Designing Pilot Programs to Distribute Patient Medication Information (PMI) Expert Workshop

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Content Development Issues

- Selection of drug products:
 - Include range of drug complexity and risk
 - Include drugs in multiple dosage forms with variations in PMI
 - Include drugs with Medication Guides and REMS
 - Include drugs from same class but different manufacturers
 - Include same drugs from different manufacturers
 - Include drug pair with inconsistent risk information

Content Development Issues

Creation of PMI

- FDA should first publish clear guidance on content and format
- Manufacturers should interpret guidance independently
- Manufacturers should develop content independently based on their own interpretation of guidance
- FDA should not review content in advance of distribution

PMI Distribution Issues

Distribution of PMI

- Should test access from centralized repository
- Should test known issues with FDA's NDC data
- Should test multiple dosage forms of same drug
- Should test multiple manufacturers of same drug product, including generics
- Should test other known data-quality issues with manufacturer-controlled submission of electronic files to central repository



Non-integrated Content Issues

- How will pharmacy reconcile?
 - High-level drug interaction alerts from pharmacy information system (PIS) not reflected in PMI
 - Counseling messages from PIS not reflected in PMI
 - Other PIS alerts/content (auxiliary labels) not reflected in PMI
 - Liability issues about standard of care/advice differences between pilot PMI and existing risk communication documents
 - Patient confusion in comparing such documents

Comparator Content

- What will it be?
 - Web-based?
 - Print-based?
 - Combination?
- Medication Guides
- Independent drug information publishers
 - Notify all comparator sources of drugs to be tested
 - Allow comparator CMI to adopt new content and format standards versus Keystone CMI