



- 1 30 April 2018
- 2 EMA/113700/2008 Rev.1
- 3 Veterinary Medicines and Product Data Management

4 EudraVigilance Access Policy for Medicines for Veterinary Use

EudraVigilance Access Policy for Medicines for Veterinary Use coming into effect	7 July 2011
Draft Revised EudraVigilance Access Policy for Medicines for Veterinary Use adopted by the Committee for Medicinal Products for Veterinary Use (CVMP) for release for consultation	19 April 2018
Start of public consultation	30 April 2018
End of consultation (deadline for comments)	27 June 2018

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25 **Executive summary**

26 The European Medicines Agency (hereafter referred to as “the Agency”) and the medicines regulatory
27 authorities collectively comprise the European Union (EU) regulatory network. The network's
28 responsibilities are the protection and promotion of public health through the evaluation and
29 supervision of medicines and the continuous safety monitoring and benefit-risk assessment of
30 medicines, including the collection, management and dissemination of information on suspected
31 adverse reactions to medicines (pharmacovigilance). The key EU resource to support this activity is
32 EudraVigilance Veterinary (EVVET), a centralised European database of suspected adverse reactions
33 related to veterinary medicinal products authorised in the European Economic Area (EEA).

34 In December 2010, the EMA Management Board adopted an EVVET Access Policy, which came in force
35 in July 2011. This policy outlined the data elements for and the principles of providing access to reports
36 of suspected adverse reactions referred to as Adverse Event Reports (AERs) in EVVET as regards
37 medicines regulatory authorities and marketing authorisation holders (MAHs) in the EEA, healthcare
38 professionals, patients and consumers (hereafter referred to as “public”) as well as academia.

39 The legal requirements related to pharmacovigilance for veterinary medicinal products are outlined by
40 Regulation (EC) No 726/2004 and Directive 2001/82/EC and furthermore Volume 9b of The Rules
41 Governing Medicinal Products in the European Union. The current EudraVigilance Veterinary system
42 that adheres and supports the EU legal requirements came into operation in 2005.

43 In 2010, the international guideline VICH1 GL42; data elements for submission of adverse event
44 reports was adopted followed in 2013 by 2 further technical guidelines VICH GL35; Electronic
45 standards for transfer of data and VICH GL30 Controlled list of terms. The current EVVET system will
46 be updated accordingly to comply with the international standards. Consequently the EVVET Access
47 Policy adopted in December 2010 has been updated whilst maintaining adherence to EU data
48 protection rules. The aim is to provide the access necessary for stakeholders with legal obligations in
49 pharmacovigilance as well as to give the highest possible degree of transparency while minimising the
50 necessity to engage in ad-hoc individual requests.

51 The methods by which stakeholders are provided with access to EVVET based on defined AER data
52 elements and in accordance with EU data protection legislation have been further elaborated based on
53 experience gained and taking into account the international guidelines.

54 In summary:

- 55 • No changes in the EudraVigilance Access Policy have been introduced for the following
56 stakeholders:
 - 57 – Medicines regulatory authorities, the Agency and the European Commission, who maintain
58 access to all AER data (Section 5.2.5.1. and Table 3);
 - 59 – MAHs using EVWEB for the electronic reporting of AERs will maintain full access to their own
60 reports (Section 5.2.5.3. and Table 5).
- 61 • The main changes in the EudraVigilance Access Policy are:
 - 62 – Healthcare professionals and the public will gain extended access to AER data for all medicinal
63 products authorised in the EU by means of easy to use retrieval functions provided through the
64 Agency's adrreports.eu portal (Section 5.2.5.2. and Table 4).

¹ VICH is a trilateral (EU-Japan-USA) programme aimed at harmonising technical requirements for veterinary product registration. Its full title is the International Cooperation on Harmonisation of Technical Requirements for Registration of Veterinary Medicinal Products (<http://www.vichsec.org/>)

- 65 – MAHs will be provided with access to defined AER data element sets in support of their signal
66 detection, validation and other pharmacovigilance obligations (Section 5.2.5.3. and Table 5);
- 67 – Academia will gain extended access to AER data sets in support of their research activities and
68 requests (Section 5.2.5.4. and Table 6.);
- 69 – Medicines regulatory authorities in third countries can obtain data outputs on an ad-hoc basis
70 (Section 5.2.5.5. and Table 7);
- 71 – The need to maintain the confidentiality of the identity of individuals such as patients and
72 reporters in accordance with EU data protection law is being further emphasised including the
73 responsibility of concerned stakeholders to apply appropriate technical and organisational
74 measures to protect information and personal data processed against unauthorised or unlawful
75 access, disclosure, dissemination, alteration, or destruction or accidental loss (text integrated
76 in the description of access for each stakeholder);
- 77 – The data elements for AERs have been reviewed and updated in line with the VICH adverse
78 events reporting guidelines (GL30, 42 and 35).

79 **1. Introduction (background)**

80 MAHs and regulatory authorities in the EU have the obligation, for all authorised veterinary medicines,
81 to electronically exchange adverse event reports which are centralised in the EU in one single database
82 system, EVVET. The system is operational since 2005 and there has been a yearly increase in
83 reporting, mainly related to improved adherence to the regulatory requirements as well as increased
84 awareness of the value of pharmacovigilance reporting by veterinarians in the field. At the same time,
85 the Agency is experiencing a significant increase in information requests from the general public
86 related to such post-authorisation safety data. The initial access policy that came into force in 2011
87 was fully aligned with the access policy related to the Eudravigilance system for medicinal products for
88 human use. However, while a dedicated web tool was put in place for the general public to access
89 summary information of the data held in EudraVigilance Human, unfortunately such possibility was not
90 put in place for Eudravigilance Veterinary due to lack of resources, which may partly explain the high
91 number of requests for access to information which otherwise would have been readily obtainable from
92 such web tool. The ongoing update of EVVET now also includes the availability of a web tool for the
93 general public to access the post-authorisation data related to veterinary medicinal products
94 authorised in the EU.

95 In 2010, new pharmacovigilance legislation was finalised related to medicinal products for human use
96 and, consequently, the access policy for Eudravigilance human was updated in December 2015 to take
97 into account the new requirements. For veterinary medicinal products, the European Commission
98 released in September 2014 a new draft veterinary pharmaceutical regulation, which also includes
99 potential significant changes in relation to pharmacovigilance requirements. While it is yet unclear how
100 much these new requirements will differ from the current legislative requirements and from the human
101 legislative requirements, it is nevertheless assumed that in view of the objectives of simplification and
102 the overall similarities of both reporting systems, the requirements in terms of access for stakeholders
103 to submit data, as well as access rights to information for the general public will be very similar. In
104 that respect the overall access principles to EVVET and EVHuman remain aligned with this proposed
105 revision of the access policy.

106 In addition, and following the adoption in 2010 and 2013 of further international guidelines related to
107 adverse event reporting under VICH guidelines GL30, GL35 and GL42, there is a need to update the
108 current EVVET system to become compliant with these guidelines, in particular with the internationally
109 defined message format for an adverse event message. This implementation is taken place as part of

110 the “EVVET3 project”, and requires the update of the access policy to align the field access
111 specifications for each stakeholder to the data fields as identified by the VICH international standards,
112 and as being implemented for the updated EVVET system.

113 **2. Scope**

114 This Access Policy defines the overall principles for providing access to AER data held in EudraVigilance
115 Veterinary in line with the EU legal framework and taking into account that the interest in and the use
116 of the data may vary between stakeholders. Requirements to protect personal data based on
117 Regulation (EC) No 45/2001 and reflected in the policy accordingly.

118 According to Regulation (EC) No 726/2004, the EudraVigilance database shall contain information on
119 suspected adverse reactions in animals arising from use of the veterinary medicinal product within the
120 terms of the marketing authorisation as well as suspected adverse reactions in animals and human
121 beings from uses outside the terms of the marketing authorisation.

122 The Regulation defines the level of EVVET access as follows:

- 123 1. EVVET shall be fully accessible to the competent authorities of the Member States and to the
124 Agency and the European Commission.
- 125 2. It shall also be accessible to MAHs to the extent necessary for them to comply with their
126 pharmacovigilance obligations.
- 127 3. The Agency shall ensure that healthcare professionals and the public have appropriate levels of
128 access to the EVVET database, while guaranteeing personal data protection.

129 The description of individual cases and AERs are further outlined in Annex A.

130 **3. Policy statement**

131 The following aspects are addressed in this policy:

- 132 • Objectives of the policy.
- 133 • Characteristics of the policy.
- 134 • Date of coming into effect of the policy.

135 **4. Objectives**

136 This Access Policy has been developed with the goal to facilitate the continuous monitoring of the
137 safety of medicinal products for veterinary use, and the evaluation of the benefits and risks of
138 medicines authorised in the EU, with the overall aim to promote and protect animal and public health.

139 Furthermore, the Access Policy aims to meet the EU principles of transparency and openness and to
140 ensure compliance with EU personal data protection legislation. By providing proactive access to
141 adverse reaction data collected in EVVET, the following objectives should be met:

- 142 • Providing openness to healthcare professionals and the public, who are directly affected by the EU
143 Regulatory Network’s decisions relating to the authorisation and supervision of medicinal products
144 for veterinary use, including the monitoring and assessment of the safety of veterinary medicines;
- 145 • Facilitating the monitoring of the safety of veterinary medicines following their authorisation and
146 marketing;

- 147 • Supporting signal detection and validation activities related to all authorised veterinary medicines
148 in the EU;
- 149 • Allowing the use of adverse reaction data for research purposes to contribute to promoting and
150 protecting public health and fostering the innovation capacity of European medical research;
- 151 • Strengthening of the collaboration with medicines regulatory authorities in third countries as
152 regards the safety monitoring of medicines.

153 **5. Characteristics of the policy**

154 **5.1. EudraVigilance Veterinary and Medicinal Products for Veterinary Use**

155 EVVET has multiple functions, which relate to the secure electronic transmission of AERs, the
156 collection, administration and quality management of these reports in a centralised database, which
157 serves the early detection of potential safety signals and the evaluation thereof. To support these
158 functions, EudraVigilance Veterinary is composed of the following main system components:

159 **Data processing and management system components**

- 160 • **EudraVigilance Gateway**, a data-processing network for the secure electronic exchange of
161 adverse reaction data.
- 162 • **EudraVigilance Veterinary (EVVET)** dedicated to the collection of AERs related to all medicinal
163 products for veterinary use authorised in the EEA in line with Regulation (EC) No 726/2004 and
164 Directive 2001/82/EC.

165 Note: EVET can be accessed through EVWEB by registered users, which provides a web interface with a
166 set of functionalities to aid the creation, electronic reporting of and access to AERs. EVWEB includes
167 the AER Export Manager, which permits the download of AERs in an internationally agreed format.

- 168 • **EudraVigilance Veterinary Medicinal Product Dictionary (EVVETMPD)**, dedicated as
169 reference source for the coding of substances and medicinal products reported in AERs.

170 **Data analysis and signal detection component**

- 171 • **EudraVigilance Data Warehouse and Analysis System (EVVET DWH)**, dedicated to support
172 the EU pharmacovigilance safety monitoring activities with the main focus on signal detection and
173 evaluation of AERs.

174 **Adrreports.eu portal**

- 175 • The **portal** will allow to search and view data on suspected adverse reactions for authorised
176 veterinary medicinal products in the EEA and provides general information to aid the understanding
177 of the reports.

178 Adequate quality of AERs as reported to EVVET is paramount in implementing this Access Policy. The
179 Agency is operating procedures that ensure the quality and integrity of the information reported in
180 EVVET. This is performed in collaboration either with the MAH or with the Member State that submitted
181 an AER to EVVET. This refers in particular to the responsibilities of these stakeholders with EVVET
182 reporting obligations to:

- 183 • Adequately document individual cases and follow-up information in accordance with the regulatory
184 pharmacovigilance requirements;
- 185 • Operate local duplicate detection and management procedures;

- 186 • Adhere with the reporting timelines of suspected serious and non-serious adverse reactions;
- 187 • Comply with personal data protection requirements as set out in Regulation (EU) No 679/2016 or
- 188 the General Data Protection Regulation (GDPR);
- 189 and the responsibility of the Agency for the:
- 190 • Coding of veterinary medicinal product information reported in AERs;
- 191 • Operation of procedures to ensure the quality and integrity of AERs reported in EVVET including the
- 192 detection and management of duplicated individual cases;
- 193 • Compliance with personal data protection requirements as set out in Regulation (EC) No 45/2001
- 194 on the protection of personal data and any new Regulation which will replace Regulation (EC) No
- 195 45/2001.

196 **5.2. Access to EudraVigilance Veterinary Data**

197 **5.2.1. Stakeholder Groups**

198 The stakeholders being granted access to EVVET data can be grouped as follows:

- 199 • Medicines regulatory authorities in EEA Member States, the European Commission and the Agency
- 200 • Marketing Authorisation Holders (MAH)
- 201 • Academia
- 202 • Medicines regulatory authorities in third countries.
- 203 • Healthcare Professionals and the Public

204 **5.2.2. General Principles**

205 Reports of suspected adverse events (AERs) are collected in EVVET as derived from legal obligations

206 placed on medicines regulatory authorities and MAHs in EEA Member States.

207 Access to AER data in EVVET is provided independent of the primary source (i.e. the person who

208 provides the facts about the AER), the sender of the report (e.g. a medicines regulatory authority or a

209 MAH) or the country, where the suspected adverse reaction occurred or was reported.

210 The data elements for AERs are defined in the “VICH GUIDELINES GL42 & GL35”

211 Access is defined based on the stakeholder's interests and needs as well as the requirement to comply

212 with EU personal data protection legislation (Regulation (EU) 679/2016 or the GDPR and Regulation

213 (EC) No 45/2001)). The protection of personal data is a fundamental right of EU citizens. Therefore,

214 the access is further defined in different levels taking into account that due to the nature of the

215 information not all data elements can be disclosed to avoid a potential re-identification of data

216 subjects.

217 Annex A lists all AER data elements (excl. batch wrapper and message header) and outlines those that

218 can be accessed by each stakeholder group based on the levels defined in Table 1.

219

220

221 **Table 1.** Description of access levels

Access Level	Description
Level 1	Public subset of AER data elements with main focus on Healthcare professionals and the general public
Level 2A	Extended subset of AER data elements with main focus on MAHs to fulfil their pharmacovigilance obligations.
Level 2B	Extended subset of AER data elements including case narratives with main focus on <ul style="list-style-type: none">• MAHs to validate signals.• Academia to directly advance public health and work, which is intended to improve procedures for protecting public health.• Regulatory authorities in 3rd countries, thus fostering protection of public health outside the EEA
Level 3	All AER data elements without restrictions with main focus on <ul style="list-style-type: none">• NCAs in EEA, the EC and the Agency, taking into account their roles and responsibilities to protect public health.• MAHs to fulfil their pharmacovigilance obligations based on the AERs that a MAH has sent to EudraVigilance.

222

223 It also needs to be recognised that not all data elements of AERs are always completed. This means
224 that although access is provided to certain data elements, information may not always be available
225 given the type of the report or the primary source of the information. Moreover, the new VICH AER
226 format foresees the use of additional data elements previously not available. This implies that with the
227 implementation of the VICH AER standard, information for these data elements may not be available
228 for legacy data i.e. AERs reported previously to EVVET in the Data elements guideline (DEG) format.

229 A detailed description of access to AER data held in EVVET for each stakeholder group is provided in
230 chapter 5.2.5.

231 For the purpose of access to AER data in EVVET by healthcare professionals and the public, MAHs,
232 academia and medicines regulatory authorities in third countries, the information held in the
233 EudraVigilance Veterinary Medicinal Product Dictionary (EVVETMPD) serves as a reference for data
234 coding and data retrieval purposes.

235 **5.2.3. Personal Data Protection**

236 The Agency, medicines regulatory authorities in EEA Member States and MAHs are responsible for:

- 237
- Ensuring confidentiality of AER data and Protecting personal data by implementing appropriate
238 technical and organisational measures to protect information and personal data processed against
239 unauthorised or unlawful access, disclosure, dissemination, alteration, or destruction or accidental
240 loss in accordance with the applicable law on personal data protection.

241 Personal data shall mean any information relating to an identified or identifiable natural person ('data
 242 subject'); an identifiable person is one who can be identified, directly or indirectly, in particular by
 243 reference to an identified number or to one or more factors specific to their physical, physiological,
 244 mental, economic, cultural or social identity (Article 2(a) of Regulation (EC) No 45/2001).

245 For the Agency the provisions set out in Regulation (EC) No 45/2001 apply; for medicines regulatory
 246 authorities in EEA Member States and MAHs the rules set out in Regulation (EU) No 679/2016 the
 247 General Data Protection Regulation apply.

248 **5.2.4. Methods of providing access to AER data held in EVVET**

249 Access to EVVET data is provided through easy to use query and data retrieval functions based on the
 250 EVVET system components described in chapter 5.1. Table 2. provides an overview of the system
 251 components applied to provide access to AER data for each stakeholder group and outlines the overall
 252 format of the data outputs.

253 **Table 2.** EVVET system components with AER data outputs by stakeholder group

EudraVigilance System Component	Data Outputs
Stakeholder: Regulatory authorities in EEA Member States, the European Commission and the Agency	
<ul style="list-style-type: none"> EV Gateway for the electronic re-routing of AERs to medicines regulatory authorities in EEA Member States based on primary source country for regulatory purposes 	<ul style="list-style-type: none"> AER electronic (XML) format
<ul style="list-style-type: none"> EVWEB including AER Export Manager 	<ul style="list-style-type: none"> AER electronic (XML) format AER forms
<ul style="list-style-type: none"> EVVET DWH 	<ul style="list-style-type: none"> Data outputs based on predefined and customisable query and signal detection functionalities AER line listings AER forms
Healthcare Professionals and the Public	
<ul style="list-style-type: none"> Adrreports.eu portal 	<ul style="list-style-type: none"> Aggregated data outputs based on predefined queries AER line listings (based on core AER data elements) AER forms (for individual case review)
Marketing Authorisation Holders	
<ul style="list-style-type: none"> EVWEB including AER Export Manager 	<ul style="list-style-type: none"> AERs electronic (XML) format AER forms
<ul style="list-style-type: none"> EVVET DWH 	<ul style="list-style-type: none"> Data outputs based on predefined query and

EudraVigilance System Component	Data Outputs
	signal detection functionalities <ul style="list-style-type: none"> AER line listings AER forms
<ul style="list-style-type: none"> Adrreports.eu portal 	<ul style="list-style-type: none"> Aggregated data outputs based on predefined queries AER line listings (based on core AER data elements) AER forms (for individual case review)
Academia + Medicines regulatory authorities in third countries	
<ul style="list-style-type: none"> Adrreports.eu portal 	<ul style="list-style-type: none"> Aggregated data outputs based on predefined queries AER line listings (based on core AER data elements) AER forms (for individual case review)
<ul style="list-style-type: none"> Not applicable 	<ul style="list-style-type: none"> Ad-hoc preparation of data set by the Agency based on receipt of a research request; data format will depend on research request

254 **5.2.5. Detailed description of access to AER data held in EVVET by**
 255 **Stakeholder Group**

256 **5.2.5.1. Medicines Regulatory Authorities in the EEA, the European Commission and the**
 257 **Agency**

258 **5.2.5.1.1. Reports of suspected adverse reactions in EVVET**

259 In accordance with (EC) No 726/2004, access to individual cases of suspected adverse reactions
 260 reported to EVVET is provided for all AER data elements for all medicinal products authorised in the
 261 EEA.

262 For further details refer to Table 3.

263 **Table 3.** Access to AER data by Medicines Regulatory Authorities in the EEA, the Agency and the
 264 European Commission

Stakeholder	Disclosure	Access Authorisation
<ul style="list-style-type: none"> Medicines Regulatory Authorities in EEA Member States Agency European Commission 	<ul style="list-style-type: none"> AER Level 3: <ul style="list-style-type: none"> All data elements for AERs reported to EVVET (for details refer to Annex A) 	Authorised Personnel

265 **5.2.5.1.2. Methods of Access**

266 A description of how access is provided to these stakeholders including the main data outputs is given
267 in chapter 5.2.4.

268 **5.2.5.1.3. Access Authorisation**

269 Access is granted to authorised personnel of the European Commission, the Agency and Medicines
270 Regulatory Authorities in the EEA. The identification of 'authorised personnel' is based on the EVVET
271 registration process. In Member States, where regional pharmacovigilance centres are established, the
272 responsible medicines regulatory authority determines the level of access, which should be granted to
273 these centres.

274 **5.2.5.1.4. Personal data protection requirements**

275 The AER data access provisions (Level 3) apply without prejudice to Directive 95/46/EC of the
276 European Parliament and of the Council of 24 October 1995 on the protection of individuals with regard
277 to the processing of personal data and on the free movement of such data and Regulation (EC) No
278 45/2001 of the European Parliament and of the Council of 18 December 2000 on the protection of
279 individuals with regard to the processing of personal data by the Community institutions and bodies
280 and on the free movement of such data. The fundamental right to protection of personal data has to be
281 fully and effectively guaranteed in all pharmacovigilance activities.

282 Hence, the data shall only be used for the purpose of the pharmacovigilance responsibilities identified
283 by the relevant legislative requirements (e.g. signal detection).

284 More specifically stakeholder group I is responsible for ensuring that:

- 285
- 286 • Information on EudraVigilance Veterinary is included in the privacy statements on their
pharmacovigilance activities.
 - 287 • Confidentiality of AERs and the personal data of the subjects remain protected in accordance with
288 the applicable law on personal data protection.
 - 289 • The Agency is notified immediately of a breach of security leading to the accidental or unlawful
290 destruction, loss, alteration, unauthorised disclosure of, or access to, personal data transmitted,
291 stored or otherwise protected in connection with data held or generated from EVVET.

292 **5.2.5.2. Healthcare Professionals and the Public**

293 **5.2.5.2.1. Reports of suspected adverse reactions in EVVET**

294 In accordance with the provisions of Regulation (EC) No 726/2004, access to individual cases of
295 suspected adverse reactions reported to EVVET is provided for a defined set of AER data elements in
296 compliance with Regulation (EC) No 45/2001 on personal data protection. This applies to spontaneous
297 reports for all veterinary medicinal products authorised in the EEA independent of the authorisation
298 procedure. General explanations and guidance on the nature and the interpretation of the accessible
299 data will be provided on the adrreports.eu portal.

300 For further details refer to Table 4.

301 **Table 4.** Access to EudraVigilance data by healthcare professionals and the public

Stakeholders	Disclosure	Access Authorisation
Healthcare Professionals and the Public	<ul style="list-style-type: none"> • AER Level 1: <ul style="list-style-type: none"> – Subset of AER data elements for substances/veterinary medicinal products authorised in the EEA (for details refer to Annex A) 	Not required

302

303 **5.2.5.2.2. Methods of Access**

304 A description of how access is provided to these stakeholders including the main data outputs is given
305 in chapter 5.2.4.

306 **5.2.5.2.3. Access Authorisation**

307 No authorisation for accessing the data by means of the adrreports.eu portal will be required i.e. all
308 healthcare professionals and the public can access adverse reaction data of interest.

309 **5.2.5.2.4. Personal data protection requirements**

310 Data access and provision is based on a defined AER data set (Level 1) in compliance with Regulation
311 (EC) No 45/2001. A statement on data privacy will be included under the section “Background” of the
312 adrreports.eu portal. The Agency is also operating a procedure for access and rectification in line with
313 the aforementioned Regulation.

314

315

316 **5.2.5.3. . Marketing Authorisation Holders**

317 **5.2.5.3.1. Reports of suspected adverse reactions in EVVET**

318 In accordance with the provisions of Regulation (EC) No 726/2004, access to individual cases of
319 suspected adverse reactions reported to EV is provided to MAHs for a defined set of AER data elements
320 in compliance with Regulation (EC) No 45/2001 and Regulation (EU) No 679/2016, the General Data
321 Protection Regulation.

322 For further details refer to Table 5.

323 **Table 5.** Access to EudraVigilance data by Marketing Authorisation Holders

Stakeholder	Disclosure	Access Authorisation
Marketing Authorisation Holders	<ul style="list-style-type: none"> • AER Level 1: <ul style="list-style-type: none"> – Subset of AER data elements for substances/medicinal products authorised in the EEA (for details refer to Annex A) made available through EVVET DWH 	EU Qualified Person Responsible for Pharmacovigilance (EU QPPV) (headquarter level), appointed Deputy and authorised personnel under the strict responsibility of the EU QPPV.
	<ul style="list-style-type: none"> • AER Level 2A: <ul style="list-style-type: none"> – Extended subset of AER data elements (for details refer to Annex A) 	EU QPPV (headquarter level), appointed Deputy and authorised personnel under the strict responsibility of the EU QPPV.
	<ul style="list-style-type: none"> • AER Level 2B: <ul style="list-style-type: none"> – Extended subset of AER data elements including case narrative (for details refer to Annex A) 	EU QPPV (headquarter level) /appointed Deputy and authorised personnel under the strict responsibility of the EU QPPV based on submission of a formal request and the signed confidentiality undertaking for MAHs (see Annex B).
	<ul style="list-style-type: none"> • AER Level 3: <ul style="list-style-type: none"> – All data elements for AERs that MAH submitted (“Sender-based”) to EVVET 	EU QPPV (headquarter level)/appointed Deputy and authorised personnel under the strict responsibility of the EU QPPV.

324

325 **5.2.5.3.2. Methods of access**

326 A description of how access is provided to these stakeholders including the main data outputs is given
327 in chapter 5.2.4.

328 **5.2.5.3.3. Access Authorisation**

329 Access to AER data elements Level 1 and 2A is granted to authorised personnel of a MAH at
330 headquarter level. The identification of authorised personnel under the strict responsibility of the EU
331 QPPV is based on the EVVET registration process. The EU QPPV of the MAH (headquarter level) or their
332 registered Deputy nominates the authorised personnel in line with the EVVET registration process and
333 is responsible for updating the user registration for their organisation accordingly.

334 AER Level 2B access is granted to the EU QPPV/registered Deputy and any other personnel under the
335 strict responsibility of the EU QPPV of a MAH at headquarter level following the receipt of a formal
336 request by the EU QPPV or their registered Deputy in the context of signal management or where a
337 review of AER data is warranted in the context of a pharmacovigilance assessment procedure in line
338 with legislation and following acceptance of the confidentiality undertaking for MAHs (see Annex B).

339 **5.2.5.3.4. Personal data protection requirements**

340 The access provisions apply without prejudice to regulation (EU) No 679/2016, the General Data
341 Protection Regulation. The fundamental right to protection of personal data have to be fully and
342 effectively guaranteed in all pharmacovigilance activities. More specifically, MAHs are responsible for
343 ensuring that:

- 344 • With regard to the processing of personal data, for the purpose of pharmacovigilance activities,
345 information on the transfer of data to EVVET is included in their privacy statements.
- 346 • Confidentiality of records and the personal data of the subjects remain protected in accordance
347 with the applicable law on personal data protection.
- 348 • Appropriate technical and organisational measures are implemented to protect information and
349 personal data processed against unauthorised or unlawful access, disclosure, dissemination,
350 alteration, or destruction or accidental loss.
- 351 • The Agency is notified immediately of a breach of security leading to the accidental or unlawful
352 destruction, loss, alteration, unauthorised disclosure of, or access to, personal data transmitted,
353 stored or otherwise protected in connection with data held or generated from EVVET.

354

355 **5.2.5.4. Group IV: Academia**

356 **5.2.5.4.1. Reports of suspected adverse reactions in EVPM**

357 In the context of this Access Policy the following definition applies:

358 **'Academia' or 'Academic sector'** should be understood as consisting of public or private higher
359 education establishments awarding academic degrees, public or private non-profit research
360 organisations whose primary mission is to pursue research, and international European interest
361 organisations².

362 **'Non-profit organisation' or 'non-profit legal entity'** should be understood as a legal entity which
363 by its legal form is non-profit-making or which has a legal or statutory obligation not to distribute
364 profits to its shareholders or individual members³.

365 **'Legal entity'** should be understood as any natural person, or any legal person created and
366 recognised as such under national law, Union law or international law, which has legal personality and
367 which may, acting in its own name, exercise rights and be subject to obligations⁴.

368 **'International European interest organisation'** should be understood as an international
369 organisation, the majority of whose members are Member States or associated countries, and whose
370 principal objective is to promote scientific and technological cooperation in Europe⁵.

371 In accordance with the provisions of Regulation (EC) No 726/2004, access to individual cases of
372 suspected adverse reactions reported to EVVET is provided for a defined set of AER data elements
373 (Level 1) in compliance with Regulation (EC) No 45/2001.

374 Furthermore, an extended AER data set (Level 2B) for substances or substance classes for medicinal
375 products authorised in the EEA can be made available to academia by the Agency based on the
376 following principles:

- 377 • The Agency supports efforts that aim to directly advance public health and work which is
378 intended to improve procedures for protecting public health.
- 379 • The data to be provided should be sufficient to carry out work aimed at achieving either of the
380 objectives named above and should observe EU legislation on protection of personal data.
- 381 • A research request should be submitted to the Agency using the form "Send a question to the
382 European Medicines Agency⁶".
- 383 • The research request should address as a minimum the primary research question, the
384 methodology to be used, the way that the results will impact on public health and the name
385 and contact details of the person nominated by the academic institution to safeguard the
386 EVVET data for the research purpose. These details should not exceed 1500 words and should
387 be provided in English. A panel with representatives from the Agency's Pharmacovigilance

² MSCA Standard Eligibility Conditions: Extract from the MSCA part of the main Work Programme" of 10 December 2013

³ REGULATION (EU) No 1290/2013 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 11 December 2013 laying down the rules for participation and dissemination in "Horizon 2020 - the Framework Programme for Research and Innovation (2014-2020)" and repealing Regulation (EC) No 1906/2006

⁴ REGULATION (EU) No 1290/2013 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 11 December 2013 laying down the rules for participation and dissemination in "Horizon 2020 - the Framework Programme for Research and Innovation (2014-2020)" and repealing Regulation (EC) No 1906/2006

⁵ REGULATION (EU) No 1290/2013 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 11 December 2013 laying down the rules for participation and dissemination in "Horizon 2020 - the Framework Programme for Research and Innovation (2014-2020)" and repealing Regulation (EC) No 1906/2006

⁶ http://www.ema.europa.eu/ema/index.jsp?curl=pages/about_us/landing/ask_ema_landing_page.jsp: a template will be made available at the dedicated webpage "Access to EudraVigilance data" of the Agency's corporate website

388 Department will review the research request for the purpose of preparing the AER data set
 389 required for the research. The data quality will be the best available to the Agency at the time
 390 of request. Metadata (i.e. explanations on how to interpret the data e.g. comparisons to
 391 baselines) essential for the interpretation of the EudraVigilance data set for which access is
 392 provided, will be also made available by the Agency where applicable.

393 • The Agency will not review the validity or soundness of the research proposal and will apply a
 394 standard timescale for response to requests.

395 • The academic researchers should make all possible efforts to publish their research outcome. A
 396 copy of any associated articles should be provided to the Agency at least 5 business days
 397 ahead of publication. This is for information purposes only.

398 **Table 6.** Access to EVVET data by Academia

Stakeholder Group IV	Disclosure	Access Authorisation
Academia	<ul style="list-style-type: none"> • AER Level 1: <ul style="list-style-type: none"> – Subset of AER data elements for substances/medicinal products authorised in the EEA (for details refer to Annex A) 	Not required.
	<ul style="list-style-type: none"> • AER Level 2B: <ul style="list-style-type: none"> – Extended set of AER data elements (for details refer to Annex A) 	Nominated person by the academic institution following submission of a research request

399

400 **5.2.5.4.2. Methods of access**

401 A description of how access is provided to these stakeholders including the main data outputs is given
 402 in chapter 5.2.4.

403 **5.2.5.4.3. Access Authorisation**

404 No authorisation for accessing the AER (Level 1) data set by means of the adrreports.eu portal will be
 405 required i.e. all academic researchers can access adverse reaction data of interest.

406 Access to an extended data set (AER Level 2B) will be provided by the Agency to a person nominated
 407 by the academic institution to safeguard the EVVET data following submission of a research request.

408 **5.2.5.4.4. Personal data protection requirements**

409 The personal data protection requirements for AER level are identical to those outlined in chapter
410 5.2.5.3.4.

411 **5.2.5.5. Group VI: Medicines regulatory authorities in third countries**

412 **5.2.5.5.1. Reports of suspected adverse reactions in EVVET**

413 Access to individual cases of suspected adverse reactions occurring in the EEA and reported to EVVET
414 is provided for a defined set of AER data elements (Level 1 and Level 2B) in compliance with
415 Regulation (EC) No 45/2001.

416 For further details refer to Table 7.

417 **Table 7.** Access to EVVET data by Medicines Regulatory Authorities in third countries

Stakeholder Group VI	Disclosure	Access Authorisation
Medicines Regulatory Authorities in third countries	<ul style="list-style-type: none">• AER Level 1:<ul style="list-style-type: none">– Subset of AER data elements for substances/medicinal products authorised in the EEA (for details refer to Annex A)	Not required
	<ul style="list-style-type: none">• AER Level 2B:<ul style="list-style-type: none">– Subset of AER data elements for substances/medicinal products authorised in the EEA (for details refer to Annex A)	Nominated contact of Medicines Regulatory Authority in the third country

418

419 **5.2.5.5.2. Methods of access**

420 A description of how access is provided to these stakeholders including the main data outputs is given
421 in chapter 5.2.4.

422 **5.2.5.5.3. Access authorisation**

423 Access to the AER data set Level 2B is provided where the Agency receives a request from a medicines
424 regulatory authority in a third country e.g. in the context of the evaluation of a safety issue related to
425 a medicine. Access is provided to the nominated contact of the medicines regulatory authority.

426 **5.2.5.5.4. Personal data protection requirements**

427 Transfer of data to medicines regulatory authorities in third countries will in any case comply with
428 applicable data protection legislation.

429 **6. Entry into force of the EudraVigilance Access Policy**

430 This Access Policy will enter into force six months following the announcement by the Management
431 Board of the Agency that the EudraVigilance Veterinary 3 database has achieved full functionality.

432

433 **Annex A - AER data elements accessible by stakeholder group**

434 This chapter provides a list of all data elements for AERs defined in the guidelines “VICH GL42: Pharmacovigilance: data elements for submission of adverse
435 event reports (AERs)” and “VICH GL35: Pharmacovigilance: electronic standards for transfer of data”.

436 It further outlines the access of AER data elements provided for each stakeholder group as defined in chapter5.2.1.

437

438 Access to AER data elements by stakeholder group

439

VICH GL35 Data Elements		NCA	PUBLIC	MAHs/ Academia	MAHs/Academia/NCAs in 3rd countries	MAHs
ICH/EU	DATA ELEMENT NAME	Level 3	Level 1	Level 2A	Level 2B	Level 3*
VICH	GL 42 Contents					
A.	Administrative and Identification Information					
A.1	Regulatory Authority (RA)					
A1.1	RA name	Y	Y	Y	Y	Y
A1.2	Street address	Y	N	N	N	Y
A1.3	City	Y	N	N	N	Y
A1.4	State/county	Y	N	N	N	Y
A1.5	Mail/zip code	Y	N	N	N	Y
A1.6	Country (3 character country codes ISO 3166)	Y	Y	Y	Y	Y
A.2	Marketing Authorisation Holder (MAH)					
A.2.1	MAH Information					
A.2.1.1	Business name	Y	Y	Y	Y	Y
A.2.1.2	Street address	Y	N	N	N	Y
A.2.1.3	City	Y	N	N	N	Y
A.2.1.4	State/county	Y	N	N	N	Y
A.2.1.5	Mail/zip code	Y	N	N	N	Y

A.2.1.6	Country (3 character country codes ISO 3166)	Y	N	N	N	Y
A.2.2	Person Acting on Behalf of MAH					
A.2.2.1	Title	Y	N	N	N	Y
A.2.2.2	First name	Y	N	N	N	Y
A.2.2.3	Last name	Y	N	N	N	Y
A.2.2.4	Telephone	Y	N	N	N	Y
A.2.2.5	Fax	Y	N	N	N	Y
A.2.2.6	e-mail	Y	N	N	N	Y
A.3	Persons Involved in the AER					
A.3.1	Primary Reporter					
A.3.1.1	Primary Reporter Category	Y	Y	Y	Y	Y
A.3.1.2	Last name	Y	N	N	N	Y
A.3.1.3	First name	Y	N	N	N	Y
A.3.1.4	Telephone	Y	N	N	N	Y
A.3.1.5	Fax	Y	N	N	N	Y
A.3.1.6	e-mail	Y	N	N	N	Y
A.3.1.7	Business name	Y	N	N	N	Y
A.3.1.8	Street address	Y	N	N	N	Y
A.3.1.9	City	Y	N	N	N	Y
A.3.1.10	State/county	Y	N	N	N	Y
A.3.1.11	Mail/zip code	Y	N	N	N	Y
A.3.1.12	Country (3 character country codes ISO3166)	Y	Y	Y	Y	Y
A.3.2	Other Reporter					
A.3.2.1	Primary Reporter Category	Y	Y	Y	Y	Y
A.3.2.2	Last name	Y	N	N	N	Y
A.3.2.3	First name	Y	N	N	N	Y
A.3.2.4	Telephone	Y	N	N	N	Y

A.3.2.5	Fax	Y	N	N	N	Y
A.3.2.6	e-mail	Y	N	N	N	Y
A.3.2.7	Business name	Y	N	N	N	Y
A.3.2.8	Street address	Y	N	N	N	Y
A.3.2.9	City	Y	N	N	N	Y
A.3.2.10	State/county	Y	N	N	N	Y
A.3.2.11	Mail/zip code	Y	N	N	N	Y
A.3.2.12	Country (3 character country codes ISO 3166)	Y	Y	Y	Y	Y
A.4	AER Information					
A.4.1	Unique AER Identification Number	Y	Y	Y	Y	Y
A.4.2	Original received date	Y	N	Y	Y	Y
A.4.3	Date of Current Submission	Y	N	Y	Y	Y
A.4.4	Type of Report					
A.4.4.1	Type of Submission & Code	Y	N	N	N	Y
A.4.4.2	Reason for Nullification Report	Y	N	N	N	Y
A.4.4.3	Type of Information in Report & Code	Y	Y	Y	Y	Y
B.	Description of Animal Data Information					
B.1	Animal Data					
B.1.1	Number of Animals Treated	Y	Y	Y	Y	Y
B.1.2	Number of Animals Affected	Y	Y	Y	Y	Y
B.1.2.1	Attending Veterinarian's assessment of animal health status prior to VMP use & Code	Y	Y	Y	Y	Y
B.1.3	Species (Type of Species) & Code	Y	Y	Y	Y	Y
B.1.4	Breed & Code					
B.1.4.1.1	Breed (Purebreed)	Y	Y	Y	Y	Y

B.1.4.2.1	Breed (Crossbred)	Y	Y	Y	Y	Y
B.1.5	Gender & Code	Y	Y	Y	Y	Y
B.1.6	Reproductive Status & Code	Y	Y	Y	Y	Y
B.1.7	Female Physiological Status & Code	Y	Y	Y	Y	Y
B.1.8	Animal Weight					
B.1.8.1	Weight Measured, Estimated or Unknown & Code	Y	Y	Y	Y	Y
B.1.8.2	Minimum Weight	Y	Y	Y	Y	Y
B.1.8.2.1	Minimum Weight Unit	Y	Y	Y	Y	Y
B.1.8.3	Maximum Weight	Y	Y	Y	Y	Y
B.1.8.3.1	Maximum Weight Unit	Y	Y	Y	Y	Y
B.1.9	Animal Age					
B.1.9.1	Age Measured, Estimated or Unknown & Code	Y	Y	Y	Y	Y
B.1.9.2	Minimum Age	Y	Y	Y	Y	Y
B.1.9.2.1	Minimum Age Units (code)	Y	Y	Y	Y	Y
B.1.9.3	Maximum Age	Y	Y	Y	Y	Y
B.1.9.3.1	Maximum Age Units (code)	Y	Y	Y	Y	Y
B.2	VMP(s) Data and Usage					
B.2.1	Registered Name or Brand Name	Y	Y/N	Y	Y	Y
B.2.1.1	Product Code	Y	Y	Y	Y	Y

B.2.1.2	Registration Identifier	Y	N	Y	Y	Y
B.2.1.3	Anatomical Therapeutic Chemical Vet (ATCvet) Code	Y	N	Y	Y	Y
B.2.1.4	Company or MAH	Y	N	Y	Y	Y
B.2.1.5	MAH Assessment	Y	N	Y	Y	Y
B.2.1.6	RA Assessment	Y	N	Y	Y	Y
B.2.1.6.1	RA Assessment Term	Y	N	Y	Y	Y
B.2.1.6.1.1	Explanation Relating to Assessment	Y	N	Y	Y	Y
B.2.1.7	Route of Exposure (Route of Administration)	Y	Y	Y	Y	Y
B.2.1.7.1	Dose Per Administration	Y	Y	Y	Y	Y
B.2.1.7.1.1	Numeric Value for Dose (Numerator)	Y	Y	Y	Y	Y
B.2.1.7.1.1.1	Units of Value for Dose (Numerator)	Y	Y	Y	Y	Y
B.2.1.7.1.2	Numeric Value for Dose (Denominator)	Y	Y	Y	Y	Y
B.2.1.7.1.2.1	Units of Value for Dose (Denominator)	Y	Y	Y	Y	Y
B.2.1.7.1.3	Interval of Administration	Y	Y	Y	Y	Y
B.2.1.7.1.3.1	Numeric Value for Interval Of Administration	Y	Y	Y	Y	Y
B.2.1.7.1.3.1.1	Units of Value for Interval Of Administration	Y	Y	Y	Y	Y
B.2.1.7.1.3.2	Date of First Exposure	Y	N	Y	Y	Y
B.2.1.7.1.3.3	Date of Last Exposure	Y	N	Y	Y	Y
B.2.2	Active Ingredient(s)					

B.2.2.1	Active Ingredient(s)	Y	Y	Y	Y	Y
B.2.2.1.1	Numeric Value for Strength (Numerator)	Y	N	Y	Y	Y
B.2.2.1.1.1	Units for Numeric Value for Strength (Numerator)	Y	N	Y	Y	Y
B.2.2.1.2	Numeric Value for Strength (Denominator)	Y	N	Y	Y	Y
B.2.2.1.2.1	Units for Numeric Value for Strength (Denominator)	Y	N	Y	Y	Y
B.2.2.1.3	Active Ingredient Code	Y	Y	Y	Y	Y
B.2.2.2	Dosage Form & Code	Y	Y	Y	Y	Y
	Lot Number					
B.2.3	Lot Number	Y	N	Y	Y	Y
B.2.3.1	Expiry Date	Y	N	Y	Y	Y
	Administration					
B.2.4	Who Administered the VMP & Code	Y	Y	Y	Y	Y
	Label Usage					
B.2.5	Use According to Label	Y	Y	Y	Y	Y
B.2.5.1	Explanation for Off-Label Use	Y	Y	Y	Y	Y
B.2.5.1.1	Explanation for Off-Label Use – Was the target species Off-Label?	Y	Y	Y	Y	Y
B.2.5.1.2	Explanation for Off-Label Use – Was the route of administration Off-Label?	Y	Y	Y	Y	Y
B.2.5.1.3	Explanation for Off-Label Use – Was the animal overdosed?	Y	Y	Y	Y	Y
B.2.5.1.4	Explanation for Off-Label Use – Was the animal underdosed?	Y	Y	Y	Y	Y

B.2.5.1.5	Explanation for Off-Label Use – Was the treatment regimen Off-Label?	Y	Y	Y	Y	Y
B.2.5.1.6	Explanation for Off-Label Use – Was the indication Off-Label?	Y	Y	Y	Y	Y
B.2.5.1.7	Explanation for Off-Label Use – Was the storage condition Off-Label?	Y	Y	Y	Y	Y
B.2.5.1.8	Explanation for Off-Label Use – Was the product expired?	Y	Y	Y	Y	Y
B.2.5.1.9	Explanation for Off-Label Use – Was there any other Off-Label issue?	Y	Y	Y	Y	Y
B.3	Adverse Event Data					
B.3.1	Narrative of AE	Y	N	N	Y	Y
B.3.2	Adverse Clinical Manifestations (AER Term Name(s) & Code(s))	Y	Y	Y	Y	Y
B.3.2.1	Number of Animal	Y	Y	Y	Y	Y
B.3.2.1.1	Accuracy of the Number of Animals	Y	Y	Y	Y	Y
B.3.3	Date of Onset of AE (AE Start Date)	Y	Y	Y	Y	Y
B.3.4	Length of Time Between Exposure to VMP and Onset of AE	Y	Y	Y	Y	Y
B.3.5	Duration of AE					
B.3.5.1	Duration (Time)	Y	Y	Y	Y	Y
B.3.5.1.1	Duration Time Units	Y	Y	Y	Y	Y
B.3.6	Serious AER	Y	Y	Y	Y	Y
B.3.7	Treatment of AE	Y	Y	Y	Y	Y
B.3.8	Outcome to Date					
B.3.8.1	Ongoing	Y	Y	Y	Y	Y
B.3.8.2	Recovered/Normal	Y	Y	Y	Y	Y

B.3.8.3	Recovered with Sequela	Y	Y	Y	Y	Y
B.3.8.4	Died	Y	Y	Y	Y	Y
B.3.8.5	Euthanized	Y	Y	Y	Y	Y
B.3.8.6	Outcome Unknown	Y	Y	Y	Y	Y
B.3.9	Previous Exposure to VMP	Y	Y	Y	Y	Y
B.3.10	Previous AE to VMP	Y	Y	Y	Y	Y
B.4	Dechallenge-Rechallenge Information					
B.4.1	Did AE Abate After Stopping the VMP?	Y	Y	Y	Y	Y
B.4.2	Did AE Reappear After Re-introduction of the VMP?	Y	Y	Y	Y	Y
B.5	Assessment of AE					
B.5.1	Attending Veterinarian's Assessment of AE	Y	N	Y	Y	Y
B.6	Report Number(s) of Linked Report(s)					
B.6.1	Unique Adverse Event Report Identification Number	Y	N	Y	Y	Y
B.6.2	Explanation for Linkage	Y	N	Y	Y	Y
B.7	Supplemental Documents					
B.7.1	Attached Document Filename	Y	N	N	N	Y
B.7.1.1	Attached Document Type	y	N	N	N	Y

441 **Annex B - Confidentiality Undertaking for marketing** 442 **authorisation holders**

443 **Introduction**

444 This Confidentiality Undertaking is aimed principally at ensuring the protection of personal data. It
445 governs the access and use by marketing authorisation holders in the European Economic Area (EEA)
446 of the AER data set Level 2B as defined in chapter 5.2.5.3. of the European Medicines Agency policy on
447 access to EudraVigilance Veterinary data for medicinal products for veterinary use (EMA/113700/2008-
448 Revision 1) ("Policy"). By signing the Confidentiality Undertaking, access to AER data set Level 2B will
449 be granted to the marketing authorisation holder by the Agency.

450 **Access to the AER data set Level 2B under the policy**

451 The marketing authorisation holder acknowledges that the AER data set level 2B will be made available
452 in electronic format. Before being granted access to the AER data set level 2B, the marketing
453 authorisation holder shall provide the EMA with:

- 454 • A confirmation that either:
 - 455 ➤ The initial signal management steps have been performed;
 - 456 ➤ A review of AER data is warranted in the context of a pharmacovigilance assessment
457 procedure such as the PSUR or when required by the CVMP in a referral or signal
458 assessment procedure;
- 459 • Elements concerning the identity of the marketing authorisation holder (Organisation ID
460 Headquarter level, name and contact details in accordance with the EudraVigilance Veterinary
461 Registration details);
- 462 • A copy of the Confidentiality Undertaking signed by the EU QPPV and where different, by the
463 Deputy appointed by the EU QPPV or any other personnel, under the strict responsibility of the
464 EU QPPV, who is registered with EudraVigilance Veterinary and holds a valid user ID and
465 password and obtains access to the AER data set Level 2B, which includes a case narrative.

466

467 **Confidentiality Undertaking**

468 As a condition of my access to the EudraVigilance Veterinary database, for the purpose of ensuring the
469 protection of personal data therein, I agree to the following terms:

- 470 • I agree at all times to treat as confidential all information related to the AER data set Level 2B
471 and to use it for the purpose of signal management as outlined in legislation or in the context of
472 a pharmacovigilance assessment procedure such as the Periodic Safety Update Report or when
473 required by the CVMP in a referral or signal assessment procedure according to the conditions
474 set in this Undertaking and in compliance with applicable data protection legislation. In
475 particular, I agree not to seek to identify, profile, contact or target the data subjects from the
476 AER data set Level 2B.
- 477 • I agree not to transfer or dispose of the AER data set Level 2B for which access is provided
478 under the condition of this Confidentiality Undertaking to any third party, where there are no
479 legal obligations for the marketing authorisation holder to do so. I shall not permit any third
480 party to access, study, analyse, refer to or otherwise use the data or permit any party to
481 reproduce any AER data.
- 482 • I agree to access and use only the minimal amount of personal data that is necessary for the
483 performance of my pharmacovigilance activities pursuant to the applicable laws and I agree to
484 acknowledge that the source of the data is the EudraVigilance Veterinary database.
- 485 • I shall ensure that any personal information is anonymised when there is a legal requirement for
486 the marketing authorisation holder to report suspected adverse reactions for the medicinal
487 products for which they hold a marketing authorisation in the EEA to a medicines regulatory
488 authority in a third country. Personal information mean any recorded information that could,
489 either by itself or in combination with other information, be used to link or associate the
490 information to a particular individual.
- 491 • I agree to maintain adequate technical and security measures to prevent unauthorised or
492 unlawful access, disclosure, dissemination, alteration, destruction, accidental loss or copying of
493 the AER data set Level 2B, in accordance with applicable data protection legislation, and to
494 immediately notify the Agency of a breach of security leading to any thereof.
- 495 • I acknowledge that this Undertaking will be in effect from the date of my signature and that the
496 terms of this Undertaking will apply to any secondary analysis of the AER data set Level 2B I
497 perform using the EudraVigilance Veterinary data.
- 498 • I understand that compliance with this Confidentiality Undertaking is a condition of my access to
499 the EudraVigilance Veterinary database and that failure to comply may result in immediate
500 termination of my right of access and use of the data.

501 I have read, understood and I agree to comply with the terms stated above at all times.

502 Name: _____ Title: _____

503 Signature: _____ Date: _____