USP 795 Gap Analysis Date:_____

- ☐ **USP <795> 1.1 SCOPE:** Designated individual(s) for performance/operations of facility and personnel for CNSP prep
  - ☐ Designated individual identified in SOP
  - ☐ Oversees training program to ensure personnel competency of compounding, handling, and preparing CNSPs
  - ☐ Responsible for selecting components
  - ☐ Monitoring/observing compounding activities and taking immediate corrective action for deficient practices
  - ☐ Ensure SOPs implemented and follow-up is carried out if problems, deviations, or errors are identified
  - ☐ Establishing, monitoring, & documenting procedures for handling and storage of CNSPs and/or components
- ☐ **USP <795> 2. PERSONNEL TRAINING/EVALUATION:** Documentation of initial competency and refresher every 12 mos
  - ☐ Hand hygiene
  - ☐ Garbing
  - ☐ Cleaning and sanitizing
  - ☐ Handling and transporting components and CNSPs
  - ☐ Measuring and mixing
  - ☐ Proper use of equipment and devices selected to compound CNSPs
  - ☐ Documentation of the compounding process (e.g., Master Formulation Records and Compounding Records)
  - ☐ Documented steps in the training procedure must include the following:
    - ☐ Read and understand this chapter, other applicable standards, and other relevant literature
    - ☐ Understand and interpret Safety Data Sheets (SDSs) and, if applicable, Certificates of Analysis (COA)
    - ☐ Read and understand procedures related to their compounding duties
- ☐ **USP <795> 3. PERSONAL HYGIENE AND GARBING:** Designated individual(s) responsible for evaluating personnel for exclusions from compounding because of risk of contamination from rashes, recent, tattoos, oozing sores, conjunctivitis, or active respiratory infection. Personnel must report condition. Exclusion must be documented.
- ☐ **USP <795> 3.1 Personnel Preparation:** Personnel must remove before entering compounding area:
  - ☐ Remove personal outer garments (e.g., bandanas, coats, hats, jackets)
  - ☐ Remove all hand, wrist, piercings, and other exposed jewelry that could interfere with garbing/hand hygiene
  - ☐ Remove earbuds or headphones
- ☐ **USP <795> 3.2 Hand Hygiene:** Documented in SOPs:
  - ☐ Wash hands and forearms up to the elbows with soap and water for at least 30 seconds.
  - ☐ Dry hands and forearms to the elbows completely with disposable towels or wipers.
  - ☐ Allow hands and forearms to dry thoroughly before donning gloves
  - ☐ Gloves should be wiped or replaced before beginning a CNSP with different components
  - ☐ All gloves must be inspected for holes, punctures, or tears and must be replaced immediately if defective
- ☐ **USP <795> 3.3 Garb and Glove Requirements:** Garbing and frequency is documented in SOPs
  - ☐ Gloves must be worn for all compounding activities
  - ☐ Garb should be worn for protection of personnel & must be appropriate for type of compounding performed
  - ☐ If gowns are worn, they may be re-used if not soiled
  - ☐ Gloves, shoe covers, hair covers, facial hair covers, face masks, or head coverings may not be re-used
  - ☐ Non-disposable garb, i.e goggles, should be cleaned and sanitized with 70% isopropyl alcohol before re-use
- ☐ **USP <795> 4. BUILDINGS AND FACILITIES:** All requirements are described in SOPs
  - ☐ **4.1 Compounding Space: S**pecifically designated for nonsterile compounding, sanitary, orderly, well-lit
    - ☐ Surfaces should be resistant to damage by cleaning and sanitizing agents; no carpeting allowed
    - ☐ Space designed, arranged, and used that minimizes cross-contamination from non-compounding areas

- ☐ **USP <795> 4.2 Storage Area:** Temperature monitored and dcoumented daily; immediately retrievable
  - ☐ Temperature monitoring equipment calibrated every 12 months if not specified by manufacturer
  - ☐ Adhere to SOPs to detect and prevent temperature excursions; CNSPs discarded if outside limits
  - ☐ CNSPs, components, equipment, & containers stored off floor & permits cleaning/inspection of area
- ☐ **USP <795> 4.3 Water Sources:** Hot and cold water sink easily accessible
  - ☐ Sink must be emptied of all items unrelated to compounding and cleaned when visibly soiled before being used to clean any equipment used in nonsterile compounding
  - ☐ Purified, distilled, or reverse osmosis water used for rinsing equipment and utensils

☐ **USP <795> 5. CLEANING AND SANITIZING:** Documented in SOPs and cleaning logs

- ☐ Work surfaces: beginning/end of each shift, after spills, surface contamination, between each CNSPs batch
- ☐ Floors: Daily, after spills, and when surface contamination (e.g. splashes) is known or suspected
- ☐ Walls: Every 3 months, after spills, and when surface contamination is known or suspected
- ☐ Storage shelving: Every 3 months, after spills, and when surface contamination is known or suspected
- ☐ Ceilings: When visibly soiled and when surface contamination is known or suspected

☐ **USP <795> 6. EQUIPMENT AND COMPONENTS:** Documented in SOPs and logs

- ☐ **USP <795> 6.1 Equipment:** Must be suitable for the specific compounding process
  - ☐ Surfaces that contact components must not be reactive, additive, sorptive, or alter the quality of CNSPs
  - ☐ Stored in a manner to minimize the risk of contamination and facilitate use, maintenance and cleaning
  - ☐ Inspected/verified prior to use in accordance to manufacturer specifications
  - ☐ Calibrated/maintained every 12 months or manufacturer requirment, which ever is sooner
  - ☐ After compounding, equipment cleaned to prevent cross-contamination of the next preparation
  - ☐ Assessment performed to determine if CNSPs need closed-system equipment and processes to reduce exposure/contamination of employees, facility, and/or products
  - ☐ Minimum Frequency for Cleaning and Sanitizing Equipment in Nonsterile Compounding Area(s)
    - ☐ Containment ventilated enclosures: beginning/end of each shift, after spills, surface contamination, and between each CNSPs batch
    - ☐ Other equipment: Before first use, manuf recommendations and between each CNSPs batch
- ☐ **USP <795> 6.2 Components:** SOPs for selection & inventory control of all components from receipt to use in CNSP
  - ☐ SDSs must be readily accessible to all personnel; Personnel must be instructed on how to retrieve & interpret
  - ☐ Component selection: A designated individual responsible for selecting components
  - ☐ Active Pharmaceutical Ingredient (API) and components other than APIs must:
    - ☐ Comply with the criteria in the USP–NF monograph
    - ☐ Have a Certificate of Analysis (COA) that includes the specifications and test results; API meets specs
    - ☐ Must be obtained from an FDA-registered facility in the U.S.; Non-U.S. complys with laws and regs
  - ☐ Component receipt: Documentation must be made for:
    - ☐ Components other than manuf products - information including the receipt date, quantity received, supplier name, lot number,expiration date, & results of any in-house or third-party testing performed
    - ☐ Date of receipt must be clearly and indelibly marked on each component package lacking an exp date
    - ☐ Components that lack a vendor's exp date must not be used after 3 years from the date of receipt
    - ☐ Once removed from original container, excess compnents not used in compounding is discarded
  - ☐ Component evaluation before use: Inspect for correct identity, strength, purity, and quality of components
  - ☐ Component Spill and Disposal: Accessible SDSs reviewed and update every 12 months
    - ☐ SOPs in place for labeled contents of spill kits with refresher course for personnel every 12 months

- ☐ **USP <795> 7. MASTER FORMULATION & COMPOUNDING RECORDS:** Must have SOPs & Documentation for new or altered
  - ☐ **USP <795> 7.1 Creating Master Formulation Records:** Created for each unique formulation of a CNSP; contains:
    - ☐ Name, strength or activity, and dosage form
    - ☐ Identities and amounts of all components (e.g., particle size, salt form, purity grade, solubility)
    - ☐ Container–closure system(s)
    - ☐ Complete instructions for preparation, including equipment, supplies, & description of compounding steps
    - ☐ Physical description of the final CNSP
    - ☐ Assigned beyond-use date (BUD) and storage requirements
    - ☐ Reference source to support the assigned BUD and storage requirements
    - ☐ Calculations to determine/verify quantities and/or concentrations of components & strength/activity of API
    - ☐ Labeling and auxillary labeling requirements
    - ☐ Quality control (QC) procedures (e.g., pH testing, visual inspection) and expected results
    - ☐ Other info needed to describe the compounding process & ensure repeatability (e.g., adjusting pH, temp)
  - ☐ **7.2 Creating Compounding Records:** A Compounding Record documents the following of each CNSP:
    - ☐ Name, strength or activity, and dosage form of the CNSP
    - ☐ Date and time of preparation of the CNSP
    - ☐ Assigned internal identification number (e.g., prescription, order, or lot number)
    - ☐ A method to identify the individuals involved in the compounding process and verifying the final CNSP
    - ☐ Name, vendor or manufacturer, lot number, and expiration date of each component
    - ☐ Weight or measurement of each component
    - ☐ Total quantity compounded
    - ☐ Assigned BUD and storage requirements
    - ☐ Calculations to determine/verify quantities and/or concentrations of components & strength/activity of API
    - ☐ Physical description of the final CNSP
    - ☐ Results of quality control procedures (e.g., pH testing, visual inspection)
    - ☐ Master Formulation Record reference for the CNSP
- ☐ **USP <795> 8. RELEASE INSPECTIONS:** CNSPs must be visually inspected and documented:
  - ☐ Determine whether the physical appearance is as expected
  - ☐ Labeling matches the Compounding Record and the prescription or medication order
  - ☐ All checks, inspections, quality tests are detailed in Master Formulation Records and documented
  - ☐ Pre-release inspection must include visual inspection of container–closure integrity (e.g., checking for leakage, cracks in the container, or improper seals)
- ☐ **USP <795> 9. LABELING:** All labels, written, printed, or graphic matter on immediate CNSP container, package or wrapper
  - ☐ Label on immediate container of the CNSP must, at a minimum, display the following information:
    - ☐ Assigned internal identification number (e.g., barcode, prescription, order, or lot number)
    - ☐ Active component(s), and amounts, activities, or concentrations
    - ☐ Dosage form
    - ☐ Amount or volume in each container
    - ☐ Storage conditions if other than controlled room temperature
    - ☐ BUD

☐ **USP <795> 9. LABELING:** All labels, written, printed, or graphic matter on immediate CNSP container, package or wrapper
- ☐ The labeling on the CNSP should display the following information:
  - ☐ Route of administration
  - ☐ Indication that the preparation is compounded
  - ☐ Any special handling instructions
  - ☐ Any warning statements that are applicable
  - ☐ Name, address, and contact information of the compounding facility if the CNSP is to be sent outside facility

☐ **USP <795> 10. ESTABLISHING BEYOND-USE DATES:** Each CNSP label must state date, or hour/date, beyond which the prep cannot be used and must be discarded

☐ **USP <795> 10.3 Establishing a BUD for a CNSP:** The day that the preparation is compounded is considered Day 1

BUD by Type of Prep in absence of a USP-NF Compounded Preparation Monograph or CNSPSpecific monograph:

Type of Preparation	BUDs (days)	Storage Temperature
Non-preserved aqueous	14	Refrigerator
Preserved aqueous	35	Controlled room temp or refrigerator
Nonaqueous	90	Controlled room temp or refrigerator
Solid	180	Controlled room temp or refrigerator

☐ **USP <795> 10.4 CNSPs Requiring Shorter BUDs:** A shorter BUD must be established under the following circumstances:
- ☐ API or any other components in the CNSP have an expiration date that is earlier than the BUD in USP <795> 10.3
- ☐ CNSP includes components from conventionally manufactured product(s) with shorter BUD in USP <795> 10.3
- ☐ CNSP includes components from other compounded preparations with shorter BUD in USP <795> 10.3
- ☐ Formulation is known to require a shorter BUD

☐ **USP <795> 10.5 Extending BUDs for CNSPs: If USP–NF compounded prep monograph has BUD for CNSP, then BUD stays**
- ☐ **CNSPS WITH STABILITY INFORMATION:** Exceptions:
  - ☐ Aqueous & nonaqueous CNSPs may be extended max 180 days if there is a stability study (published or unpublished) using a stability-indicating assay for the API(s), CNSP, and type of container-closure that will be used
  - ☐ If the BUD of the CNSP is extended beyond the BUDs in USP <795> 10.3, an aqueous CNSP should be submitted for antimicrobial effectiveness testing (AET). The compounder may rely on AET that is:
    - ☐ Conducted (or contracted for) once for each formulation in container–closure system packaged in. OR;
    - ☐ Provided by an FDA-registered facility or published in peer-reviewed literature sources if the CNSP formulation (including any preservative) and container–closure system are exactly the same as those tested unless a bracketing study is performed

☐ **USP <795> 11. SOPS:** Must be developed on all aspects of the compounding operation
- ☐ All personnel who conduct or oversee compounding activities must be trained SOPs and follow them responsibly
- ☐ One or more person(s) must be designated to ensure that SOPs are fully implemented
- ☐ The designated individual(s) must ensure that follow-up occurs if problems, deviations, or errors are identified

☐ **USP <795> 12. QUALITY ASSURANCE AND QUALITY CONTROL:** A facility's QA & QC programs must be formally established and documented in SOPs. A designated person must ensure facility has formal, written QA and QC programs that:

- ☐ Adhere to procedures
- ☐ Ensure prevention and detection of errors and other quality problems
- ☐ Evaluate of complaints and adverse events
- ☐ Ensure appropriate investigations and corrective actions
- ☐ SOPs must describe the roles, duties, and training of the personnel responsible for each aspect of the QA program
- ☐ Designated person(s) for QA prgrm must have training, experience, responsibility, & authority to perform duties
- ☐ QA/QC prgrm must be reviewed every 12 months by the designated person(s). Results and actions documented

☐ **USP <795> 13. CNSP PACKAGING AND TRANSPORTING**

- ☐ **USP <795> 13.1 Packaging of CNSPs:** SOPs must describe packaging of CNSPs:
  - ☐ Personnel select and use packaging materials that maintain physical, chemical integrity and stability of CNSPs
  - ☐ Packaging materials must protect CNSPs from damage, leakage, contamination, and degradation
  - ☐ Packaging materials must protect protecting personnel from exposure
- ☐ **USP <795> 13.2 Transporting CNSPs:** SOPs describe mode of transportation, handling, & temp monitoring required

☐ **USP <795> 14. COMPLAINT HANDLING AND ADVERSE EVENT REPORTING:** SOPs for complaint & AE report receipt, acknowledgment, and handling. Complaints of quality, labeling, or possible adverse reactions to CNSPs

- ☐ **USP <795> 14.1 Complaint Handling:** Designated person(s) reviews all complaints and determines if problem
  - ☐ If problem, thorough investigation into the cause of the problem must be initiated and completed
  - ☐ Investigation must consider whether the quality problem extends to other CNSPs
  - ☐ Corrective action, if necessary, must be implemented for all potentially affected CNSPs
  - ☐ Consider initiate recall of potentially affected CNSPs and/or cease and desist compounding until corrected
  - ☐ A readily retrievable written or electronic record of each complaint must be kept by the facility, regardless of the source of the complaint (e.g., e-mail, telephone, mail). Record must contain:
    - ☐ Name of the complainant or unique identifier
    - ☐ Date the complaint was received
    - ☐ Nature of the complaint
    - ☐ Response to the complaint
    - ☐ Name and strength of the CNSP
    - ☐ Prescription or medication order number
    - ☐ Lot number
    - ☐ Findings/Follow-up of any investigation
- ☐ **USP <795> 14.2 Adverse Event Reporting:** Designated person(s) must ensure AE reports of a CNSP are reviewed
  - ☐ If AE investigation reveals quality problem likely to affect patients, patients and prescribers are notified
  - ☐ AE with a CNSP reported to FDA MedWatch program for human drugs; FDA Form 1932a for animal drugs

☐ **USP <795> 15. DOCUMENTATION: Must have & maintain written or electronic documentation to demonstrate compliance**

- ☐ Personnel training, competency assessments, and corrective actions for any failures
- ☐ Equipment records (e.g., calibration, verification, and maintenance reports)
- ☐ Product(s) Cerificate of Analysis (COA)
- ☐ Receipt of components
- ☐ SOPs, Master Formulation Records, and Compounding Records
- ☐ Release inspection and testing records
- ☐ Information related to complaints and adverse events including corrective actions taken
- ☐ Results of investigation and corrective actions
- ☐ Records must be legible and stored in a manner that prevents their deterioration and/or loss
- ☐ All records readily retrievable for 3 years after prep or as required by the laws and regulations, whichever is longer