MDS-G32

Guidance on Requirements for Performance Evaluation Studies of In Vitro Diagnostics Medical Devices (PESIVD)

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Introduction

Purpose

The purpose of this document is to clarify the requirements of conducting PESIVD within the KSA.

Scope

This document is applicable to any party wishes to conduct PESIVD within the KSA.

Background

SFDA/MDS has issued this guidance document in reference to Article Four of the "Medical Devices Interim Regulation" issued by Saudi Food and Drug Authority Board of Directors decree No. (1-8-1429) dated 29/12/1429 H and amended by Saudi Food and Drug Authority Board of Directors decree No. (4-16-1439) dated 27/12/2017 stipulating that the SFDA undertakes issuing the approval for conducting clinical investigations and clinical evaluation.

Requirements

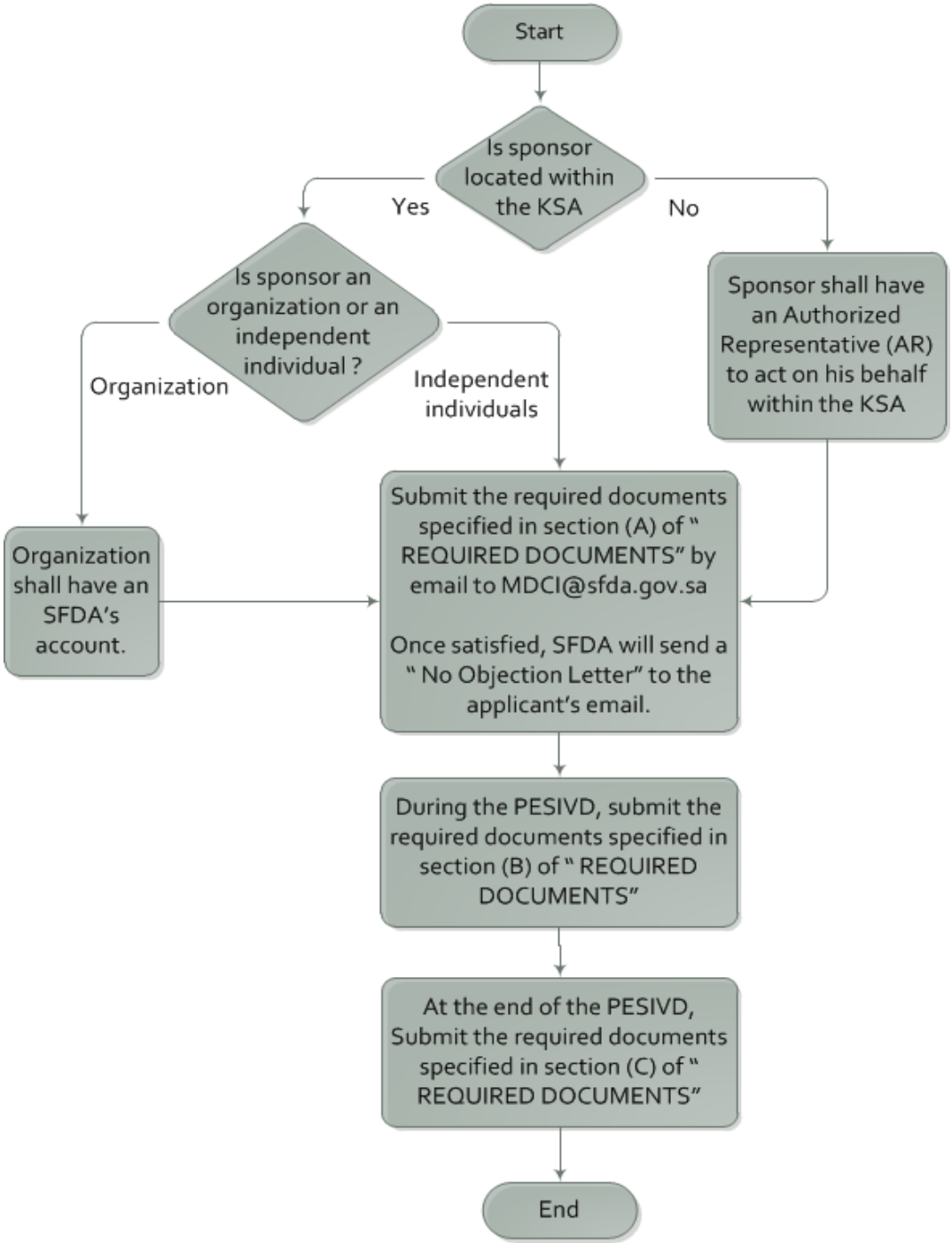
General	1	• Any high risk PESIVD within KSA shall be approved by SFDA before commencement. • Any other than high risk PESIVD and post-market performance evaluation studies shall be notified to SFDA before commencement within 10 working days.
	2	Investigational IVD medical device imported for performance evaluation may access KSA only if SFDA's importation approval is obtained.
	3	PESIVD shall be approved by the EC that is registered at National Committee of Bio Ethics (NCBE).
Regulations and Standards	4	PESIVD shall comply with the Law of Ethics of Research on Living Creatures.
Labeling Requirements	5	The labeling of the device shall comply with the requirements described in SFDA's guidance document entitled MDS – G10 Guidance on Labeling Requirements for Medical Devices
Reporting of Serious Adverse Event and Device Deficiency	6	The sponsor shall report to the SFDA's NCMDR about any serious adverse events or device deficiencies that could have led to a serious adverse device effect, including serious health threat. This shall be reported immediately but not later than 15working days after the sponsor first knowing of the events.
Submitting Documents to SFDA	7	Sponsor (either located within the KSA, or outside the KSA through his AR) shall submit documents specified in the "Required Documents" by email to MDCI@sfda.gov.sa
Inspection of the PESIVD	8	SFDA has the right to inspect the PESIVD without previous notification.
Reviewing Fees	9	No fees are required.

Required Documents

	Required Documents	Note
(A) Required documents prior to PESIVD		
1	Application Form for PESIVD	- See Annex (2) - See points (7) of "Requirements" - SFDA responds within a week in case of missing documents. - Application reviewing time is 60 working days.
2	Labelling of device	- See point (5) of "Requirements"
3	PESIVD agreement between sponsor and site(s)/principal investigator(s)	-
4	PESIVD agreement between sponsor and CRO	- If applicable
5	EC approval letter	- It is required for each site - The EC shall be registered at National Committee of Bio Ethics (NCBE)
6	Performance Evaluation Study Protocol	-
7	Investigator's Brochure (IB)	- It is required only for premarket studies.
8	Informed consent	- It shall be in Arabic and English
9	Curriculum Vitae of principal investigator(s) and investigator(s)	-
10	Disclosure of Principal Investigator Conflict of Interests	- See Annex (3) - It shall be signed by PI
Note: Incomplete application will be deleted after 60 days.		
(B) Required documents during PESIVD		
11	Progress Report	- It shall be submitted in yearly intervals
12	Change Form	- See Annex (4) - For any amendments to any documents already approved by SFDA
13	Change principal investigator	- Notify SFDA and provide the following documents: 1. New PI CV

		2. IRB approval of PI change 3. Any document and agreements signed by the previous PI need to be updated and submitted.
14	Withdrawal of EC approval	- Sponsor shall notify SFDA in case of withdrawal of EC approval or part of it, within five working days of receiving the withdrawal notice
15	Notification of suspension or premature termination of the performance evaluation study.	- It shall be submitted to SFDA without delay but not later than 10 working days.
16	Evaluation report of the serious adverse events or device deficiencies that lead to serious adverse events	- It shall be provided to the SFDA without delay but not later than 15 working days from the sponsor first knowing about the serious adverse event
(C) Required documents at the end of the PESIVD		
17	Notification of a PESIVD completion.	- It shall be provided to the SFDA within 10 working days.
18	PESIVD report	- It shall be submitted to the SFDA without delay but not later than 12 months after the PESIVD completion.

Flowchart


Start
Is sponsor located within the KSA
Yes
No
Is sponsor an organization or an independent individual ?
Organization
Independent individuals
Sponsor shall have an Authorized Representative (AR) to act on his behalf within the KSA
Organization shall have an SFDA's account.
Submit the required documents specified in section (A) of " REQUIRED DOCUMENTS" by email to MDCI@sfda.gov.sa
Once satisfied, SFDA will send a " No Objection Letter" to the applicant's email.
During the PESIVD, submit the required documents specified in section (B) of " REQUIRED DOCUMENTS"
At the end of the PESIVD, Submit the required documents specified in section (C) of " REQUIRED DOCUMENTS"
End

Annexes

Annex (1): Definitions and Abbreviations

KSA	Kingdom of Saudi Arabia
SFDA	Saudi Food and Drug Authority
GHTF	Global Harmonization Task Force
MDMA	Medical Devices Marketing Authorization
NCMDR	National Center for Medical Devices Reporting
AR	Authorized Representative
PESIVD	Performance Evaluation Study of IVD Medical Devices
CRO	Contract Research Organization
PESP	Performance Evaluation Study Protocol
EC	Ethics Committee/Institutional Review Board
NCBE	National Committee of Bio Ethics
Adverse Events (AE)*	any untoward medical occurrence, unintended disease or injury, or untoward clinical signs (including abnormal laboratory findings) in subjects, users or other persons, whether or not related to the investigational medical device. Note 1: This definition includes events related to the investigational medical device or the comparator. Note 2: This definition includes events related to the procedures involved. Note 3: For users or other persons, this definition is restricted to events related to investigational medical devices.
Authorized Representative (AR)	means any natural or legal person established within the KSA who has received a written mandate from the manufacturer to act on his behalf for specified tasks, including the obligation to represent the manufacturer in its dealings with the SFDA.
Contract Research Organization (CRO)*	person or organization contracted by the sponsor to perform one or more of the sponsor's clinical investigation-related duties and functions.
Endpoint(s)*	⟨primary⟩ principal indicator(s) used for assessing the primary hypothesis of a clinical investigation.
Ethics Committee (EC)*	independent body whose responsibility it is to review clinical investigations in order to protect the rights, safety and well-being of human subjects participating in a clinical investigation. Note 1: For the purposes of this International Standard, “ethics committee” is synonymous with “research ethics committee”, “independent ethics committee” or “institutional review board”. The regulatory requirements pertaining to ethics committees or similar institutions vary by country or region. Note 2: In the KSA, all local ECs supervising a clinical study have to be listed in The List of Registered Local Committees at the National Committee of Bioethics (NCBE) in King Abdulaziz City for Science & Technology (KACST):

	http://bioethics.kacst.edu.sa/LocalCommittees/What_are-the-local-committees.aspx
Informed Consent Process*	process by which an individual is provided information and is asked to voluntarily participate in a clinical investigation. Note: Informed consent is documented by means of a written, signed and dated informed consent form.
Performance Evaluation Study Site	Institution or site where the performance evaluation study is carried out.
Performance Evaluation Study Protocol	A key document that contain details about the background, rationale, objectives, design, analysis, methodology, monitoring, statistical considerations, and organization of the conduct of a performance evaluation study
Investigational IVD medical device	is an in vitro diagnostic medical devices that are being assessed for safety or performance in a performance evaluation study.
In-Vitro Medical Device	means a medical device, whether used alone or in combination, intended by the manufacturer for the in-vitro examination of specimens derived from the human body solely or principally to provide information for diagnostic, monitoring or compatibility purposes. This includes reagents, calibrators, control materials, specimen receptacles, software and related instruments or apparatus or other articles.
Labelling	means written, printed or graphic matter A. Affixed to an IVD medical device or any of its containers or wrappers. B. Information accompanying an IVD medical device, related to identification, technical description. C. Information accompanying an IVD medical device, related to its use, but excluding shipping documents.
Legally Authorized Representative*	individual or judicial or other body authorized under applicable law to consent, on behalf of a prospective subject, to the subject's participation in the clinical investigation.
National Centre for Medical Device Reporting (NCMDR)	means an organization managing a database of information on safety and/or performance related aspects of medical devices and employing staff capable of taking appropriate action on any confirmed problems.
Objective*	main purpose for conducting the clinical investigation
Performance Evaluation Study	is a study undertaken to confirm the performance claims of an IVD medical device.
Principal Investigator(PI)*	qualified person responsible for conducting the clinical investigation at an investigation site .
Sponsor*	individual or organization taking responsibility and liability for the initiation or implementation of a clinical investigation NOTE When an investigator initiates, implements and takes full responsibility for the clinical investigation, the investigator also assumes the role of the sponsor and is identified as the sponsor-investigator.

Subject*	individual who participates in a clinical investigation NOTE A subject can be either a healthy volunteer or a patient.
Vulnerable Subject*	individual whose willingness to volunteer in a clinical investigation could be unduly influenced by the expectation, whether justified or not, of benefits associated with participation or of retaliatory response from senior members of a hierarchy in case of refusal to participate example Individuals with lack of or loss of autonomy due to immaturity or through mental disability, persons in nursing homes, children, impoverished persons, subjects in emergency situations, ethnic minority groups, homeless persons, nomads, refugees, and those incapable of giving informed consent. Other vulnerable subjects include, for example, members of a group with a hierarchical structure such as university students, subordinate hospital and laboratory personnel, employees of the sponsor, members of the armed forces, and persons kept in detention.
* Source: ISO 14155:2020 * For the purposes of this guidance, “clinical investigation” is synonymous with “performance evaluation study”.	

Annex (2): Application Form for High Risk PESIVD

	Date Received		(For SFDA use only)
	PESIVD Application Number		(For SFDA use only)
1. Status			
1.1	Type of submission	☐ First submission ☐ Amendments to previous submission	
1.2	Aim of Study	☐ Pre-marketing approval for new device ☐ Pre-marketing approval for new claims	
1.4	Does this PESIVD involve first in human use?	☐ Yes ☐ No	
1.5	Will the investigational IVD be imported to KSA?	☐ Yes (SFDA Import License is required) ☐ No	
2. Sponsor details			
2.1	Type of Sponsorship	☐ Commercial ☐ Non-commercial	
2.2	Type of sponsor	☐ manufacturer ☐ AR ☐ Hospital ☐ Independent individuals ☐ Foundation ☐ University or Institution ☐ Other, please specify: ……	
2.3	Type of aid	☐ Material support ☐ Funding support ☐ Other, please specify: ……	

2.4	Sponsor administrative	Name SFDA's License Address Phone Fax E- mail Contact person name Contact person phone Contact person e-mail	
2.5	CRO, if applicable	Name SFDA's license (if applicable) Address Phone Fax E- mail Contact person name Contact person phone Contact person e-mail	
2.6	Person responsible for completing the application.	Name Position Phone E-mail	
3. Investigational IVD Device Information			
3.1	Is the investigational IVD device registered at SFDA?	☐ Yes, MDMA certificate number: …… …….. ☐ No, but registered in: ☐ Australia ☐ Canada ☐ Japan ☐ USA ☐ EU ☐ Other, please specify: ……..…. ☐ Not registered anywhere	
3.2	Investigational IVD Device Name		

3.3	Investigational IVD Device Category	☐ Clinical Chemistry ☐ Coagulation ☐ Haematology ☐ Histology & Cytology ☐ Human genetics ☐ Immunohaematology (blood banking) ☐ Infectious disease ☐ Instrument/analyser ☐ Microbiological culture media ☐ Software IVDs ☐ Specimen receptacle ☐ Tissue typing ☐ Other: ……..	
3.4	Does the device intended to be used as an IVD companion diagnostic device?	☐ No ☐ Yes ➢ Name of corresponding drug:…… ……	
3.5	Does the device intended to be used as a home use in vitro diagnostic device?	☐ No ☐ Yes	
3.6	Does the device intended to be used as a near patient in vitro diagnostic device?	☐ No ☐ Yes	
3.7	The intended purpose of the device		
3.8	Device classification based on GHTF guidance "Principles of In Vitro Diagnostic (IVD) Medical Devices Classification."	☐ A ☐ B ☐ C ☐ D	

4. Design of Performance Evaluation Study			
4.1	Performance evaluation study protocol title	Scientific title	
		Abbreviated title	
4.2	Performance evaluation study protocol (PESP) information	PESP number	
		PESP date	
		PESP version	
4.3	Subject health status	☐ Healthy volunteers ☐ Patients ☐ Both	
4.4	Does this study includes vulnerable subjects?	☐ No ☐ Yes	
4.5	Size of the sample population		
4.6	Number of study centers in the KSA		
4.7	Other countries where this performance evaluation study is carried out		

5. Investigation Site(s) in the KSA			
5.1	Site 1	Name	
		Address	
		Phone	
		E-mail	
		Name of principal investigator	
		EC name	
		EC address	
		EC phone	
		EC e-mail	
		Protocol number approved by EC	
5.2	Site 2	Name	
		Address	
		Phone	
		E-mail	
		Name of principal investigator	
		EC name	
		EC address	
		EC phone	
		EC e-mail	
		Protocol number approved by EC	
Add			

6. Declaration	
6.1	I, the sponsor defined in this application,: ☐ undertake that I comply with the Law of Ethics of Research on Living Creatures. ☐ undertake that I will report to the SFDA's NCMDR any serious adverse event of which I become aware that involves the IVD medical device; without delay but not later than 10 working days of occurrence. ☐ undertake that I will provide the documents specified in sections (B) and (C) of "REQUIRED DOCUMENTS" in SFDA's guidance document entitled MDS – G…. Guidance on Requirements for Performance Evaluation Study of In Vitro Diagnostics Medical Devices. ☐ undertake to notify ECs and principal investigators an case of withdrawal of SFDA's approval, or part of it, within five working days of receiving the withdrawal notice. ☐ undertake, under any request from the SFDA, to respond by providing accurate, current, and complete information about any aspects of the study. ☐ declare that SFDA has the right to inspect the study at any time without previous notification. ☐ declare that all information provided in this application is true and complete. ☐ declare that I will maintain a proper safe return or disposal of investigational IVD devices. Name: Position: Date: Signature:

Annex (3): Disclosure of Principal Investigator Conflict of Interests

Title of performance evaluation study protocol	
Date received:	(For SFDA use only)
PESIVD Application Number:	(For SFDA use only)

I disclose the following regarding the involvement in the PESIVD in the submitted application:

- ☐ any significant payments of other type made from the sponsor, including but not limited to a grant to fund ongoing research, compensation in the form of equipment, retainer for ongoing consultation, or honoraria;
- ☐ any proprietary interest in the investigational product held by the principal investigator;
- ☐ any considerable equity interest (including but not limited to any ownership interest, stock deal, or other financial interest) held by the principal investigator in the sponsor of the covered study.

Details of the disclosable financial arrangements and interests are attached, along with a description of steps taken to minimize the potential bias of performance evaluation study results by any of the disclosed arrangements or interests.

Name of principal investigator:
Date:
Signature:

Note: In case of multicenter study, a separate form shall be filled for each principal investigator

Annex (4): Change Form for PESIVD

Date:	
PESIVD Application Number:	
1. The document type where the change occur	
2. The original statement	
3. The changed statement	
4. Reason of change	