Food and Drug Administration



CFSAN Online Submission Module (COSM)

New Dietary Ingredient Notification Step-by-Step Submission Guide

Introduction

This is a *Guide*. It is intended to help you quickly file a New Dietary Ingredient (NDI) Notification. It, therefore, contains enough information to complete a submission. If this is your first exposure to the CFSAN Online Submission Module it is highly recommended that you first review the CFSAN COSM Registration Guide. The Registration Guide is an official pre-cursor to this or any other Guide that is specific to a submission within the COSM system.

LOG IN TO THE CFSAN ONLINE SUBMISSION MODULE

FDA CFSAN Online Submission Module	1 About
Login Username * 😝	WARNING WARNING WARNING WARNING WARNING This information system is provided for U.S. Government-authorized use only. System User Agreement You are accessing a U.S. Government information system, the CFSAN Online Submission Module. The information system includes (1) this computer, (2) this computer network, (3) all computers connected to this network, and (4)
Password *	all devices and storage media attached to this network or to a computer on this network. Any unauthorized or improper usage of this information system is prohibited and may result in disciplinary action as well as civil and criminal penalties. By using this information system, you understand and consent to the following: - Anyone who makes a materially false, fictitious, or fraudulent statement to the U.S. Government is subject to criminal penalties. See Title 18 U.S.C. 1001.
Login Register Forgot Password?	 Any information system usage may be monitored, recorded, and subject to audit. Anyone using this information system expressly consents to monitoring and is advised that if such monitoring reveals possible criminal activity, system personnel may provide the evidence of such monitoring to law enforcement officials.
Please use your credentials to log-in to the CFSAN Online Submission Module.	 You have no reasonable expectation of privacy regarding any communications or data transiting or stored on this information system. At any time, and for any lawful government purpose, the government may monitor, intercept, and search and seize any communication or data transiting or stored on this information system. Any communications or data transiting or stored in this information system may be disclosed or used for any lawful government nurpose.
FURLS User Registration	
Please begin the registration process by providing the E-mail address associated with your FURLS login.	
E-Mail Address *	
Submit	

Figure 1 : COSM Login Page

Log in to the COSM by entering a Username and Password on the Login page (Figure 1). Click the "Login" button. The Home page for the COSM will appear (Figure 2).



COSM HOME PAGE

Figure 2: Select NDI Notification

Click the "Start NDI Notification" button to begin a New Dietary Ingredient Notification. The NDI Summary Page (Figure 3) will appear.

New DIETARY INGREDIENT NOTIFICATION SUMMARY PAGE

The Summary Page (Figure 3) displays an overview of the sections that must be completed for the New Dietary Ingredient Notification. A unique tracking number is created for each NDI created. The Tracking Number is the unique identifier for the submission within the COSM. Please note that it is not the NDIN report number. Click on each "Update" button to complete the information relevant to the section. As each section is completed, COSM will return you to the Summary Page to complete the next section.

FDA CFSAN Online Submission Module	About III Manage Submissions		\varTheta Profile 🗸	ပို Logout
New Dietary Tracking Number: OLS_N	y Ingredient (NDI) Notification	Paperwork Reduction Act Notice Form Approval: OMB No. 0910-0330 Expiration Date: 05/31/2021		
	 This section asks you to identify: a. The Submitter of the notification The submitter of the notification is the person or firm that submits the online notification could be amaufacturer or distributor of dietary ingredients or dietary supplement entity that submits the notification on behalf of a manufacturer or distributor, such other agent of the motification is the manufacturer or distributor, such other agent of the motification. The Owner of the notification The owner of the notification The owner of the notification The owner of the notification and submitter of the notific thens, such as when manufacturers and distributors hire an outside entity (attorm notification on their behalf, the notification owner and submitter will be different. Contacts (primary and additional) Contacts authorized to communicate with the FDA contacts are people whom you with the FDA about the notification. By listing someone as a contact in this section him or the with questions about the notification one as a outset of the notification. Yu submit equates on the status of the notification and the loss one person as the primary co designate additional contacts in case the primary contact is not available, but that designate additional contacts in case the primary contact is not available. Details Details	frication to FDA. The submitter the or it could be a person or h as a consultant, law firm or which the notification is being cation will be the same but in ey or consultant; to submit the u designate to communicate is, you authorize FDA to contact fication and any other matters pontort. We encourage you to is optional.		
General Administrat	tive Information			
FDA	This section asks for general administrative information pertaining to the New Dietary Ing high-level information that gives us insight as to the nature and content of the notification of the notification that gives us insight as to the nature and content of the notification of the notification of the	gredient Notification. This is on itself.		
Description of New	Dietary Ingredient and Dietary Supplement			
	This section describes the new dietary ingredient and the dietary supplement containing obtaining answers to specific questions regarding: a. The type and name of the ingredient. b. The serving form, serving size and conditions of use for the supplement. c. A narrative describing the ingredients in the NDL. d. Other information pertinent to the NDL.	the new dietary ingredient by Update		
Safety Information	Attachment			
P	In this section, you will download and fill in a safety information template describing the you base your conclusion that the dietary supplement(s) containing the NDI will reasonal Safety information means, among other things, information showing that the NDI is iden documented as having a history of use as food and/or to test articles used in actery studi information means documentation of history of use as food, and the results of safety studi toxicology studies, pharmacokinetic studies, animal toxicology studies and human clinica details about the identity of the NDI verification of that identity, information about histo evidence relevant to the safety of the NDI and the dietary supplement. The template also copies of all cited studies. After filling in the template, you will attach the completed safe files containing the scientific publications cited in your notification.	scientific information on which bly be expected to be safe. bial or related to substances es. thaddition; safety dies, including genetic I studies. The template saks for ny of use as tood, and/or other asks for reprints or photo static ty information template file and		
Additional Attachm	ents			
	Additional attachments to the NDI notification are explained in this Section. Uploading la supplement containing the NDI will help FDA evaluate what conditions of use are being r you are the manufacturer or distributor of the NDI and do not have access to labeling for which the NDI will be used, please upload the labeling of the bulk NDI.	beling for the dietary recommended or suggested. If the dietary supplement(s) in		
Review Notification				
E.	Review your submission in its entirety. Modily, update or make corrections as necessary t submission.	before certifying your Review		
Signature and Certif	fication			
P	The accuracy of the statements you make in this submission should reflect your best prec regarding the chemical substance described herein. Any knowing and willful misinterpret penalty pursuant to 18 U.S.C. 1001. The notifying party certifies that the information prov complete to the best of his/her knowledge.	siction of the anticipated facts ation is subject to criminal ided herein is accurate and		
Final Submission				
FINISH	All fields in these documents are entered correctly and submitted. Also included all the files and documents required. Also followed all the terms and conditions while filing the forms. Please ensure that all the above sections are complete before attempting to	Send to FDA		

Figure 3: NDI Summary Page

CONTACT INFORMATION SECTION

The Contact Information Section allows you to enter or select multiple contacts for the NDIN. Contact information may be typed directly into the form or a contact may be selected from your Contacts list. Your Contacts list is explained in the CFSAN Online Submission Module Registration Guide.

Below is a list of the Contact field names and their descriptions. Mandatory fields are shown with an asterisk (*).

Field	Description
First Name*	First name of contact person
Last Name*	Last name of contact person
Company*	Full company name
Position*	Position or title of the contact person
Doing Business As	Alternate or "local" name of the company
Mailing Address Line 1	Street name and number or post office box number for the Company's mailing address
Mailing Address Line 2	Optional; can be uses for building number, suite number or other information.
City*	City for the Company's mailing address
Country/Area*	Country
State or Province*	Required if Country is "United States of America" or "Canada"
Zip/Postal Code*	Required if Country is "United States of America" or "Canada"
Email Address*	Email address of contact person
Telephone Number*	Telephone number of contact person
Fax Number	FAX phone number of Company

Table 1: Field Names and Descriptions for Contact

To add one or more contacts to your NDI, click the "Update" button next to the Contact Information heading on the NDI Summary Page. The Contact Information section appears (Figure 4).

CFSAN Online Submission Module 🏫 Home 🕜 About III Manage Submissions	⊖ Profile ∽ (U Logout
New Dietary Ingredient (NDI) Notification Tracking Number: OLS_NDI_243	
Contact Information @	
Add Centact	
Contact Type *	
Submitter	Canoel
Owner	
Primary	
Other	

Figure 4: Select Contact Type

Click the "Add Contact" button to add a new contact. Click the "Contact Type" listbox arrow indicator. Select from one of the contact types that appear. The "Primary", "Owner" and "Submitter" contact types are mandatory. You will be prompted to add each contact type until each of those contacts has been added. The "Other" contact type is optional.

Select a Contact from the list of contacts (Figure 5). The remaining contact information will be automatically completed. All fields are modifiable, however, changes made on this screen will not affect entries in your contacts list.

	New Dietary Ingredier	nt (NDI) Notifica	ation		
<complex-block></complex-block>	Tracking Number: OLS_NDI_243				
Constripte* Partinany Submitter of the Notification Owner of the Notification Owner of the Notification Other (please appedfy) Part Name * Last Name * Orapany * Position Doing Business AS (if applicable) Maling Address * Maling Address * Dig' Contry/Ares * State or Province * Tappone Number * Extension	Contact Inform	ation 🕜			
Submitter of the Notification Owner of the Notification Ogent/Attorney/Consultant The r (please specify) First Name* Company* Position Daing Business As (if applicable) Mulling Address* City* County/Area* State or Province* Zip Code/Pontal Code* Evaluation Telephone Number*	Add Contact Contact Type * Primary		Auto-fill the data		
Submitter of the Notification Owner of the Notification Agent/Attorney/Consultant Ther (please specify) First Name * Company * Position Daing Business As (if applicable) Mulling Address * City * Country/Area * Etablone Number * Etablone Number *	Type of Contact *		Wilson, LTD		
Owner of the Notification Agent/Attorney/Consultant Other (please specify) First Nome * Company * Position Daing Business As (if applicable) Mailing Address * City * Country/Area * E-Mail Address * Telephone Number *	O Submitter of the Notification		and the second	-	
Agent/Attorney/Consultant Other (please specify) First Name * Last Name * Company * Position Daing Business As (if applicable) Mailing Address * Mailing Address 2 City * Country/Area * State or Province * Zip Code/Postal Code * E-Mail Address *	O Owner of the Notification		Jackson, , Inc. (Profile Contact)		
Orther (please specify) First Name * First Name * Company * Doing Business As (if applicable) Mailing Address * City * City * Country/Area * State or Province * Telephone Number * Fax Number	O Agent/Attorney/Consultant				
First Name * Company * <td>O Other (please specify)</td> <td></td> <td></td> <td></td> <td></td>	O Other (please specify)				
Company * Position Doing Business As (if applicable) Multing Address * Multing Address 2 City * Country/Area * State or Province * Zip Code/Postal Code * E-Mail Address * Telephone Number * Fax Number	First Name *		Last Name *	-8	
Doing Business As (if applicable) Mailing Address * Mailing Address2 City * Country/Area * * State or Province * Zip Code/Postal Code * E-Mail Address * Telephone Number * Fax Number	Company *		Pasition	-	
Mailing Address * Mailing Address2 City * Country/Area * State or Province * Zip Code/Postal Code * E-Mail Address * Telephone Number * Fax Number Concel	Doing Business As (if applicable)				
Mailing Address2 City * Country/Area * State or Province * Zip Code/Postal Code * E-Mail Address * Telephone Number * Fax Number	Mailing Address *				
City* Country/Area* State or Province* Zip Code/Postal Code* E-Mail Address* Telephone Number* Fax Number	Mailing Address2			_	
Zip Code/Postal Code * E-Mail Address * Telephone Number * Fax Number Save Cancel	City *	Country/Area *	* State or Province *		
Telephone Number * Fax Number	Zip Code/Postal Code *		E-Mail Address *	20	
Cancel	Telephone Number *		Fax Number	-3	
	D Save		Car	ncel	

Figure 5: Select the Contact from Contacts List

Select the additional "Type of Contact" from the circular "radio" buttons or the square multi-select buttons. Table 2 shows the selections available.

Table 2: Contact Type Selection Choices

Primary	Select one of: Submitter of the Notification Owner of the Notification Agent/Attorney/Consultant Other (please specify)
Submitter	Select one or more of: Manufacturer of NDI

	Distributor of NDI Manufacturer of Dietary Supplement Containing NDI Distributor of Dietary Supplement Containing NDI Agent/Attorney/Consultant
Owner	Select one or more of: Manufacturer of NDI Distributor of NDI Manufacturer of Dietary Supplement Containing NDI Distributor of Dietary Supplement Containing NDI
Other	Select one of: Submitter of the Notification Owner of the Notification Agent/Attorney/Consultant Other

FDA CFSAN Onli	ne Submission Module 🔺 Home 🛛 🌘	About III Manage Submis	sions		😝 Profile 🗸	U Logout
	New Dietary Ingredient (Tracking Number: OLS_NDI_243	(NDI) Notification				
	Contact Informatio	on 🕢				
	Contact Type * Primary		Auto-fill the data Jackson, Inc. (Profile (Contact)		
	Type of Contact *					
	Submitter of the Notification Owner of the Notification					
	Agent/Attorney/Consultant					
	O Other (please specify)					
	This field is required					
	First Name *		Last Name * Jackson			
	Company *		Position CEO			
	Doing Business As (if applicable)					
	Mailing Address * 2038 Rallston Sq					
	Mailing Address2					
	City* Jamestown	Country/Area * United States of Americ	State or Province * • Virginia	÷		
	Zip Code/Postal Code *		E-Mail Address *			
	49586		Industry associated on			
	Telephone Number * 3049		Fax Number			
	Continue			Cance	0,	

Figure 6: Complete the Contact Selection

Click the "Save" button when done as shown in Figure 6. *After* clicking the "Save" button, click the "Add Contact" button to insert an additional contact or click the "Continue" button to exit the Contact Information section (Figure 7).

Туре	Name	Address	Action	
Primary	Jackson	2038 Rallston Sq, Jamestown, VA, 49586, USA	1	T
Submitter	Wilson	PO Box 8402, Ewock, WI, 88444, USA	1	

Figure 7: Completed Contact Information Section

GENERAL ADMINISTRATIVE INFORMATION SECTION

The General Administrative Information section captures information about the submission and required components.

CFSAN Online Submission Module 🛧 Home 🚯 About 🗰 Manage Submissions	😝 Profile 🗸 🔱) Logou
	, t	
New Dietary Ingredient (NDI) Notification		
Tracking Number: OLS_NDI_243		
General Administrative Information		
1. Name of the New Dietary Ingredient? * 🧿		
Name of the New Dietary Ingredient *		
Sample Dietary Ingredient	0	
2. Have you designated information in your submission that you view as trade secret or as confidential comme	ercial or financial	
information? * 🤫		
O Yes, see attached Designation of Confidential Information		
\bigcirc Yes, information is designated at the place where it occurs in the submission		
○ No		
3. Are you providing a redacted copy of some or all of the notification? * 🍘		
O Yes, redacted copy of complete notification		
Ves, redacted copy of part(s) of the notification		
⊖ No		
4. Are all citations to published information accompanied by reprints or full photo static copies of the publicat	tions? * 🕜	
⊖ Yes	-	
O No		
5. Are the notifications and all publications submitted in English or accompanied by a complete and accurate E	English translation? * 🕜	
○ Yes	-	
O No		
-		
Save and Continue	Cancel	

Figure 8: General Administrative Information

All fields in this section are mandatory. See Table 3 for the list of fields and their descriptions for the General Administrative Information section.

Table 3: Fields for	General Administrative	Information
---------------------	------------------------	-------------

Field	Description
Name of Dietary	Enter the name of the new dietary ingredient that is the subject of the
Ingredient*	notification. Please note that for an NDI notification that concerns an NDI
	that is a combination of two or more NDIs, the NDI notification should
	include identity information for each component NDI as part of the safety

	information for the combination NDI.
Have you designated information in your submission that you view as trade secret or as	Select 'Yes, see attached designation of confidential information' if there are trade secrets or confidential commercial information in the notification and you are providing an attachment detailing the information you view as confidential. This attachment should be uploaded in Section 5.
confidential commercial or financial information? *	Select 'Yes, information is designated at the place where it occurs in the notification' if you have marked certain material as confidential within the notification.
	Select 'No' if you do not consider any of the information in the notification to be a trade secret or confidential commercial information.
Are you providing a redacted copy of some or	Select 'Yes' if you are including a redacted copy of your notification. The redacted copy should be uploaded as an attachment in Section 5.
all of the notification? *	Select 'No' if you are not including a redacted copy of your notification.
Are all citations to published information	Select 'Yes' if the notification includes reprints or photocopies of all publications cited.
accompanied by reprints or full photo static copies of the publications? *	Select 'No' if the notification cites publications and does not include reprints or photocopies of all publications cited. If you select 'No," your notification will be incomplete, and you will not be able to transmit it to the FDA.
Are the notifications and all publications submitted in English or accompanied by	Select 'Yes' if the entire notification, including any supporting publications, is in English or if the notification includes a complete and accurate English translation of any foreign language materials submitted.
a complete and accurate English translation? *	Select 'No' if any part of the notification, including supporting publications, is being submitted in a foreign language without a complete and accurate English translation. If you select 'No," your notification will be incomplete, and you will not be able to transmit it to the FDA.

DESCRIPTION OF NEW DIETARY INGREDIENT AND DIETARY SUPPLEMENT

This section asks for detailed information about the dietary ingredient such as a description of the ingredient, it's uses, possible trade names, dosing and serving suggestions.

ew Dietary Indredient (101)	I) Notification	
acking Number: OLS_NDI_243	i Notification	
44		
Description of New Die	etary Ingredient and Dietary Supplement	
1. New Dietary Ingredient Type (Check all t	ihat apply) 🕜	
Vitamin		
Mineral		
Herb or other botanical		
Amino acid		
Dietary substance for use by man to sup	plement the diet by increasing the total dietary intake	
Concentrate, metabolite, constituent, ext	tract, or combination of any ingredient described above	
2. New dietary ingredient name and related	d information 🥑	
Maximum level of new dietary ingredient in	each serving of dietary supplement (include units) *	
NDI Name	Latin Binomial Name (LBN)	
Synonyms and Trade Name	Author of LBN	
Plant Part and Strain		
Ves No	Capsule	
Powder	Soft gel	
Powder Liquid	☐ soft gel ☐ Gelcap	
Powder Liquid Sachet	Soft gel Gelcap	
Powder Iquid Sachet Description of dietary supplement (Includ If the notification concerns an NDI that is a component NDI: Synonyms, Trade Name, PI relevant, also include the following addition manufacture (e.g., >99% purity, 50:1 dry lea Description of dietary supplement *	Soft gel Gelcap Other de the level of NDI and all other ingredients in one unit of the dietary supplement), combination of two or more other NDIs, you should provide the following informal lant Part, Strain, Latin Binomial Name, Author of Latin Binomial Name, and NDI type hal information: CAS registry number, Unusual form (e.g., malted barley or immature f extract, or fermentation product).	2 tion for each e. Where e apples), Type
Powder Liquid Sachet Description of dietary supplement (Includ If the notification concerns an NDI that is a component NDI: Synonyms, Trade Name, PI relevant, also include the following addition manufacture (e.g., >99% purity, 50.1 dry lea Description of dietary supplement * S. Conditions of Use of the Dietary Supplement	Soft gel Gelcap Other de the level of NDI and all other ingredients in one unit of the dietary supplement). combination of two or more other NDIs, you should provide the following informal lant Part, Strain, Latin Binomial Name, Author of Latin Binomial Name, and NDI type nat information: CAS registry number, Unusual form (e.g., maited barley or immature f extract, or fermentation product).	Output: The second s
Powder Liquid Sachet Description of dietary supplement (Includ If the notification concerns an NDI that is a component NDI: Synonyms, Trade Name, PI relevant, also include the following addition manufacture (e.g., >99% purity, S0:1 dry lea Description of dietary supplement * S. Conditions of Use of the Dietary Supplem a. Serving instructions (e.g., 'take with fo	Soft gel Gelcap Other de the level of NDI and all other ingredients in one unit of the dietary supplement). combination of two or more other NDIs, you should provide the following informal lant Part, Strain, Latin Binomial Name, Author of Latin Binomial Name, and NDI type ati information: CAS registry number, Unusual form (e.g., malted barley or immature of extract, or fermentation product). nent other	tion for each e. where e apples), Type
Powder Liquid Sachet Description of dietary supplement (Includ If the notification concerns an NDI that is a component NDI: Synonyms, Trade Name, Pl relevant, also include the following addition manufacture (e.g., >99% purity, 50:1 dry lea Description of dietary supplement * S. Conditions of Use of the Dietary Supplem a. Serving instructions (e.g., take with fo Serving instructions *	Conter C	© tion for each e. Where e apples), Type
Powder Liquid Sachet Description of dietary supplement (Includ If the notification concerns an NDI that is a component NDI: Synonyms, Trade Name, PI relevant, also include the following addition manufacture (e.g., >99% purity, 50:1 dry lea Description of dietary supplement * S. Conditions of Use of the Dietary Supplem a. Serving instructions (e.g., 'take with fo Serving instructions * b. Dietary Supplement serving size (weig	Soft gel Gelcap Other de the level of NDI and all other ingredients in one unit of the dietary supplement). combination of two or more other NDIs, you should provide the following informal lant Part, Strain, Latin Binomial Name, Author of Latin Binomial Name, and NDI type hal information: CAS registry number, Unusual form (e.g., malted barley or immature of extract, or fermentation product). nent other complete the before bed', 'dissolve in a glass of water' etc. pht or volumetric measure), serving frequency (# of servings/day, interval between s	extra to for each e. Where e apples), Type servings),
Powder Liquid Sachet Liquid Sachet Description of dietary supplement (Includ If the notification concerns an NDI that is a component NDI: Symonyms, Trade Name, PI relevant, also include the following addition manufacture (e.g., >99% purity, 50:1 dry lea Description of dietary supplement * S. Conditions of Use of the Dietary Supplem a. Serving instructions (e.g., 'take with fo <u>Serving instructions * b. Dietary Supplement serving size (weig duration of use and maximum total data </u>	Soft gel Gelcap Other de the level of NDI and all other ingredients in one unit of the dietary supplement), combination of two or more other NDIs, you should provide the following informal lant Part, Strain, Latin Binomial Name, Author of Latin Binomial Name, and NDI type hal information: CAS registry number, Unusual form (e.g., malted barley or immature if extract, or fermentation product). nent other to volumetric measure), serving frequency (# of servings/day, interval between s aily intake level. other	tion for each e. Where e apples), Type servings),
Powder Liquid Sachet Liquid Sachet Description of dietary supplement (Includ If the notification concerns an NDI that is a component NDI: Symonyms, Trade Name, PI relevant, also include the following addition manufacture (e.g., >99% purity, 50:1 dry lea Description of dietary supplement * S. Conditions of Use of the Dietary Supplem a. Serving instructions (e.g., take with fo Serving instructions * b. Dietary Supplement serving size (weig duration of use and maximum total da Serving size *	Soft gel Gelcap Other de the level of NDI and all other ingredients in one unit of the dietary supplement), combination of two or more other NDIs, you should provide the following informal lant Part, Strain, Latin Binomial Name, Author of Latin Binomial Name, and NDI type hal information: CAS registry number, Unusual form (e.g., malted barley or immature if extract, or fermentation product). nent	Control for each e. Where e apples), Type servings),
Powder Liquid Sachet Description of dietary supplement (Incluc If the notification concerns an NDI that is a component NDI: Synonyms, Trade Name, PI relevant, also include the following addition manufacture (e.g., >99% purity, 50.1 dry lea Description of dietary supplement * S. Conditions of Use of the Dietary Supplem a. Serving instructions (e.g., take with fo Serving instructions * b. Dietary Supplement serving size (weig duration of use and maximum total da Serving size * Turosteen during for the serving size (meig	Soft gel Gelcap Other de the level of NDI and all other ingredients in one unit of the dietary supplement). combination of two or more other NDIs, you should provide the following informal lant Part, Strain, Latin Binomial Name, Author of Latin Binomial Name, and NDI type nal information: CAS registry number, Unusual form (e.g., malted barley or immature if extract, or fermentation product). nent ? ph or volumetric measure), serving frequency (# of servings/day, interval between s aily intake level. ?	tion for each e. Where e apples), Type servings),
Powder Liquid Sachet Liquid Sachet Description of dietary supplement (Incluc If the notification concerns an NDI that is a component NDI: Synonyms, Trade Name, PI relevant, also include the following addition manufacture (e.g., >99% purity, 50:1 dry lea Description of dietary supplement * S. Conditions of Use of the Dietary Supplem a. Serving instructions (e.g., 'take with fo Serving instructions * b. Dietary Supplement serving size (weig duration of use and maximum total da Serving size * c. Target populations / excluded popular	Soft gel Gelcap Other de the level of NDI and all other ingredients in one unit of the dietary supplement). combination of two or more other NDIs, you should provide the following informal lant Part, Strain, Latin Binomial Name, Author of Latin Binomial Name, and NDI type all information: CAS registry number, Unusual form (e.g., malted barley or immature if extract, or fermentation product). nent ? phot or volumetric measure), serving frequency (# of servings/day, interval between s ality intake level. ?	tion for each e. where e apples), Type servings),
Powder Liquid Sachet Description of dietary supplement (Incluc If the notification concerns an NDI that is a component NDI: Synonyms, Trade Name, Pl relevant, also include the following addition manufacture (e.g., >99% purity, 50:1 dry lea Description of dietary supplement * S. Conditions of Use of the Dietary Supplem a. Serving instructions (e.g., 'take with fo Serving instructions * b. Dietary Supplement serving size (weig duration of use and maximum total da Serving size * c. Target populations / excluded populat Target Populations *	Soft gel Gelcap Other de the level of NDI and all other ingredients in one unit of the dietary supplement), combination of two or more other NDIs, you should provide the following informal lant Part, Strain, Latin Binomial Name, Author of Latin Binomial Name, and NDI type hal information: CAS registry number, Unusual form (e.g., malted barley or immature if extract, or fermentation product). nent o there there is a glass of water' etc. o there is a glass of wat	€ tion for each e. Where e apples), Type servings),
Powder Liquid Sachet Description of dietary supplement (Incluc If the notification concerns an NDI that is a component NDI: Synonyms, Trade Name, Pl relevant, also include the following addition manufacture (e.g., >99% purity, 50:1 dry lea Description of dietary supplement * S. Conditions of Use of the Dietary Supplement a. Serving instructions (e.g., 'take with fo Serving instructions * b. Dietary Supplement serving size (weig duration of use and maximum total da Serving size * c. Target populations / excluded populat Target Populations * 6. Other ②	bott gel Gelcap Other de the level of NDI and all other ingredients in one unit of the dietary supplement). combination of two or more other NDIs, you should provide the following informal lant Part, Strain, Latin Binomial Name, Author of Latin Binomial Name, and NDI type ali information: CAS registry number, Unusual form (e.g., malted barley or immature of extract, or fermentation product). nent o to rolumetric measure), serving frequency (# of servings/day, interval between s aliy intake level. o	€ tion for each e. Where e apples), Type servings),
Powder Liquid Sachet Description of dietary supplement (Incluc If the notification concerns an NDI that is a component NDI: Symonyms, Trade Name, PI relevant, also include the following addition manufacture (e.g., >99% purity, 50:1 dry lea Description of dietary supplement * S. Conditions of Use of the Dietary Supplement a. Serving instructions (e.g., 'take with fo Serving instructions (e.g., 'take with fo Serving instructions * b. Dietary Supplement serving size (weig duration of use and maximum total da Serving size * c. Target populations / excluded popular Target Populations * 6. Other	In the set of the	Control of the second s

Figure 9: Description of New Dietary Ingredient

Complete the fields on this page as necessary. Not all fields are mandatory. Mandatory fields are marked with an asterisk (*). The fields and their descriptions are discussed in the table below.

Field	Description
New Dietary Ingredient Type (Check all that apply)	Select the dietary ingredient type to which the new dietary ingredient that you wish to introduce belongs using the definitions provided. By selecting an ingredient type, you are designating the regulatory status. (See section 201(ff)(1) of the FD&C Act (21 U.S.C 321(ff)(1)).
	More than one category may apply; e.g., for broccoli extract you would check the "herb or other botanical, "dietary substance," and "concentrate, metabolite, constituent, extract, or combination" boxes.
Maximum level of new dietary ingredient in each serving of dietary supplement *	Enter the maximum level of the NDI (including units of measurement) in a serving of the dietary supplement, if your notification applies to a specific dietary supplement. If you are a bulk supplier or if your notification is intended to cover dietary supplements at a range of doses, enter the maximum level of the NDI (including units of measurement) per serving that you have concluded will reasonably be expected to be safe under the conditions of use described in the notification.
NDI Name	The NDI name that was entered in the General Administration Information Section will be pre-populated here. This field cannot be modified by the user. If this name is not correct the user should return to the General Administration Information section and change it there.
Synonyms and Trade Name	List the trade name(s) of the NDI and any synonyms for the NDI (other names under which the NDI is known) that could be used to search the scientific literature about the safety of the NDI.
Plant Part and Strain (Mandatory if New Dietary Ingredient Type is "Herb or other botanical")	The plant part and plant strain from which the NDI is taken. (For microbial NDIs, enter the microbial strain.)
Latin Binomial Name (LBN) (Mandatory if New Dietary Ingredient Type is "Herb or other botanical")	The LBN of the NDI
Author of LBN (Mandatory if New Dietary Ingredient Type is "Herb or other botanical")	The Author of the LBN
Dietary supplement serving form * (Check all that apply)	Select the form of the dietary supplement containing the NDI. If the NDI will be an ingredient of dietary supplements in more than one form, select all forms that apply. If the form of your dietary supplement is not listed, select 'Other' and describe the form in the text box provided.
Description of the dietary	List the names and levels of all ingredients in each dietary supplement

Table 4: Field Names and Descriptions for the Description of New Dietary Ingredient

supplement *	that contains the new dietary ingredient. The level should correspond to the level in the specified serving form(s) above. You should list the dietary ingredients and all other ingredients for each supplement product.
	Bulk ingredient suppliers should provide the requested information about NDI level, other ingredients, form, and type of manufacture based on the conditions of use that are recommended for the NDI and for which there is a reasonable expectation of safety based on history of use or other evidence.
	If the notification is intended to cover more than one dietary supplement containing the NDI, enter the description of the first dietary supplement here.
Conditions of Use of the Dietary Supplement	Provide information on the conditions of use for each dietary supplement containing the NDI.
	If you are a bulk ingredient supplier, provide the conditions of use you recommend for dietary supplements containing the NDI.
	If the notification is intended to cover more than one dietary supplement containing the NDI, enter the conditions of use for the first dietary supplement here, and enter the conditions of use for the remaining dietary supplements in the safety information attachment you will upload in Section 4.
Serving Instructions*	Provide information on the serving instructions (directions for use) for each dietary supplement containing the NDI.
Dietary Supplement serving size *	For each dietary supplement containing the NDI, provide information on the dietary supplement serving size (weight or volumetric measure of one serving of the dietary supplement), serving frequency (number of servings per day, length of time between servings), duration of use, and maximum daily intake level (weight or volumetric measure) of the dietary supplement when taken as suggested in its labeling.
Target Populations / excluded populations / other restrictions *	For each dietary supplement containing the NDI, provide information on the population groups for which the product is intended and on any population groups that should not take the product. For example, you may want to state that the dietary supplement should not be taken by pregnant and lactating women or by individuals with certain medical conditions: (e.g., diabetics or individuals unable to metabolize phenylalanine.) Also provide information on any other use restrictions that may apply. For example, if the intake of the NDI or one of the other dietary ingredients in the supplement needs to be limited for safety reasons, you may want to state that the dietary supplement should not be taken in combination with other dietary supplements that contain the same dietary ingredient.
Other	Please provide any additional information describing the NDI and the dietary supplement(s) containing the NDI. This field can also be used as additional space to enter information on the answers to the questions in

	this section.
--	---------------

SAFETY INFORMATION ATTACHMENT

The Safety Information Attachment section allows the user to download a template for the Safety Attachment. The download is not mandatory if the user has downloaded it previously. Uploading a completed Safety Attachment is mandatory, however. This section only allows one document to be uploaded.

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New Dietary Ingredient (NDI) Notification Tracking Number: OLS_NDI_243		
Safety Information Attachment @		
In this section, you will download and fill in a safety information template describing the scientific information on whi you base your conclusion that the dietary supplement(s) containing the NDI will reasonably be expected to be safe. S information means, among other things, information showing that the NDI is identical or related to substances documented as having a history of use as food and/or to test articles used in safety studies. In addition, safety inform means documentation of history of use as food, and the results of safety studies, including, genetic toxicology studies pharmacokinetic studies, animal toxicology studies and human clinical studies. The template asks for details about the identity of the NDI, verification of that identity, information about history of use as food and/or other evidence releva the safety of the NDI and the dietary supplement. After filling in the template, you will upload the completed templat your notification and attach files containing the scientific publications cited in your notification.	ch afety ation s, e nt to e to	
Please ensure that you do not upload a password protected document. Maximum allowed file size is 10MB. Accepted file type is .pdf. Only 1 file is allowed to be uploaded in this section.		
Click here to download the Safety Information template file.		
+ Drag and Drop or Select File		
Car	ncel	



Step-1: To download the template file for entering your safety information, click on the blue link in the sentence "Click <u>here</u> to download the Safety information template file."

Step-3: Save the completed Safety Narrative to your computer in one of the supported file formats. For security reasons, please save or convert all files to .pdf format prior to uploading. Please remove any protections or restrictions from these documents.

Step-4: You may find it advantageous to combine the completed Safety Narrative with the files containing referenced documents into one large document and upload the one file in this section.

Should you choose to create and attach one large file here, which includes the Safety Narrative and associated reference documents, the next section, "Additional Attachments", may be skipped.

Note: Please ensure that uploaded documents are *not* password protected. The maximum allowed file size is 10MB. The only accepted file type is .pdf. Only 1 file may be uploaded in this section.

Alternatively, you may attach the Safety Narrative document here and attach all files containing referenced documents separately in the "Additional Attachments" section.

Step-5 Once you have completed this section click the "Save and Continue" button to return to the NDI summary page.

+ Drag and Drop or Select File Two ways to attach documents: ents . My Documents New folder **Click and Select** e Cloud Files **Documents** library wnloads My Documents Recent Places or Name Desktop 🦉 (------6/3/ Libraries 6/20/ (Documents X 9/16/2 **Drag and Drop** My Documents **W** (3/11/2 Public Documents . 12/8/20 A Music 3/19/20 Pictures 9/29/20 4 Subversion 12/17/2 Adobe Videos W 2/10/2 8/1/2 + Drag and Drop or Select File Computer W (4/5 W 1 Adobe cle.Bin W S d1cd7dd751092b24e6e 🖬 () Adobe e-tomcat-8.0.26 🖬 🖬 1 1

There are two ways to submit your attachments as shown in Figure 11.



You can click on the blue "Drag and Drop or Select File" button. Your local File Select dialog box will open and you can select the file in the traditional way.

Or you can open the folder containing the file and, using the mouse, "drag" the file from the folder to the area just under the blue button. When you release the mouse button the file will be loaded into the Safety Information Attachment section.

ADDITIONAL ATTACHMENTS

This is an optional section. In this section, you may upload all referenced materials used as a basis for concluding that the new dietary ingredient (NDI) or dietary supplement(s) containing the NDI are reasonably expected to be safe.

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New Dietary Ingredient (NDI) Notification Tracking Number: OLS_NDL_243	
Additional Attachments	
 Attachments included here may include the following: ? Attachments verifying the identity of the dietary ingredient. Attachments of preclinical or clinical studies that the notifier has conducted. Product labels (NDI bulk product label or label for dietary supplement containing the NDI). Letter designating additional contacts authorized to communicate with the FDA. Additional safety information provided as an amendment to the submitted notification. Attachments such as complete copies of all references cited in the safety narrative. A redacted copy of the notification, or a list of information in the notification that the submi secrets or confidential commercial information. 	itter considers to be trade
Save and Continue	Cancel

Figure 12: Additional Attachments

Additional attachments to the NDI are explained in the Safety Information Attachment section. Uploading labeling for the dietary supplement containing the NDI will help FDA evaluate what conditions of use are being recommended or suggested.

If the user is the distributor or manufacturer of the NDI and does not have access to labeling for the dietary supplement(s) in which the NDI will be used, the user is advised to upload the labeling of the bulk NDI.

Clearly identify the attachments with appropriate descriptive file names (for example, first author, year and title, or citation number), making sure a reviewer can connect a citation with the reference document. Number the pages in each attachment consecutively.

Once the user has completed this section they can click the "Save and Continue" button to return to the Summary page.

REVIEW NOTIFICATION SECTION

In this section, you are given the opportunity to review all data elements for this NDI Notification (Figure 13). You can return to the individual sections in the Summary page to make edits and corrections by clicking the "Edit" button for the relevant Section.

After making corrections for the Section click the "Save and Continue" button to be returned to the Review Notification page.

You may print the Summary page by clicking the "Print" icon near the top of the page.

Click the "Continue" button to be returned to the Summary page.

	e Profile ∨ U Logout
New Dietary Ingredient (NDI) Notification Tracking Number: OLS_NDI_240	
Review Notification	
Contact Information	
Contact Type: Submitter Contact Description: 1. Manufacturer of NDI	Edit
Jackson @gmail.com Inc. / CEO 2038 Rallston Sq, Jamestown , VA , USA , 49586 Phone : 301 859 3049	
Contact Type: Primary Type of Contact: Submitter of the Notification Jackson @gmail.com Inc. / CEO 2038 Rallston Sq. Jamestown , VA , USA , 49586 Phone : 301 859 3049	
General Administrative Information	Edit
1. Name of the New Dietary Ingredient New Supplement	
registry number, Unusual form (e.g., malted barley or immature apples), Type of manufacture (e dry leaf extract, or fermentation product).) Description	.g., >99% purity, 50:1
 Conditions of Use of the Dietary Supplement Serving instructions (e.g., 'take with food', 'take before bed', 'dissolve in a glass of water' e Take w/Food 	tc.
 b. Dietary Supplement serving size (weight or volumetric measure), serving frequency (# of s between servings), duration of use and maximum total daily intake level 20mg 	ervings/day, interval
c. Target populations / excluded populations / other restrictions All	
6. Other	
	e-10
Safety Information Attachment	Edit
Safety Information Attachment MEJS18954 Y (SOct).pdf	Edit
Safety Information Attachment MEJ518954 Y (50ct).pdf Additional Attachments (Optional)	Edit
Safety Information Attachment MEJS18954 Y (50ct).pdf Additional Attachments (Optional) 1. Memo Style.pdf 2. Rules of Behavior.pdf	Edit

Figure 13: Review Notification (Close up)

SIGNATURE AND CERTIFICATION SECTION

This section allows you to affix the name and title of a responsible individual to the submission. The responsible individual has the authority to speak on behalf of the submission and answer questions regarding the dietary ingredient. The section must be completed to submit the notification to the FDA.

FDA	CFSAN Online Submission Module 🏫 Home 🕕 About 🗰 Manage Submissions	⊖ Profile ∨	U Logout
	New Dietary Ingredient (NDI) Notification Tracking Number: OLS_NDI_243		
	Signature and Certification		
	Name of the Responsible Official, Employee, Agent or Attorney *		
	Title of the Responsible Official, Employee, Agent or Attorney		
	The person named above has reviewed this notification and certifies that it is correct and complete. I Agree.* Save and Continue	Cancel	

Figure 14: Signature and Certification

Field names and descriptions are shown in Table 5.

Table 5: Signature and Certification Field Descriptions

Field	Description
Name of the Responsible Official, Employee, Agent or Attorney *	Provide the Name
Title of the Responsible Official, Employee, Agent or Attorney	Provide the Title (optional)
Certification Check Box *	Must be checked.

SUBMITTING THE COMPLETED NEW DIETARY INGREDIENT NOTIFICATION

When the NDI is completed, the Summary page will display a check mark to the right of each section as shown in Figure 15. You can edit and review all sections.

New Diet	ary Ingredient (NDI) Notification	Paperwork Reduction Act Notice	
Tracking Number: (DIS NDI 204	Form Approval: OMB No. 0910-0330 Expiration Date: 05/31/2021)
Contact Inform	ation		
	 This section asks you to identify: a. The Submitter of the notification The submitter of the notification is the person or firm that submits the online notific could be a manufacturer or distributor of dietary ingredients or dietary supplement entity that submits the notification on behalf of a manufacturer or distributor. b. The Owner of the notification The owner of the notification The owner of the notification is the manufacturer or distributor by or on behalf of w submitted. In some cases the owner of the notification and submitter of the notification of the notification on their behalf. The owner of the notification of the notification on their behalf. The outper of the notification on use the notification on their behalf. The outper of the notification owner and submitter will be different. c. Contacts (primary and additional) Contacts authorized to communicate with the FDA Contacts are people whom you with the FDA about the notification. yig biling someone as a contact in this section, him or her with questions about the notification. guardes on the status of the notification.	Lation to FDA. The submitter s or it could be a person or as a consultant, law firm or hich the notification is being tion will be the same but in or consultant) to submit the designate to communicate you authorize FDA to contact cation and any other matters toter. We encourage you to	
General Admini	strative Information	optional.	
FDA	This section asks for general administrative information pertaining to the New Dietary Ingr high-level information that gives us insight as to the nature and content of the notification	edient Notification. This is itself.	
Description of I	New Dietary Ingredient and Dietary Supplement		
	This section describes the new dietary ingredient and the dietary supplement containing the obtaining answers to specific questions regarding: a. The type and name of the ingredient. b. The serving form, serving size and conditions of use for the supplement. c. A narrative describling the ingredients in the NDI. d. Other information pertinent to the NDI.	e new dietary ingredient by Update	
Safety Informat	tion Attachment		
A	In this section, you will download and fill in a safety information template describing the sc you base your conclusion that the dietary supplement(s) containing the NDI will reasonabl Safety information means, among other things, information showing that the NDI is identi documented as having a history of use as food and/or to test articles used in safety studie information means documentation of history of use as food, and the results of safety studie is download to the safety studies and the second studies and human clinical details about the identity of the NDI, verification of that identity, information about history evidence relevant to the safety of the NDI and the dietary supplement. The template also a copies of all cited studies. After filling in the template, you will attach the completed safety files containing the scientific publications cited in your notification.	ientific information on which y be expected to be safe, cal or related to substances is. In addition, safety es, including genetic studies. The template asks for of use as food, and/or other asks for reprints or photo static information template file and	
Additional Atta	chments		
>	Additional attachments to the NDI notification are explained in this Section. Uploading lab supplement containing the NDI will help FDA evaluate what conditions of use are being re you are the manufacturer or distributor of the NDI and do not have access to labeling for t which the NDI will be used, please upload the labeling of the bulk NDI.	eling for the dietary commended or suggested. If the dietary supplement(s) in	
Review Notifica	ition		
E	Review your submission in its entirety. Modify, update or make corrections as necessary be submission.	fore certifying your Review	
Signature and G	Certification		
A	The accuracy of the statements you make in this submission should reflect your best predi regarding the chemical substance described herein. Any knowing and willful misinterpretat penalty pursuant to 18 U.S.C. 1001. The notifying party certifies that the information provid complete to the best of his/her knowledge.	ction of the anticipated facts tion is subject to criminal ded herein is accurate and	
Final Submissio	n		
-	 All fields in these documents are entered correctly and submitted. 		

Figure 15: Ready to Submit

After the Signature and Certification Section is completed, the notification is ready for Final Submission. Once you select 'Send to FDA,' you will no longer be able to edit any data entered in the submission.

When the you click the "Send to FDA" button, the data and documents will be submitted to FDA and a confirmation page will appear (Figure 16).

CFSAN Online Submission Module 🏫 Home 🕧 About III Manage Submission 🛃 Manage Users 😝 Profile 🗸 🕛 Logout
Thank you for using the CFSAN Online Submission Module
Your submission has been submitted to the Center for Food Safety and Applied Nutrition (CFSAN) at the FDA.
Please note that your submission has not been officially Accepted or Received. You will receive an email to that effect when that milestone occurs.
If you would like to view this submission or your other submissions, please click the Manage Submissions tab on the CFSAN Online Submission menu above.
To create another submission please click the Home tab on the CFSAN Online Submission menu above.

Figure 16: Submission Confirmation Page

The Confirmation page displays the tracking number that uniquely identifies your submission within the COSM. This is not to be confused with the NDIN report number. You will be contacted via email when the submission has undergone a preliminary review. The email will contain the official NDIN report number.

This is the end of the NDI submission process. You may click the "Home" menu item to return to the Home page where another submission may be initiated, or you may click the "Manage Submissions" menu item to see the list of all submissions that you have created.

MANAGE SUBMISSIONS

The Manage Submissions page (Figure 17) gives information about all your submissions. The Tracking Number is the unique identifier for each submission. The Title will be the name of the NDI as reported in Question 1 of the General Administrative Section of the form. The Modified Date is the date and time the submission was last updated by the user. The status will display "Draft" or "Submitted". Submissions in Draft status are available for update. Updates to draft submissions may be initiated by clicking the "Pencil" icon under the "Action" heading. Submissions in Draft status may be deleted by clicking the red "Trashcan" icon under the "Action" heading. Those that say "Submitted" have been sent to the FDA. They can no longer be updated but the contents of the submission can be viewed by clicking the "eye" icon under the "Action" heading.

	unuge 5							
Tracki	ng Number	Title	Modified Date 👃	Status	Submission Number	Action		
	OLS_SFC_2250	Brand Supplement	Jun 28, 2019, 5:44:46 PM	SUBMITTED	SFC 2019-000053	0		
	OLS_NDI_2269	American Pawpaw	May 28, 2019, 11:57:42 AM	SUBMITTED		0		
*	OLS_NDI_2268	Valerian Root	May 28, 2019, 11:40:29 AM	SUBMITTED		0		
1	OLS_FCN_2243		May 7, 2019, 11:34:21 AM	DRAFT		1		
-	OLS_NDI_2251	Ashwagandha	May 1, 2019, 2:18:32 PM	SUBMITTED		0		
*	OLS_NDI_2249		Apr 29, 2019, 8:02:42 PM	DRAFT		1		
1	OLS_SFC_2241		Apr 17, 2019, 2:10:38 PM	DRAFT		1		
	OLS_SFC_2239		Apr 11, 2019, 10:06:45 AM	DRAFT		1		
-	OLS_NDI_2238		Apr 8, 2019, 1:40:48 PM	DRAFT		1		
1	OLS_SFC_2236	Millennium Herbal Osha	Apr 3, 2019, 11:53:54 AM	SUBMITTED	SFC 2019-000014	0		

Figure 17: Manage Submissions Page

CONCLUSION

This concludes the NDI Step-by-Step Submission Guide.