ClinicalTrials.gov Registration Guide

The Food and Drug Administration Amendments Act (FDAAA), National Institutes of Health (NIH) and International Committee of Medical Journal Editors (ICMJE) require registration of certain clinical trials. If a study meets FDA, NIH or ICMJE registration criteria, it must be registered on a publicly accessible website (ClinicalTrials.gov). Meeting FDAAA requirements satisfies federal regulations. Meeting ICMJE requirements satisfies one of a journal’s condition for publishing.

This guide is a resource for KUMC faculty and staff. The guide covers registering new studies and maintaining compliance with site requirements until the study is completed. This guide reflects the HHS final rule and NIH complimentary policy on new study registration and results reporting. The final rule and policy go into effect on January 18, 2107. Enforcement by the FDA and NIH begins April 18, 2017.

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What is an “Applicable Clinical Trial (ACT)”?

An APPLICABLE CLINICAL TRIAL is the term used in Title VIII of the Food and Drug Administration Amendments Act of 2007 (FDAAA) to designate the scope of trials that may be subject to the registration and reporting requirements in FDAAA.

Generally speaking, if the study meets the following criteria, it is an ACT:
1. Involves a drug or device subject to FDA regulation
2. Not a phase I or small feasibility (for devices) study
3. Involves at least one site in the US

For the complete statutory definition of an ACT and an elaboration on the FDA’s current thinking, see [http://prsinfo.clinicaltrials.gov/ElaborationsOnDefinitions.pdf](http://prsinfo.clinicaltrials.gov/ElaborationsOnDefinitions.pdf)

For an NIH flowchart to help you identify an ACT according to FDAAA requirements, see: [https://grants.nih.gov/clinicaltrials_fdaaa/docs/Flow_chart-ACT_only.pdf](https://grants.nih.gov/clinicaltrials_fdaaa/docs/Flow_chart-ACT_only.pdf)

Overview of Differences between ICMJE and FDAAA

Below is an abbreviated breakdown of the requirements by each authority. For Investigator-initiated research, pay close attention to ICMJE guidelines. Studies that do not meet FDAAA requirements, and are not NIH funded, may meet ICMJE requirements. ICMJE requirements include a broad group of studies.

<table>
<thead>
<tr>
<th>Trial Registration Requirements by Authority</th>
<th>ICMJE (effective 2005)</th>
<th>FDAAA Final Rule (issued in 2016)</th>
<th>Final NIH Policy (issued in 2016)</th>
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<td>What sections must be created and managed in clinicaltrials.gov?</td>
<td>Study registration</td>
<td>Study registration and results reporting</td>
<td>Study registration and results reporting</td>
</tr>
<tr>
<td>What phase meets requirements?</td>
<td>Any</td>
<td>Not phase I (drugs); Not small feasibility trial (devices)</td>
<td>Any</td>
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<tr>
<td>What intervention type² meets requirements?</td>
<td>Any</td>
<td>Drug, biologic, and devices regulated by the FDA</td>
<td>Any</td>
</tr>
<tr>
<td>Funding source</td>
<td>Any</td>
<td>Any</td>
<td>NIH</td>
</tr>
<tr>
<td>When to register the trial?</td>
<td>PRIOR to enrollment of first subject</td>
<td>Within 21 days of enrollment of first subject</td>
<td>Within 21 days of enrollment of first subject</td>
</tr>
<tr>
<td>When to report results?³</td>
<td>Not Applicable</td>
<td>Within 12 months of final data collection for the primary outcome⁴</td>
<td>Within 12 months of final data collection for the primary outcome⁵</td>
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<tr>
<td>Potential Enforcement Action</td>
<td>Refusal to publish</td>
<td>Criminal proceedings and civil penalties (up to $10,000/day); DHHS funding withheld</td>
<td>NIH funding withheld</td>
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</table>
1. Table adapted from a presentation: Zarin, Deborah, Williams, Rebecca, (September 27, 2016) final Rule for Section 801 of the Food and Drug Administration Amendments Act of 2007 (42 CFR Part 11), Final Rule Webinar Series – 1 of 3 [PowerPoint slides]

2. Intervention types include: drugs, surgical procedures, devices, behavioral treatments, dietary interventions, quality improvement interventions, and process-of-care changes

3. Deadline to submit results to Clinicaltrials.gov is INDEPENDENT of publication status

4. Trials considered as Applicable Clinical Trials by FDAAA are required to submit results to Clinicaltrials.gov

A note regarding results registration:
- Primary outcome: results for the primary outcome are due 12 months after the Primary completion date, as indicated in the study registration
- Secondary outcomes: data collection for secondary outcomes often continues on after final data collection for the Primary outcome measure. In these situations, results data for secondary outcomes is due within 12 months of the Study completion date, as indicated in the study registration.

Who Registers the Study on Clinicaltrials.gov?
The “Responsible Party” refers to the entity or individual who is responsible for registering a trial in a clinical trial registry data bank (i.e. ClinicalTrials.gov). They are the ONLY user who is able to “release” the initial record and future updates to it for public view. They are responsible for ensuring the study registration stays accurate and up-to-date. There is ONE responsible party per study registration. This is to prevent a study from being registered multiple times.

Determining the Responsible Party

```
Does the study involve an IND/IDE? YES
The IND/IDE Holder is the Responsible Party

NO

Is there an external group that initiated the study? YES
The industry, CRO, group, consortium or other external entity is the Responsible Party

NO

Is there ANY funding? YES
The Institution (KUMC) is the Responsible Party

NO

The Principal Investigator is the Responsible Party
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- When the IND/IDE holder is a KUMC Investigator, they are listed as the Responsible Party
- The external group is the entity that writes the protocol or funded the protocol to be written
- If there is no IND/IDE, and the study is initiated by a KUMC Investigator, then KUMC or the Investigator will be listed as the Responsible Party. For ACTs where there is no IND or IDE holder, the funding recipient is generally considered to be the sponsor and therefore the responsible party. For NIH grants, the funding recipient is the grantee institution, not the PI on the grant. If the Investigator is designated as the Responsible Party, they will be notified and marked as such in clinicaltrials.gov.
NIH Funded Studies

The NIH requires registration and results reporting for all NIH-funded clinical trials, regardless of whether or not they are subject to FDAAA (http://grants.nih.gov/clinicaltrials_fdaaa/at-a-glance.htm).

All competing applications (new and renewal) and progress reports for NIH grants (including cooperative agreements) supporting ACTs must include a certification of compliance with FDAAA. This includes applications where the trial has not yet begun (e.g. is proposed) or is not yet required to be registered (e.g. less than 21 days since first subject was enrolled), as well as applications and progress reports that include an on-going trial that is already registered in ClinicalTrials.gov.

For details on how to certify compliance to NIH, see: http://grants.nih.gov/ClinicalTrials_fdaaa/certify-compliance.htm

A breakdown of steps and details on each to ensure compliance with NIH implementation of FDAAA is available at: http://grants.nih.gov/ClinicalTrials_fdaaa/steps.htm

Potential Consequences Resulting from Non-Compliance

The Responsible Party is accountable for the accuracy and completeness of the study registration. Complying with updating registrations and providing study data according to requirements will prevent any of the following actions. Non-compliance with FDAAA and ICMJE requirements can have serious consequences.

ICMJE Enforcement Actions (individual journals):
1. Journal does not accept article on the study for publication

FDAAA Enforcement Actions:
1. Notification from Clinicaltrials.gov when records are out of compliance
2. Monetary penalty of up to $10,000/day per instance of non-compliance
3. DHHS funding withheld

NIH Enforcement Actions:
1. NIH funding withheld

CMS Billing Requirement

The National Clinical Trial (NCT) ID number (assigned once initials registration is approved by clinicaltrials.gov) is required for all qualified claims. The Centers for Medicare and Medicaid Services initiated requirement on January 1, 2014. Any claim that does not include the NCT will not be paid and will be returned. The NCT ID must be available before any qualified claim is submitted.

The NCT ID for each study is stored in CRIS. KU Hospital billing has access to study records in CRIS to obtain the number. If a trial does not meet any registration requirements (i.e. chart reviews), NCT00000000 is entered into CRIS to denote the study is not registered.
Accessing Clinicaltrials.gov
You need an account in order to access the Clinicaltrials.gov Protocol Registration System (PRS). PRS administrators at KUMC are part of the Clinical Research Administration (CRA) within the KUMC Research Institute and Cancer Center Clinical Trials Office. A PRS administrator will create an account for you under the KUMC organizational account.

Requesting a ClinicalTrials.gov Account:
- Contact Kevin Smilor (ksmilor@kumc.edu) in the CRA for a new account.
  a. For studies running through the Cancer Center Regulatory Office, contact the project manager in that office for more information.
- KUMC has an established Institutional account for all KUMC investigators/faculty
  o Do not request an Individual Account or another Organizational Account through Clinicaltrials.gov

Logging in to the Protocol Registration System (PRS):
After your account is created, you will receive an email from ClinicalTrials.gov with your username and a temporary password. Click on the link in the email to go to the ClinicalTrials.gov PRS log-in page (https://register.clinicaltrials.gov/)

Logon Details: Organization: UKansasMCRI
User Name: as it is assigned to you in your notice from PRS
Password: enter your temporary password

After logging in, you will be on the “main page” of the site. Features of the main page:
1. You will see the Quick Links section and Drop down menus (pictured below):
   o The “Records” menu is a way for you to view a problem report for your studies. You can also quickly access CT.gov QA review comments from the list.
   o Mouse over the “Accounts” drop down list to update your account information or to change your password.
   o Mouse over the “Help” menu for guides on different clinicaltrials.gov topics.

2. You will see a list of all records to which you have access. Access to studies is limited to only those studies where the user is the Responsible Party or access has been designated by the PI. If you should have access to a study, and do not, contact the CRA.

3. Access to View/Edit a Study: Click “Open” next to the study you want to view/edit. This will take you to the Record Summary (to be discussed later) page.
4. **Create a New Study Registration:** Click “New Record” in the Quick Links section. This will start the process to add a new study to the site. See next section for preferred data and information to be entered in some of the required fields.

**New Study Registration**

**Language Used in the Study Registration**
The main audience for clinicaltrials.gov is the public. Keep this in mind when creating a study registration in the system. All attempts should be made to keep the language to an 8th grade reading level. If there is an IRB approved consent form available, this serves as a good starting point. The public uses the website to learn more about clinicaltrials.gov in their area. The study registration should provide an understandable and readable outline of the study to the lay person.

**Preferred Format for Data Fields**
Studies registered in clinicaltrials.gov follow the same registration process. There is some variance on the fields that are required depending on the type of study (interventional, observational or an expanded access). The following are some guidelines to follow when creating new studies in the system.

- **Unique Protocol ID:** the study IRB#, i.e. STUDY12345678
- **Secondary ID:** required when the study involves NIH or other grant funding.
  - If the study received funding from the Frontiers CTSA grant, include the following: ID = UL1TR000001 (add National Institutes of Health to Collaborators)
- **Collaborators:** Organization(s) providing support: funding, design, implementation, data analysis or reporting. Include all collaborators on the research project. If the study is funded by the NIH, include the name of the agency.
- **Study Start:** Month/Year the study starts enrolling subjects
- **Study Primary Completion:** Month/Year of the final data collection date for the primary outcome measure (this is independent from when the study is closed with an IRB)
- **Study Completion:** Month/Year of the last patient/last visit for final data collection date (this is independent from when the study is closed with an IRB)
- **Board Information:**
  - Name: Human Subjects Committee
  - Affiliation: University of Kansas Medical Center
  - Phone: 913-588-1240
  - Email: humansubjects@kumc.edu
- **Brief Summary:** Short description of the protocol intended for the lay public, i.e. “The purpose of this study is to determine...”
- **Oversight Authorities:** There are two main options to use (other options are available):
  - For FDA regulated studies: “United States: Food and Drug Administration”
  - For other studies: “United States: Institutional Review Board”
- **Outcome Measure Title:** A concise name for the specific measure that will be used to determine the effect of the intervention(s) or, for observational studies, related to core objectives of the study and receiving the most emphasis in assessment. Describes what will be measured and not why it is measured. **All outcome measures listed in the protocol need to be included in the registration.** The outcome measures listed in this section will be used for the results section.
Example 1:
- Title: Systolic Blood Pressure
- Outcome measure description: Change in Systolic Blood Pressure

Example 2:
- Title: Parkinson’s Disease Questionnaire – 39 (PDQ-39)
- Outcome measure description: The PDQ-39 is a measure of quality of life in Parkinson's disease patients. It has 39 questions each with a response from 0-4 for a total of 156 points. The total score is calculated as a percentage so the scores of the 39 items are added and divided by 156 and multiplied by 100. The higher the score the worse quality of life.

When the outcome is measured using a scale, the outcome must include the following information in the Outcome Measure Description field:
- All scale ranges (i.e., minimum and maximum scores) required to interpret any values in the data table. For example, if the *total* score is reported, the *total* range should be provided. If subscale scores are reported, the range for each subscale should be provided.
- For each scale range provided, specify which values are considered to be a better or worse outcome (i.e., Do higher values represent a better or worse outcome?).
- If subscales are combined to compute a total score, consider indicating how subscales are combined (summed, averaged, etc.).

- **Outcome Measure Time Frame**: Time point when outcome measure is assessed. **Each outcome measure can only have one time point**. If multiple outcomes are based on the same underlying measure assessed at different time points (i.e. 8 weeks, 12 weeks and Final Visit), then each unique combination of measurement and time frame is entered as a separate outcome measure (i.e. Change from Baseline to Week 8 in MMSE/ Baseline to Week 12).

- **Central Contact**: Designate a member of the study team (Principal Investigator, Sub-investigator, Study coordinator) who potential participants can contact for more information. This person should be available via phone or email to field questions about the study.
  - When a Central Contact is listed, a contact for each study location does not need to be listed.
  - For KUMC investigator-initiated studies, it is recommended to provide a Central Contact and Location specific contacts.

- **References Section**: Include any and all citations/links relevant to the study in this section. If you include this information in any other section (i.e. detailed description), Clinicaltrials.gov will require you to move it before approving the registration.

Clinicaltrials.gov requires a copy of the IRB approval letter. Send a copy of the IRB approval letter to approval@clinicaltrials.gov after the initial registration is complete.

**Protocol Submission to Clinicaltrials.gov – NEW REQUIREMENT**

As part of the HHS final rule and NIH complimentary policy, a copy of the study protocol will be required to be uploaded to clinicaltrials.gov. As of the release of the final rule, the process and requirements for this specific action have not been finalized.
Reviewing and Editing Study Registrations

ALL studies registered on clinicaltrials.gov must be reviewed and released periodically. These time points are critical to maintaining compliance with FDAAA regulations.

It is up to the Responsible Party of the study registration to handle the updates. Clinicaltrials.gov will NOT send a notice or reminder when review is required.

**It is the Responsible Party’s obligation to review, revise and verify all information in the registration. Only the Responsible party can release information for public viewing. This is true anytime (from new study registration to updates throughout the study) a registration needs to be released.**

Key time points for Clinicaltrials.gov Registrations

Initial Registration: Refer to table on page 2. It is recommended to register all trials before enrollment of the first subject.

Predetermined time points when registrations require review/revision/release:

a. Not Yet Recruiting, Recruiting, Enrolling by Invitation: Every 6 months
b. Active, not recruiting: Annually
c. Change in Recruitment Status: 30 calendar days after the change in status
d. IRB Board Status: 30 calendar days after the change in status
e. Individual Site Status: 30 calendar days after the change in status

Results and Adverse Event Data: Enter within 12 months of the Primary Completion Date..

Steps to review and release the study registration

Follow these steps when it’s time to review, verify and release a study registration:

1. Login to the study at register.clinicaltrials.gov
2. Click “Open” next to the registration you want to view
3. This will take you the study Record Summary page. There are three main sections on this page:
   a. **Record Status** – contains key dates for the posting; last time record was updated, last time the record was released, last public site update
   b. **Protocol Section** – location of study information used for public site posting
   c. **Results Section** – where results and adverse events for study are entered
4. To edit study information, click “Open” to the left of the “Protocol Section”
5. From the “Protocol Section” page, you can edit all parts of the study.
   a. Record Verification: Update when reviewing the record for accuracy and completeness, even if no other updated information is submitted.
Tip: When a trial's Overall Status changes to "Active, not recruiting," it is not necessary to change recruitment status for each location. Location recruitment status is only shown on ClinicalTrials.gov when Overall Status is "Recruiting".

But...when you change the Overall Status to Recruiting, you also need to update the recruiting status that is part of the Contacts/Locations section at the end of the record (pictured below).

6. After you have reviewed all study sections, and made any changes, return to the “Record Summary” page. To release the updates:
   a. First click “Complete” (the page will reload),
   b. Then “Approve” (the page will reload again),
   c. Then “Release”.
      i. NOTE: If you are reviewing the study at a required time point, you will NOT be able to release the record BEFORE clicking into the “Protocol Section.”
   d. After you Release the registration, the site will ask you to confirm you-are-you via a checkbox. Click the box and then release and the registration. Clinicaltrials.gov QA will review all changes before making them available to the public. For new studies and results, they may return comments. If they do, those comments must be addressed before the registration is approved.

Response Times – NEW REQUIREMENT
Effective January 18, 2017, the Responsible Party will be required to respond to comments from Clinicaltrials.gov within a timely manner. Clinicaltrials.gov issues requests for changes or clarifications to the protocol section and results section.
- When comments are issued for the protocol section, the Responsible Party has 15 days to respond.
- When comments are issued for the results section, the Responsible Party has 25 days to respond.