

MDR REPORTING REQUIREMENTS

Vaishnavi Chandrasekar, Ph.D.,

MDR Analyst and Lead Reviewer

Renal and Transplantation Devices Team, CDRH/OPEQ/OHT3

Organ Procurement and Transplantation Network (OPTN)

5 February 2024

AGENDA

- CDRH Vision
- Postmarket Surveillance
- MDR Regulation (21 CFR 803)
- Reporting Timeframes
- Limitations of MDR Data
- Considerations for OPTN

CDRH VISION

- Patients in the U.S. have access to high-quality, safe, and effective medical devices of public health importance first in the world.
- The U.S. is the world's leader in regulatory science, medical device innovation and manufacturing, and radiation-emitting product safety.
- **U.S. post-market surveillance quickly identifies poorly performing devices, accurately characterizes real-world performance, and facilitates device approval or clearance.**
- Devices are legally marketed in the U.S. and **remain safe, effective, and of high-quality.**
- Consumers, patients, their caregivers, and providers have access to understandable science-based information about medical devices and **use this information to make health care decisions.**

DEVICE SURVEILLANCE

- **Medical Device Reporting (MDR)**
- MedSun Program
- Post-Approval Studies (PAS)
- Postmarket Surveillance Studies (522/PSS Studies)
- Signal Management
- National and International Device Registries
- National Evaluation System for Health Technology (NEST)

MEDICAL DEVICE REPORTING (MDR) REGULATION

Medical Device Reporting (MDR, 21 CFR Part 803)

- Establishes the reporting requirements for device user facilities, manufacturers and importers. (Authorized under Section 519 FD&C Act.)
- A mechanism for FDA and manufacturers to identify and monitor adverse events involving marketed medical devices

Types of Events that Must Be Reported to FDA

- If device may have caused or contributed to a death or serious injury.
- Certain malfunctions must also be reported

WHAT IS A REPORTABLE EVENT?

21 CFR 803.3(o)

- An adverse event that **user facilities** become aware of that reasonably suggests that a device has or may have **caused or contributed** to a death or serious injury, or
- An event that **manufacturers or importers** become aware of that reasonably suggests that one of their marketed devices:
 - May have **caused or contributed** to a death or serious injury, or
 - Has malfunctioned and that the device or a similar device marketed or manufactured by the manufacturer or imported would be likely to **cause or contribute** to a death or serious injury if the malfunction were to recur.
 - FDA assumes that once a malfunction has occurred, it will recur.

“CAUSED OR CONTRIBUTED”

A death or serious injury may have been attributed to a medical device

or

A medical device may have been a factor in a death or serious injury including events resulting from

- Failure
- Malfunction
- Improper or inadequate design
- Manufacturing (problems)
- Labeling (problems)
- Use error

WHAT IS A SERIOUS INJURY?

A reportable serious injury is defined as an injury or illness that is:

- Life-threatening

or

- Results in permanent impairment or damage to a body function or structure

or

- Requires medical or surgical intervention to preclude permanent impairment or damage to a body function or structure

WHAT IS A MALFUNCTION?

- The failure of a device to meet its performance specifications or otherwise perform as intended.
 - Performance Specifications include all claim made in the labeling for the device
 - The intended performance of a device refers to the intended use for which the device is labeled or marketed as defined in 21 CFR 801.4.

WHAT IS NOT AN MDR?

- **MDR \neq Complaint**
- **Complaints (21 CFR 820.198)**
 - Written electronic or oral communication that alleges deficiencies related to the identity, quality, durability, reliability, safety, effectiveness, or performance of a device after it is released for distribution.
 - Manufacturers and importers are required to maintain complaint files and establish and maintain procedures for receiving, reviewing and evaluating complaints.
- Complaints are reviewed, evaluated and documented for MDR reportability
- **Volume of MDRs \neq Complaint Rate**

REPORTING TIMEFRAMES

REPORTER	WHAT TO REPORT	WHERE	WHEN
Manufacturer	Deaths, Serious Injuries, Malfunction	FDA	Within 30 calendar days
	Events that require remedial action to prevent an unreasonable risk of substantial harm	FDA	Within 5 working days
	Supplements (Follow-up Reports)	FDA	Within 30 calendar days
User Facility	Deaths	FDA and Mfr.	Within 10 working days
	Serious Injury	Mfr. (FDA if unknown)	Within 10 working days
Importer	Deaths and Serious Injuries	FDA and Mfr.	Within 30 calendar days
	Malfunctions	Mfr.	Within 30 calendar days

EMPHASIZING USER FACILITY REPORTING REQUIREMENTS

1. **Reports of death.** Submit a report to FDA as soon as practicable but no more than 10 work days after the day that you become aware of information, from any source, that **reasonably suggests** that a device has or may have caused or contributed to the death of a patient of your facility. Also submit the report to the device manufacturer, if known. ([§ 803.32](#)).
2. **Reports of serious injury.** Submit a report to the manufacturer of the device no later than 10 work days after the day that you become aware of information, from any source, that **reasonably suggests** that a device has or may have caused or contributed to a serious injury to a patient of your facility. If the manufacturer is not known, submit the report to FDA ([§ 803.32](#)).

What information does FDA consider “reasonably” known to me?

- This information includes information found in documents that you possess and any information that becomes available as a result of reasonable follow-up within your facility.
- You are not required to evaluate or investigate the event by obtaining or evaluating information that you do not reasonably know.

TYPES OF MDR SUBMISSIONS

- Individual (initial) Reports (3500/3500A):
 - Contain text narratives
 - Some may describe multiple patients, events or devices
- Supplemental/Follow-up Reports:
 - Filed for individual MDRs when additional information is obtained
 - Manufacturer's evaluation of returned device
 - New or corrected information
 - Follow up with user facility

WHERE CAN I FIND INFORMATION ON HOW TO PREPARE AND SUBMIT AN MDR?

(21 CFR 803.23)

- You may obtain information on how to prepare and submit reports in an electronic format that FDA can process, review, and archive at:
<http://www.fda.gov/ForIndustry/FDAeSubmitter/ucm107903.htm>.
- We may sometimes update information on how to prepare and submit reports electronically. If we do make modifications, we will ensure that we alert reporters by updating the eMDR Web page.



DEPARTMENT OF HEALTH AND HUMAN SERVICES
Food and Drug Administration

MEDWATCH

The FDA Safety Information and
Adverse Event Reporting Program

Form FDA 3500

Form Approved: OMB No. 0910-0291, Expires: 06-30-2025
See PRA statement on page 6.

FDA USE ONLY	
Triage unit sequence #	<input type="text"/>
FDA Rec. Date	<input type="text"/>

For VOLUNTARY reporting of adverse events, product problems and product use/medication errors

Note: For date prompts of "dd-mmm-yyyy" please use 2-digit day, 3-letter month abbreviation, and 4-digit year; for example, 01-Jan-1900.

A. PATIENT INFORMATION			
1. Patient Identifier (In confidence)		2. Age <input type="text"/> or Date of Birth (e.g., 01-Jan-1900)	
<input type="text"/>		<input type="checkbox"/> Year(s) <input type="checkbox"/> Week(s)	<input type="text"/>
		<input type="checkbox"/> Month(s) <input type="checkbox"/> Day(s)	
3a. Sex: Enter the patient's sex at birth (the sex that a person has or was assigned to at birth).		3b. Gender: Enter the patient's current gender (how the patient thinks of themself).	
<input type="checkbox"/> Male <input type="checkbox"/> Undifferentiated <input type="checkbox"/> Female <input type="checkbox"/> Decline to answer		<input type="checkbox"/> Cisgender man/boy (gender corresponds with birth sex) <input type="checkbox"/> Cisgender woman/girl (gender corresponds with birth sex) <input type="checkbox"/> Transgender man/trans man/ female-to-male (FTM) <input type="checkbox"/> Transgender woman/trans woman/ male-to-female (MTF) <input type="checkbox"/> Other gender category; please specify: <input type="text"/> <input type="checkbox"/> Decline to answer	
4. Weight	5. Ethnicity (Check one)	6. Race (check all that apply)	
<input type="text"/> <input type="checkbox"/> lb <input type="checkbox"/> kg	<input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Not Hispanic/Latino	<input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Native Hawaiian/ Other Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> White <input type="checkbox"/> Black or African American	
B. ADVERSE EVENT, PRODUCT PROBLEM			
1. Type of Report (check all that apply)		2. Outcome Attributed to Adverse Event (check all that apply)	
<input type="checkbox"/> Adverse Event <input type="checkbox"/> Product Use/Medication Error <input type="checkbox"/> Product Problem (e.g., defects/malfunctions) <input type="checkbox"/> Problem with Different Manufacturer of Same Medicine		<input type="checkbox"/> Death - Date of death (e.g., 01-Jan-1900): <input type="text"/> <input type="checkbox"/> Life-threatening <input type="checkbox"/> Required Intervention to Prevent Permanent Impairment/Damage <input type="checkbox"/> Hospitalization (initial or prolonged) <input type="checkbox"/> Disability or Permanent Damage <input type="checkbox"/> Other Serious or Important Medical Events <input type="checkbox"/> Congenital Anomaly/Birth Defects	
3. Date of Event (e.g., 01-Jan-1900)	4. Date of this Report (e.g., 01-Jan-1900)		
<input type="text"/>	<input type="text"/>		
5. Describe Event, Problem or Product Use/Medication Error			
Characters Remaining (max, 4,000):			
<input type="text"/>			



- Mandatory reporters
 - FDA Form 3500A
 - Manufacturers
 - User Facilities
 - Importers
- Voluntary reporters
 - Medwatch Form 3500
 - Healthcare professionals
 - Patients
 - Consumers

EVENT INVESTIGATION

- Manufacturers must demonstrate a *reasonable attempt* to follow up and obtain relevant required information
- Document and justify why certain information could not be obtained
- Includes:
 - Obtaining suspect device and evaluating/testing it
 - Going to the facility to evaluate the device
 - Follow-up discussions with the user facility, clinician or patient
 - Evaluating labeling & IFUs
 - Reviewing manufacturing documentation
 - Testing devices from same lot/batch
 - Trending similar complaints

INVESTIGATION RESULTS

- Results of investigation summarized in MDRs
 - Narrative text
 - Manufacturer evaluation codes
- May submit supplemental MDRs
 - If investigation is not complete by reporting deadlines
 - If corrections are needed to previous submissions after additional information is obtained
- FDA may request additional information regarding event investigation

ADDITIONAL INFORMATION (AI) LETTERS

21 CFR 803.15: AI letters are used to collect additional or clarify information in an MDR

- 1) We will notify you in writing if we require additional information and will tell you what information we need. We will require additional information if we determine that protection of the public health requires additional or clarifying information for medical device reports submitted to us and in cases when the additional information is beyond the scope of FDA reporting forms or is not readily accessible to us.
- 2) In any request, we will state the reason or purpose for the request, specify the due date for submitting information and clearly identify the reported event(s) related to our request.

IN ADDITION TO FILING MDRS...

- Device manufacturers must conduct a complete investigation of each event ([21 CFR 820.198](#))
- Develop, maintain and implement written MDR procedure ([21 CFR 803.17](#))
- Establish and maintain MDR event files/records ([21 CFR 803.18](#))
- Specific requirements are dependent on submitter:
 - User Facilities – [21 CFR 803 Subpart C](#)
 - Importers – [21 CFR 803 Subpart D](#)
 - Manufacturers – [21 CFR 803 Subpart E](#)
- Have a system in place that ensures access to information that facilitates timely follow-up/inspection by FDA!

LIMITATIONS OF MDR DATA

- Under-reporting
 - Users unfamiliar/unaware
 - Fear of unintended consequences
 - Confusion about HIPPA privacy and reporting
 - Malfunction/injury may not be clinically apparent
- Incomplete information in reports
 - Not obtainable from user end
 - Devices not returned or made available for manufacturer evaluation
- Causality not confirmed
 - Cannot determine link between device use/malfunction and negative clinical outcomes

Lack of MDRs ≠ Lack of problems

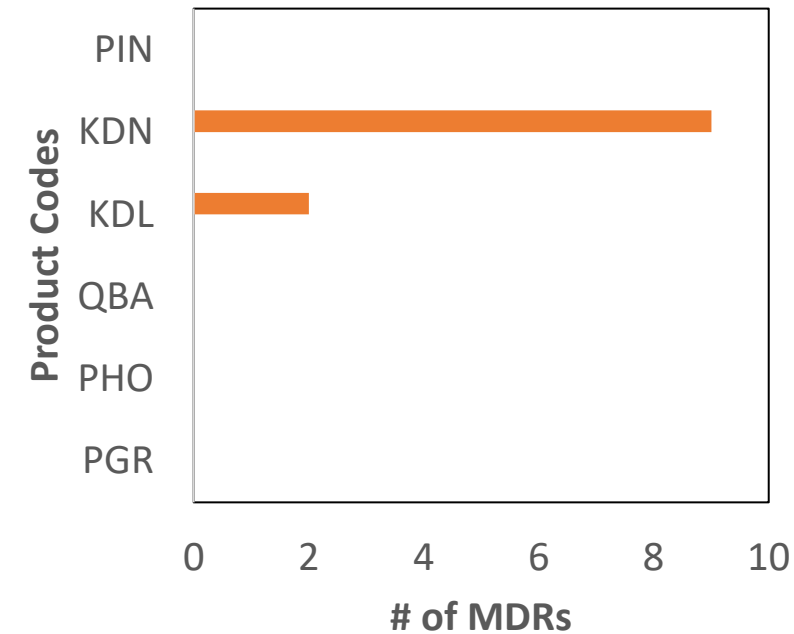
CONSIDERATIONS FOR OPTN...

- Both the Centers for Medicare and Medicaid Services (CMS) and the Organ Procurement and Transplantation Network (OPTN) require transplant programs to maintain quality assurance and performance improvement (QAPI) programs directed toward clinical and nonclinical transplant activities.
- Transplant program QAPI requirements mandate *review of adverse events*, including patient deaths and graft losses, with the intent to change practice through the implementation of better care processes.

MDRs RECEIVED Since JAN 2020

For Product Codes:

Product Code	Regulatory Pathway	Description*
PGR	PMA	NORMOTHERMIC DONOR HEART PRESERVATION SYSTEM FOR TRANSPLANTATION
PHO	PMA	NORMOTHERMIC PRESERVATION SYSTEM FOR TRANSPLANTATION OF INITIALLY UNACCEPTABLE DONOR LUNGS
QBA	PMA	NORMOTHERMIC MACHINE PERFUSION SYSTEM FOR THE PRESERVATION OF STANDARD CRITERIA DONOR LUNGS PRIOR TO TRANSPLANTATION
KDL	510(k)	SET, PERFUSION, KIDNEY, DISPOSABLE
KDN	510(k)	SYSTEM, PERFUSION, KIDNEY
PIN	Enforcement Discretion	KIDNEY PERFUSION KIT



■ Jan 2020 - Dec 2023 ■ Jan 2023 - Dec 2023

CONSIDERATIONS FOR OPTN...

- Patient safety issues from debriefings and incident reports – related to Medical Device Equipment:
 - Failure/Malfunction
 - User Error
 - Poor Presentation/Packaging/Labeling
 - Lack of Availability
 - Unclean/Unsterile
 - Dislodgement/Misconnection

RECOMMENDATIONS TO OPTN WHEN REPORTING MDRs

- Do so in a timely manner
- Always report back to the manufacturer (or to FDA if the manufacturer is unknown) if you find any defects in the device that caused or attributed to an adverse event.
- In your text narratives, emphasize how the event (graft failure, low organ quality, etc.) may be related to the specific device
- For events related to graft failure or graft loss, you may consider using the words “serious injury” in your complaint to the manufacturer so they may be able to pay attention to the complaint and evaluate whether it is reportable as an MDR.
- When in doubt regarding whether to report an event or not, err on the side of reporting and allow FDA to evaluate whether this is a reportable event.

DISCUSSION

- What are the challenges you commonly face with transplant devices with regards to safety or device malfunctions?
- What are the challenges associated with determining whether an adverse event is related to the medical device used?
- What recommendations do you have for improving MDR reporting of transplant devices?



THANK YOU!

Vaishnavi Chandrasekar

MDR Analyst and Lead Reviewer

Renal and Transplantation Devices Team, CDRH

Vaishnavi.Chandrasekar@fda.hhs.gov

Maura Rooney

Assistant Director

Renal and Transplantation Devices Team, CDRH

Maura.Rooney@fda.hhs.gov

Arturo Hernandez

Physician

Renal and Transplantation Devices Team, CDRH

Arturo.Hernandez@fda.hhs.gov

Manuel Bayona

MDR Analyst and Health Scientist

Obesity and Hepatobiliary Devices Team, CDRH

Manuel.Bayona@fda.hhs.gov