

PHARMA PRO NET

Introduzione all'uso di CTIS

09 luglio 2025

PHARMA PRO NET
BUSINESS SCHOOL
PpN

Sponsor handbook

Clinical Trial Information System (CTIS) user guidance on the sponsor's workspace

Version 6.0

Pre-submission steps

- 1.1. Access to EMA applications (CTIS, OMS, EV, XEVMPD)
- 1.2. Sponsor and other organisation(s) registration in OMS
- 1.3. Sponsor registration in EudraVigilance (EV)
- 1.4. Medicinal product registration in XEVMPD
- 1.5. CTIS User Management: Organisation-centric vs trial-centric
- 1.6. User roles in CTIS ('role matrix')
- 1.7. Role(s) assignment and how to request a certain role

Apply for a CT authorisation

- 2.1. CTIS Publication rules
- 2.2. Clinical Trial (CT) application data fields and documents
- 2.3. Create and submit an Initial CT application (IN)
- 2.4. Fill in specific IN sections (e.g. product section)
- 2.5. Partial submission of an IN
- 2.6. Search, view and download a CT
- 2.7. Withdraw a submitted IN and resubmit it

Evaluation phase

- 3.1. Evaluation steps, outcome and timetable
- 3.2. Notices and alerts
- 3.3. Respond to a Request for Information (RFI)

Conduct a clinical trial

- 4.1. Notify on CT events (e.g. CT start, start of recruitment)
- 4.2. Create and submit an Additional Member State appl. (AM)
- 4.3. Create and submit a Substantial Modification appl. (SM)
- 4.4. SM to change the sponsor
- 4.5. Withdraw a submitted SM or AM and resubmit it
- 4.6. Evaluation of an AM
- 4.7. Evaluation of an SM
- 4.7. Create and submit a Non-Substantial Modification (NSM)
- 4.8. Notify on Unexpected event, Urgent safety measure, Serious breach and Third-Country Inspectorate Inspection
- 4.9. Respond to an RFI raised during an ad hoc assessment
- 4.10. Respond to an RFI raised on a corrective measure
- 4.11. Suspected Unexpected Serious Adverse Reaction (SUSAR)
- 4.12. Submit an Annual Safety Report (ASR) and respond to ASR RFI

End the CT & submit results

- 5.1. Notify the end of a CT
- 5.2. Submit interim results, summary of results and layperson summary
- 5.3. Submit the Clinical Study Report (CSR) and update it

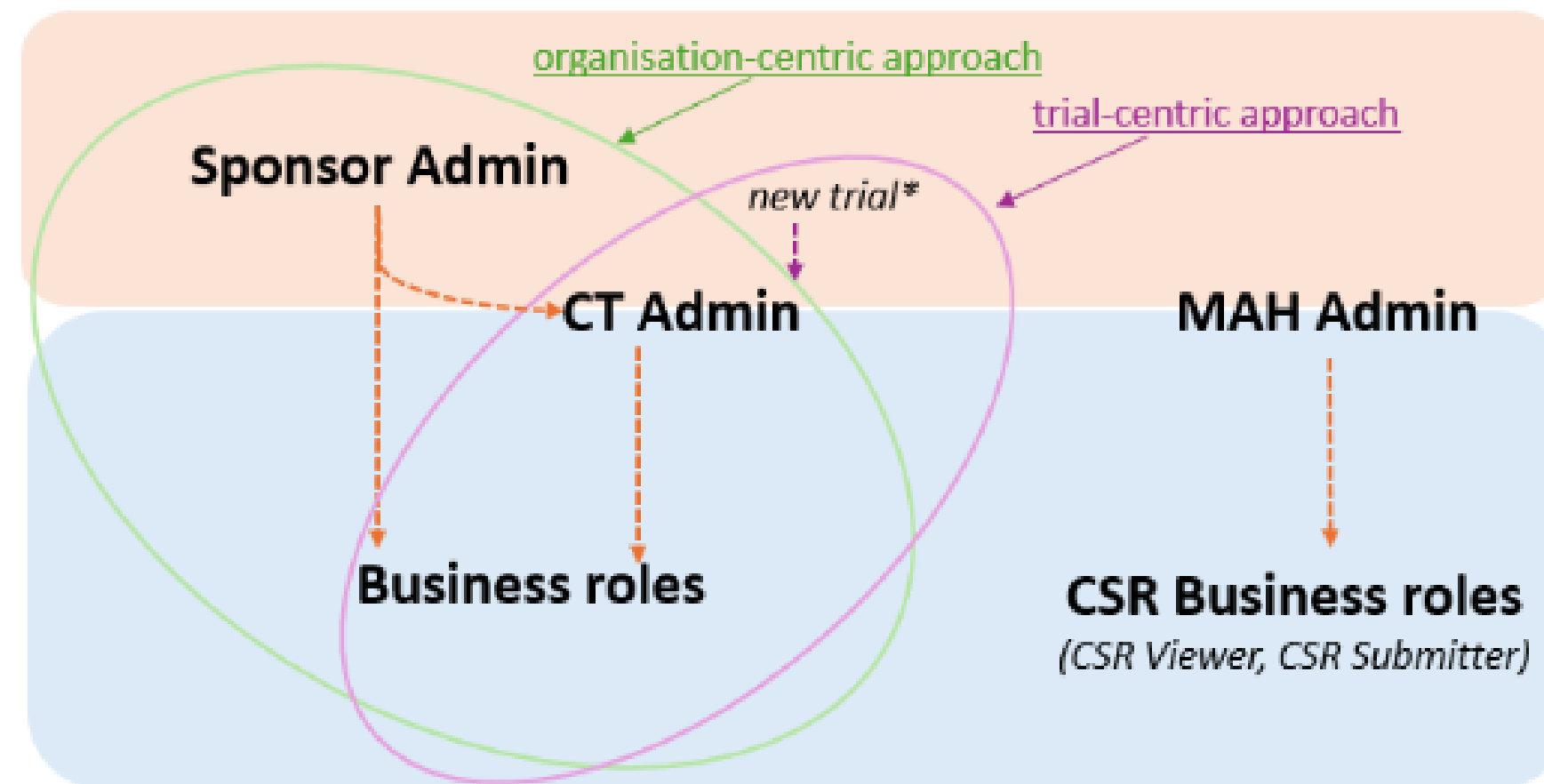


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The **approach is established automatically** when the user performs certain actions in the system:

- once a **Sponsor Admin role is given to a user of a specific organisation** (with a certain ORG-ID), all trials sponsored by that ORG ID will follow the **organisation-centric approach** (see section [1.5.1](#)).
- if a **user with no role assigned** logs in the CTIS Sponsor's workspace and **creates an IN for an ORG-ID that does not have a Sponsor Admin user appointed**, the trial will follow the **trial-centric approach** and the user automatically gains the role of 'CT Admin' (see section [1.5.2](#), [1.5.2](#)).



**new trial created from an ORG-ID for which a Sponsor Admin was not appointed, see section [1.5.2](#).*

Pros and cons of the two approaches need to be evaluated by a sponsor before starting a new trial in CTIS: detailed descriptions of the two approaches are available in sections [1.5.1](#) and [1.5.2](#). Based on the current experience, **it is recommended that commercial and non-commercial sponsors use the organisation-centric approach** (preferably by centralising the activity within a dedicated internal team).

The organisation-centric approach allows the **management of user roles at the organisation level**, ideal for sponsors running multiple trials. Once the sponsor organisation is registered in OMS (see section [1.2.](#)), in order to follow this approach a **Sponsor Admin (high-level administrator) must be registered through the [EMA Account Management](#) portal** (see section [1.5.1.1.](#)).

This type of user management approach follows a top-down model, where the **Sponsor Admin assigns medium-level administrator (i.e. CT admin) and business roles** to users to perform user management or business activities in CTIS. Upon role's assignment, **users become affiliated with the organisation's ORG-ID (as registered in OMS) of the relevant Sponsor admin in CTIS.**

The trial-centric approach applies **when no Sponsor Admin was registered in the EMA Account Management portal for a specific ORG-ID**, see section [1.5.1.](#)

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PART I / FORM SECTION:

Cover Letter	A template is available on the HMA website (v4 March 2024) → you can find it in this webpage https://www.hma.eu/about-hma/working-groups/clinical-trials-coordination-group.html , under the section "GUIDANCE - Transitional Trials". This template is for multinational trials but can be modified for single-country trials.
Proof of Payment	To be added as per local requirements (mandatory for Italy)
Compliance with Regulation (EU) 2016/679	A template is available on the EMA website → https://health.ec.europa.eu/document/download/dcbff0c5-b4e8-479b-88a5-f308b006d126_en?filename=compliance_reg2016_679_template_en.pdf
Trial Category	You will need to select in which category your study is falling into, and justify your choice. Also refer to the EMA " Revised CTIS transparency rules and historical trials: quick guide for users "

Statement of compliance with Regulation (EU) 2016/679 (GDPR)

Sponsor	
Title of the clinical trial	
EU CT Number	

The sponsor declares that data have been and will be collected and processed in accordance with the General Data Protection Regulation (EU) 2016/679 (GDPR).

Date:

Name and surname¹ :

Role in the sponsor organisation :

Attenzione ad eventuale norma locale più restrittiva (es ITA)

PART I / FORM SECTION, example:

Compliance with regulation

Compliance with Regulation (EU) 2016/679

Compliance with Regulation (EU) 2016/679 *

 r1_compliance with regulation 2016-679 

English · Compliance with Regulation (EU) 2016/679 · System version 1.00

Submission date 08/08/2024

· Version N/A · 27/04/2023

Trial category

Justification of trial category

Trial category *

Category 2

Justification for trial category *

This is a Phase III study - is a confirmatory/registrational trial and the development program for the molecule is ongoing

Category	Trial type
Category 1 Pharmaceutical development clinical trials	Phase I clinical trials in healthy volunteers or patients Phase 0 trial in healthy volunteers or patients Bioequivalence and bioavailability trials Similarity trials for biosimilars Equivalence trials for combination or topical products
Category 2 Therapeutic exploratory & confirmatory clinical trials	Phase I and phase II integrated clinical trials Phase II clinical trials Phase II and phase III integrated clinical trials Phase III clinical trials
Category 3 Therapeutic use clinical trials	Phase III and phase IV integrated clinical trials Phase IV clinical trial and low interventional trials

PART I / Member States Concerned (MSC) Section:

All mandatory structured application data	- Member state(s) concerned - Reporting member state proposed - Number of Patient planned in each participating EEA Countries - List of non-EEA countries, if applicable - Total number of patients in the trial
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EXAMPLE FOR MULTI-COUNTRY STUDY:

Member states concerned			
Member states concerned	RMS	First submissions date	Subjects
Italy	Selected	11/04/2024	3
Poland		11/04/2024	6
Countries outside the European Economic Area		Estimated total population for the trial	
Australia		EEA subjects 9	
Canada		Rest of the world subjects*	
Korea, Republic of		37	
New Zealand		Total subjects	
United States		46	

PART I / CTIS DATA & DOCUMENTS:

All mandatory structured application data	- EU CT Data - example: Protocol Number, Title, I/E criteria, endpoints, MedDRA term, etc.. - Sponsor Information & 3rd Parties - IMPs information
Protocol	Redacted & not redacted Allegato 1 sez. D
Lay CTD	Synopsis in lay language (to be redacted if needed)
Patient facing material	Relevant to endpoints and provided to patients after ICF signature (to be redacted if needed)
IDMC Charter	If applicable
Scientific Advice / PIP number	If applicable
IMPs & Quality Documents	- QIMPD(s) - QIMPD(s) Safety and Efficacy - GMP Relevant documents - Label(s) - Reference Safety Information Allegato 1 sez. E

Trial information

Protocol information

Clinical trial protocol

Protocol *



d1_protocol-[REDACTED]-redacted

English · Protocol (for publication) · System version 1.00
Submission date 08/08/2024
· Version 7 · 11/12/2023



d1_protocol-[REDACTED]

English · Protocol (not for publication) · System version 1.00
Submission date 08/08/2024
· Version 7 · 11/12/2023



d1_protocol-[REDACTED]-redacted gr

Greek · Protocol (for publication) · System version 1.00
Submission date 08/08/2024
· Version 7 · 11/12/2023



d1_protocol-[REDACTED] gr

Greek · Protocol (not for publication) · System version 1.00
Submission date 08/08/2024
· Version 7 · 11/12/2023



D4_Patient facing documents_EQ-5D-5L_SE-SE.pdf

Swedish (Sweden) · Protocol (for publication) · System version 1.00
Submission date 09/05/2024
· Version 1.2 · 01/01/2009



D4_Patient facing documents_EQ-5D-5L_EN.pdf

English · Protocol (for publication) · System version 1.00
Submission date 09/05/2024
· Version 1.2 · 01/01/2009

REMEMBER: Upload the redacted version first, and then the non redacted under the redacted version, as “Not for publication” by using the + icon, to avoid CCI and PPD to become publicly available.

NOTE: in case you have a multi-country trial with Greece, remember they must submit the translated protocol

In this section upload the Patient Facing material relevant to primary/secondary endpoints and provided to patients **after** ICF signature - in ENG (if not already present in the protocol) + all applicable languages according to the Q&A doc (currently v6.9 - [HERE](#)). THIS IS APPLICABLE FOR ITA.
PLEASE REMEMBER TO UPLOAD A REDACTED VERSION IF NEEDED

PART I / CTIS DATA & DOCUMENTS, IMP Section

IMPs must be added one by one, by using the ADD button and selecting the correct option:

- **TEST** IMP
- **COMPARATOR** IMP
- **PLACEBO**
- **AUXILIARY** IMP = Auxiliary Medicinal Product (AxMP) used within the marketing authorisation only need to be listed in the Cover Letter and not in CTIS. All other AxMPs (unauthorized or authorized but modified AxMP) must be listed in CTIS as well.



The screenshot displays the 'Products' section of the CTIS interface. At the top, there is a header bar with the label 'Products' and a lock icon. Below this, a sorting section shows 'Sort by: 1?' and 'No sorting' with a dropdown arrow. To the right of the sorting section are two buttons: '+ Add' and 'Register'. A blue arrow points from the text box above to the '+ Add' button. A dropdown menu is open from the '+ Add' button, showing four options: 'Test', 'Comparator', 'Auxiliary', and 'Placebo'. Below the dropdown, there are two rows of product information. The first row is labeled 'Role: Test' and 'Name: [redacted]'. The second row is labeled 'Role: Comparator' and 'Name: [redacted]'. Each row has a right arrow and a trash icon. At the bottom, there is a 'Content labeling' section with a dropdown arrow.

Role	Name	Action
Test	[redacted]	[arrow] [trash]
Comparator	[redacted]	[arrow] [trash]

Content labeling [dropdown arrow]

28. Se il medicinale sperimentale è autorizzato e impiegato conformemente alle condizioni dell'autorizzazione all'immissione in commercio, il riassunto delle caratteristiche del prodotto (RCP) costituisce l'IB approvato. Qualora le condizioni d'uso nella sperimentazione clinica differiscano da quelle autorizzate, l'RCP è integrato da una sintesi dei dati clinici e non clinici pertinenti a sostegno dell'impiego del medicinale sperimentale nel quadro della sperimentazione clinica. Qualora il medicinale sperimentale sia identificato nel protocollo unicamente tramite la sostanza attiva, il promotore sceglie un RCP come documento equivalente all'IB per tutti i medicinali contenenti quella sostanza attiva e utilizzati in qualsiasi sito di sperimentazione clinica.

Autorizzazione Tacita

Application Details

EU CT number: 2024-513075-40-00 ID: 22707 Type: Initial (Part I, Part II)
Submission Date: 11/07/2024

MSCs	Validation	Assessment Part I	Assessment Part II	Decision
GERMANY			Acceptable (09/08/2024)	Authorised with condition (26/08/2024)
ITALY RMS	Valid (07/08/2024)	Acceptable (20/08/2024)	Acceptable (05/09/2024)	Authorised (10/09/2024) Tacit
FRANCE			Acceptable (08/08/2024)	Authorised (22/08/2024)
GREECE			Acceptable (20/08/2024)	Authorised (22/08/2024)
NETHERLANDS			Acceptable (08/08/2024)	Authorised with condition (22/08/2024)

In accordo a quanto stabilito all'art. 8 (SC iniziali) e art. 23 (SM) del Regolamento (UE) N. 536/2014, qualora lo Stato membro interessato (in questo caso Italia) non notifica al promotore la propria decisione entro i termini previsti vige il silenzio assenso. Le procedure oggetto di richiesta di valutazione quindi prive dello specifico provvedimento AIFA, si considerano autorizzata tacitamente e fa fede il Documento Report for the Application Evaluation Decision scaricabile da CTIS.

La decisione tacita ha a tutti gli effetti valore legale sul territorio italiano.

PART II / DOCUMENTS, overview:

Language requirements for Part 2:
Art. 26 of Regulation (EU) 536/2014 states that "The language of the application dossier, or parts thereof, shall be determined by the Member State concerned. Member States shall, when applying the first subparagraph, consider the possibility of accepting a language of common understanding in the medical field in documentation not intended for subjects", therefore the presentation of Part II documents in English is acceptable, except for those intended for patients.

Form MSCs Part I * Part II * - AT - BE - BG - HR - CZ - DK - FR - DE - HU - IT - PT - RO - ES - NL - PL - SK Evaluation Timetable	Country specific details (Part II - Italy)
	Trial sites
	Documents
	Recruitment Arrangements
	Subject information and informed consent form
	Suitability of the investigator
	Suitability of the facilities
	Proof of insurance cover or indemnification
	Financial and other arrangements
	Compliance with national requirements on Data Protection
	Compliance with use of Biological samples
	All documents

PUBLIC SECTIONS

Don't forget to redact **PPD** (personal data) and **CCI** (Commercially Confidential Information)

PART II / TRIAL SITES:

All sites participating to the trial:

- On Part II - the sites are uploaded from Organization Management System (OMS) / CTIS or created in CTIS - and First, Last name, department, phone and email are completed manually.
- Check with your sites which phone and email address can be used, knowing that this will be made publically available

EXAMPLE FOR MULTI-SITES STUDY- CTIS VIEW:

Remember to not use personal info (names emails..) as these fields will be publicly available

Trial sites												
Trial sites												
Organisation ID	Organisation name	Site location	Site street address	Site city	Site post code	Site country	Title	First name	Last name	Department	Phone	Email
484354	Azienda Ospedaliera Universitaria Citta Della Salute E Della Scienza Di Torino	Via Cherasco 15	Via Cherasco 15	Turin	10126	Italy	Prof.			Oculistica		
484320	Fondazione Policlinico Universitario Agostino Gemelli IRCCS	Largo Francesco Vito 1	Largo Francesco Vito 1	Rome	00168	Italy	Prof.			Oftalmologia		
484350	Azienda Ospedaliera Policlinico Universitario Tor Vergata	Viale Oxford 81	Viale Oxford 81	Rome	00133	Italy	Prof.			UNIT Patologie Retiniche		

Remember to not use personal info (names, emails..) as these fields will be publicly available

It is important to check if your site(s) is/are available in Organization Management System-OMS. There are 2 options:

1. Via OMS directly
2. Or drop-down list and search function in CTIS

If your site is not available in OMS, you must:

- Ask your site to register themselves in OMS - please see [OMS guide](#)
- You can create it in CTIS directly

PART II / DOCUMENTS:

Recruitment arrangement	This section refers exclusively to recruitment material (copies of the advertising material, including any printed materials, and audio or visual recordings), no other documentation shall be submitted under this section (<i>CTR wording</i>) A new document is required by CTR in this section: "Recruitment and Informed consent procedure" -> EMA template This section will be public and available to the public once the study is approved. NB.: documents redaction may be needed
Subject Information	This section refers exclusively to all information given to the subjects together with the informed consent form <u>before</u> their decision to participate or abstain from participation in the clinical trial (<i>CTR wording</i>) No other documentation shall be submitted under this section (several ICF can be uploaded: e.g. 1 main ICF; 1 optional biopsy ICF...), knowing that only 1 country specific version of each ICF can be uploaded. This section will be public and available to the public once the study is approved. NB.: documents redaction may be needed
Suitability of Investigator	This section contains 2 parts: Investigator's CV and suitability of the Investigators. EMA templates are available For Italy (only for Principal Investigator): use EMA CV template and Declaration of Interest (DoI) template published by CCNCE
Suitability of the facilities	This document is signed by the legal representative of the site, EMA template must be used. In Italy: General director or delegate must sign the document
Proof of insurance cover or indemnification	There are no EMA CTR requirements for the insurance - except national requirements For Italy: it is required the upload of the insurance certificate as required per DM 14 July 2009
Financial and other arrangements	A brief description of the financing of the clinical trial and Information on financial transactions and compensation paid to subjects and investigator/site, any other agreement between the sponsor and the site For Italy: Patient reimbursement and indemnity template published by CCNCE
Compliance with national requirements on data Protection	This is an optional section but there is the EMA template that can be used. For Italy, this section stays empty
Compliance with use of Biological samples	It is not mandatory document, but there is the EMA template that can be used. For In Italy it is mandatory.

PART II / DOCUMENTS:

Recruitment arrangement	This section refers exclusively to recruitment material (copies of the advertising material, including any printed materials, and audio or visual recordings), no other documentation shall be submitted under this section (<i>CTR wording</i>) A new document is required by CTR in this section: "Recruitment and Informed consent procedure" -> EMA template This section will be public and available to the public once the study is approved. NB.: documents redaction may be needed
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Suitability of Investigator	This section contains 2 parts: Investigator's CV and suitability of the Investigators. EMA templates are available For Italy (only for Principal Investigator): use EMA CV template and Declaration of Interest (DoI) template published by CCNCE
Suitability of the facilities	This document is signed by the legal representative of the site, EMA template must be used. In Italy: General director or delegate must sign the document
Proof of insurance cover or indemnification	There are no EMA CTR requirements for the insurance - except national requirements For Italy: it is required the upload of the insurance certificate as required per DM 14 July 2009
Financial and other arrangements	A brief description of the financing of the clinical trial and Information on financial transactions and compensation paid to subjects and investigator/site, any other agreement between the sponsor and the site For Italy: Patient reimbursement and indemnity template published by CCNCE
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CONFORMITÀ ALLE NORME APPLICABILI DEGLI STATI MEMBRI PER LA RACCOLTA, LA CONSERVAZIONE E L'USO FUTURO DI CAMPIONI BIOLOGICI UMANI

(REGOLAMENTO UE n. 536/2014, ART. 7.1 (H))

Titolo completo della sperimentazione clinica	Numero UE della sperimentazione
Cliccare o toccare qui per inserire il testo.	Cliccare o toccare qui per inserire il testo.
Soggetto legalmente responsabile per i campioni	
Cliccare o toccare qui per inserire il testo.	

Come usare questo documento

Questo modulo può essere utilizzato dagli sponsor delle sperimentazioni cliniche nel dossier di candidatura della Parte II per fornire informazioni sulla "conformità alle norme applicabili per la raccolta, conservazione e uso futuro di campioni biologici di soggetti partecipanti a sperimentazioni cliniche" (Regolamento (UE) n. 536/2014, articolo 7.1 (h)). Questo non è un modulo obbligatorio e potrebbero essere in vigore disposizioni nazionali diverse che dovrebbero essere confermate prima della presentazione.

Se le informazioni sono già fornite altrove nel dossier di candidatura, è necessario fornire un riferimento. Per facilitare l'utilizzo del modello, ogni sezione può essere compressa cliccando sul titolo.

Questo modello della Parte II è stato sviluppato e approvato dallo EU Clinical Trials Expert Group in ottemperanza con il Regolamento (UE) n. 536/2014 sulla sperimentazione clinica di medicinali per uso umano.

I - Descrizione dei campioni biologici nella sperimentazione clinica
Sezione 1 - Questa sperimentazione clinica comporta una nuova raccolta di campioni dei soggetti? ☐ Sì, compilare le informazioni richieste nella sezione 1 ☐ No, non applicabile. Continuare con la sezione 2 Nota: Lo sponsor deve compilare <i>almeno una</i> delle sezioni 1 o 2
1.1. Che tipo/i di campioni del soggetto verranno prelevati? <i>Indicare il materiale originale prelevato dal paziente, ad es. sangue, tessuto (stato del tipo di tessuto), urina, saliva ecc. Non includere informazioni sulla preparazione del campione.</i> Cliccare o toccare qui per inserire il testo.
1.2 Numero totale di campioni, frammenti (ad es. aliquote, blocchi di tessuto, sezioni) e volume totale (se applicabile) per singolo soggetto: Cliccare o toccare qui per inserire il testo.
1.3 Il numero massimo di campioni e il volume massimo (se applicabile) in un'unica volta: Cliccare o toccare qui per inserire il testo.

1.4 I campioni verranno prelevati nell'ambito dell'assistenza sanitaria di routine?
Cliccare o toccare qui per inserire il testo.

Sezione 2 - Questa sperimentazione clinica comporta la raccolta di campioni di archivio esistenti (ad es. materiale diagnostico archiviato o altro materiale di biobanca)?

- ☐ Sì, compilare le informazioni richieste nella sezione 2
☐ No, non applicabile. Continuare con la sezione 3

Nota: Lo sponsor deve compilare almeno una delle sezioni 1 o 2

2.1. Che tipo/i di materiale/campioni archiviati saranno usati?

Cliccare o toccare qui per inserire il testo.

2.2 Fornire il numero totale di campioni, frammenti (es. aliquote, blocchi di tessuto, sezioni) e il volume totale (se applicabile) a cui lo Sponsor ha bisogno di accedere per ogni singolo soggetto.

Esempio: sono necessarie 20 sezioni a biopsia per ogni singolo soggetto

Cliccare o toccare qui per inserire il testo.

2.3 Si otterranno nuovi consensi per l'utilizzo dei campioni d'archivio nella sperimentazione clinica (se conforme alla normativa nazionale)? In caso negativo, fornire spiegazioni.

(se applicabile, aggiungere il testo del consenso originale)

Cliccare o toccare qui per inserire il testo.

II – Uso, conservazione e trasferimento di campioni biologici

Sezione 3 – Uso di campioni per uno scopo che rientra nell'obiettivo della presente sperimentazione clinica (cioè per l'uso descritto nel protocollo)

Nota: Questa sezione deve essere compilata sia per i campioni di archivio appena prelevati che per quelli esistenti

3.1 Dove verranno analizzati i campioni?

es., all'interno del laboratorio clinico, all'interno/esterno dell'organizzazione dello sponsor, all'interno/al di fuori dello Stato membro in cui sono stati raccolti o all'interno/al di fuori dell'UE/SEE.

Cliccare o toccare qui per inserire il testo.

3.2 Se i campioni verranno inviati a un'altra organizzazione per le analisi (nell'ambito della sperimentazione), come verranno gestiti dopo le analisi?

es., distrutti, restituiti al soggetto legalmente responsabile per i campioni, conservati nel sito dove sono stati analizzati, resi anonimi ecc.

Nota: Deve essere stabilito con il destinatario un accordo (Contratto di trasferimento materiale o equivalente) che regoli le modalità di trattamento del campione

Cliccare o toccare qui per inserire il testo.

3.3 Dove verranno conservati i campioni? <i>es., all'interno/esterno dell'organizzazione dello sponsor, all'interno/al di fuori dello Stato membro in cui sono stati raccolti o all'interno/al di fuori dell'UE/SEE</i> Cliccare o toccare qui per inserire il testo.
3.4 Per quanto tempo verranno conservati i campioni? Cliccare o toccare qui per inserire il testo.
3.5 Che tipo di collegamento è disponibile tra campioni e singoli soggetti? ☐ Collegamento diretto (<i>campioni contrassegnati con ad es. iniziali, data di nascita</i>) ☐ Collegamento pseudonimizzato (<i>campioni contrassegnati da un codice</i>) ☐ Nessun collegamento, i campioni sono resi anonimi (<i>ovvero i campioni non possono né direttamente né indirettamente essere collegati al donatore del campione con mezzi ragionevoli, ai sensi del considerando 26 del Regolamento generale sulla protezione dei dati (UE) 2016/679</i>)
3.6 Chi avrà accesso ai campioni? Cliccare o toccare qui per inserire il testo.
3.7 Chi avrà accesso all'elenco dei codici dei campioni (se applicabile)? Cliccare o toccare qui per inserire il testo.
Sezione 4 - I campioni appena prelevati o i campioni di archivio esistenti verranno conservati per un uso futuro? <i>Per usi diversi da quelli descritti nel protocollo. Si noti che alcuni scopi (uso secondario di campioni) potrebbero richiedere un'approvazione aggiuntiva, nella maggior parte degli Stati membri, da parte di un comitato etico</i> ☐ Sì, compilare le informazioni richieste in questa sezione ☐ No, i campioni verranno distrutti, continuare con la sezione 5
4.1 Qual è lo scopo dell'uso futuro? Cliccare o toccare qui per inserire il testo.
4.2 Per quanto tempo verranno conservati i campioni? Cliccare o toccare qui per inserire il testo.
4.3 Dove verranno conservati i campioni? Cliccare o toccare qui per inserire il testo.
4.4 Che tipo di collegamento è disponibile tra campioni e singoli soggetti? ☐ Collegamento diretto (<i>campioni contrassegnati con ad es. iniziali, data di nascita</i>) ☐ Collegamento pseudonimizzato (<i>campioni contrassegnati da un codice</i>) ☐ Nessun collegamento, i campioni sono resi anonimi (<i>ovvero i campioni non possono né direttamente né indirettamente essere collegati al donatore del campione con mezzi ragionevoli, ai sensi del considerando 26 del Regolamento generale sulla protezione dei dati (UE) 2016/679</i>)

4.5 Chi avrà accesso ai campioni?

Cliccare o toccare qui per inserire il testo.

4.6 Chi avrà accesso all'elenco dei codici dei campioni (se applicabile)?

Cliccare o toccare qui per inserire il testo.

4.7 Il donatore sarà ricontattato per dare un nuovo consenso all'uso dei campioni in future ricerche? In caso negativo, fornire spiegazioni.

Cliccare o toccare qui per inserire il testo.

4.8 Se sarà in discussione un futuro uso secondario dei campioni, un comitato etico o un comitato di biobanca valuterà se lo scopo del nuovo studio rientra nell'ambito del consenso originariamente fornito (se applicabile secondo la legislazione nazionale)?

Cliccare o toccare qui per inserire il testo.

4.9 Chi potrà fare uso dei campioni?

Cliccare o toccare qui per inserire il testo.

4.10 Come verranno gestiti i risultati non richiesti?

Cliccare o toccare qui per inserire il testo.

III - Ulteriori informazioni

Sezione 5 - Ulteriori informazioni richieste da disposizioni e regolamenti nazionali vigenti negli Stati membri. Lo sponsor dovrebbe confermarlo prima della presentazione

Nota: Questa sezione va compilata solo se applicabile

5.1 Fornire qualsiasi informazione (non descritta sopra) pertinente sulla scorta delle norme applicabili dello Stato membro in materia di prelievo, conservazione, trasporto e uso futuro dei campioni, ad es. su disposizioni e regolamenti nazionali specifici relativi all'uso di campioni biologici umani.

Cliccare o toccare qui per inserire il testo.

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1. Notifications that need to be submitted for every CT:

- **Start trial:** the first act of recruitment of a potential subject for a specific CT, unless defined differently in the protocol (as per Article 2(25) of the [CTR](#)). It is the date of initiation of the first trial site in an MSC.
 - **Start recruitment:** the first visit of the first subject (see definition in the [CTR Q&A](#)). The date could be the same as for the start trial. The recruitment of subjects **shall start within two years from the CT authorisation**. If the start recruitment notification is not submitted within that period, the trial expires, unless the sponsor submits an SM for an extension of this period beyond two years, which needs to be authorised by the MSC, see section [4.3.3](#).
 - **End recruitment:** the act of stopping recruitment of subjects in an MSC.
-
- **End trial:** the last visit of the last subject, or a later point in time as defined in the protocol (as per Article 2(26) of the [CTR](#)). *The trial could also be **early terminated**: see below.*
 - **Global end of trial:** *in case the trial is conducted in countries outside of the EEA*, the sponsor shall also notify this date by clicking on 'Submit global end' button.



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