



Global Harmonization Working Party
Towards Medical Device Harmonization

PROPOSED FINAL DOCUMENT

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GLOBAL HARMONIZATION WORKING PARTY TECHNICAL COMMITTEE

Software as a Medical Device (SaMD) Pre-Market Submission Requirement

Comparison of requirements from key jurisdictions

White Paper

GHWP TC WORK GROUP 3

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For Proposed Final

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52 **1. Preface**

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54 The objective of this whitepaper is to provide a summary of the regulatory requirements for Software
55 as Medical Device (SaMD) pre-market submissions of a few jurisdictions. This document is intended
56 to serve as an educational resource to promote awareness and understanding of these requirements.
57 It is important to note that this whitepaper does not offer any guidance or recommendations, but
58 rather aims to inform and educate stakeholders about the existing regulatory landscape. WG3 will
59 update this document from time to time to reflect any major regulatory changes.

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80 **2. Introduction**

81 The increasing amount of Software as a Medical Device (SaMD) as well as rapid technology evolution
82 leads to a great deal of complexity when applying existing medical device regulations to these devices
83 around the world.

84 The manufacturer of a SaMD product, often called the “developer”, has a different perspective than
85 the manufacturer of a traditional medical device when designing, “manufacturing”, and marketing the
86 product. Regulators will need to take this into account when developing their regulatory requirements
87 for SaMD products. Mutual understanding between the software industry and regulators is essential
88 to ensure appropriate regulatory controls without obstructing patient’s timely access to healthcare.

89 The first step is always the hardest. Sometimes new industry players may mis-interpret how existing
90 regulatory requirements apply to their products, or regulatory authorities may start to regulate SaMD
91 in a suboptimal way. Helpful material can be found in SaMD Software Qualification and Risk
92 Categorization guidance documents, such as AHWP/WG3/F001:2015 Guidance Document on
93 Qualification of Medical device Software and AHWP/WG3/F001:2016 Guidance document on Risk
94 Categorisation of Software as a Medical Device.

95 We have collected pre-market submission requirements for some regulatory bodies and jurisdictions,
96 such as Australia Therapeutic Goods Administration (TGA), Japan MHLW, China NMPA, Republic of
97 Korea (South Korea) MFDS, and Singapore HSA – with reference to their published guidelines for
98 medical software regulation and pre-market submission requirements. To ensure clarity, our focus
99 will be exclusively on the pre-market submission requirements for SaMD, while excluding AI-based
100 medical devices, Digital Therapeutics (DTx), and Clinical Decision Support Software (CDSS).

101 The main aim of this white paper is to summarize the current regulatory environment around the
102 world, by comparing different pre-market submission requirement across jurisdictions, for next
103 development of GHWP guidelines. These can then serve as member economies’ key reference in
104 establishing, in a consistent way, an economic and effective approach to the control of software as
105 medical device in the interest of public health and in continuous innovation in the development of
106 these technologies. Please note that this paper is focuses on SaMD.

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108 **2.1. Note on Terminology**

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111 This white paper does not intend to define any terms in relating to SaMD. It is noted that some of the
112 terms adopted in regulatory guidance are different from each other even though they share the same
113 or similar name. This is confusing when preparing regulatory (submission) documentation for multiple
114 jurisdictions and increases the likelihood of mistakes.

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3. Japan MHLW/PMDA

3.1.1. Japan SaMD Pre-Market Submission requirement

In Japan, the pre-market submission requirements for Software as a Medical Device (SaMD) are governed by the Pharmaceuticals and Medical Devices Act (PMD Act).

Scope of regulated software medical device (Yakushokukanma-hatsu #1114-5 薬食監麻発 1228-2 第 2 号) [1]:

“Medical Device Programs’ (which means SaMD) are used for diagnosis, treatment or prevention of human diseases or for effect on human anatomy or function by being installed into general purpose computers or mobile devices.”

For Class II, III and IV Medical Device Programs pre-market application is required, but it is not required for Class I Medical Device Programs because they are not under the control of Pharmaceutical and Medical Devices Act (PMD Act). The applications for Class II Medical Device Programs are reviewed under the Certification Standard by 3rd Party Certification Bodies specified by MHLW. Most of the applications for Class III and IV Medical Device Programs are reviewed by the PMDA.

SaMD Classification in Japan

Non-SaMD	SaMD			
For health control (ex: programs which give patients advice on meal or exercise for health maintenance and promotion) Educational program (ex: training programs for health care professionals) In-hospital business support program (ex: medical appointment system, electronic medical record) Programs corresponded to Class I (ex: eye test, programs for color perception test)		Class II	Class III	Class IV
	For treatment at home	For used exclusively at home		
	For diagnostics	For computer assisted imaging diagnostics		
		For computer assisted diagnostics other than imaging		
		For gene mutation analysis		
For treatment	For therapy planning support			
	For Surgical Support			
	Application for behavioural therapy	For controlling active implantable device		

138 **3.1.2. PMDA submission requirement**

139 Submission requirements (Yakushokuki-hatsu #1121-33 [2] and “Application file and STED templates
 140 with sample description for program medical device approval application” Jimurenraku 02102015).

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142 **Table 2. Submission requirement for Japan PMDA in relates to software medical device**

Application file (body)		
1	Name	Category, JMDN (Japanese medical device nomenclature,) Product name
2	Purpose of use or effectiveness	Indicated patient, disease, usage condition, expected result, effectiveness
3	Shape, structure and mechanism	Concrete and detailed explanation about what the product is including following: - How to be provided (e.g. Sold by downloading, Provided by memory storage etc.) - Mechanism of operation (e.g. input, processing algorithm, output info) - Platform requirement (e.g. HDD, Memory, CPU, OS, electric safety (JIS T0601-1 or JIS C6950-1 etc.) - Devices to be used with (other medical devices (incl. SaMD,) program) If the product has an additional function, the description is also required.
4	Raw material, Mfg method Storage method & shelf-life	No description required
5	Specification related to performance and safety	Design specifications required as the product requirements as a program medical device installed in the platform from perspectives of quality, safety and effectiveness (performance and function.) Same info as the “Shape, structure and mechanism” is not required. They should be verified at development life cycle and design phase and assured as the final product quality, safety and effectiveness specification. Test methods are also required if no standards.
6	Usage method	Operation environment, preconditioning, requirement specs of combined equipment, Usage method from preparation/installation (downloading,) operation to the equipment power turning off by using flowchart or illustrations. If it is used with any other products, the usage method should include the combined products.
7	Manufacturing sites	Design mfg site name, registration # Domestic final labeling or shipping site name, registration #
8	Package insert	Draft package insert
STED (summary and attachments)		
1	Product description	Development history including needs or background and design concept, Other design and development history, summary product description including relationship between design concept and product design specifications, Approval and complaints history in foreign countries, Comparison with the existing approved medical devices.
2	Essential principles and the conformity	Reference standards, Essential principles and the evidence/explanation of conformity (EP checklist)
3	Product details	Specifications related to performance and safety and the evident data,
4	Design verification and validation summary	Declaration of conformity, Evident data of conformity to applicable product standard (Design verification and validations summary and documentations). Clinical evidence if necessary.
5	Labeling	Package insert (draft) Domestic designated labeling (draft,) Conformity to applicable JIS standard required by the applicable product standard
6	Risk analysis/management	Risk management organization, Risk analysis results (critical hazards) and risk mitigation actions taken
7	Manufacturing information	No description required

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144 **4. Australia TGA**

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146 **4.1.1. Australia SaMD regulation requirements**

147 In Australia, software based medical devices are medical devices that incorporate software or are
148 software, including software as a medical device, or software that relies on hardware to function as
149 intended, and are regulated in Australia by TGA. Software (including mobile apps) is a medical device
150 if it fits within the definition of a medical device in section 41BD of the Therapeutic Goods Act 1989,
151 unless otherwise excluded [3].

152 There is no specific SaMD Pre-Market submission requirement under Therapeutic Good Act 1989.
153 However, if software is qualified as medical device, the product should go through the necessary
154 conformity assessment and principle requirements by referencing to the Essential Principle Checklist,
155 and ARTG listing similar to any other medical device. The TGA maintains a comprehensive SaMD
156 guidance portal, which includes SaMD regulations (draft), FAQs, a factsheet on SaMD advertisements,
157 among other resources.

158 The TGA has implemented a regulatory reform concerning SaMD by making changes to Therapeutic
159 Goods (Medical Devices) Regulation 2002, introducing new classification rules and amending essential
160 principles to clarify SaMD regulations. The changes under the reform is effective from 25 Feb 2021.
161 Guidance that outlines the regulation changes [4] and draft guidance on SaMD regulatory approach
162 [5] are available on the TGA website.

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164 **5. China NMPA**

165 **5.1.1. China SaMD regulation requirement**

166 In China, standalone software (SaMD) refers to software that has one or more medical
 167 purposes/uses, can complete its intended use without medical device hardware, and run on a
 168 general-purpose computing platform. The general computing platform meets the safety
 169 requirements of information technology equipment (including electromagnetic compatibility, and
 170 complies with GB 4943.1, GB/T 9254 and other standards.

171
 172 Both Software in a Medical Device and Software as a Medical Device are regulated in China. In 2015,
 173 the National Medical Products Administration – NMPA published the registration guidance
 174 document for software related submissions. Technical Evaluation of submissions will be performed
 175 by the Centre for Medical Device Evaluation (CMDE) under the NMPA. The guidance was revised in
 176 2022, any medical device software registration shall follow the latest NMPA software guidance.
 177 Furthermore, NMPA CMDE already setup digital health regulation framework, including general
 178 software technical review guidance, which is mentioned above, the cybersecurity review guidance,
 179 AI medical device review guidance, mobile medical device review guidance and specific software
 180 product review guidance, like PACS [6].

182 **5.1.2. China NMPA Submission Requirements**

183 NMPA request manufacture to provide a software study report for new and change medical device
 184 product registration submission. The structure of the software study report can be found in table 3.
 185 In addition, the NMPA general software guidance also indicate the requirement about the software
 186 version, measurement function, interoperability, UDI, quality management software, IFU and etc.

187
 188 The study report shall cover self-development software and off-the-shelf (OTS) software and cloud
 189 computing. Since the manufacture won't manage the OTS software and cloud computing through
 190 full software lifecycle, the submission requirements are tailored and focus on the verification,
 191 maintenance and risk management.

Table 3: Submission Requirement for Medical Device Software Description Documentation Report Clauses		Software Safety Class		
		Minor	Moderate	Major
Basic Information	Software identification	Describe software name, model, version No., HASH (#) value, registration applicant and manufacturing address		
	Level of Safety Class	Indicating the Level of safety class and a description of the rationale for that level.		
	Architecture and function	The functions, uses, interfaces of component module and function module and the prerequisite software shall be explained according to the architecture diagram, user interface relationship diagram and main interface diagram.		
	Physical Topology	Describe the physical connection relation among software/composition module, general computer platform and medical device hardware/component, prerequisite software according to the physical topological diagram.		
	Operating environment	Identify the typical operating environment required for the normal operation of the software, including the hardware configuration, external software environment, prerequisite software, and network conditions.		
	Registration history	Identify the registration status of software in China and the country of origin.		
Realization	Development overview	Describe development language, tool, method, model, personnel, time, workload, number of code line and controlling documents		
	Risk management	Provide the risk management process workflow chart and describe the software risk management activities . The risk analysis report, risk management summary report of software update shall be provided.		

Software Requirement specification (SRS)	The SRS documents shall be provided		
Software Lifecycle process	The software development process, software maintenance process, and software configuration management process shall be summarized.	Provide the software development process workflow chart, software maintenance process workflow chart, software configuration management process workflow chart and describe activities in the software development process, software maintenance process and software configuration management process.	Provide the software development process workflow chart, software maintenance process workflow chart, software configuration management process workflow chart and describe activities in the software development process, software maintenance process and software configuration management process. The index table of software design history files and software coding rule document shall be provided.
Verification and validation	Provide the plan and report of system test and user test	Summarize the quality assurance activities at various stages of software development process and provide the plans and reports for system testing & user testing.	Provide the software development quality assurance workflow chart and describe the quality assurance activities for software development process, the plan and report of integration testing, system testing, user testing shall be provided.
Traceability Analysis	Provide the software traceability analysis process workflow chart. Describe the activities in the software traceability analysis process. The traceability analysis report of software update shall be provided.		
Defect Management	Summary of software defect management process, and product the total number of known defects and the number of residual defects.	Provide the software defect management process workflow chart, describe the activities in the software defect management process. Indicate the total number of known defects and the number of residual effects of the software subject version shall be specified. The contents, impacts, risks of known residual defects shall be listed, ensuring that the risks are acceptable.	
Change history	The software version naming rules, software release version and software integral version shall be specified; the integral version, date, type and details of all previous software updates since the previous registration shall be listed.	The software version naming rules, software release version and software integral version shall be specified; the integral version, date, type and details of all previous software updates since the previous registration shall be listed.	The software version naming rules, software release version and software integral version shall be specified; the integral version, date, type and details of all previous software updates since the initial registration shall be listed.
Core functions	The name of core functions, core algorithms used and intended uses of the software shall be listed, and the type shall be noted.	The name of core functions, core algorithms used, intended uses of the software shall be listed and the type shall be noted. The study data of safety and effectiveness shall be provided for the brand-new core functions, core algorithms and intended uses.	
Conclusion	The standardization of the implementation process of software update and the correctness of the corresponding core functions shall be summarized. And whether the safety and effectiveness of the software of subject version meet the requirements shall be determined.		

194 **6. South Korea MFDS**

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196 **6.1.1. MFDS SaMD regulation requirements**

197 In South Korea, “Medical device software” refers to software developed and manufactured for the
 198 purposes specified in Article 2 of the Medical Device Act, including embedded software, standalone
 199 software, and mobile medical apps.

200 There are multiple specific guidance documents that have been published under the existing Medical
 201 Device Act over the past 10 years, such as the Guidance on Review and Approval of Medical Device
 202 Software, Guidance for Medical Device Software Validation, Guidance for Mobile Medical Apps,
 203 Guidance for General Wellness Devices, Guidance for Software requirements for Big Data and AI
 204 Medical Device Registration and the recent Guide on Regulation on Review and Approval of Medical
 205 Device Software (2023) [7].

206

207 **6.1.2. MFDS Guidance for Software requirement for Medical Device Registration**

208 Form No.14 under the Revised Regulation for approval, notification, review of medical device, is
 209 described and explained by this guidance as published in June 2018 [8]. The table below (unofficial
 210 translation) shows the key documents and information required for submission.

211 **Table 4. Form No. 14 of Revised Regulation for approval, notification, review of medical device**

Medical Device Software Compliance Verification Report			
Item name (Item classification number)		Software name and version	
Software Usage type	<input type="checkbox"/> Built-in	<input type="checkbox"/> Standalone	
Software functional characteristics (Multiple selection possible)	<input type="checkbox"/> Control <input type="checkbox"/> Diagnosis <input type="checkbox"/> Receive Data	<input type="checkbox"/> Measure <input type="checkbox"/> Data Conversion <input type="checkbox"/> Display	<input type="checkbox"/> Analysis <input type="checkbox"/> Data transmission <input type="checkbox"/> Other
Software Safety Class	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C
Software Intended Use			
Software Operation Environment (Standalone software only)			

Software Development	Software Development Plan	e.g. Software Development Plan
	Software Requirement Analysis	e.g. Software Requirement Specification
	Software Implementation	e.g. Software Architecture; Software Design Specification
	Software Verification and Validation	e.g. Software Verification and Validation
	Software Distribution	e.g. Software Release
Software Maintenance and Troubleshooting	e.g. Software Maintenance; Software Problem Resolution	
Software Risk Management	e.g. Software Risk Management	
Software Configuration Management	e.g. Software Configuration Management	

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228 **7. Singapore HSA**

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230 In Singapore, Standalone software (also known as SaMD in IMRDF context) is a software and/or mobile
231 applications that is intended to function by itself and are not intended for use to control or affect the
232 operation of other hardware medical devices.

233 **7.1.1. HSA SaMD regulation requirements**

234 As mentioned, SaMD is classified as a medical device based on the first schedule of the *Health*
235 *Products Act 2007* as it is used for humans for one or more of the specific purposes of:

- 236 I. diagnosis, prevention, monitoring, treatment or alleviation of disease;
- 237 II. diagnosis, monitoring, treatment or alleviation of, or compensation for, an injury;
- 238 III. investigation, replacement, modification or support of the anatomy or of a physiological
239 process, mainly for medical purposes;
- 240 IV. supporting or sustaining life;
- 241 V. control of conception;
- 242 VI. disinfection of medical devices; or
- 243 VII. providing information by means of in-vitro examination of specimens derived from the
244 human body, for medical or diagnostic purposes.

245 Singapore HSA’s approach to medical device classification was revised and updated in their
246 “Guidelines on Risk Classification of Standalone Medical Mobile Applications and Qualification of
247 Clinical Decision Support Software (CDSS)” updated in April 2022. Per the updated guidelines, HSA
248 leverages the risk-based classification framework described by IMDRF (ref IMDRF/SaMD WG/N12)
249 and takes into consideration the significance of the information provided to the healthcare decision
250 as well as the state of healthcare situation or condition in determining risk classification. Lower risk
251 software is classified as Class A, while more regulatory oversight is provided to higher risk software.
252 Of note, this guidance also clarifies that lower risk CDSS would be considered Class A if it met certain
253 criteria outlined in the guidance. The Act and its Regulations prescribe the regulatory controls for all
254 medical devices including SaMD. The Health Sciences Authority also published guidance documents
255 to provide guidance on product registration, dealer’s licensing, change notification and
256 amendments, special access routes, advertisement and sales promotion, safety monitoring, and
257 technical references.

258 **7.1.2. HSA Guidance for Software requirement for Medical Device Registration**

259 The Act and its subsidiary Regulations require Class B and C SaMD to be registered with HSA prior to
260 placing them on the Singapore market. Although Class A SaMD are exempted from the product
261 registration, manufacturers and importers are required to submit a list of their Class A SaMD
262 electronically to HSA as part of the licensing requirements.

263 GN-15: Guidance on Medical Device Product Registration [9] provides general guidance to local
264 registrants on the types of evaluation route for SaMD. The details of each route are summarized in
265 the tables below:

Type	Risk Class	Eligibility Criteria
Full	B, C	A SaMD that has not obtained any prior approval from any of HSA's reference regulatory agencies
Abridged	B, C	A SaMD that has obtained at least one reference agency approval for a labelled use identical to that intended for marketing in SG.
Immediate Class B Registration (IBR) / Immediate Class C Registration (ICR)	B, C	<p>A Class B or C SaMD may qualify for registration via the IBR/ ICR route if it fulfils specific conditions:</p> <p><u>IBR-1/ ICR</u></p> <ul style="list-style-type: none"> • Obtained approval from at least one of HSA's independent reference regulatory agencies for a labelled use identical to that intend for marketing in SG. (IBR-1 and ICR) • Marketed for at least three years in the above independent reference regulatory agency's jurisdiction (IBR-1 only) • No safety issues globally. (IBR-1 and ICR) <p><u>IBR-2</u></p> <ul style="list-style-type: none"> • Obtained approvals from at least two of HSA's independent reference regulatory agencies for a labelled use identical to that intended for marketing in SG • No safety issues globally.

266 For more details and requirements, please refer to the GN-15. Exclusion criteria may apply to certain
267 routes.

268 Under the Verification and Validation documents, software verification and validation studies are
269 required for standalone medical mobile applications; and traceability analysis is required for full
270 evaluation route. Software version indicated in the report should tally with the version to be supplied
271 in Singapore.

272
273 All software medical device manufacturers are recommended to adopt a Total Product Life Cycle
274 (TPLC) [10] approach to manage and adapt to the rapid changes, including

- 275 a. quality management system
- 276 b. pre-market registration
- 277 c. dealer's licensing requirements
- 278 d. change notification
- 279 e. post-market management
- 280 f. cybersecurity
- 281 g. Artificial Intelligence

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283 **8. Summary of SaMD Pre-Market Submission requirements, similar or difference**

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285 The following is a summary of key requirement for the jurisdictions compared:

286 **SaMD required**

- 287 1. Level of Concern / Risk Categorization[#]
- 288 2. Software Description including Platform and Operation Environment[#]
- 289 3. Device Hazard Analysis / Risk Assessment[#]
- 290 4. Software Requirement Specifications (SRS) [#]
- 291 5. Architecture Design Chart[#]
- 292 6. Software Design Specification (SDS) [#]
- 293 7. Traceability Analysis[#]
- 294 8. Software Development Environment Description[#]
- 295 9. Verification & Validation Documentation[#]
- 296 10. Software Version/Revision level History[#]
- 297 11. Unresolved Anomalies (Bugs or Defects) [#]
- 298 12. Software Configuration Management[#]
- 299 13. Medical Device - Software Development Life Cycle (SDLC) standards

300 **Other requirements, emphasized in certain regulatory guidance**

- 301 1. Labelling (Product Label & Instruction For Use)
- 302 2. Intended Use & Indication for Use
- 303 3. Contra-indications
- 304 4. Market History
- 305 5. Registration History (Product Approval in Country of Origin)
- 306 6. Clinical Evaluations / Clinical Trial / Clinical Studies
- 307 7. Essential Principal / Essential Requirements
- 308 8. Unique Device Identification (UDI)
- 309 9. Cloud computing
- 310 10. OTS software

311 A table below compares and summarizes the requirements in different jurisdictions.

312 [#] Also part of the IEC 62304:2015 requirements.

Table 5: Summaries of SaMD Pre-Market Submission Requirements

Doc \ Economy	Japan PMDA	Australia TGA	China NMPA	South Korea MFDS	SG HSA	
Level of Concern / Risk Categorization	Not Part of Premarket Submission Requirements	Incorporate into Medical Device classification	Yes	Yes	Incorporate into Medical Device classification	
Software Description including Platform and Operation Environment [#]	Yes	No SaMD Specific submission guidance published as of Oct 2019.	Yes	Yes	Yes	
Device Hazard Analysis / Risk Assessment [#]	Yes		Yes	Yes	Yes	
Software Requirement Specifications (SRS) [#]	Not Part of Premarket Submission Requirements		Yes	Yes	Yes	
Architecture Design Chart [#]	Not Part of Premarket Submission Requirements		Yes	Yes	Yes	
Software Design Specification (SDS) [#]	Not Part of Premarket Submission Requirements		Yes	Yes	Yes	
Traceability Analysis [#]	Not Part of Premarket Submission Requirements		Yes	Not Part of Premarket Submission Requirements	Yes	
Software Development Environment Description [#]	Not Part of Premarket Submission Requirements		Yes	Yes	Yes	
Verification & Validation Documentation [#]	Yes		Yes	Yes	Yes	
Revision level History [#]	Not Part of Premarket Submission Requirements		Yes	Yes	Yes	
Unresolved Anomalies (Bugs or Defects) [#]	Not Part of Premarket Submission Requirements		Yes	Not Part of Premarket Submission Requirements	Yes	
Software Configuration Management [#]	Not Part of Premarket Submission Requirements		Not Part of Premarket Submission Requirements	Not Part of Premarket Submission Requirements	Yes	Yes
Medical Device - Software Development Life Cycle (SDLC) standards	Yes. IEC62304:2015 / JIS T 2304		Not Part of Premarket Submission Requirements	SDLC summary is required. IEC 62304 (YY/T 0664) checklist is recommended.	Yes. IEC62304:2015	Yes. IEC62304:2015

Other Requirements					
Doc \ Economy	Japan PMDA	Australia TGA	China NMPA	South Korea MFDS	SG HSA
Instruction for use	Yes	Yes	Yes	Yes	Yes
Intended Use & Indication for Use	Yes	Yes	Yes	Yes	Yes
Contra-indications	Yes	Yes	Yes	Yes	Yes
Market History	Yes	Yes	Yes	Not Part of Premarket Submission Requirements	Yes
Registration History (Product Approval in Country of Origin)	Not Part of Premarket Submission Requirements	Not Part of Premarket Submission Requirements	Yes	Not Part of Premarket Submission Requirements	Yes (for immediate & Abridged registration path)
Clinical Evaluations / Trial / Studies	Yes	Yes	Yes	Yes	Yes
Labelling	Yes	Yes	Yes	Yes	Yes
Essential Principles / Essential Requirements	Yes	Yes	Not Part of Premarket Submission Requirements	Not Part of Premarket Submission Requirements	Yes
Unique Device Identification (UDI)	UDI applies to SaMD since 2019	Under discussion for guidance and implementation. No timeline yet	Yes, required for Class III SaMD.	Yes. Starting from 2019 by phase	Yes. Starting from 2024 by phase

317 # Also the requirements of IEC 62304:2015.

318 **9. Summary**

319

320 There is a trend to require a common set of information in order to compile SaMD pre-market
321 submissions, although some jurisdictions do have unique requirements. However, most of these
322 requirements are closely related to the Medical Device Software Development Life Cycle - in the
323 traditional medical device manufacturing point of view it is similar to an integrated Design,
324 Development and Manufacturing process. A more harmonised approach to SaMD regulatory
325 requirements, beginning with terminology, is very important. Not only for "manufacturers" but
326 also for reviewers and users of SaMD, especially when the same product is made available in
327 multiple jurisdictions.

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