
Use of Whole Slide Imaging in Nonclinical Toxicology Studies: Questions and Answers Guidance for Industry

DRAFT GUIDANCE

This guidance document is being distributed for comment purposes only.

Comments and suggestions regarding this draft document should be submitted within 60 days of publication in the *Federal Register* of the notice announcing the availability of the draft guidance. Submit electronic comments to <https://www.regulations.gov>. Submit written comments to the Dockets Management Staff (HFA-305), Food and Drug Administration, 5630 Fishers Lane, Rm. 1061, Rockville, MD 20852. All comments should be identified with the docket number listed in the notice of availability that publishes in the *Federal Register*.

For questions regarding this draft document, contact (CDER) Office of Study Integrity and Surveillance at CDER-OSIS-GLP@fda.hhs.gov or 240-402-6002, (CBER) Office of Communication, Outreach and Development, 800-835-4709 or 240-402-8010, (CDRH) Office of Product Evaluation and Quality at 301-796-5550, (CVM) Office of New Animal Drug Evaluation at CVMONADEPolicyTeam2@cvm.fda.gov, (CFSAN) Office of Center Director at CFSANBIMO@fda.hhs.gov, (CTP) Small Business Assistance at 1-877-287-1373, Office of Regulatory Affairs (ORA) at ORAPolicyStaffs@fda.hhs.gov.

**U.S. Department of Health and Human Services
Food and Drug Administration
Center for Drug Evaluation and Research (CDER)
Center for Biologics Evaluation and Research (CBER)
Center for Devices and Radiological Health (CDRH)
Center for Veterinary Medicine (CVM)
Center for Food Safety and Applied Nutrition (CFSAN)
Center for Tobacco Products (CTP)
Office of Regulatory Affairs (ORA)**

April 2022

Pharmacology/Toxicology

Use of Whole Slide Imaging in Nonclinical Toxicology Studies: Questions and Answers Guidance for Industry

Additional copies are available from:

*Office of Communications, Division of Drug Information
Center for Drug Evaluation and Research
Food and Drug Administration
10001 New Hampshire Ave., Hillandale Bldg., 4th Floor
Silver Spring, MD 20993-0002
Phone: 855-543-3784 or 301-796-3400; Fax: 301-431-6353
Email: druginfo@fda.hhs.gov*

<https://www.fda.gov/drugs/guidance-compliance-regulatory-information/guidances-drugs>

and/or

*Office of Communication, Outreach and Development
Center for Biologics Evaluation and Research
Food and Drug Administration
10903 New Hampshire Ave., Bldg. 71, Room 3128
Silver Spring, MD 20993-0002
Phone: 800-835-4709 or 240-402-8010
Email: ocod@fda.hhs.gov*

<https://www.fda.gov/vaccines-blood-biologics/guidance-compliance-regulatory-information-biologics/biologics-guidances>

and/or

*Office of Policy
Center for Devices and Radiological Health
Food and Drug Administration
10903 New Hampshire Ave., Bldg. 66, Room 5431
Silver Spring, MD 20993-0002
Email: CDRH-Guidance@fda.hhs.gov*

<https://www.fda.gov/medical-devices/device-advice-comprehensive-regulatory-assistance/guidance-documents-medical-devices-and-radiation-emitting-products>

and/or

*Policy and Regulations Staff, HFV-6
Center for Veterinary Medicine
Food and Drug Administration
7500 Standish Place, Rockville, MD 20855
<https://www.fda.gov/animal-veterinary/guidance-regulations/guidance-industry>*

and/or

*Office of Nutrition and Food Labeling Nutrition Programs Staff, HFS-830
Center for Food Safety and Applied Nutrition
Food and Drug Administration
5001 Campus Drive College Park, MD 20740
<http://www.fda.gov/FoodGuidances>*

and/or

*Office of Small Business Assistance
Center for Tobacco Products
Document Control Center, Bldg. 71, Rm. G335, 10903 New Hampshire Ave.
Silver Spring, MD 20993-2000.
<http://www.fda.gov/TobaccoProducts/Labeling/RulesRegulationsGuidance/default.htm>*

and/or

*Division of Operational Policy
Office of Regulatory Affairs
Food and Drug Administration
12420 Parklawn Drive, Rm 4044
Rockville, MD 20857
Email: ORAPolicyStaffs@fda.hhs.gov*

**U.S. Department of Health and Human Services
Food and Drug Administration
Center for Drug Evaluation and Research (CDER)
Center for Biologics Evaluation and Research (CBER)
Center for Devices and Radiological Health (CDRH)
Center for Veterinary Medicine (CVM)
Center for Food Safety and Applied Nutrition (CFSAN)
Center for Tobacco Products (CTP)
Office of Regulatory Affairs (ORA)**

**April 2022
Pharmacology/Toxicology**

Contains Nonbinding Recommendations

Draft — Not for Implementation

TABLE OF CONTENTS

I. INTRODUCTION..... 1

II. BACKGROUND 2

III. QUESTIONS AND ANSWERS..... 2

Contains Nonbinding Recommendations

Draft — Not for Implementation

1 **Use of Whole Slide Imaging in Nonclinical Toxicology Studies:**
2 **Questions and Answers**
3 **Guidance for Industry¹**
4

5
6 This draft guidance, when finalized, will represent the current thinking of the Food and Drug
7 Administration (FDA or Agency) on this topic. It does not establish any rights for any person and is not
8 binding on FDA or the public. You can use an alternative approach if it satisfies the requirements of the
9 applicable statutes and regulations. To discuss an alternative approach, contact the FDA staff responsible
10 for this guidance as listed on the title page.
11

12
13
14
15 **I. INTRODUCTION**
16

17 This guidance provides information to sponsors and nonclinical laboratories regarding the use
18 and management of whole slide images used during histopathology assessment and/or pathology
19 peer review performed for good laboratory practice (GLP)-compliant nonclinical toxicology
20 studies using non-human specimens.² When whole slide imaging is used as part of a nonclinical
21 study conducted in compliance with the GLP regulations, adequate documentation is critical. The
22 FDA’s expectations regarding documentation practices during generation, use, and retention of
23 whole slide images have not been clearly defined and vary among nonclinical testing facilities.
24 This question-and-answer document is intended to clarify FDA’s recommendations concerning
25 the management, documentation, and use of whole slide imaging in histopathology assessment
26 and/or pathology peer review for nonclinical studies conducted in compliance with the GLP
27 regulations.
28

29 The contents of this document do not have the force and effect of law and are not meant to bind
30 the public in any way, unless specifically incorporated into a contract. This document is intended
31 only to provide clarity to the public regarding existing requirements under the law. FDA
32 guidance documents, including this guidance, should be viewed only as recommendations, unless
33 specific regulatory or statutory requirements are cited. The use of the word *should* in Agency
34 guidances means that something is suggested or recommended, but not required.
35
36

¹ This guidance has been prepared by the Office of Study Integrity and Surveillance in the Center for Drug Evaluation and Research in cooperation with the Center for Biologics Evaluation and Research, Center for Devices and Radiological Health, Center for Veterinary Medicine, Center for Food Safety and Applied Nutrition, Center for Tobacco Products, and Office of Regulatory Affairs at the Food and Drug Administration.

² We support the principles of the “3Rs,” to reduce, refine, and replace animal use in testing when feasible. We encourage sponsors to consult with us if they wish to use a non-animal testing method they believe is suitable, adequate, validated, and feasible. We will consider if such an alternative method could be assessed for equivalency to an animal test method.

Contains Nonbinding Recommendations

Draft — Not for Implementation

37 **II. BACKGROUND**

38
39 The histopathological assessment of tissue samples is one of the key activities conducted during
40 GLP-compliant nonclinical laboratory studies. Commonly, the histopathological assessment
41 includes an initial evaluation of glass histology slides³ by the study pathologist and a subsequent
42 review (referred to as pathology peer review) by a second pathologist, group of pathologists, or
43 Pathology Working Group. When whole slide imaging is used as part of a nonclinical study
44 conducted in compliance with the GLP regulations (21 CFR Part 58), the management,
45 documentation, and use of whole slide images in histopathology assessment and/or pathology
46 peer review should be clear and follow written processes and procedures.

47
48 Use of whole slide images in casual consultations, opinion exchanges, and mentoring among
49 pathologists is not covered by this guidance document.

50 51 52 **III. QUESTIONS AND ANSWERS**

53 54 **Q1: What is whole slide imaging?**

55
56 A1: Whole slide imaging includes the software and hardware used to generate a two-dimensional
57 digital image⁴ of a glass histology slide used for routine assessment in generation of the
58 pathology report. The process includes four sequential parts: image acquisition (scanning), image
59 processing, image file storage, and display of images. Due to inherent limitations of the current
60 technologies used in the process that digitalizes the spatial and color information from the
61 scanned histology slides, FDA does not consider the resulting digital image to be an exact copy
62 of the glass slide. For example, the scanning systems have limited spatial and color resolution
63 and loss of depth of field.⁵

64 65 **Q2: Should whole slide image files be retained?**

66
67 A2: If whole slide images are assessed in lieu of the original glass slides during histopathology
68 assessment and/or pathology peer review performed for GLP-compliant nonclinical toxicology
69 studies, the whole slide image files should be retained as study records and archived after study
70 finalization. Consideration should be given to ensure that archived digital images remain
71 viewable as software/hardware updates/versions are implemented.

72
73

³ In the context of this guidance, the term histology slide refers to tissue mounted on a microscope slide, including organ sections and cell samples such as bone marrow and other cytological preparations.

⁴ Digital images comprise a sequence of small images (referred to as tiles) taken from distinct locations on the glass slide. Whole slide imaging systems typically determine the optimal focal plane at a limited, discrete set of locations on the glass slide and interpolate the optimal focal plane to generate all of the tiles. The individual tiles are then combined to create the “whole slide” image.

⁵ Guidance for Industry and Food and Drug Administration Staff *Technical Performance Assessment of Digital Pathology Whole Slide Imaging Devices* (April 2016), section IV (A)(6) *Image Processing Software* and section IV (A)(7) *Image Composition*. We update guidances periodically. For the most recent version of a guidance, check the FDA guidance web page at <https://www.fda.gov/regulatory-information/search-fda-guidance-documents>.

Contains Nonbinding Recommendations

Draft — Not for Implementation

74 **Q3: If the whole slide image files are retained, should the glass slides also be retained?**

75

76 A3: Yes. The glass slides are study specimens and must be retained as study specimens after
77 study finalization in accordance with 21 CFR Part 58.

78

79 **Q4: What should be retained with respect to the whole slide image file? Should modified**
80 **whole slide image files be retained?**

81

82 A4: The whole slide image files assessed by the pathologist for histopathology assessment and/or
83 pathology peer review (i.e., files containing all image data captured by the sensor and
84 documentation of any modifications), referred to here as the original whole slide image files,
85 should be retained. Specifically, any technical image processing modifications made to whole
86 slide image files prior to being provided to the pathologist (e.g., smoothing, color manipulation)
87 should be documented and retained. Viewing software should not allow the original whole slide
88 image files to be changed. Simple adjustments made by the pathologist using the image viewing
89 software during whole slide image evaluation (e.g., brightness, contrast) do not need to be
90 documented or retained.

91

92 **Q5: Should written procedures for whole slide imaging processes be in place?**

93

94 A5: Yes, written procedures for whole slide imaging processes should be in place. These may
95 include slide scanning, validation, training, maintenance, software version control,
96 backup/disaster recovery, virus protection, archival, secure access controls, and chain of custody
97 processes.

98

99 **Q6: Should the whole slide imaging system be validated?**

100

101 A6: If the whole slide images are assessed in lieu of the original glass slides during
102 histopathology assessment and/or pathology peer review performed for GLP-compliant
103 nonclinical toxicology studies, the whole slide imaging system (including software and
104 hardware) should be validated and maintained in a manner specific to the intended use of the
105 technology, consistent with 21 CFR Part 58.

106

107 **Q7: How should whole slide image files be protected, including when transmitted to**
108 **external users?**

109

110 A7: If the whole slide images are assessed in lieu of the original glass slides during
111 histopathology assessment and/or pathology peer review performed for GLP-compliant
112 nonclinical toxicology studies, generation of a backup file, chain of custody, access controls, and
113 securing data systems and data transmission should be performed following written procedures
114 and processes in compliance with an electronic record under 21 CFR Part 11 to maintain whole
115 slide image file integrity.

116

117

118

Contains Nonbinding Recommendations

Draft — Not for Implementation

119 **Q8: Should the signed pathology report/peer review statement state that whole slide images**
120 **were evaluated in lieu of glass slides?**

121
122 A8: Yes, the signed pathology report should state whether the glass slides or whole slide images
123 were used for histopathological evaluation by the study pathologist, consistent with 21 CFR
124 58.185(a). If a pathology peer review is performed, the pathology peer review statement should
125 indicate whether whole slide images or glass slides were reviewed.⁶

⁶ Guidance for Industry *Pathology Peer Review in Nonclinical Toxicology Studies: Questions and Answers* (December 2021).