STEM CELL LABORATORY (STCL)

DOCUMENT NUMBER: STCL-QA-007

DOCUMENT TITLE:

Non-Conforming Products - Receipt, Processing, Distribution, and Disposition

DOCUMENT NOTES:

Document Information

Revision: 07	**Vault:** STCL-General-rel
Status: Release	**Document Type:** STCL

Date Information

Creation Date: 09 Feb 2023	**Release Date:** 08 May 2025
Effective Date: 08 May 2025	**Expiration Date:**

Control Information

Author: MSR68	**Owner:** WATER002
Previous Number: STCL-QA-007 Rev 06	**Change Number:** STCL-CCR-564

STCL-QA-007
NON-CONFORMING PRODUCTS – RECEIPT, PROCESSING, DISTRIBUTION, AND DISPOSITION

1 PURPOSE

1.1 The purpose of this procedure is to identify, contain, and prevent non-conforming products from reaching customers.

1.2 The purpose of this procedure is to describe the procedure for quarantine and investigation of non-conforming products at the time of receipt, processing, distribution, and disposition.

1.3 The purpose of this procedure is to identify and eliminate the root cause of the non-conforming product whenever possible.

2 INTRODUCTION

2.1 Non-conforming products are those products that may pass initial qualifying specifications but do not meet quality standards at the time the product is inspected (*ie, abnormal appearance of the product attributed to clumping, leaking of product container, etc.*) at the time of processing, distribution, or upon receipt at the Transplant Center.

2.2 A fresh product that turns positive after the time of distribution, is not considered a non-conforming product. If additional cells remain available in the freezer from that same product, the remaining cells would be considered a "non-conforming product" which would require a NCP form be initiated and signed if that product (with a positive culture) is going to be used for infusion in the future.

NOTE: Products that do not pass qualifying specifications due to maternal/family history, positive infectious disease test results, positive bacterial/fungal cultures (*if results are available before release of the product*), etc. are considered non-conforming products.

3 SCOPE AND RESPONSIBILITES

3.1 The Program/Medical Director, Laboratory Manager, STCL staff, and Clinical Quality Program (CQP) responsible for ensuring that the requirements of this procedure are successfully met.

4 DEFINITIONS/ACRONYMS

4.1 **cGMP:** Current Good Manufacturing Practices consist of guidelines and regulations that outline the aspects of production and testing that can impact the quality of a product. cGMP are followed to ensure that the products produced meet specific requirements for identity, potency, quality, and purity.

4.2 **Corrective Action:** An activity meant to correct an incidence or event. It may also aid in preventing the event from occurring again.

4.3 **Non-conforming Product:** A product that does not meet quality standards.

4.4 **Preventative Action:** An activity or step implemented to prevent an event from reoccurring in the future.

4.5 CQP Clinical Quality Program

4.6 NCP Non-Conforming Product

4.7 STCL Stem Cell Laboratory

4.8 PPE Personal Protective Equipment

4.9 N/A Not Applicable

5 MATERIALS

5.1 Non-Conforming Product

6 EQUIPMENT

6.1 N/A

7 SAFETY

7.1 Wear all appropriate personal protective equipment (PPE) when handling any/all potentially hazardous blood and body fluids to include, but not limited to gloves, lab coats, etc.

8 PROCEDURE

8.1 Personnel identifying the non-conforming product should take immediate action to clearly label and quarantine the non-conforming product, if applicable, and to notify the Laboratory Manager.

8.2 Laboratory Management/designee:

8.2.1 Promptly notify Program/Medical Director or designee of the non-conforming product.

8.2.2 Report the non-conforming product to the CQP. The CQP and Laboratory Manager or designee will then determine if the non-conforming product should be reported as a deviation or tracked as a non-conforming product.

8.2.2.1 If the product is determined to be a non-conforming product, CQP will issue a tracking # and CQP will document and track the non-conforming product on the Non-Conforming Product Log that is maintained electronically using a designated spreadsheet.

8.2.2.2 If it is decided that a deviation must be filed instead of or in conjunction with a *STCL-QA-007 FRM1 Non-Conforming Product* form, CQP will issue the event # and/or tracking # and will document and track the deviation and/or non-conformance electronically using a designated spreadsheet. Refer to *COMM-QA-042 Deviations and Investigations,*

COMM-QA-042 FRM4 Deviation and Investigation Report, and *STCL-QA-007 FRM1 Non-Conforming Products FRM1*.

8.2.3 If the product is returned from a Transplant Center, complete the *STCL-DIST-001 FRM1 HPC Return from Issue Form* and evaluate whether the product will be reissued, discarded, etc.

8.3 Program/Medical Director and Laboratory Management in consultation with CQP determine the disposition of the non-conforming product based on the results of the investigation.

8.3.1 Disposition Options for Non-Conforming Products include:

8.3.1.1 Accept the product with re-work:

8.3.1.1.1 Take action to eliminate the Non-Conformity e.g., repair, re-work (*ie. filter clumped product*).

8.3.1.1.2 Re-verification of the product specifications must be completed and documented before the product is redistributed.

8.3.1.2 Accept the product without re-work:

8.3.1.2.1 Accept the product without further manipulation (*ex. leaking bag at the time of 37°C thaw may be given to the patient based on the total # of CD34+ cells/kg available for the transplant*).

8.3.1.2.2 The attending physician or designee must be informed of the non-conformance so a decision can be made regarding the product's disposition. In situations where time is limited (*ie. 37°C thawed product must be infused immediately, post thaw*), a verbal order may be given by the physician but the *STCL-QA-007 FRM1 Non-Conforming Product* form must be signed as soon as feasibly possible.

8.3.1.2.3 Products with known positive cultures and/or positive infectious disease test results may need to be given to a recipient based on "Urgent Medical Need". In such cases, the recipient or guardian, if the recipient is a minor, must be informed of the intent to infuse cells with a positive culture and/or positive infectious disease test results. Notification of the recipient or guardian must be reflected on the *STCL-QA-007 FRM1 Non-Conforming Product Form* and *APBMT-COMM-001 FRM1 Request and Authorization Form for*

the Donation and/or Infusion of Emergency Cellular Products.

8.3.1.2.4 Products that have been cryopreserved and found to have positive cultures (*or positive infectious disease test results*) should be stored in vapor LN2 freezers since the vapor phase of liquid nitrogen is considered a "**virtual quarantine**". Storing products in vapor phase will reduce the risk of cross-contamination.

8.3.1.3 Accept with Correction or Re-label:

8.3.1.3.1 In the event that product labels must be corrected or new labels prepared, before the product can be re-issued, the *STCL-QA-007 FRM1 Non-Conforming Product* form must be signed.

8.3.1.3.2 Re-verification of product specifications must be completed and documented before a product is redistributed.

8.3.1.4 Authorize use, release, or acceptance under concession by an order from the recipient's physician that this product fills an "Urgent Medical Need" and that the recipient has been informed of the non-conformity.

8.3.1.4.1 The product, when appropriate, must be relabeled to identify the non-conformity using a tie tag label attached to the product.

8.3.1.4.2 The decision to release or accept a non-conforming product must be documented and signatures obtained prior to release of the product. e.g., documentation from treating physician agreeing to accept the non-conforming product, the treating physician provides a signed consent form from the recipient, etc. See *STCL-QA-007 FRM1 Non-Conforming Products* form.

8.3.1.4.3 The Program/Medical Director or designee informs the recipient's physician of those conditions that may affect the safety and efficacy of the product, including unachieved endpoints, as applicable.

8.3.1.5 Disposal or release for research:

8.3.1.5.1 Disposal of product in biohazard trash as outlined in *STCL-SOP-045 Disposing of Unused-Outdated Cryopreserved Recipient*

Products and *STCL-SOP-045 FRM1 Record of Discard*.

8.3.1.5.2 Distribution of product for other non-patient related disposition, such as research, if proper signed consent is on file and once the product has been de-identified of all recipient/donor-related demographic information.

8.3.2 Disposition of the non-conforming product must be documented and appropriate signatures obtained before the product is disposed. (See *STCL-QA-007 FRM1 Non-Conforming Products* and *STCL-SOP-045 FRM1 Record of Discard* documents).

8.4 Program/Medical Director and CQP will report non-conforming products, as deemed appropriate, to regulatory authorities e.g., (*FDA - Center for Biologics Evaluation and Research, CBER, Center for Drug Evaluation and Research, CDER*).

8.5 Refer to Duke University Medical Center policy on Safe Medical Devices Act: Medical Device (SMDA) Reporting Procedure if the non-conforming product results from a medical device.

9 RELATED DOCUMENTS/FORMS

9.1 *STCL-DIST-001 FRM1 HPC Return from Issue Form*

9.2 *APBMT-COMM-001 FRM1 Request and Authorization Form for the Donation and/or Infusion of Emergency Cellular Products*

9.3 *COMM-QA-042 Deviations and Investigations*

9.4 *COMM-QA-042 FRM4 Deviation and Investigation Report*

9.5 *STCL-QA-007 FRM1 Non-Conforming Products*

9.6 *STCL-SOP-045 Disposing of Unused-Outdated Cryopreserved Recipient Products*

9.7 *STCL-SOP-045 FRM1 Record of Discard*

10 REFERENCES

10.1 Foundation for the Accreditation of Hematopoietic Cell Therapy (FACT). Standards for Hematopoietic Progenitor Cell Collection, Processing and Transplantation. Current edition

10.2 21 CFR 1271.3(u) Urgent medical need

11 REVISION HISTORY

Revision No.	Author	Description of Change(s)
07	M. Ritt	• Removed reference to Quality Systems Unit (QSU) throughout the document and replaced with Clinical Quality Program (CQP)

Signature Manifest

Document Number: STCL-QA-007 **Revision:** 07
Title: Non-Conforming Products - Receipt, Processing, Distribution, and Disposition
Effective Date: 08 May 2025

All dates and times are in Eastern Time.

STCL-QA-007 Non-Conforming Products - Receipt, Processing, Distribution, and Disposition

Author

Name/Signature	Title	Date	Meaning/Reason
Melissa Ritt (MSR68)	GMP, Quality Assurance Associate I	21 Apr 2025, 12:14:32 PM	Approved

Management

Name/Signature	Title	Date	Meaning/Reason
Barbara Waters-Pick (WATER002)		22 Apr 2025, 01:25:14 PM	Approved

Medical Director

Name/Signature	Title	Date	Meaning/Reason
Beth Shaz (BHS16)		22 Apr 2025, 01:26:18 PM	Approved

Quality

Name/Signature	Title	Date	Meaning/Reason
Bing Shen (BS76)	Associate Director, Quality Assurance	23 Apr 2025, 01:30:27 PM	Approved

Document Release

Name/Signature	Title	Date	Meaning/Reason
Amy McKoy (ACM93)	Document Control Specialist	24 Apr 2025, 10:02:09 AM	Approved