

Chapter 1 : On-Farm Kitchens - Delaware Department of Agriculture - State of Delaware

In addition to monitoring farm share trends for individual foods, such as lettuce and whole milk, ERS also creates market baskets to more broadly estimate the farm share of retail food prices across a range of products.

All 30 displayed Getting Information â€” Observing, receiving, and otherwise obtaining information from all relevant sources. Establishing and Maintaining Interpersonal Relationships â€” Developing constructive and cooperative working relationships with others, and maintaining them over time. Making Decisions and Solving Problems â€” Analyzing information and evaluating results to choose the best solution and solve problems. Communicating with Supervisors, Peers, or Subordinates â€” Providing information to supervisors, co-workers, and subordinates by telephone, in written form, e-mail, or in person. Communicating with Persons Outside Organization â€” Communicating with people outside the organization, representing the organization to customers, the public, government, and other external sources. This information can be exchanged in person, in writing, or by telephone or e-mail. Identifying Objects, Actions, and Events â€” Identifying information by categorizing, estimating, recognizing differences or similarities, and detecting changes in circumstances or events. Organizing, Planning, and Prioritizing Work â€” Developing specific goals and plans to prioritize, organize, and accomplish your work. Analyzing Data or Information â€” Identifying the underlying principles, reasons, or facts of information by breaking down information or data into separate parts. Updating and Using Relevant Knowledge â€” Keeping up-to-date technically and applying new knowledge to your job. Judging the Qualities of Things, Services, or People â€” Assessing the value, importance, or quality of things or people. Processing Information â€” Compiling, coding, categorizing, calculating, tabulating, auditing, or verifying information or data. Interacting With Computers â€” Using computers and computer systems including hardware and software to program, write software, set up functions, enter data, or process information. Evaluating Information to Determine Compliance with Standards â€” Using relevant information and individual judgment to determine whether events or processes comply with laws, regulations, or standards. Developing and Building Teams â€” Encouraging and building mutual trust, respect, and cooperation among team members. Developing Objectives and Strategies â€” Establishing long-range objectives and specifying the strategies and actions to achieve them. Resolving Conflicts and Negotiating with Others â€” Handling complaints, settling disputes, and resolving grievances and conflicts, or otherwise negotiating with others. Thinking Creatively â€” Developing, designing, or creating new applications, ideas, relationships, systems, or products, including artistic contributions. Coordinating the Work and Activities of Others â€” Getting members of a group to work together to accomplish tasks. Monitoring and Controlling Resources â€” Monitoring and controlling resources and overseeing the spending of money. Estimating the Quantifiable Characteristics of Products, Events, or Information â€” Estimating sizes, distances, and quantities; or determining time, costs, resources, or materials needed to perform a work activity. Training and Teaching Others â€” Identifying the educational needs of others, developing formal educational or training programs or classes, and teaching or instructing others. Monitor Processes, Materials, or Surroundings â€” Monitoring and reviewing information from materials, events, or the environment, to detect or assess problems. Performing Administrative Activities â€” Performing day-to-day administrative tasks such as maintaining information files and processing paperwork. Provide Consultation and Advice to Others â€” Providing guidance and expert advice to management or other groups on technical, systems-, or process-related topics. Performing for or Working Directly with the Public â€” Performing for people or dealing directly with the public. This includes serving customers in restaurants and stores, and receiving clients or guests. Guiding, Directing, and Motivating Subordinates â€” Providing guidance and direction to subordinates, including setting performance standards and monitoring performance. Interpreting the Meaning of Information for Others â€” Translating or explaining what information means and how it can be used. Scheduling Work and Activities â€” Scheduling events, programs, and activities, as well as the work of others.

Chapter 2 : Forms and Templates “ On Farm Food Safety

Read Monitoring Movement of People and Food Products Key to Avoiding ASF in addition to hundreds of recent farming and agriculture news articles. View up to date crop reports, livestock information and ag industry breaking news from calendrierdelascience.com

Random animal product residue monitoring programmes: Targeted animal product residue monitoring programmes are designed to meet particular management objectives relating to potential chemical residues that could pose a risk for access to export or domestic markets. All animal product residue monitoring programmes are designed, operated and reviewed within agreed budgets by the NRS in consultation with peak industry bodies. Random monitoring programs Of the 20 meat programs, cattle, sheep and pigs provide the largest number of samples monitored for residues. Other meat programs cover products derived from camels, buffalo, eggs, deer, goats, honey, horses, kangaroos, poultry chicken, duck, turkey, spatchcock and quail , ratites emu and ostrich and wild boars. The two aquatic animal programs cover aquaculture and wild-caught seafood. The likelihood of residues from pesticides, veterinary medicines or contaminants guides the choice of chemicals that are measured in the samples. The chemicals include those used commonly in agricultural and veterinary practice, as well as those necessary to fulfil export requirements. Some chemicals are monitored that are not registered for use, nor are likely to be used in Australian animal production systems but may be important to satisfy the requirements of international trading partners. Sample collection and analysis Collection rates are based on production levels of the commodity, or, in the case of exported products, are based on direction from overseas markets. Samples of products are taken by authorised government officers or company quality control officers at registered production or processing establishments. The distribution of samples is proportional to the production volume of the establishment and the NRS sends sample requests to the establishments specifying the kind of product required and the production period during which samples are to be taken. Animals are then selected for sampling at random along the slaughter chain. Once samples are collected they are sent to a central receipt and dispatch facility within the NRS, sorted into batches and forwarded to appropriate laboratories for analysis. Choosing material for analysis The matrix usually selected for analysis is the one that is expected to contain the highest concentration of a residue. The matrix may be inedible, and does not necessarily represent the part most likely to be eaten. For example, fat is analysed for pesticides, kidney is analysed for antibiotics, liver is analysed for metals, and urine or faeces is analysed for some hormonal growth promotants. Chemical screens The likelihood of residues from pesticides, veterinary medicines or contaminants guides the choice of chemicals that are measured in animal product samples. Some chemicals are monitored that are not registered for use, nor are likely to be used in Australian animal production systems, but may be important for international trade. The range of chemical screens to which animal product samples are subjected are listed in the following table: Veterinary drugs and animal treatments Group.

Chapter 3 : Food Safety Monitoring Programs

Abstract. Cost-efficient monitoring of food contamination and surveillance of food-borne diseases requires a coordinated multidisciplinary approach with the participation of stakeholders from all sectors of the "farm-to-fork" continuum including the public health sector.

Presence of VTEC O26, O, O and O in beef cattle Presence of Campylobacter in pre-cut ready-to-eat salad Effect of different reduction strategies on the number of Campylobacter on broilers at slaughter level Presence and number of Campylobacter on turkeys during slaughter combined with antibiotic resistance testing Surveillance programme on antibiotic resistance in bacteria from foods DANMAP *Listeria monocytogenes* in ready-to-eat foods *Vibrio* in seafoods EU control campaign Total The content of these "Centrally coordinated projects" are decided each year through a process involving the central and regional authorities as well as the Danish Institute for Food and Veterinary Research. Concluding Remarks The detection of changes of food-borne diseases patterns and variations in the contamination in the food production process are an absolute necessity for the monitoring and continuous improvement of food quality and safety. These programmes need to be sensitive, sensible and cost efficient. Food contamination monitoring and food-borne disease surveillance at national level provides a timely and comprehensive overview of the veterinary and public health status of a nation. The integration of food-borne disease surveillance has the goal to gather all national surveillance activities in a common public service that carries out many functions using similar structures, processes and personnel. The infrastructure of an established surveillance programme in one area may serve as a framework for strengthening other surveillance activities. Though some food-borne diseases may have specific information needs, requiring specialized systems, there may be the potential for synergy and the sharing of common resources. A Bayesian approach to quantify the contribution of animal-food sources to human Salmonellosis. Wageningen Pers, Wageningen, , pp. Salmonella control programmes in Denmark. The World Health Organization WHO reports that surveillance of food-borne diseases is becoming an increasingly high priority in the public health agenda in many countries. Such surveillance helps estimate the burden of food-borne diseases, assess its relative impact on health and economics, evaluate disease prevention and control programmes, and allows for rapid detection of and response to outbreaks. It is also a major source of information for conducting risk assessment, and more broadly for risk management and communication. Food-borne disease surveillance should be integrated with food monitoring data and data from food animals along the entire feed-food chain. Integrating such data would result in robust surveillance information and allow appropriate priority setting and public health interventions. Intersectoral, inter-institutional, and international collaboration are of paramount importance. National surveillance is of varying intensity depending on the country and region on the globe. Additionally, methods used are not necessarily uniform, making data interpretation difficult. With respect to the United States, the U. These nationally notifiable disease reporting systems collect limited standard information, help track trends in those infections, and alert local, state and national health authorities to potential outbreaks. Serotyping clinical isolates of *Salmonella* at state public health laboratories is a critical part of this surveillance. EFORS collects standardized information on more than reports of outbreaks each year. The project consists of active surveillance of food-borne diseases and related epidemiologic studies designed to help public health officials better understand the epidemiology of food-borne diseases in the United States. Food-borne diseases include infections caused by bacteria such as *Salmonella*, *Shigella*, *Campylobacter*, *Escherichia coli* O H7, *Listeria monocytogenes*, *Yersinia enterocolitica*, and *Vibrio*, and parasites such as *Cryptosporidium* and *Cyclospora*. In , FoodNet surveillance began in five locations: California, Connecticut, Georgia, Minnesota, and Oregon. Each year, the surveillance area, or catchment, has expanded, with the inclusion of additional counties or additional sites New York and Maryland in , Tennessee in , Colorado in and New Mexico in The total population of the bacterial catchment is FoodNet provides a network for responding to new and emerging food-borne diseases of national importance, monitoring the burden of food-borne diseases, and identifying the sources of specific food-borne diseases. FoodNet provides accurate and detailed surveillance information about those infections for which surveillance

is variable or non-existent from state to state. For more information see [www. PulseNet](http://www.PulseNet) reached full national participation in Public health laboratories in all 50 states routinely determine the molecular fingerprints of *Escherichia coli* O H7, *Listeria monocytogenes*, and regularly subtype common serotypes of *Salmonella*; standard protocols have also been developed for subtyping a growing number of other food-borne pathogens. Rapid electronic comparison of strain patterns in state and national databases provides early detection of clusters of related infections, guiding investigations, and verifying control. PulseNet identifies potential outbreaks that otherwise would have been missed, particularly those that are widely dispersed. Identifying and investigating such outbreaks can identify system problems in food safety, so that they can be corrected. For example, with the regular use of PulseNet, the frequency of detected outbreaks of listeriosis in the United States has increased from one every five years to two per year, focusing attention on critical points of control within the food safety system. Food-borne outbreak investigations are a critical part of the food safety system. New and recurrent food-borne hazards can be rapidly identified by investigation of food-borne outbreaks. Careful investigation of an outbreak, including tracing the food from farm to table and reconstructing the means of contamination, is critical to move the food safety agenda forward when new hazards emerge. Most outbreaks are investigated and controlled by local and state health departments. Information is shared within legal constraints, and information received from other organizations is used to improve analysis and respond to problems. Well-trained personnel enhance surveillance, and FDA relies strongly on State and local authorities for quality surveillance information. EOC conveys proper alerts through various mechanisms to respond effectively to these situations, as needed. There is a hour toll-free number for public health partners to call which routes the caller to the appropriate officer. Distribution of information through the Epi-X network is to promote rapid communications of recent outbreaks and other health events among local, state, and federal health officials. Epi-X carries reports of disease events outside, as well as inside, the United States. This dissemination of international health information promotes further surveillance of these conditions in the United States, as well as follow-up collaborations with foreign authorities dealing with these health events. It is regularly used to disseminate information by the Agency. For example, for a food product that is recalled because there is a reasonable probability that use of or exposure to the product will cause serious health consequences or death referred to as Class I , and is exported, notification will be provided to the counterpart authorities. It enables health officials to assess risks and analyze trends, and it provides the necessary infrastructure for an early-warning system that identifies potentially hazardous foods. At present, there are laboratories representing 49 states that are part of the eLEXNET systems with 62 laboratories actively submitting data. We are continuing to increase the number of participating laboratories. NARMS monitors antibiotic resistance of select food-borne pathogens isolated from clinical settings both human and animal and the antibiotic resistance of isolates from foods. The system was initiated in in response to public health concerns associated with the approval of fluoroquinolone products for use in poultry. NARMS monitors changes in susceptibilities to 17 antimicrobial drugs of zoonotic enteric pathogens from human and animal clinical specimens, from healthy farm animals, from carcasses of food-producing animals at slaughter, and from isolates from samples of retail foods. The system includes a veterinary arm, a human arm, and a retail food monitoring arm. The CCMS investigations have led to recognition of outbreaks, voluntary recalls of adulterated products, and changes to specifications of school lunch products. This system is currently undergoing an enhancement which will allow early recognition of complaint patterns that may indicate unusual or intentional events. As such it is also a surveillance system, allowing FSIS to react to the presence of pathogens considered adulterants with the appropriate public health regulatory response, as well as to provide a rough estimate of the prevalence of specific pathogens on particular products. Timely alerts via current notification processes are needed. Effective exchange of information is difficult when countries do not carry out the same methods and procedures or do not use the same set of standards. Many non-industrialized countries lack the resources to conduct meaningful surveillance, and even the countries that undertake surveillance may be using different methods and have different standards. These countries need trained staff in government, as well as adequately staffed and equipped laboratories and trained health care professionals, to identify and report diseases. Establishing consistent laboratory methodologies, laboratory training, emergency

preparedness training and procedures, database development, further assistance for developing countries, and strengthened communication networks are key strategies to advance the status of international food-borne disease surveillance. Identifying and exchanging specific contact information for specific products with other countries and developing agreements to cross-train with pertinent foreign officials would improve international information exchange. Some countries could also provide training, equipment, and technical support to international organizations, as well as to individual countries. Surveillance of food-borne diseases should be given a high priority in the development of a food safety infrastructure. Building capacity for public health laboratories to conduct laboratory-based surveillance and to conduct epidemiologically-based surveillance are important global public health objectives. The needs of developing countries should be particularly considered. There is a need to be proactive in establishing one or more sentinel sites for food-borne disease in developing countries. There is also a need to develop and coordinate a global approach to strengthen surveillance at national, regional, and international levels. Current surveillance is dependent upon physicians and clinical laboratories reporting illness and specific diagnosed infections. Thus, an improvement would be increasing the capacity of laboratories to identify specific pathogens and developing mechanisms to facilitate reporting of specific diseases. The ongoing support of interagency collaboration, international surveillance, and scientific research is crucial in preparing the international community to deal with food-borne disease in the global market place. Food-borne disease surveillance within individual countries is important to track and to monitor domestic food-borne threats to public health. Collected information, including active and passive reporting from sub-jurisdictions e. Within individual countries, the surveillance arm of government must coordinate with the regulatory arm of government to enforce food safety standards. These internal food safety networks support global surveillance, communication, and coordination. Formal programmes include Global Salm-Surv a global network of laboratories and individuals involved in capacity building for surveillance, isolation, identification, and antimicrobial resistance testing of Salmonella and the European Commission Health and Consumer Protection weekly reports from the Rapid Alert System for Food and Feed RASFF. One goal of RASFF is to provide individual control authorities with an effective tool for exchanging information on food safety measures. Yet, formal international food-borne disease surveillance communication is limited. Much of what is shared has been dependent upon relationships that people at various agencies developed over the years with colleagues in other countries. Efforts are emerging to strengthen international food-borne disease surveillance. There is a more general WHO disease surveillance programme called Communicable Disease Surveillance and Response, a data mining software developed by the Canadians. A number of international links can also be found at www. Another international electronic tool for food-borne disease information is ProMed, which reports on international health issues multiple times a day. Below are more details on some of the specific international collaborative efforts. This includes the training courses. This includes assisting with technical consultation and participation in training. At present, FETP is active in almost 20 countries. Since , institutions and individuals in human health, veterinary, and food-related disciplines have participated in Salm-Surv activities, such as regional trainings for microbiologists and epidemiologists, external quality assurance and reference testing, an electronic discussion group, and a web-based databank containing an annual summary of laboratories. Over the next five years, Global Salm-Surv plans to improve its regional coverage with new training courses in Central Asia, Eastern and Southern Africa, Brazil, and Europe, encourage participation in the External Quality Assurance System and in Focused Regional or National Projects, expand to other food-borne pathogens Campylobacter , produce training manuals in microbiology and epidemiology, and establish regional centers. For more information see: This has facilitated early interventions in food-borne outbreaks in terms of investigative procedures and public health prevention strategies, thus preventing additional illnesses and possibly saving lives. A feasibility study of PulseNet Europe was completed for three food-borne pathogens Shiga-toxin producing E. The results of this study were presented and discussed at a workshop held in Paris, France on 16 June

Chapter 4 : Food Service Temperature Monitoring Products

A Fact Sheet on the proposed rule on preventive controls for human food that focuses on preventing problems that can cause foodborne illness.

For example, the FDA regulates almost every facet of prescription drugs, including testing, manufacturing, labeling, advertising, marketing, efficacy, and safety—yet FDA regulation of cosmetics focuses primarily on labeling and safety. The FDA regulates most products with a set of published standards enforced by a modest number of facility inspections. Inspection observations are documented on Form FD-304. In June 2013, the FDA released a statement regarding new guidelines to help food and drug manufacturers "implement protections against potential attacks on the U.S. Regulation of food and dietary supplements by the U.S. Food and Drug Administration The regulation of food and dietary supplements by the U.S. Pursuant to the Federal Food, Drug, and Cosmetic Act "the Act" and accompanying legislation, the FDA has authority to oversee the quality of substances sold as food in the United States, and to monitor claims made in the labeling about both the composition and the health benefits of foods. The FDA subdivides substances that it regulates as food into various categories—including foods, food additives, added substances, man-made substances that are not intentionally introduced into food, but nevertheless end up in it, and dietary supplements. Specific standards the FDA exercises differ from one category to the next. Furthermore, legislation had granted the FDA a variety of means to address violations of standards for a given substance category. Through their governing of processes, however, the FDA does have a set of regulations that cover the formulation, manufacturing, and use of nonstick coatings. The Center for Drug Evaluation and Research uses different requirements for the three main drug product types: A drug is considered "new" if it is made by a different manufacturer, uses different excipients or inactive ingredients, is used for a different purpose, or undergoes any substantial change. The most rigorous requirements apply to new molecular entities: A drug that is approved is said to be "safe and effective when used as directed". The studies are progressively longer, gradually adding more individuals as they progress from stage I to stage III, normally over a period of years, and normally involve drug companies, the government and its laboratories, and often medical schools and hospitals and clinics. However, any exceptions to the aforementioned process are subject to strict review and scrutiny and conditions, and are only given if a substantial amount of research and at least some preliminary human testing has shown that they are believed to be somewhat safe and possibly effective. Advertising and promotion for over-the-counter drugs is regulated by the Federal Trade Commission. The drug advertising regulation [31] contains two broad requirements: Also, an advertisement must contain a "fair balance" between the benefits and the risks side effects of a drug. The term off-label refers to drug usage for indications other than those approved by the FDA. Postmarket safety surveillance[edit] After NDA approval, the sponsor must review and report to the FDA every patient adverse drug experience it learns of. They must report unexpected serious and fatal adverse drug events within 15 days, and other events on a quarterly basis. While this remains the primary tool of postmarket safety surveillance, FDA requirements for postmarketing risk management are increasing. As a condition of approval, a sponsor may be required to conduct additional clinical trials, called Phase IV trials. Food and Drug Administration FDA requires scientific evidence that the generic drug is interchangeable with or therapeutically equivalent to the originally approved drug. Generic drug scandal[edit] In 2004, a major scandal erupted involving the procedures used by the FDA to approve generic drugs for sale to the public. When its application to manufacture generics were subjected to repeated delays by the FDA, Mylan, convinced that it was being discriminated against, soon began its own private investigation of the agency in 2004. Mylan eventually filed suit against two former FDA employees and four drug-manufacturing companies, charging that corruption within the federal agency resulted in racketeering and in violations of antitrust law. Brancato, Walter Kletch pleaded guilty to criminal charges of accepting bribes from generic drugs makers, and two companies Par Pharmaceutical and its subsidiary Quad Pharmaceuticals [39] pleaded guilty to giving bribes. Furthermore, it was discovered that several manufacturers had falsified data submitted in seeking FDA authorization to market certain generic drugs. Vitarine Pharmaceuticals of New York, which sought approval

of a generic version of the drug Dyazide , a medication for high blood pressure, submitted Dyazide, rather than its generic version, for the FDA tests. In April , the FDA investigated 11 manufacturers for irregularities; and later brought that number up to Dozens of drugs were eventually suspended or recalled by manufacturers. In the early s, the U. Securities and Exchange Commission filed securities fraud charges against the Bolar Pharmaceutical Company, a major generic manufacturer based in Long Island, New York. New biologics are required to go through a premarket approval process called a Biologics License Application BLA , similar to that for drugs. The original authority for government regulation of biological products was established by the Biologics Control Act , with additional authority established by the Public Health Service Act. Originally, the entity responsible for regulation of biological products resided under the National Institutes of Health ; this authority was transferred to the FDA in Medical and radiation-emitting devices[edit] The Center for Devices and Radiological Health The Center for Devices and Radiological Health CDRH is the branch of the FDA responsible for the premarket approval of all medical devices , as well as overseeing the manufacturing, performance and safety of these devices. CDRH also oversees the safety performance of non-medical devices that emit certain types of electromagnetic radiation. Examples of CDRH-regulated devices include cellular phones , airport baggage screening equipment , television receivers , microwave ovens , tanning booths , and laser products. CDRH regulatory powers include the authority to require certain technical reports from the manufacturers or importers of regulated products, to require that radiation-emitting products meet mandatory safety performance standards, to declare regulated products defective, and to order the recall of defective or noncompliant products. CDRH also conducts limited amounts of direct product testing. Approved requests are for items that are new or substantially different and need to demonstrate "safety and efficacy", for example it may be inspected for safety in case of new toxic hazards. Both aspects need to be proved or provided by the submitter to ensure proper procedures are followed. Cosmetic products are not, in general, subject to premarket approval by the FDA unless they make "structure or function claims" that make them into drugs see Cosmeceutical. However, all color additives must be specifically FDA approved before manufacturers can include them in cosmetic products sold in the U. The FDA regulates cosmetics labeling, and cosmetics that have not been safety tested must bear a warning to that effect. Though the cosmetic industry is predominantly responsible in ensuring the safety of its products, the FDA also has the power to intervene when necessary to protect the public but in general does not require pre-market approval or testing. Companies are required to place a warning note on their products if they have not been tested. Experts in cosmetic ingredient reviews also play a role in monitoring safety through influence on the use of ingredients, but also lack legal authority. The implementation date is uncertain, due to ongoing proceedings in the case of R. Food and Drug Administration. Reynolds , Lorillard , Commonwealth Brands Inc. District Court for the District of Columbia temporarily halted the new labels, likely delaying the requirement that tobacco companies display the labels. Supreme Court ultimately could decide the matter. Ronald Sherman permission to produce and market medical maggots for use in humans or other animals as a prescription medical device. Medical maggots represent the first living organism allowed by the Food and Drug Administration for production and marketing as a prescription medical device. In June , the FDA cleared *Hirudo medicinalis* medicinal leeches as the second living organism to be used as a medical device. The FDA also requires milk to be pasteurized to remove bacteria. Science and research programs[edit] FDA lab at Building 64 in Silver Spring, Maryland In addition to its regulatory functions, the FDA carries out research and development activities to develop technology and standards that support its regulatory role, with the objective of resolving scientific and technical challenges before they become impediments. History of the Food and Drug Administration Up until the 20th century, there were few federal laws regulating the contents and sale of domestically produced food and pharmaceuticals, with one exception being the short-lived Vaccine Act of The history of the FDA can be traced to the latter part of the 19th century and the U. Under Harvey Washington Wiley , appointed chief chemist in , the Division began conducting research into the adulteration and misbranding of food and drugs on the American market. The serum was originally collected from a horse named Jim , who had contracted tetanus. The act applied similar penalties to the interstate marketing of "adulterated" drugs, in which the "standard of strength, quality, or purity" of the active ingredient was not either stated clearly on the label or

listed in the United States Pharmacopoeia or the National Formulary. The resulting proposed law was unable to get through the Congress of the United States for five years, but was rapidly enacted into law following the public outcry over the Elixir Sulfanilamide tragedy, in which over people died after using a drug formulated with a toxic, untested solvent. The new law significantly increased federal regulatory authority over drugs by mandating a pre-market review of the safety of all new drugs, as well as banning false therapeutic claims in drug labeling without requiring that the FDA prove fraudulent intent. Soon after passage of the Act, the FDA began to designate certain drugs as safe for use only under the supervision of a medical professional, and the category of "prescription-only" drugs was securely codified into law by the Durham-Humphrey Amendment. These developments confirmed extensive powers for the FDA to enforce post-marketing recalls of ineffective drugs. Applications grew considerably after the efficacy mandate under the Drug Amendments. This marked the start of the FDA approval process in its modern form. These reforms had the effect of increasing the time, and the difficulty, required to bring a drug to market. The act extended the patent exclusivity terms of new drugs, and tied those extensions, in part, to the length of the FDA approval process for each individual drug. For generic manufacturers, the Act created a new approval mechanism, the Abbreviated New Drug Application ANDA, in which the generic drug manufacturer need only demonstrate that their generic formulation has the same active ingredient, route of administration, dosage form, strength, and pharmacokinetic properties "bioequivalence" as the corresponding brand-name drug. This act has been credited with in essence creating the modern generic drug industry. Under the theory that federal law passed pursuant to Constitutional authority overrules conflicting state laws, federal authorities still claim the authority to seize, arrest, and prosecute for possession and sales of these substances,[citation needed] even in states where they are legal under state law. The first wave was the legalization by 27 states of laetrile in the late s. This drug was used as a treatment for cancer, but scientific studies both before and after this legislative trend found it to be ineffective. Though Virginia passed a law with limited effect in , a more widespread trend began in California in

Chapter 5 : Food and Drug Administration - Wikipedia

Food Quality & Safety (formerly Food Quality) is the established authority in delivering strategic and tactical approaches necessary for quality assurance, safety, and security in the food and beverage industry.

All animals carry bacteria in their intestines. Giving antibiotics to animals will kill many bacteria, but resistant bacteria can survive and multiply. When food animals are slaughtered and processed, these bacteria can contaminate the meat or other animal products. These bacteria can also get into the environment through animal stool and may spread to produce that is irrigated with contaminated water. Food can get contaminated whether the bacteria are resistant to antibiotics or not. How do people get infections with resistant bacteria from animals? Here are ways that people can be exposed to resistant bacteria from animals: From handling or eating raw or undercooked food from animals or produce contaminated with resistant bacteria From contact with animal stool either directly or when it gets into water for drinking, swimming or growing plants From touching or caring for animals What effects do resistant infections have on people? Some resistant infections cause severe illness. People with these infections: Antibiotic Use and Healthcare Did you know nearly half of antibiotic use in hospitals is unnecessary or inappropriate? May be more likely to be hospitalized and have higher medical expenses; May take longer to get well again; or May die from the infection. How do we know that antibiotic use in food animals is linked to resistant infections in humans? Scientists around the world have provided strong evidence that antibiotic use in food animals can lead to resistant infections in humans. Studies have shown that: Antibiotic use in food animals allows antibiotic-resistant bacteria to grow and crowd out the bacteria that do respond to antibiotics; Resistant bacteria can contaminate food from the animals; and Resistant bacteria in food can cause infections in humans Why is it important to use antibiotics responsibly in food animals? Antibiotics are valuable tools for reducing animal disease and suffering from bacterial infections, but decisions about which antibiotics to use in food animals and how to use them must be made with consideration of their potential impact on human health. Any use of antibiotics can lead to resistance. However, when animals are given antibiotics for growth promotion or increased feed efficiency, bacteria are exposed to low doses of these drugs over a long period of time. This type of exposure to antibiotics may lead to the survival and growth of resistant bacteria. This is inappropriate antibiotic use. What uses are antibiotics approved for in food animals? FDA has approved antibiotics for these uses in food animals: Disease treatment for animals that are sick; Disease control for a group of animals when some of the animals are sick; Disease prevention for animals that are at risk of becoming sick. What is CDC doing to prevent foodborne infections caused by antibiotic resistant bacteria? Preventing foodborne and other intestinal infections reduces both infections that can be treated effectively with an antibiotic and antibiotic-resistant infections. CDC activities that help prevent these infections include: What can I do to reduce the chance of infection with resistant bacteria from foods? You can reduce the chance of getting a resistant bacterial infection by following some easy recommendations for safe food handling and preparation. Cook meat, poultry, and eggs to a safe minimum internal temperature. Prevent animal products from contaminating other foods by washing your hands, utensils, and kitchen surfaces during meal preparation. Wash your hands after contact with stool, animals, or animal environments.

Chapter 6 : Food & Farms at Ecotrust: Building resilience in the food system

On-farm Food Safety: Cleaning and Sanitizing Guide. for food products and food contact Sample Chemical Sanitizer Monitoring Form.

Chapter 7 : - Buyers and Purchasing Agents, Farm Products

Agriculture and Food Harvest Monitoring SGS offers a range of harvest monitoring services - including harvest measurement - that optimize your operations through yield estimations, harvesting operation monitoring and product

tracking.

Chapter 8 : 10 ways technology is changing our food - TechRepublic

2 Food Allergen Environmental Monitoring Guide (October) Food Allergens Overview: Each year millions of consumers can have an adverse allergic reaction to foods.

Chapter 9 : FOOD CONTAMINATION MONITORING AND FOOD-BORNE DISEASE SURVEILLANCE AT

The Guide contains many individual practices that contribute to good dairy farming practice, covering the key aspects of animal health, milk hygiene, nutrition, welfare, the environment and socio-economic management.