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Draft guidance document on terms and conditions (T&Cs) for human and veterinary drugs



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20 This guidance document gives an overview of the regulatory requirements for terms and conditions (T&Cs). It
21 also provides direction and guidance to authorization holders and Health Canada staff on the use of T&Cs in
22 accordance with Part C, Division 1, section C.01.014.21 of the *Food and Drug Regulations* (FDR).

23 Introduction

24 The *Food and Drugs Act* (FDA) and its regulations give Health Canada the authority to regulate food, drugs
25 (including natural health products), medical devices and cosmetics. As a drug regulator, Health Canada's role
26 is to verify that regulatory requirements for the safety, efficacy and quality of human and veterinary drugs
27 are met through scientific assessments. These include product and establishment licensing, monitoring and
28 surveillance, as well as compliance and enforcement activities.

29 On December 6, 2013, the Government of Canada introduced the *Protecting Canadians from Unsafe Drugs*
30 *Act (Vanessa's Law)*. On November 6, 2014, it received Royal Assent. *Vanessa's Law* introduced amendments
31 to the FDA aimed to improve Health Canada's ability to collect post-market safety information and take
32 appropriate action when a serious risk to health is identified. These amendments were introduced to better
33 protect patient health and safety and increase consumer confidence in therapeutic products on the market.

34 Under the FDA, a therapeutic product is defined as a drug or device or any combination of drugs and devices.
35 It does not include a natural health product as defined in the *Natural Health Products Regulations*.

36 Drugs for human and veterinary use in Canada must meet certain requirements under the *Food and Drug*
37 *Regulations* (FDR). Drugs must satisfy all applicable requirements in Part C, Division 1 to be authorized for
38 sale. As well, drugs that meet the definition of a new drug under Part C, Division 8 of the FDR must also
39 satisfy the requirements of Division 8.

40 When an authorization is issued, a unique drug identification number (DIN) is assigned to a drug. The DIN
41 serves as a tool to help in the follow-up of products on the market, recall of products, inspections and quality
42 monitoring.

43 For information on the DIN, refer to:

- 44 • [Guidance document: Regulatory requirements for drug identification numbers \(DINs\)](#)

45 For Division 1 only drugs, information must be submitted to satisfy the requirements of subsection
46 C.01.014.1(1). The Minister assigns a DIN to a drug, which permits the authorization holder to market the
47 drug in Canada.

48 For Division 8 drugs, submissions must include evidence to support the safety and effectiveness of the drug
49 for its indicated use and conditions of use. This is in accordance with sections C.08.002, C.08.002.01,
50 C.08.002.1 and/or C.08.003 of the FDR. The issuance of a notice of compliance (NOC) to the manufacturer of
51 a new drug, in addition to a DIN, allows the sale of that new drug in Canada.

52 The granting of an authorization to sell a drug in Canada is based on:

- 53 • Health Canada's review of information that has been provided to support a drug submission and
54 application **and**
- 55 • our determination that the information has met the requirements of Division 1 or Division 1 and 8 of
56 the FDR

57 The rapid pace of innovation in industry has led to uncertainties and risks for therapeutic products that may
58 not be adequately managed through existing regulatory provisions. *Vanessa's Law* gave the Governor in
59 Council the authority to make regulations under the FDR that would support Health Canada's goal of
60 implementing a life-cycle approach to regulating drugs and medical devices.

61 This includes making regulations that give the Minister the authority to impose or amend T&Cs on a DIN or a
62 medical device licence. A T&C is an obligation that would require the owner of a DIN, or holder of a medical
63 device licence, to conduct an activity concerning the drug or medical device on which the T&C(s) has been
64 imposed.

65 Scope and application

66 This guidance document applies to drugs regulated under Part C, Division 1 only, or Divisions 1 and 8 of the
67 FDR that are issued a DIN.

68 For the purpose of this document, "drug" is for human and veterinary use and includes:

- 69 • pharmaceuticals
 - 70 ○ prescription
 - 71 ○ non-prescription
- 72 • biologics
 - 73 ○ therapeutic products made from living organisms or cells
 - 74 ○ includes vaccines (for human use)
- 75 • radiopharmaceuticals

76 It excludes natural health products and biocides.

77 T&Cs may be imposed on a DIN, and can be amended, at any time. This means they may be imposed after
78 authorization or when an authorization is issued for submissions or applications that were filed as a:

- 79 • new drug submission (NDS)
- 80 • supplement to a new drug submission (SNDS)
- 81 • extraordinary use new drug submission (EUNDS)
- 82 • supplement to an extraordinary use new drug submission (EUSNDS)
- 83 • abbreviated new drug submission (ANDS)
- 84 • supplement to an abbreviated new drug submission (SANDS)
- 85 • abbreviated extraordinary use new drug submission (EUANDS)
- 86 • supplement to an abbreviated extraordinary use new drug submission (EUSANDS)
- 87 • application for a DIN (includes non-prescription products), such as:
 - 88 ○ DINA/F for a pharmaceutical
 - 89 ○ DINB for a biologic product

90 T&Cs can also be imposed on a DIN following the review of a submission or application filed as a:

- 91 • post-authorization Division 1 Change (PDC)
- 92 • notifiable change (NC)

93

94 Policy objectives and statements

95 This guidance document explains the purpose of T&Cs and the processes that will be applied so that T&Cs are
96 imposed fairly and consistently and give regulated parties an opportunity to be heard.

97 Before T&Cs are imposed, consideration will be given as to whether the obligations under the T&Cs are
98 technically feasible and can be reasonably expected to achieve their objectives. Health Canada will consider
99 whether the T&Cs imposed will:

- 100 • reduce the risks and/or uncertainties associated with the potential to cause injury to health
- 101 • address significant uncertainties
- 102 • manage risks and uncertainties and/or
- 103 • confirm a drug's benefit-risk profile for the indicated use

104 Drug submissions and applications must be supported by the necessary information and must meet all
105 requirements of the FDR to be authorized for sale in Canada. Data establishing the safety, efficacy and quality
106 of a drug must demonstrate a favourable benefit-risk profile.

107 If the Minister identifies risks and/or uncertainties related to a human or veterinary drug, T&Cs can be
108 imposed on its DIN at the time of authorization or after authorization when risks and/or uncertainties are
109 identified for the authorized indication. T&Cs are a regulatory tool giving Health Canada oversight of an
110 authorized drug's safety, efficacy and/or quality throughout its life cycle. This tool will also be used to reduce
111 the risks and/or uncertainties associated with the potential to cause injury to health after the drug's
112 authorization.

113 T&Cs can also be amended throughout the life cycle of a drug.

114 The main objective of imposing T&Cs is to ensure a drug maintains a favourable benefit-risk profile
115 throughout its life cycle. In other words, its safety, efficacy and/or quality are retained.

116 Before we impose T&Cs, Health Canada will consider if other regulatory mechanisms are available to address
117 the risks and/or uncertainties that we have identified.

118 Note about guidance documents in general

119 Guidance documents provide assistance to industry with the governing statutes and regulations. They also
120 provide guidance to Health Canada staff on how mandates and objectives should be met fairly, consistently
121 and effectively.

122 Guidance documents are administrative, not legal, instruments. This means that flexibility can be applied.
123 However, to be acceptable, alternate approaches to the principles and practices described in this document
124 must be supported by adequate justification. They should be discussed in advance with the relevant program
125 area to avoid the possible finding that applicable statutory or regulatory requirements have not been met.

126 As always, Health Canada reserves the right to request information or material, or define conditions not
127 specifically described in this document, to help us adequately assess the safety, efficacy or quality of a
128 therapeutic product. We are committed to ensuring that such requests are justifiable and that decisions are
129 clearly documented.

130 This document should be read along with the accompanying notice and the relevant sections of other
131 applicable guidance documents.

132 Overview of the regulatory provision in section C.01.014.21

133 We will impose T&Cs when we need to manage risks or address uncertainties. We will also impose T&Cs
134 when new or additional information becomes known that may affect the drug's benefit-risk profile for its
135 indicated use.

136 As per the proposed section C.01.014.21, the provision states:

137 The Minister may, at any time, impose terms and conditions on a drug identification number assigned for a
138 drug, or amend those terms and conditions, after considering the following factors:

- 139 a. whether there are significant uncertainties relating to the benefits or risks associated with the drug
- 140 b. whether the requirements under the Act are sufficient to:
 - 141 i. optimize the benefits and manage the risks associated with the drug
 - 142 ii. manage the uncertainties relating to the benefits and risks and
 - 143 iii. collect information to be able to continuously assess the benefits and risks, identify any
144 changes to them and manage the uncertainties
- 145 c. whether the proposed terms and conditions may contribute to meeting the objectives set out in
146 subparagraphs (b)(i) to (iii)
- 147 d. whether compliance with the proposed terms and conditions is technically feasible and
- 148 e. whether there are less burdensome ways to meet the objectives of the proposed terms and
149 conditions

150 Implementation of terms and conditions

151 T&Cs may be imposed on a DIN for several reasons, including when there is a significant uncertainty about
152 the drug's safety, efficacy and/or quality for its indicated use. They may also be imposed to:

- 153 • manage risks and uncertainties
- 154 • gather further information that could affect the drug's benefit-risk profile or
- 155 • address uncertainties that could potentially cause injury to health

156 T&Cs may also be imposed or amended after authorization has been given. We will do so when new
157 information for the drug's indicated use suggests that the initial benefit-risk profile that was concluded to be
158 favourable may have significantly changed.

159 The Minister must consider if the T&Cs are technically feasible. Consideration must also be given to less
160 burdensome ways to meet the objectives of the T&Cs.

161 Imposing terms and conditions at issuance of market authorization

162 To be considered for a market authorization, all drugs must be supported by information required by the
163 FDR. A drug must have a favourable benefit-risk profile for the intended use at the time an authorization is
164 issued.

165 Health Canada reviews the submitted information. We may ask for further information during this process.
166 Following our review of the submitted information, the drug may have a favourable benefit-risk profile for
167 the indication being sought, but risks and/or uncertainties about the drug may be identified. In such cases,
168 the drug may receive authorization for a specific indication. To manage or address the risks and/or
169 uncertainties that have been identified, Health Canada may impose T&Cs on the DIN.

170 When imposing T&Cs, Health Canada will consider the factors listed in the proposed section C.01.014.21 of
171 the FDR. The Minister may impose T&Cs on a DIN to manage risks or address uncertainties relating to its risks

172 and benefits for the indicated use and/or the quality of the drug. In the case of a generic drug or a
173 subsequent entry drug (biosimilar) where the Canadian Reference Product (CRP) or reference biologic drug
174 has imposed T&Cs, the Minister will determine on a case-by-case basis which T&Cs will be imposed on the
175 generic or subsequent entry drug.

176 Health Canada will [inform the manufacturer of our intent](#) to impose T&Cs on the DIN before we do so.

177 T&Cs can be imposed a DIN for many reasons depending on the information provided in the drug submission
178 or application. The following lists give some examples of when T&Cs may be imposed on a DIN at the time an
179 authorization is issued.

180 T&Cs may be imposed to manage and/or address:

- 181 • uncertainties with the use of the drug by assessing the effective use of a drug, and the food safety
182 for certain veterinary drugs
- 183 • uncertainties of identified and/or potential risks after long-term use of a drug
- 184 • uncertainties in a specific patient population using the drug when safety and/or efficacy information
185 is limited
 - 186 ○ specific patient populations could be pregnant women, certain age groups or patients with
187 renal or hepatic impairment
- 188 • uncertainties of a drug's known risks to verify the worldwide safety experience of the drug by
189 requiring more frequent submission (rather than yearly) of the following:
 - 190 ○ [periodic safety update report \(PSUR\)](#)
 - 191 ○ [periodic benefit-risk evaluation report \(PBRER\)](#) and/or
 - 192 ○ [annual summary report \(ASR\)](#)

193 T&Cs may also be imposed to:

- 194 • address uncertainties of a drug through confirmatory studies on safety and efficacy when surrogate
195 markers were used in clinical trial studies to support an authorization
 - 196 ○ surrogate markers are parameters that when measured directly are reasonably likely, based
197 on available evidence, to predict an effect of a drug on recognized clinical outcomes such as
198 morbidity and mortality
- 199 • collect information to continuously assess the benefits and risks, identify any changes to them and
200 manage the uncertainties
- 201 • implement an ongoing monitoring program to detect trends in quality, for example:
 - 202 ○ verifying impurities identified in a drug through additional specific testing and
203 investigational requirements for impurities
- 204 • request results from confirmatory trials submitted to a foreign jurisdiction

205 [Imposing or amending terms and conditions after authorization](#)

206 The Minister may impose or amend T&Cs at any time after issuing an authorization. The Minister will do so if
207 new information about the drug's safety, efficacy and/or quality could affect the product's benefit-risk
208 profile, which was established at the time of authorization.

209 New risks or uncertainties about a drug's safety, effectiveness or quality for the authorized indication(s) may
210 be identified through:

- 211 • post-market assessments of real world evidence or
- 212 • new evidence from studies or reports

213

214 Post-NOC or post-DIN changes may also reveal:

- 215 • new uncertainties related to safety, efficacy or quality or
- 216 • new risks that require additional assessment or mitigation

217 These could lead to the imposition of T&Cs

218 Examples of T&Cs that may be imposed after authorization include the following:

- 219 • conditions that manage and/or address:
 - 220 ○ uncertainties by evaluating the effectiveness of risk mitigation measures
 - 221 ○ uncertainties with the safety of a drug following the review of safety ASRs, PSURs and/or
 - 222 PBRERs
 - 223 ○ risks or uncertainties about risks and/or the drug's efficacy identified following a review of
 - 224 submissions filed for new indications
 - 225 ○ new risks, uncertainties and/or emerging issues that were not known at the time of the
 - 226 drug's market authorization through specific risk mitigation measures
 - 227 ○ uncertainties identified following the review of initial T&Cs imposed, which may have
 - 228 potential impacts on the benefit-risk of the drug for its indicated use
 - 229 ○ new risks or uncertainties identified as a result of new information obtained from markets
 - 230 outside Canada or from published evidence in scientific journals as it relates to our
 - 231 authorization of the indication
 - 232 ○ new risks and uncertainties resulting from outcomes from studies conducted under risk
 - 233 management plans (RMPs), which may have impacts on the benefit-risk profile of the
 - 234 approved drug
- 235 • conditions that:
 - 236 ○ implement an ongoing monitoring program to detect trends in quality such as verifying
 - 237 impurities identified in a drug through additional specific testing and investigational
 - 238 requirements for impurities

239 Anticipatory terms and conditions

240 Anticipatory terms and conditions letter

241 Health Canada will inform the manufacturer of its intent to impose T&Cs by issuing an 'Anticipatory Terms
242 and Conditions Letter'. The anticipatory letter will:

- 243 • explain the risk(s) and/or uncertainties that we have identified
- 244 • outline the objectives for imposing T&Cs and
- 245 • describe the expected outcome from the specific T&Cs imposed

246 Response to letter

247 Manufacturers should provide a response to the Anticipatory Terms and Conditions Letter and, as applicable,
248 include information on how they will fulfill the T&Cs.

249 If the T&Cs require the manufacturer to conduct more studies for the indicated use, the manufacturer should
250 provide:

- 251 • a brief description of the methodology and study design of the proposed investigation or study
- 252 • anticipated timeframes for starting and completing these studies
- 253 • any other details necessary to demonstrate how the conditions in the letter will be met

254 If confirmatory studies are one of the T&Cs being imposed, such studies may already be under way in Canada
255 or other jurisdictions. Health Canada will consider accepting these studies if they meet the objective of the
256 T&C.

257 In general and depending on the nature of the issues raised, the manufacturer will be given up to 30 calendar
258 days from the date specified on the letter to respond. If a new risk and/or uncertainty identified requires
259 urgent attention, the time to respond may be reduced.

260 We will review a manufacturer's response within 30 calendar days upon receiving the manufacturer's
261 response. During this review, we may ask for clarification. This will be done in accordance with the following
262 guidance documents:

- 263 • [Guidance document: The management of drug submissions and applications](#) for human drugs
- 264 • [Veterinary drugs – Management of regulatory submissions: Updated guidance for industry](#) for
265 veterinary drugs

266 Manufacturers who object to the proposed T&Cs may provide reasons for their objections. They may:

- 267 • suggest an alternative proposal with a supporting rationale as to why the alternative is preferable
- 268 • comment on the technical feasibility of the T&Cs and/or
- 269 • propose less burdensome means of achieving the objectives

270 Terms and conditions letter

271 Once we have reviewed the response to the Anticipatory Terms and Conditions Letter, we will finalize the
272 conditions following review of the information provided by the manufacturer.

273 We will prepare the final 'Terms and Conditions Letter'. The letter will specify the:

- 274 • applicable DIN(s) for the authorized indication on which the T&Cs will be imposed
- 275 • conditions to be fulfilled
- 276 • information to be submitted and
- 277 • timeframe for fulfilling the T&Cs, as applicable

278 Amending terms and conditions

279 An amendment to a T&C includes adding, modifying or removing a T&C(s) on the DIN of a drug for its
280 authorized indication. The T&C letter is updated as individual conditions are fulfilled, to reflect the date the
281 condition(s) was fulfilled, where applicable.

282 Although the Minister initiates amendments, a DIN owner may request an amendment to a T&C(s) by filing
283 an undefined regulatory activity (UDRA).

284 For more information on this submission type for human drugs, you may consult the following guidance
285 document:

- 286 • [Guidance document: The management of drug submissions and applications](#)

287 When doing so, the DIN owner must provide a rationale as to why they are asking for the amendment.
288 Depending on the type of amendment, they would also have to provide the scientific basis to support the
289 reason for the requested amendment.

290 If the amendment request concerns changing a study methodology to meet the main objective of the T&C,
291 the DIN owner should provide the proposed methodology. For example, if during an ongoing study, the DIN
292 owner concludes that the study cannot be completed for technical or scientific reasons, they must include

293 the proposed alternative methodology or study to fulfill the T&C(s). The Minister would review the
294 information provided and make a decision to amend the T&C(s) accordingly.

295 Filing information to fulfill terms and conditions

296 The 'Terms and Conditions Letter' may include several conditions. Each condition may have a different
297 timeline for completion or no timeline for conditions imposed that are ongoing.

298 Where applicable, a DIN owner must submit the information required to fulfill the T&C(s) by the date
299 indicated in the letter. Some DIN owners may have had similar conditions imposed in another jurisdiction and
300 the foreign regulator may have removed these conditions. Regardless of the status of the conditions imposed
301 in another jurisdiction, a DIN owner must fulfill their obligations under the FDR for the T&Cs imposed in
302 Canada by filing the relevant information for Health Canada's review.

303 The DIN owner should file information to fulfill the T&Cs using the appropriate submission type (detailed in
304 this section). For more information, you may also consult the following guidance documents:

- 305 • [Guidance document: The management of drug submissions and applications](#) for human drugs
- 306 • [Veterinary drugs – Management of regulatory submissions: Updated guidance for industry](#) for
307 veterinary drugs

308 If results from studies or information required by the T&C:

- 309 • indicate the benefit-risk profile has changed since the submission or an application was reviewed and
310 issued an authorization, the DIN owner should file this information as an appropriate post-
311 authorization submission type
- 312 • do not indicate that the safety, efficacy and/or quality has changed, a UDRA may be filed
313 ○ if we determine that the evidence filed as a UDRA affects the information on which the
314 authorization was based, we will ask the DIN owner to file the appropriate submission or
315 application type

316 For more information on determining which post-authorization submission type is most appropriate, please
317 consult the relevant post-authorization changes guidance documents:

- 318 • [Post-notice of compliance \(NOC\) changes: Safety and efficacy document](#)
- 319 • [Post-notice of compliance \(NOC\) changes: Quality document](#)
- 320 • [Post-drug identification number changes](#)

321 Once a DIN owner files the information to fulfill the T&C(s), we will review the submitted information as per
322 the performance standards outlined in the applicable guidance documents:

- 323 • [Guidance document: The management of drug submissions and applications](#) for human drugs
- 324 • [Veterinary drugs – Management of regulatory submissions: Updated guidance for industry](#) for
325 veterinary drugs

326 Once we have reviewed the information filed, we will inform the DIN owner of the results of the review.

327 If the condition(s) is fulfilled and a favourable benefit-risk profile is maintained, the Minister will amend the
328 Terms and Conditions Letter to indicate the date by which the T&C(s) was fulfilled.

329 If further conditions are to be imposed or existing conditions need to be amended, the Minister will inform
330 the DIN owner of what actions must be taken through another Anticipatory Terms and Conditions Letter.

331

332 If other regulatory tools can be used to address the identified issues, additional T&Cs may not be imposed.
333 Depending on the nature of the issue, rather than imposing T&Cs, we may, for example:

- 334 • require that the labelling in the product monograph be updated to reflect new information
- 335 • request an updated RMP
- 336 • ask the DIN owner to submit a PSUR, PBRER or ASR

337 We may impose new conditions if, for example:

- 338 • the identified and/or potential risks, and/or uncertainties for which the T&Cs were initially imposed
- 339 have not adequately addressed or managed the risks and/or uncertainties
- 340 • new risks and/or uncertainties have been identified
- 341 • additional studies or trials can be conducted to address or manage the uncertainties

342 In such cases, the Minister will issue a new Anticipatory Terms and Conditions Letter to the DIN owner. This
343 letter will indicate the new T&C(s). The DIN owner will have up to 30 days to respond from the date of the
344 letter.

345 Health Canada may take other regulatory actions if the information or data demonstrates an unfavourable
346 change to the benefit-risk profile. Reasons for doing so include, for example:

- 347 • the drug is considered unsafe for the authorized indication(s)
- 348 • there is insufficient evidence to demonstrate that the drug will have the effect and/or benefit under
- 349 the conditions of use prescribed, recommended or proposed

350 All conditions are fulfilled

351 Once a DIN owner provides satisfactory evidence that all the T&Cs of the original (or amended) Terms and
352 Conditions Letter have been met, we will issue a final letter. This letter will:

- 353 • indicate that the DIN owner has met all the conditions
- 354 • reference the DIN(s) on which the T&Cs were imposed
- 355 • state that the T&Cs will be removed

356 Compliance and enforcement of terms and conditions

357 All T&Cs will be enforceable under section 21.7 of the FDA. Under section 31.2 of the FDA, it is an offence if a
358 DIN owner does not comply with the T&Cs imposed (for example, fails to submit a confirmatory study within
359 the specified time outlined in the Terms and Conditions Letter).

360 If a DIN owner were not to comply with the T&Cs imposed, Health Canada may take compliance and
361 enforcement actions.

362 Learn more:

- 363 • [Compliance and enforcement policy](#) (POL-0001)

364 Health Canada will apply a risk-based approach when taking regulatory actions related to information
365 generated by the T&Cs indicating that the:

- 366 • drug poses a risk to people in Canada or
- 367 • efficacy or quality of the drug has changed

368 Regulatory actions may result in stop-sale, ordering additional studies, ordering label changes, suspending an
369 NOC or cancelling a DIN.

370 Transparency

371 Health Canada will continue to communicate up-to-date information about drugs for human and veterinary
372 use.

373 You can find the following information online:

- 374 • [NOC database](#): contains NOCs issued for drugs for human and veterinary use
- 375 • [Drug product database](#): contains information about DINs issued for drugs for human and veterinary
376 use, such as:
 - 377 ○ the product monograph for human drugs
 - 378 ○ the product labelling for veterinary drugs
- 379 • [Drug and Health Product Register](#): contains [regulatory decision summaries](#) and [summary basis of](#)
380 [decision documents](#)
 - 381 ○ these describe our rationale for approving prescription drugs for human use
- 382 • [Clinical information portal](#): contains the clinical information filed by sponsors to seek approval of
383 human drugs under Division 8 of the FDR
- 384 • [Drug Product Inspection Database \(DHPID\)](#): The drug and health products inspections database
385 (DHPID) gives information about each type of drug and health product inspection done by Health
386 Canada

387 We will also post information on the [Drug and Health Product Register](#) about T&Cs that have been imposed
388 on the DIN of a drug for its authorized indication(s), including statements on the T&Cs imposed and their
389 timelines. We will update these as T&Cs are fulfilled and amended. The information we post will not contain
390 any confidential business information.