

Serious Adverse Event Reconciliation

Document #: 301-S02

Revision #:

Effective Date: 09SEP2022

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1. Purpose

The purpose is to ensure that the safety data in the clinical database and the Office of Sponsor and Regulatory Oversight (OSRO) Safety / Pharmacovigilance Groups' safety database are accurate and reconciled.

2. Scope

2.1. This procedure details the reconciliation of serious adverse events (SAEs) in the OSRO safety database and corresponding SAEs in the clinical databases maintained by the National Cancer Institute (NCI) Center for Cancer Research (CCR) for CCR-held Investigational New Drug Application (IND) and Investigational Device Exemption (IDE) studies.

3. Responsibilities

- 3.1. OSRO Safety is responsible for managing the process of SAE reconciliation between the clinical and safety databases.
- 3.2. The OSRO Sponsor and Regulatory Oversight Support (SROS) contractor staff produces the reports to identify discrepancies, provides queries to the study teams and updates the safety database with new information that is provided by the study teams.
- 3.3. The study teams review and respond to the queries by updating the information for the databases.

4. References

- 4.1. ICH E6(R2) Good Clinical Practice: Integrated Addendum to ICH E6(R1) Guidance for Industry (FDA), March 2018
- 4.2. 21 CFR Part 312 §55, Investigational New Drug Application: Informing Investigators
- 4.3. 21 CFR Part 812 §45, Investigational Device Exemption: Informing Investigators

5. Definitions

Refer to the OSRO Lexicon.

6. Procedure

- 6.1. Reconciliation of SAEs recorded in the safety database and in the clinical database may occur several times during the conduct of the clinical trial. The data capture of SAEs and coding of the event terms in both clinical and safety databases should match.
- 6.2. Reconciliation should be conducted at least annually, prior to generation of the safety data for the annual report, prior to any Safety Oversight Committee meeting and prior to the final clinical study report.
- 6.3. SROS Pharmacovigilance notifies the study team of initiation of the SAE reconciliation.
- 6.4. The reconciliation process should take place within 2 weeks from receipt of data.
- 6.5. SROS Data Analytic Group will export SAE reconciliation data from the databases.

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- 6.6. SROS Pharmacovigilance prepares a discrepancy report.
 - 6.6.1. The following standard data fields are reconciled:
 - Protocol Number
 - Participant Identifier (PID)
 - Adverse Event (CTCAE/LLT) Term)
 - Severity Grade (CTCAE grade)
 - Onset date
 - Resolution date
 - Event outcome
 - Seriousness criteria
 - Investigator's Causality Assessment (Related: yes/no)
 - Action taken with study agent
- 6.7. When discrepancies are identified between the safety database and the clinical database, SROS Pharmacovigilance verifies the data in the safety database to ensure that no transcription errors were made from the source documents.
 - 6.7.1. SROS Pharmacovigilance enters queries in the safety database and sends to the study team to resolve SAE discrepancies.
 - 6.7.2. SROS Pharmacovigilance enters a query in the clinical database only when there is SAE data present in the clinical database but not present in the safety database for the study team/data manager to resolve.
 - 6.7.3. The OSRO safety database is updated with responses to queries from the study team.
- 6.8. SROS Pharmacovigilance contacts OSRO Safety if a data discrepancy cannot be resolved.
 - 6.8.1. OSRO Safety reviews the data discrepancy and provides guidance for resolution to SROS Pharmacovigilance.
- 6.9. OSRO Safety Oversight Coordinators are available to assist the study teams during the reconciliation process.
- 6.10. The reconciliation process continues until all discrepancies are resolved.
 - 6.10.1. If a discrepancy cannot be resolved due to a circumstance related to the safety data, OSRO Safety will document the rationale and provide it to the study team.
- 6.11. SROS Pharmacovigilance notifies the study team of reconciliation completion.

7. Change Summary

Revision Number	Effective Date	Description of Change
1	24FEB2020	New Document
2	09SEP2022	Rewrite of procedure to capture SROS activities