

²² Available at <https://www.fda.gov/regulatory-information/search-fda-guidance-documents/requests-feedback-and-meetings-medical-device-submissions-q-submission-program>.

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BTT	Humidifier, Respiratory Gas, (Direct Patient Interface)	21 CFR 868.5450
QAV	High flow/high velocity humidified oxygen delivery device	21 CFR 868.5454
CBK	Ventilator, Continuous, Facility Use	21 CFR 868.5895
MNT	Ventilator, Continuous, Minimal Ventilatory Support, Facility Use	
NOU	Continuous, ventilator, home use	
MNS	Ventilator, continuous, non-life-supporting	
ONZ	Mechanical Ventilator	
BTL	Ventilator, Emergency, Powered (Resuscitator)	21 CFR 868.5925
QOO	Tubing Connector for Co-venting	No corresponding CFR section

194
195 Manufacturers of the devices identified in Table 1 should submit the following information to the
196 CDRH Document Control Center²³ as soon as possible after this guidance is finalized:²⁴
197

- 198 • General information, including contact information, name and place of business, and
199 email address;
- 200 • The EUA request number;
- 201 • Submission number(s) for related premarket submissions;
- 202 • A list of all model numbers or other device identifying information;
- 203 • Whether the manufacturer plans to submit a marketing submission; and
- 204 • If not planning to submit a marketing submission, the manufacturer should discuss, as
205 applicable, its plans to discontinue distribution of the device, to restore the device to a
206 previously FDA-cleared or -approved version, to provide a physical copy or electronic
207 updated labeling, and any other efforts to address or mitigate potential risks of devices
208 that remain distributed after the EUA termination date.

209
210 The manufacturer should submit this information designated with the EUA number as an “EUA

²³ The mailing address for the CDRH Document Control Center can be found in 21 CFR 807.90(a)(1) and 814.104(d)(1). FDA encourages manufacturers to submit Notifications of Intent as eCopies. Information about the eCopy program can be found in the FDA guidance document “eCopy Program for Medical Device Submissions,” available at <https://www.fda.gov/regulatory-information/search-fda-guidance-documents/ecopy-program-medical-device-submissions>.

²⁴ Earlier submission of this information is encouraged and will assist the Agency in resource planning, help to avoid any supply disruptions, and otherwise help to ensure a smooth transition for these devices after the EUA termination date. If this information is submitted after publication of the advance notice of termination of the EUA declaration, FDA recommends submission within 90 days of that publication.

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211 report.” FDA recommends that manufacturers notate the following on the cover letter of the
212 submission: “Attention: Notification of Intent.”
213

214 **B. Marketing submissions for devices distributed after the**
215 **EUA termination date**

216 For manufacturers of authorized devices that intend to continue distributing their devices after
217 the EUA termination date, please refer to the recommendations and policies in the subsections
218 below. FDA recommends that manufacturers submit their marketing submissions to FDA with
219 sufficient time for the submission to be accepted by FDA²⁵ before the EUA termination date.
220 After the EUA termination date, while an accepted marketing submission is under consideration
221 by FDA and after receiving marketing authorization from the Agency, FDA expects that
222 manufacturers will comply with all applicable regulatory requirements for the
223 device/manufacturer, including but not limited to the applicable marketing submission
224 requirements, Quality System (QS) Regulation under 21 CFR Part 820, adverse event reporting
225 requirements under 21 CFR Part 803, registration and listing under 21 CFR Part 807 Subparts B-
226 D, and Unique Device Identification under 21 CFR Part 801 Subpart B and 21 CFR Part 830,
227 except as discussed below regarding an enforcement policy for devices with a marketing
228 submission under review by FDA (see Section V.B(2) below).²⁶
229

230 **(1) Recommendations for Transition Implementation Plan**

231 FDA expects that some marketing submissions will include changes or updates to the device
232 and/or its labeling compared to the product that has been distributed under the EUA prior to the
233 EUA termination date, and in some cases, a manufacturer may not receive a positive decision
234 from FDA on its marketing submission. Depending on FDA’s evaluation of the marketing
235 submission, FDA may engage with the manufacturer during the Agency’s review of the
236 submission to discuss the appropriate disposition of already-distributed devices, including the
237 transition implementation plan described below. To help address all of these situations
238 efficiently, we recommend that manufacturers include with their marketing submissions a

²⁵ For more information regarding FDA’s acceptance policies for marketing submissions, see the FDA guidance documents “Refuse to Accept Policy for 510(k)s,” available at <https://www.fda.gov/regulatory-information/search-fda-guidance-documents/refuse-accept-policy-510ks>, “Acceptance and Filing Reviews for Premarket Approval Applications (PMAs),” available at <https://www.fda.gov/regulatory-information/search-fda-guidance-documents/acceptance-and-filing-reviews-premarket-approval-applications-pmas>, and “Acceptance Review for De Novo Classification Requests,” available at <https://www.fda.gov/regulatory-information/search-fda-guidance-documents/acceptance-review-de-novo-classification-requests>.

²⁶ For more information regarding FDA regulatory requirements for a specific device and FDA policies related to those requirements, manufacturers can use the [FDA Guidance Search Tool](https://www.fda.gov/regulatory-information/search-fda-guidance-documents/) to identify relevant guidance documents. <https://www.fda.gov/regulatory-information/search-fda-guidance-documents/>. Following the EUA termination date, FDA will look to any other applicable compliance policies and otherwise apply our general risk-based approach in making compliance and enforcement decisions. For more information, see the FDA guidance “Factors to Consider Regarding Benefit-Risk in Medical Device Product Availability, Compliance, and Enforcement Decisions,” available at <https://www.fda.gov/regulatory-information/search-fda-guidance-documents/factors-consider-regarding-benefit-risk-medical-device-product-availability-compliance-and>.

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239 “transition implementation plan” that addresses the manufacturers’ plans both for dealing with
240 devices already distributed in the case of a positive decision or in the case of a negative decision
241 on the marketing submission. We recommend that this plan include the following information, as
242 applicable:²⁷

- 243 • Estimated number of devices under an EUA currently that are in U.S. distribution;
- 244 • An explanation of the manufacturer’s benefit-risk based plan for disposition of already
245 distributed product in the event of a negative decision on the marketing submission. If the
246 manufacturer is proposing to leave already distributed product in place, the plan should
247 address the rationale for doing so and considerations such as the following, where
248 relevant:²⁸
 - 249 ○ Process for notifying patients, consumers, healthcare facilities, healthcare
250 providers, and distributors of the device’s regulatory status;
 - 251 ○ Process and timeline for restoring distributed devices to the previously FDA-
252 cleared or approved version, providing publicly available labeling that accurately
253 describes the product features and regulatory status, or providing both publicly
254 available and a physical copy of updated labeling for reusable life-supporting/life-
255 sustaining devices to describe their regulatory status; and
 - 256 ○ A description of the maintenance plan for distributed devices.
- 257 • An explanation of the manufacturer’s plans for addressing already-distributed product in
258 the event of a positive decision on the marketing submission, including considerations
259 such as the following, where relevant:
 - 260 ○ Process for notifying patients, consumers, healthcare facilities, healthcare
261 providers, and distributors of the device’s regulatory status; and
 - 262 ○ Process and timeline for providing to users of previously distributed devices
263 updated labeling or components that reflect any changes made to the cleared or
264 approved device.

265
266 Depending on FDA’s evaluation of the marketing submission, FDA may engage with the
267 manufacturer during the Agency’s review of the submission to discuss the appropriate
268 disposition of already distributed devices, including the transition implementation plan described
269 above. If changes are made to the device (e.g., modifications to address a cybersecurity concern),
270 the manufacturer should discuss possible correction or removal with FDA regarding devices
271 already distributed to the end user. Moreover, FDA may request a firm initiate a recall of such
272 devices in certain circumstances if a recall has not already been initiated (see 21 CFR 7.45).
273

²⁷ If the manufacturer has already submitted a “Notification of Intent” with some of this information (e.g., information on the number of devices currently in U.S. distribution), FDA still recommends that manufacturers include a transition implementation plan with their marketing submission, noting any updates since the “Notification of Intent” was submitted to FDA.

²⁸ While FDA recommends that a benefit-risk based plan for disposition of distributed product be included with a marketing submission for devices within the scope of this guidance, FDA also believes such an approach is consistent with device end-of-life best practices and recommends that manufacturers consider and conduct such activities even if the manufacturer’s transition implementation plan is not prospectively shared with the Agency.

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274 **(2) Enforcement policy for devices with a marketing**
275 **submission under review by FDA**

276 As previously stated, FDA recognizes that it may take time for manufacturers, including non-
277 traditional manufacturers of devices, to adjust from their operations during the COVID-19 PHE
278 back to normal operations. FDA does not intend to object to the continued distribution of devices
279 within the scope of this guidance after the EUA termination date where:

- 280
- 281 • The manufacturer has submitted a marketing submission to FDA and had it accepted by
282 FDA before the EUA termination date; and
 - 283 • FDA has not taken a final action on the marketing submission.
- 284

285 The enforcement policy identified in this section (Section V.B(2)) applies only to requirements
286 to obtain FDA marketing authorization (e.g., 510(k) clearance). It does not apply to other
287 applicable requirements (such as registration and listing, QS requirements, and reports of
288 corrections and removals requirements under 21 CFR Parts 807, 820, and 806) that would apply
289 to previously authorized devices that the manufacturer continues to distribute after an EUA
290 ceases to be in effect.

291

292 During the period after the EUA termination date, for devices for which a marketing submission
293 has been accepted by FDA but before FDA has taken final action on the submission, labeling
294 should be updated to accurately state that the product was authorized under an EUA issued
295 during the COVID-19 PHE and remains under FDA review for clearance or approval.

296

297 **C. If a manufacturer does not intend to continue to**
298 **distribute its device after the EUA termination date**

299 When a manufacturer does not intend to continue to distribute its device beyond the EUA
300 termination date, FDA generally does not intend to object to the disposition of already
301 distributed devices (i.e., FDA does not intend to request market removal)²⁹ as follows:

302

- 303 1) Single use, non-life-supporting/non-life-sustaining devices (e.g., face masks) that were
304 distributed before the EUA termination date remain distributed and are consumed by the
305 end user.
- 306 2) Reusable, non-life-supporting/non-life-sustaining devices (e.g., remote patient monitoring
307 devices) that were distributed before the EUA termination date remain distributed and are
308 used by their end user. Such devices should either:
 - 309 a. Be restored by the manufacturer to the previously FDA-cleared or approved
310 version (e.g., earlier software version, component replacement),³⁰ or

²⁹ FDA uses the term “removal” consistent with the definition in 21 CFR 806.2(j).

³⁰ In situations where manufacturers do not believe restoration is possible or in the best interest of public health, FDA recommends additional engagement with the Agency to develop a plan to address their specific scenario if it is not otherwise discussed in this guidance.

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- 311 b. Have publicly available labeling that accurately describes the product features and
312 regulatory status (i.e., that the product lacks FDA clearance or approval).
- 313 3) Reusable life-supporting/life-sustaining devices (e.g., ventilators, extracorporeal
314 membrane oxygenation systems, continuous renal replacement therapy systems) that
315 were distributed before the EUA termination date remain distributed. Such devices
316 should either:
- 317 a. Be restored by the manufacturer to the previously FDA-cleared or approved
318 version of the device, or
- 319 b. Have both publicly available and a physical copy of labeling that accurately
320 describes the product features and regulatory status (i.e., that the product lacks
321 FDA clearance or approval).³¹
- 322 4) In vitro diagnostic devices that were distributed before the EUA termination date remain
323 distributed and are used for no more than 2 years after the EUA termination date or until
324 the expiration date, whichever is less.
325

326 **D. Discontinuing distribution of a device**

327 FDA expects manufacturers to discontinue distribution of a device within the scope of this
328 guidance:

- 329
- 330 1) On the EUA termination date, if the manufacturer has not submitted a required
331 marketing submission for its device and had it accepted by FDA before the EUA
332 termination date; or
- 333 2) On the date the manufacturer receives a negative decision on its marketing submission
334 as FDA’s final action, or on the date the manufacturer withdraws its submission or
335 fails to provide a complete response to an FDA request for additional information³²
336 within the time identified in FDA’s letter.
337

338 In addition, manufacturers should be aware of any applicable FD&C Act requirements for their
339 device, such as adverse event reporting under 21 CFR Part 803, and continue to comply with
340 such requirements for the duration in which they are applicable, which may extend beyond the
341 cessation of distribution.
342

343 **E. Additional considerations**

344 Before the EUA termination date, FDA expects manufacturers who intend to distribute their
345 devices after the EUA termination date to have completed any steps necessary to transition into
346 compliance with all FD&C Act requirements applicable to their devices once their EUAs are no

³¹ Should facilities wish to retain the device for use in the future, the future use of the device would be subject to the regulatory requirements of any future authorization, including marketing authorization or EUA.

³² For more information on FDA requests for additional information (i.e., deficiency letters) and how to respond, see the FDA guidance “Developing and Responding to Deficiencies in Accordance with the Least Burdensome Provisions” available at <https://www.fda.gov/regulatory-information/search-fda-guidance-documents/developing-and-responding-deficiencies-accordance-least-burdensome-provisions>.

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347 longer in effect. However, FDA does not intend to object to continued distribution of devices
348 that lack the required FDA marketing authorization in the circumstances outlined in Section
349 V.B(2). Under section 704(a)(1) of the FD&C Act, FDA may enter and inspect any factory,
350 warehouse, or establishment in which devices are manufactured, processed, packed, or held for
351 introduction into interstate commerce or after introduction into interstate commerce, at
352 reasonable times and within reasonable limits and in a reasonable manner.³³

353
354 FDA recognizes that there may be situations that raise unique compliance considerations. For
355 example, non-traditional device manufacturers that previously operated under different quality
356 standards or requirements may face challenges that take more time to address in transitioning to
357 a system that fully complies with 21 CFR Part 820. FDA intends to take such considerations into
358 account when making case-by-case compliance and enforcement decisions. In some cases,
359 manufacturers who intend to continue distributing their devices after the EUA termination date
360 may request an exemption or variance from a device QS requirement as outlined in 21 CFR
361 820.1(e) and section 520(f)(2) of the FD&C Act. This exemption or variance should be requested
362 within 90 days of publication of the advance notice of termination of the EUA declaration
363 pertaining to the device at issue.
364

365 **VI. Examples**

366 The following hypotheticals are intended to illustrate the transition policy outlined above. To
367 exemplify the timeline of the transition plan outlined in this section (Section VI), for purposes of
368 the examples, we set the hypothetical advance notice of termination date for the EUA declaration
369 pertaining to the device at issue as July 1 in Year 1, and the EUA termination date as January 1
370 in Year 2. This date is not intended to propose an actual advance notice of termination or EUA
371 termination date; it is hypothetical and for illustrative purposes only. Note that these generalized
372 examples do not account for every possible detail, risk, or consideration a manufacturer should
373 evaluate or that may be relevant to FDA decisions regarding a particular device.
374

375 **Example 1**

376 A single-use surgical mask that is intended for use in healthcare settings by health care personnel
377 as personal protective equipment to provide a physical barrier to fluids and particulate materials,
378 was authorized for emergency use under an umbrella EUA for surgical masks.³⁴ The
379 manufacturer does not intend to continue distributing the surgical mask after the EUA is no
380 longer in effect.
381

³³ Under section 301(e)-(f) of the FD&C Act, it is a prohibited act to refuse to permit access to certain records required under the FD&C Act or to refuse to permit entry or inspection as authorized by section 704 of the FD&C Act.

³⁴ <https://www.fda.gov/medical-devices/coronavirus-disease-2019-covid-19-emergency-use-authorizations-medical-devices/personal-protective-equipment-euas#surgicalmasks>.

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382 On July 1, the advance notice of termination of the relevant EUA declaration is published. On
383 the EUA termination date (January 1), the relevant EUA declaration is terminated and the EUA
384 is no longer in effect. On January 1, the manufacturer ceases distribution of the surgical mask.
385 The manufacturer submits any reports of corrections or removals consistent with 21 CFR Part
386 806. User exhaustion of already distributed surgical masks is described in Section V.C above.
387

Example 2

388 A continuous ventilator was authorized under the umbrella EUA for ventilators and ventilator
389 accessories³⁵ to support patients who develop respiratory distress due to COVID-19.
390

391 On July 1, the advance notice of termination of the relevant EUA declaration is published.
392 Before August 1, to help FDA plan for transition-related premarket review activities, the
393 manufacturer informs FDA that it does not intend to pursue marketing authorization by
394 submitting an “EUA report” to the CDRH Document Control Center with “Attention:
395 Notification of Intent” on the cover letter of the submission. This EUA report includes the
396 information outlined in Section V.A above.
397

398 On the EUA termination date (January 1), the relevant EUA declaration is terminated and the
399 umbrella EUA is no longer in effect. The ventilator manufacturer ceases distribution of the
400 ventilator. FDA does not intend to object if the manufacturer develops a plan for the already
401 distributed product to remain distributed, including product in the possession of end users, and
402 provides a physical copy of labeling as outlined in Section V.C for those hospitals that have
403 expressed an interest in keeping the ventilators. As part of the plan, the manufacturer should
404 interact with affected hospitals, document the hospitals’ interest, and communicate to FDA its
405 strategy for providing this labeling to the relevant healthcare facilities, and carry out
406 implementation of the updated labeling. For healthcare facilities wishing to retain the ventilator
407 for use in the future, the future use of the device would be subject to the regulatory requirements
408 of any future authorization, including marketing authorization or EUA.
409
410

Example 3

411 A non-traditional device manufacturer worked with a traditional device manufacturer (original
412 equipment manufacturer (OEM)) to produce, as a contract manufacturer, ventilators that were
413 designed by the traditional device manufacturer. Such devices were authorized under the
414 umbrella EUA for ventilators and ventilator accessories and distributed by the OEM during the
415 COVID-19 PHE.
416

417 On July 1, the advance notice of termination of the relevant EUA declaration is published.
418 Before August 1, to help FDA plan for transition-related premarket review activities, the OEM
419 informs FDA that it intends to pursue a marketing authorization through submission of an “EUA
420

³⁵ <https://www.fda.gov/medical-devices/coronavirus-disease-2019-covid-19-emergency-use-authorizations-medical-devices/ventilators-and-ventilator-accessories-euas>.

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421 report” to the CDRH Document Control Center with “Attention: Notification of Intent” on the
422 cover letter of the submission. This EUA report includes the information outlined in Section V.A
423 above.

424
425 On October 1, the OEM submits a marketing submission to FDA. In its marketing submission,
426 the OEM includes a “transition implementation plan” for already distributed ventilators.

427
428 On the EUA termination date (January 1), the relevant EUA declaration is terminated and the
429 umbrella EUA is no longer in effect. The OEM and contract manufacturer must both comply
430 with all applicable regulatory requirements for the devices. The OEM has submitted a marketing
431 submission, had it accepted by FDA, and has provided updated device labeling to accurately
432 reflect that the product was authorized under an EUA issued during the COVID-19 PHE and
433 remains under FDA review for clearance or approval. Under these circumstances, FDA does not
434 intend to object to the continued distribution of the ventilators before FDA takes a final action on
435 the marketing submission (see Section V.B(2) above).

436
437 In this scenario, the OEM does not respond to an FDA request for additional information within
438 the specified timeframe identified in the Agency’s deficiency letter. FDA issues a notice of
439 withdrawal as the Agency’s final action on the marketing submission on March 28. FDA and the
440 manufacturer engage on the manufacturer’s benefit-risk plan to address already distributed
441 devices. FDA may request that the firm initiate a recall of such devices in certain circumstances
442 if a recall has not already been initiated (see 21 CFR 7.45).

443

Example 4

444
445 A molecular diagnostic test kit manufactured by a commercial manufacturer was issued an
446 individual EUA for the qualitative detection of nucleic acid from SARS-CoV-2 in upper and
447 lower respiratory specimens, nasal swab specimens, and pooled samples in authorized
448 laboratories.³⁶

449

450 On July 1, the advance notice of termination of the relevant EUA declaration is published. On
451 October 1, the manufacturer submits a marketing submission to FDA. In its marketing
452 submission, the manufacturer includes a “transition implementation plan” for already distributed
453 molecular diagnostic test kits.

454

455 On the EUA termination date (January 1), the relevant EUA declaration is terminated and the
456 EUA for the device is no longer in effect. The manufacturer must comply with all applicable
457 regulatory requirements for the device. The manufacturer has submitted a marketing submission,
458 had it accepted by FDA, and has provided updated device labeling to accurately reflect that the
459 product was authorized under an EUA issued during the COVID-19 PHE and remains under
460 FDA review for clearance and approval. Under these circumstances, FDA does not intend to

³⁶ <https://www.fda.gov/medical-devices/coronavirus-disease-2019-covid-19-emergency-use-authorizations-medical-devices/in-vitro-diagnostics-euas-molecular-diagnostic-tests-sars-cov-2#individual-molecular>.

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461 object to the continued distribution of the device before FDA takes a final action on the
462 marketing submission (see Section V.B(2) above).

463

464 In this scenario, the manufacturer receives a positive decision on February 20, as part of FDA's
465 final action on the marketing submission. No outstanding issues were identified during FDA
466 review that would result in a correction or removal of the test kits that were already distributed.

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