Revisions to USP Compounding Standards ⟨795⟩ and ⟨797⟩

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November 2022

Approach to Revisions after the Appeals

- Stakeholder Engagement
  - Reviewed feedback, including *PF* public comments and issues raised in the appeals
  - Held stakeholder semi-structured interviews (May 2020)
  - Roundtable session (July 28, 2020)
  - Open forums (September 15, 2020 & September 2021)
- Identified key stakeholder engagement discussion topics as a framework
- Also had general considerations throughout the review process
  - Scientifically robust, risk-based approach to assigning BUDs
  - Physical and chemical stability considerations
  - Sterility assurance in ⟨797⟩
  - Operational implications
  - Balancing the need for patient access to cost-effective compounded preparations with rigorous quality standards
  - Implications on regulatory oversight and enforcement

Overview of Revised General Chapter ⟨795⟩ *Pharmaceutical Compounding – Nonsterile Preparations*

⟨795⟩ Overview

Chapter Outline

- 1. Introduction and Scope
- 2. Personnel Training and Evaluation
- 3. Personal Hygiene and Garbing
- 4. Buildings and Facilities
- 5. Cleaning and Sanitizing
- 6. Equipment and Components
- 7. Master Formulation and Compounding Records
- 8. Release Inspections and Testing
- 9. Labeling
- 10. Establishing Beyond-Use Dates
- 11. SOPs
- 12. Quality Assurance and Quality Control
- 13. CNSP Packaging and Transporting
- 14. Documentation
- Glossary

⟨795⟩ Revisions

Section 1. Introduction and Scope

- Scope
  - Added information on types of Compounded Nonsterile Preparations (CNSPs)
- Hazardous Drugs
  - Removed all information on handling of hazardous drugs and added references to General Chapter ⟨800⟩ *Hazardous Drugs – Handling in Healthcare Settings*
- Affected Personnel and Settings
  - Added roles and responsibility of the designated person
    - Designated person = One or more individuals assigned to be responsible and accountable for the performance and operation of the facility and personnel as related to the preparation of CNSPs

⟨795⟩ Revisions

Section 2. Personnel Training and Evaluation

- Added guidance on training and core competencies
- Included steps in training procedures

Section 3. Personal Hygiene and Garbing

- Added Box on Hand Hygiene Procedures
- Included description of garb and glove requirements
  - Gloves are required for all compounding activities
  - Other garb must be used as appropriate for the type of compounding

⟨795⟩ Revisions

Section 4. Buildings and Facilities

- Added requirement for a designated area for nonsterile compounding
- Area must be well lit and be maintained in a clean, orderly, sanitary condition and in a good state of repair
- There **should** not be carpet in the compounding area

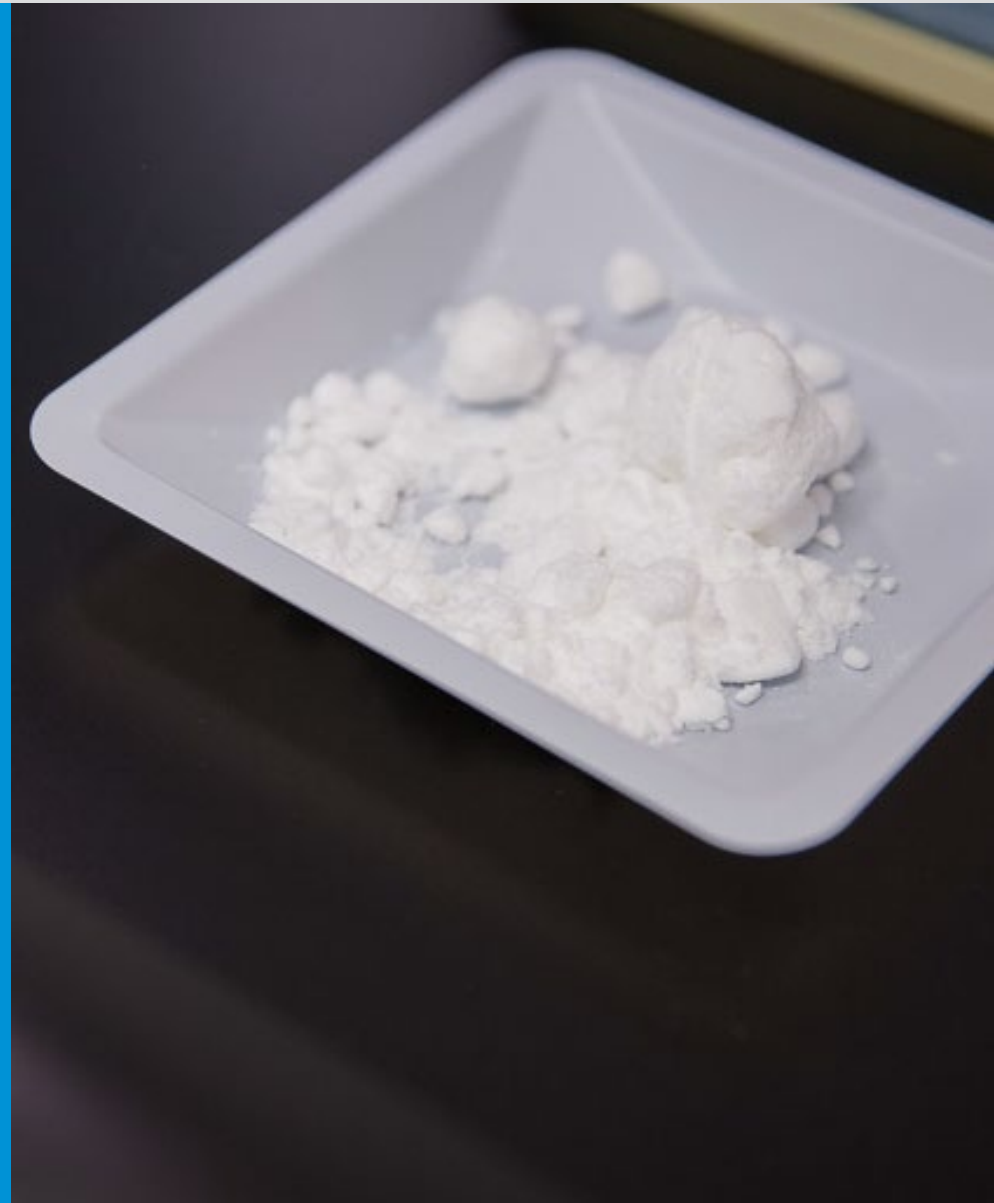
Section 5. Cleaning and Sanitizing

- New table on minimum frequencies for cleaning and sanitizing surfaces, including:
  - Work surfaces
  - Floors
  - Walls
  - Ceilings
  - Storage Shelving

⟨795⟩ Revisions

Section 6. Equipment and Components

- Weighing, measuring, or otherwise manipulating components that could generate airborne chemical particles (e.g., APIs, added substances, and conventionally manufactured products) must be evaluated to determine if these activities must be performed in a closed-system processing device
  - Containment Ventilated Enclosure (CVE) must be cleaned and sanitized
  - CVE must be certified at least annually
- Components
  - In the United States, APIs must be manufactured by an FDA-registered facility
    - Each API must be accompanied by a valid COA
  - In the United States, all components other than APIs should be obtained from an FDA-registered facility
  - Packaging systems of components that lack a vendor's expiration must not be used after 3 years from the date of receipt



⟨795⟩ Revisions

Section 7. Master Formulation And Compounding Records

- Boxes include required elements of Master Formulation Records and Compounding Records

Section 8. Release Inspections and Testing

- Confirm CNSP and labeling match Compounding Records
- Visual inspections to determine if physical appearance is as expected
- Other tests to ensure quality (e.g., pH, assays)

Section 9. Labeling

- Requirements for *labels* (labeling on the immediate container)
- Requirements for *labeling* (all matter on container or in any packaging system or wrapper)

⟨795⟩ Revisions

Section 10. Establishing Beyond-Use Dates

- Terminology
  - Expiration Date applies to conventionally manufactured drug products
  - BUD applies to CNSPs calculated in terms of hours, days, or months
- Parameters to consider
  - Water activity (a_w)
  - Chemical and physical stability
  - Compatibility of container closure system
  - Degradation of container closure system
  - Potential for microbial proliferation
  - Deviations from essential compounding steps and procedures

⟨795⟩ Revisions

Section 10. Establishing Beyond-Use Dates

- *Table 4. BUD Limit by Type of Preparation in the **Absence** of a USP–NF Compounded Preparation Monograph or CNSP-Specific Stability Information* [a]

Type of Preparation	BUD (days)	Storage Temperature [b]
Aqueous Dosage Forms ($a_w \geq 0.60$)		
Nonpreserved aqueous dosage forms [c]	14	Refrigerator
Preserved aqueous dosage forms [c]	35	Controlled room temperature or refrigerator
Nonaqueous Dosage Forms ($a_w < 0.60$)		
Oral liquids (nonaqueous) [d]	90	Controlled room temperature or refrigerator
Other nonaqueous dosage forms [e]	180	Controlled room temperature or refrigerator

a A shorter BUD must be assigned when the physical and chemical stability of the CNSP is less than the BUD limit stated in the table (see *10.4 CNSPs Requiring Shorter BUDs*).
b See *Packaging and Storage Requirements* ⟨659⟩.
c An aqueous preparation is one that has an a_w of ≥ 0.6 (e.g., emulsions, gels, creams, solutions, sprays, or suspensions).
d A nonaqueous oral liquid is one that has an a_w of < 0.6 .
e Other nonaqueous dosage forms that have an a_w of < 0.6 (e.g., capsules, tablets, granules, powders, nonaqueous topicals, suppositories, and troches or lozenges).

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Nonaqueous Dosage Forms: $a_w < 0.6$			Aqueous Dosage Forms: $a_w \geq 0.6$		
Dosage Form	Description	a_w	Dosage Form	Description	a_w
Animal treat	Animal treat (oil flavor)	0.507	Animal treat	Animal treat with 15%–18% aqueous flavor	0.716
Capsule (oil filled)	Olive oil encapsulated	0.468	Cream	Cream vehicle (oil in water emulsion, petrolatum free)	0.968
Capsule (powder filled)	Powder base encapsulated	0.435	Cream	Emollient cream (petrolatum and mineral oil)	0.984
Gel (glycol based)	Propylene glycol, ethoxy diglycol, or hydroxypropyl cellulose gel	0.056	Cream	Cream (oil in water emulsion with natural oils)	0.989
Lollipop (sorbitol based)	Sorbitol-based lollipop	0.460	Foam	Foaming surfactant solution	0.983
Ointment	Hydrophilic petrolatum	0.396	Gel (water based)	Alcohol-free aqueous gel	0.990
Ointment	Polyethylene and mineral oil gel base	0.459	Gel (water based)	Hydroxypropyl methylcellulose (HPMC) gel	1.000
Oral solution (glycol based)	20% Polyethylene glycol and 80% propylene glycol	0.009	Lotion	Lotion (oil in water emulsion)	0.986
Oral solution (oil based)	Medium chain triglycerides oil	0.338	Nasal spray	Nasal spray	0.991
Oral suspension (fixed oil)	Fixed oil with thickener	0.403	Oral solution (water based)	Low-sucrose syrup vehicle	0.906
Powder for inhalation	Encapsulated powder for inhalation	0.402	Oral solution (water based)	90% Water and 10% glycerin	0.958
Stick	Lip balm	0.181	Oral suspension (water based)	Oral suspension base	0.992
Suppository	Polyethylene glycol base	0.374	Rinse	Polymer gel with 30% water	0.960
Suppository	Fatty acid base	0.385	Shampoo	Shampoo	0.976
Tablet (compressed)	Compressed tablet	0.465	Simple syrup	Simple syrup	0.831
Tablet (triturate)	Tablet triturate (lactose and/or sucrose)	0.427	-	-	-
Troche or lozenge (gelatin based)	Gelatin troche or lozenge with NMT 3% aqueous flavor	0.332	-	-	-
Troche or lozenge (glycol based)	Polyethylene glycol troche or lozenge with NMT 3% aqueous flavor	0.571	-	-	-

⟨795⟩ Revisions

Section 10. Establishing Beyond-Use Dates

- In the **Presence** of CNSP-Specific Stability Information
  - BUD may be extended up to a maximum of 180 days
  - Stability-indicating analytical method for the API(s), CNSP formulation, and material of composition of the container closure that will be used
  - An aqueous CNSP must be tested for ⟨51⟩ antimicrobial effectiveness at the end of the BUD
    - Bracketing can be utilized to provide flexibility
  - If compounding from a *USP–NF* compounded preparation monograph, the BUD must not exceed the BUD specified in the monograph
- Shorter BUDs may be required
  - If components have an earlier expiration date or BUD
  - If ingredients are known to be susceptible to decomposition

Overview of Revised General Chapter ⟨797⟩ *Pharmaceutical Compounding – Sterile Preparations*

⟨797⟩ Revisions

Chapter Outline

1. Introduction and Scope
2. Personnel Training and Evaluation
3. Personal Hygiene and Garbing
4. Facilities and Engineering Controls
5. Certification and Recertification
6. Microbiological Air and Surface Monitoring
7. Cleaning, Disinfecting, and Applying Sporicidal Disinfectants and Sterile 70% IPA
8. Introducing Items into the SEC and PEC
9. Equipment, Supplies, and Components
10. Sterilization and Depyrogenation
11. Master Formulation and Compounding Records
12. Release Inspections and Testing
13. Labeling
14. Establishing Beyond-Use Dates
15. Use of Conventionally Manufactured Products as Components
16. Use of CSPs as Components
17. SOPs
18. Quality Assurance and Quality Control
19. CSP Handling, Storage, Packaging, Shipping, and Transport
20. Documentation
21. Compounding Allergenic Extracts

- Glossary

⟨797⟩ Revisions

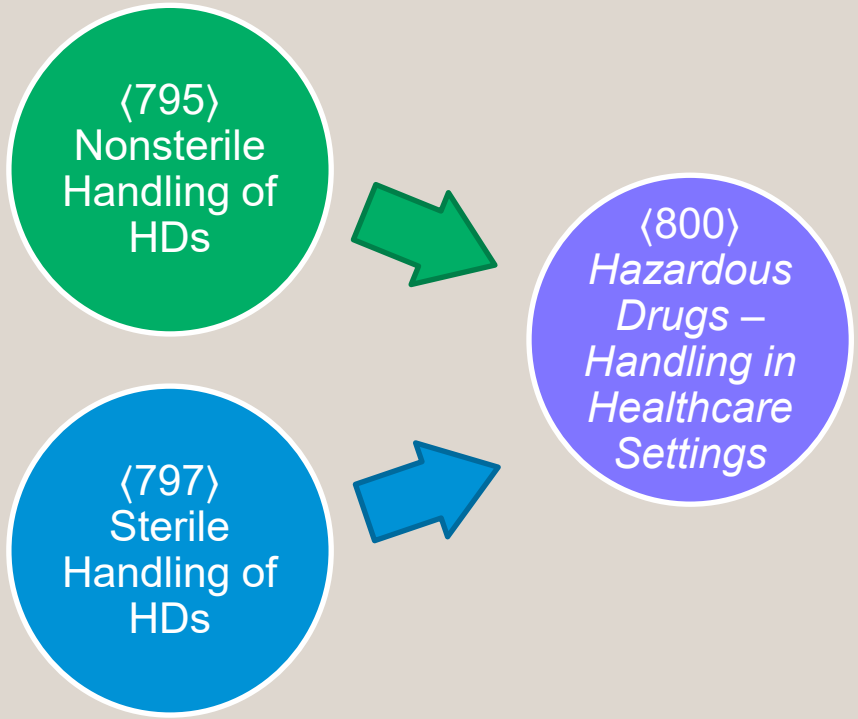
Administration is out of the scope of the chapter

- Sterile compounding is defined as:
  - Combining
  - Admixing
  - Diluting
  - Pooling
  - Reconstituting
  - Repackaging
  - Otherwise altering a drug or bulk drug substance to create a sterile preparation

⟨797⟩ Revisions

Scope

- *Removes* provisions for handling of hazardous drugs
  - Compounded sterile hazardous drugs *are subject to* ⟨800⟩



- *Removes* provisions for radiopharmaceuticals
  - Compounding radiopharmaceuticals *are subject to* ⟨825⟩ *Radiopharmaceuticals—Preparation, Compounding, Dispensing, and Repackaging*

⟨797⟩ Revisions

Alternative Technologies

- The use of technologies, techniques, materials, and procedures other than those described in this chapter is not prohibited as long as they are noninferior to those described herein and validated for the intended purpose (e.g., *Validation of Alternative Microbiological Methods* ⟨1223⟩ and *Validation of Compendial Procedures* ⟨1225⟩).

⟨797⟩ Revisions

Immediate-Use CSPs

Requirements for Immediate-Use CSPs
Aseptic techniques, processes, and procedures are followed, and written SOPs are in place to minimize the potential for contact with nonsterile surfaces, introduction of particulate matter or biological fluids, and mix-ups with other conventionally manufactured products or CSPs.
Personnel are trained and demonstrate competency in aseptic processes as they relate to assigned tasks and the facility's SOPs.
The preparation is performed in accordance with evidence-based information for physical and chemical compatibility of the drugs (e.g., approved labeling, stability and compatibility studies).
The preparation involves not more than 3 different sterile products.
Any unused starting component from a single-dose container must be discarded after preparation is complete. Single-dose containers must not be used for more than one patient.
Administration begins within 4 hours following the start of preparation. If administration has not begun within 4 hours following the start of preparation, it must be promptly, appropriately, and safely discarded.
Unless directly administered by the person who prepared it or administration is witnessed by the preparer, the CSP must be labeled with the names and amounts of all active ingredients, the name or initials of the person who prepared the preparation, and the 4-hour time period within which administration must begin.

⟨797⟩ Revisions

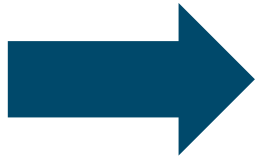
Preparation Per Approved Labeling

- Clarifies that compounding does not include mixing, reconstituting, or other such acts that are performed in accordance with directions contained in approved labeling or supplemental materials provided by the product's manufacturer
- Preparing a conventionally manufactured sterile product in accordance with the directions in the manufacturer's approved labeling is out of scope of this chapter only if:
  - The product is prepared as a single dose for an individual patient; and
  - The approved labeling includes information for the diluent, the resultant strength, the container closure system, and storage time
- Proprietary bag and vial systems
  - Docking and activation in accordance with the manufacturer's labeling for *immediate* administration to an individual patient is not considered compounding and may be performed outside of an ISO Class 5 environment
  - Docking for *future activation* and administration is considered compounding and must be performed in accordance with this chapter, with the exception of *14. Establishing Beyond-Use Dates*. BUDs for proprietary bag and vial systems must not be longer than those specified in the manufacturer's labeling

⟨797⟩ Revisions

Categories of CSPs

- High-Risk
- Medium-Risk
- Low-Risk
- Low-Risk with 12 Hour BUD



Category 1 CSPs

- Must be prepared in a PEC that may be located in an unclassified segregated compounding area
- Assigned a BUD of ≤ 12 hours at controlled room temperature or ≤ 24 hours when refrigerated

Category 2 CSPs

- Must be prepared in a cleanroom suite
- May be assigned a BUD of > 12 hours at controlled room temperature or > 24 hours if refrigerated

Category 3 CSPs

- Have additional requirements that must be met at all times
- May be assigned a BUD longer than established for Category 2 CSPs, up to 180 days

⟨797⟩ Revisions

Assigning Longer BUDs than in the Chapter*

2008 Last Official Chapter	2015 Revision Proposed in *PF*	2018 Revision Proposed in *PF*	2019 Revision Published in *USP-NF* (subsequently remanded)	Revised Chapter
BUDs could be assigned up to the duration indicated by appropriate information sources for the same or similar formulations and by personal experience	The ability to assign longer BUDs was not described	BUDs could be assigned up to a maximum of 90 days if supported by stability data	BUDs could only be assigned up to the limits described in the chapter	Category 3 describes the requirements a compounding site must ensure at all times for assigning longer BUDs than those established for Category 2 CSPs, up to a maximum of 180 days

* If there is a compounded preparation monograph for a particular CSP formulation, the BUD in the monograph can be assigned if the CSP is prepared according to the monograph and all monograph requirements are met, including sterility testing.

⟨797⟩ Revisions

Personnel Qualifications

	2008 Last Official Chapter	2015 Revision Proposal	2018 Revision Proposal	2019 Remanded Chapter	Revised Chapter
Visual observation of hand hygiene and garbing	Annually	Every 3 months	Every 6 months	Every 6 months	**Category 1 & 2:** Every 6 months **Category 3:** Every 3 months for personnel who compound Category 3 CSPs
Gloved fingertip and thumb sampling	**Low/Medium-Risk CSPs:** Annually **High-Risk CSPs:** Semi-annually	Every 3 months	Every 6 months	Every 6 months	**Category 1 & 2:** Every 6 months **Category 3:** Every 3 months for personnel who compound Category 3 CSPs as part of garbing competency and aseptic competency
Media-fill testing	**Low/Medium-Risk CSPs:** Annually **High-Risk CSPs:** Semi-annually	Every 3 months	Every 6 months	Every 6 months	**Category 1 & 2:** Every 6 months **Category 3:** Every 3 months for personnel who compound Category 3 CSPs

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Minimum Garbing Requirements

2008 Last Official Chapter	2015 Revision Proposal	2018 Revision Proposal	2019 Remanded Chapter	Revised Chapter
• Gown • Dedicated shoes or shoe covers • Head and facial hair covers • Face masks • Sterile gloves	Determined based on: • Category • Type of PEC Included: • Gown or coveralls • Disposable covers for shoes • Disposable covers for head and facial hair • Sterile gowns or sleeves • Sterile gloves	• Gown • Disposable covers for shoes • Disposable covers for head and facial hair • Face mask • Sterile gloves If using RABS → disposable gloves inside of gauntlet gloves	• Gown • Disposable covers for shoes • Disposable covers for head and facial hair • Face mask • Sterile gloves If using RABS → disposable gloves inside of gauntlet gloves	• Low-lint garment with sleeves that fit snugly around the wrists and an enclosed neck (e.g., gown or coverall) • Low-lint covers for shoes • Low-lint cover for head that covers the hair and ears, and if applicable, cover for facial hair • Low-lint face mask • Sterile powder-free gloves • If using a RABS, (i.e., a CAI or CACI), disposable gloves should be worn inside the gloves attached to the RABS sleeves. Sterile gloves must be worn over the gloves attached to the RABS sleeve

⟨797⟩ Revisions

Minimum Garbing Requirements

Revised Chapter – Category 3

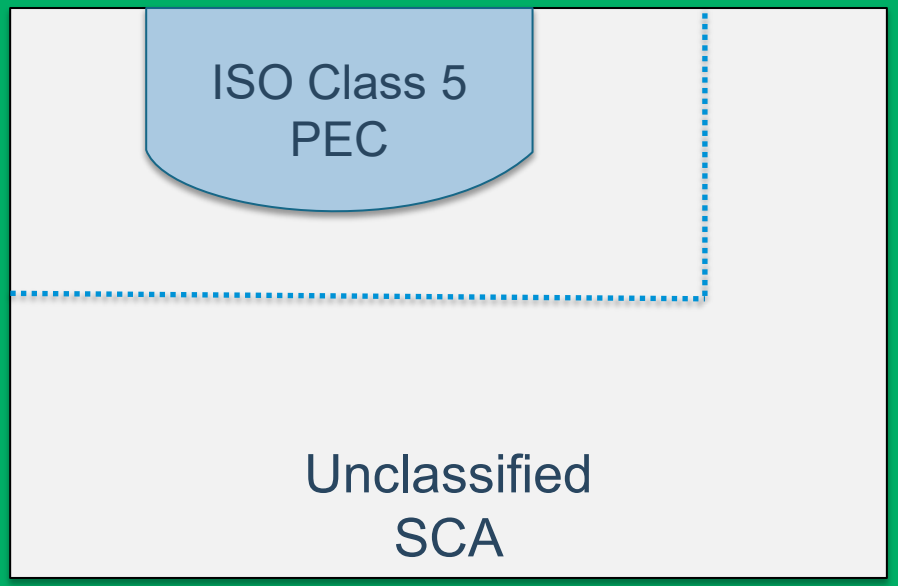
If the facility compounds Category 3 CSPs, additional garbing requirements must be continuously met in the buffer room in which Category 3 CSPs are prepared. The following additional garbing requirements must be followed in the buffer room where Category 3 CSPs are prepared for all personnel regardless of whether Category 3 CSPs are compounded on a given day:

1. Do not allow any exposed skin in the buffer room. (i.e., face and neck must be covered).
2. All low-lint outer garb must be sterile, including the use of sterile sleeves over gauntlet sleeves when a RABS is used.
3. Disposable garbing items must not be reused, and laundered garb must not be reused without being laundered and resterilized with a validated cycle.
4. The facility's SOPs must describe disinfection procedures for reusing goggles, respirators, and other reusable equipment.

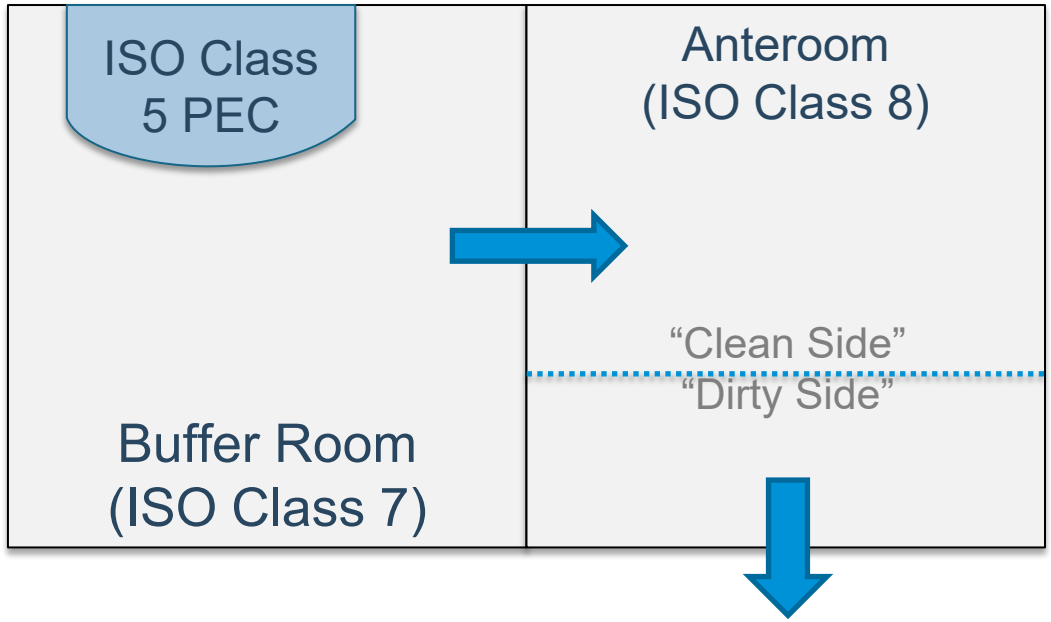
⟨797⟩ Revisions

Minimum PEC Placement

Category 1 CSPs



Category 2 or 3 CSPs



⟨797⟩ Revisions

Microbiological Air and Surface Monitoring

	2008 Last Official Chapter	2015 Revision Proposal	2018 Revision Proposal	2019 Remanded Chapter	Revised Chapter
Viable air sampling	Every 6 months	Monthly	Every 6 months	Every 6 months	**Category 1 & 2:** Every 6 months **Category 3:** Monthly
Surface sampling	Periodically	Monthly	Monthly	Monthly	**Category 1 & 2:** Monthly **Category 3:** Weekly

⟨797⟩ Revisions

Cleaning, Disinfecting, and Applying Sporicidal Disinfectants and Sterile 70% IPA

- Frequencies specified for separate activities
  - Cleaning
  - Disinfecting
  - Applying a sporicidal disinfectant
- Cleaning and disinfecting supplies (e.g., wipers, sponges, pads, and mop heads)
  - Must be low-lint
  - Should be disposable
  - Reusable cleaning tools must be dedicated for use

⟨797⟩ Revisions

Cleaning, Disinfecting, and Applying Sporicidal Disinfectants and Sterile 70% IPA

- Cleaning, disinfecting and sporicidal agents used within the PEC must be sterile
- Cleaning and disinfecting supplies used in the PEC must be sterile with the exception of tool handles and holders, which must be cleaned and disinfected prior to use in a PEC
- Reusable cleaning tools must be made of cleanable materials (e.g., handles should not be made of wood or any other porous material) and must be cleaned and disinfected before and after each use

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Release Inspections and Testing

Visual Inspection

Sterility Testing

- Required for **Category 2** CSPs assigned a BUD that requires sterility testing, and for all **Category 3** CSPs
- **The maximum batch size for all CSPs requiring sterility testing must be limited to 250 final yield units**
- If the number of CSPs to be compounded in a single batch is less than the number of CSPs needed for testing as specified in *USP* ⟨71⟩, *Table 3*, additional units must be compounded to perform sterility testing
  - If between 1 and 39 CSPs, test a number of units equal to 10% of CSPs prepared
  - If >40 CSPs, test based on *USP* ⟨71⟩, *Table 3*
- If an alternative method is used for sterility testing, the method must be validated (see ⟨1223⟩) and demonstrated to be suitable for that CSP formulation

⟨797⟩ Revisions

Establishing Beyond-Use Dates

Quality factors

- Chemical and physical stability properties of the drug and/or its formulation
- Materials of composition of the container closure system and compatibility of the container closure system with the final preparation (e.g., leachables, interactions, adsorption, and storage conditions)

Sterility factors

- Conditions of the environment in which the CSP is prepared
  - Cleanroom suite or SCA
- Aseptic processing and sterilization method
- Starting components
  - Sterile or nonsterile starting ingredients
- Whether or not sterility testing is performed
- Storage conditions
  - Packaging and temperature

⟨797⟩ Revisions

Category 1 CSP BUD Limits

Storage Conditions	
Controlled Room Temperature (20°–25°)	Refrigerator (2°–8°)
≤ 12 hours	≤ 24 hours

2008 Last official ⟨797⟩

Low-Risk Level CSP in SCA **12 hours**

⟨797⟩ Revisions

Category 2 CSP BUD Limits

Preparation Characteristics		Storage Conditions		
Compounding Method	Sterility Testing Performed & Passed	Controlled Room Temperature (20°–25°)	Refrigerator (2°–8°)	Freezer (−25° to −10°)
Aseptically processed CSPs	No	Prepared from one or more nonsterile starting component(s): 1 day	Prepared from one or more nonsterile starting component(s): 4 days	Prepared from one or more nonsterile starting component(s): 45 days

2008 Last official ⟨797⟩

High-Risk Level CSPs	1 day	3 days	45 days

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Category 2 CSP BUD Limits

Preparation Characteristics		Storage Conditions		
Compounding Method	Sterility Testing Performed & Passed	Controlled Room Temperature (20°–25°)	Refrigerator (2°–8°)	Freezer (−25° to −10°)
Aseptically processed CSPs	No	Prepared from only sterile starting components: 4 days	Prepared from only sterile starting components: 10 days	Prepared from only sterile starting components: 45 days

2008 Last official ⟨797⟩

Medium-Risk Level CSPs	**30 hours**	**9 days**	**45 days**
Low-Risk Level CSPs	**48 hours**	**14 days**	**45 days**

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Category 2 CSP BUD Limits

Preparation Characteristics		Storage Conditions		
Compounding Method	**Sterility Testing Performed & Passed**	**Controlled Room Temperature (20°–25°)**	**Refrigerator (2°–8°)**	**Freezer (−25° to −10°)**
Aseptically processed CSPs	No	Prepared from one or more nonsterile starting component(s): 1 day	Prepared from one or more nonsterile starting component(s): 4 days	Prepared from one or more nonsterile starting component(s): 45 days
		Prepared from only sterile starting components: 4 days	Prepared from only sterile starting components: 10 days	Prepared from only sterile starting components: 45 days
	Yes	30 days	45 days	60 days
Terminally sterilized CSPs	No	14 days	28 days	45 days
	Yes	45 days	60 days	90 days

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Category 3 CSP BUD Limits

Preparation Characteristics	Storage Conditions		
Compounding Method	**Controlled Room Temperature (20°–25°)**	**Refrigerator (2°–8°)**	**Freezer (-25°–10°)**
Aseptically processed, sterility tested, and passing all applicable tests for Category 3 CSPs	60 days	90 days	120 days
Terminally sterilized, sterility tested, and passing all applicable tests for Category 3 CSPs	90 days	120 days	180 days

⟨797⟩ Revisions

Additional Requirements for Category 3 CSPs

- Category 3 CSPs undergo sterility testing, supplemented by endotoxin testing when applicable, and have more requirements than Category 2 CSPs for
  - Personnel qualification
  - Use of sterile garb
  - Frequency of applying sporicidal disinfectants
  - Frequency of environmental monitoring
  - Stability determination
- The maximum batch size for all CSPs requiring sterility testing must be limited to 250 final yield units

⟨797⟩ Revisions

Multiple-Dose CSPs

- A multiple-dose CSP must be prepared as a Category 2 or Category 3 CSP
- For preserved aqueous multiple-dose CSPs, antimicrobial effectiveness testing must be passed in accordance with *USP* ⟨51⟩
- Time within which multiple-dose preserved CSPs must be used:
  - Whichever is shorter:
    - BUD limit assigned based on if CSP is compounded as Category 2 or Category 3
    - Up to 28 days after container is initially entered or punctured, if supported by ⟨51⟩ testing
- Time within which multiple-dose, nonpreserved, aqueous topical, and topical ophthalmic CSPs must be used:
  - BUD limit assigned based on if CSP is compounded as Category 2 or Category 3, and
  - Discarded 24 hours after first opening if stored at room temperature, or 72 hours if refrigerated

Next Steps

Next Steps

- The Compounding Expert Committee decided to delay the implementation of the ⟨797⟩ revision until November 1, 2023
- USP Compounding Workshop
  - February 7, 2023, 8:00 AM – 5:30 PM ET
  - February 8, 2023, 8:00 AM – 3:30 PM ET
- Sign up for updates to ⟨795⟩, ⟨797⟩, and other topics related to USP Healthcare Quality and Safety Standards
  - https://www.usp.org/hqs-signup-form
- Send questions to: CompoundingSL@usp.org

Thank You

The standard of trust

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