

Cancer Therapy Evaluation Program Adverse Event Reporting System

CTEP-AERS vs. AdEERS

Training Supplement

CTEP-AERS Training Site: https://betapps-ctep.nci.nih.gov/ctepaers/public/login

> CTEP-AERS Production Site: <u>https://eapps-ctep.nci.nih.gov/ctepaers</u>

CTEP Website - CTEP-AERS Page:

http://ctep.cancer.gov/protocolDevelopment/electronic applications/adverse events.htm

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Welcome to CTEP-AERS

CTEP-AERS:

- Compliant with the new FDA Final Rule.
- Open public system no login credentials needed.
- Supported with Internet Explorer and Mozilla Firefox , Google Chrome is not supported.
- Uses Protocol Specific Exceptions (PSEs) to provide immediate reporting recommendations to help reduce the number of unnecessary reports submitted to lower the burden on participating sites and CTEP.
- Updated user interface including autocomplete features.

Welcome to CTEP-AERS

This training presentation is specifically designed for users who have a familiarity with AdEERS and highlights the differences of CTEP-AERS.

Access CTEP-AERS Training Site

NCI Warning Disclaimer

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		*** ₩AR NING***				
	You are accessing a U.S. Government information system, which includes (1) this computer, (2) this computer network, (3) all computers connected to this network, and (4) all devices and storage media attached to this network or to a computer on this network. This information system is provided for U.S. Government-authorized use only.					
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		Any communication or data transiting or stored on this information system m Government purpose.	hay be disclosed or used for any lawful			
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		Firsto				
<u> </u>						
			This text says you agree to use the system responsibly. Click I agree.			

CTEP-AERS Home Page



CTEP-AERS Home Page



Select study, subject and course/cycle/intervention

This page, similar to AdEERS, collects the highest level data to initiate the report.



Course/Cycle/Intervention Information

This page lists the treatment assignments associated with the study.



Select study, subject and course/cycle/intervention

The completed page displays.

1. Study, Subject & Course/Cycle > 2. Adverse Events > 3. Review and Report					
Select study	, subject, and course/cycle/intervention	?			
Instructions Selec	t the study, subject, and course or cycle associated with the adverse events that you wish to report.				
* Study	(7028) A Phase II Study of BAY 43-9006 for Patients with Imatinib and Su				
* Subject ID	5522				
* Confirm Subject ID	5522				
* Organization	Mayo Clinic Hospital, Phoeniz, AZ (AZ073)				
* Course/Cycle/ Intervention	TAC1 ((Cycle=28 days) BAY 43-9006: 400mg PO BID)				



Adverse Events

The **Adverse Events** page displays.

1. Study, Subject & Course/Cycle

2. Adverse Events

3. Review and Report

Subject SS22

Study (7028) A Phase II Study of BAY 43-9006 for Patients with Imatinib and Sunitinib Resistant Gastrointestinal Stromal...

Course/Cycle/TAC1 ((Cycle=28 days)\nBAY 43-9006: 400mg PO BID) Intervention



Adverse Events



Review and Report – Action Recommended

The **Review and Report** page uses Protocol Specific Exceptions (PSEs), NCI AE Reporting Guidelines and SPEER data to determine whether an expedited report is required.

The **Review and Report** page displays a checkmark icon when a report is required. Alternatively, it displays a stop

icon when a report is not required (see slide 14 for more information).

available for late 1. Study, Subject & Course/Cycle) 2. Adverse Events 3. Review and Report adverse events (i.e., events that occur Subject SS22 more than 30 days Study (7028) A Phase II Study of BAY 43-9006 for Patients with Imatinib and Sunin after treatment) or for Course/Cycle/TAC1 ((Cycle=28 days)\nBAY 43-9006: 400mg PO BID) Intervention reporting adverse events that occur with An action is recommended. commercial Exception: If this is a commercial agent only study or an adverse event that occurre treatments (see slide administration of investigational agent/intervention, please consult your protocol 15 for more information). Dyspepsia: pain, Grade: 3: Severe or medically significant but not immediatel or prolongation of hospitalization indicated; disabling; limiting self care ADL. Recommended Actions Based on the data you have entered and the rules enabled for this study, the following action is recommended: Override Select Action Report Status Due **CREATE CTEP Expedited Report** Not started Due in 10 days Adverse, Events pedited Select porting Adverse Event Term Grade Start date *Primary? quired? 3: Severe symptoms; surgical \odot Dyspepsia: pain New 07/22/2013 fes intervention indicated When you press the Report button, you will initiate the following actions: CREATE CTEP Expedited Report The Adverse Event table lists Report -> the information you have entered and displays regardless of whether a report is required. 12

The **Override** option is

Review and Report – Recommended Actions

The **Review and Report** page displays the report due date depending on the results of the rules engine.

Select Acti	on CREATE	Report CTEP Expedited Report	Status Not started	Due Due in 10 days	The CTEP Expedited Report is due in 10 days.
Select Acti	on CREATE	Report CTEP 24 Hour Notification	Status Not started	Due Due in 24 hours	The CTEP 24-Hour Notification is due within 24-hours, followed by the CTEP
Select	Action R EDIT C	eport TEP Expedited Report	Status In process	Due Due in 5 days	Expedited Report, due in 5 days.
Select Acti	on CREATE	Report CTEP Expedited Report (15 D	Status ays) Not started	Due Due in 15 days	The CTEP Expedited Report for commercial agents is due in 15 days

Review and Report – Action Not Recommended

The **Review and Report** page uses Protocol Specific Exceptions (PSEs), NCI AE reporting guidelines and SPEER data to determine whether an expedited report is required.

The **Review and Report** page displays a stop icon when a report is not required.

If no action is recommended, you can either exit the system or use the **Override** option (see slide 15 for more information) to submit a report.

Subje	et SS2	2				
Stu	dy (70)28) A Phase II Study of BAY 43-9	006 for Patier	ents with Imatinib and Sunitinib Resi	istant Gastrointest	inal Stromal
Course/Cyc Interventic	:le/TA on	C1 ((Cycle=28 days)\nBAY 43-9	006: 400mg P	PO BID)		
_		An action is NOT recomm	iended.			
		Based on the data you have entered a expedited reporting is warranted, cli For serious adverse events that occu agent/intervention and have an a	nd the rules ena ick 'Override' an ar more than attribution of po	nabled for this study, expedited repo nd select the report you wish to comple 30 days after the last administra ossible, probable, or definite, please co	rting is not requ ite. tion of investiga t nsult your protocol f	ired . If you beli tional for expedited
		reporting requirements and click '0\	ærride' as neede	ded.		
)yspepsia: pai	in, Gr	reporting requirements and click '01 rade: 1: Mild; asymptomatic	erride' as neede	ded. mptoms; clinical or diagnostic	: observations (only;
Pyspepsia: pai ntervention n Available Ac	in , Gr iot ind tions	reporting requirements and click 'Or 'ade: 1: Mild; asymptomatic licated.	or mild syn	ded. mptoms; clinical or diagnostic	: observations (only;
Dyspepsia: pai ntervention n Available Ac	in , Gr ot ind tions	reporting requirements and click 'Or rade: 1: Mild; asymptomatic licated.	or mild syn	ded. mptoms; clinical or diagnostic	: observations o	only; e expedited
Pyspepsia: paintervention n Available Act ased on the date eporting is warr	in , Gr tiot ind tions a you P	reporting requirements and click 'Or rade: 1: Mild; asymptomatic licated. have entered and the rules enable click 'Override' and select the re	or mild syn	ded. mptoms; clinical or diagnostic udy, expedited reporting is not requ	: observations (uired. If you believe	e expedited
Dyspepsia: pai ntervention n Available Ac ased on the data eporting is warr Adverse Even	in , Gr ot ind tions a you P anted, nts	reporting requirements and click 'Or rade: 1: Mild; asymptomatic licated. have entered and the rules enable click 'Override' and select the re	or mild syn	ded. mptoms; clinical or diagnostic udy, expedited reporting is not requ to complete.	: observations (uired. If you believe	e expedited
Available Ac ased on the date Adverse Even	in , Gr tot ind tions a you P anted, nts	reporting requirements and click 'Or 'ade: 1: Mild; asymptomatic licated . <u>lave entered and the rules enable</u> <u>click 'Override' and set the re</u>	erride' as needs	ded. mptoms; clinical or diagnostic udy, expedited reporting is not requ	ired. If you believe	e expedited
Available Action of the second	in , Gr ot ind tions a you P anted, nts dited rting ired?	reporting requirements and click 'Or rade: 1: Mild; asymptomatic licated. have entered and the rules enable click 'Override' and select the re click 'Override' and select the re	or mild syn	ded. mptoms; clinical or diagnostic udy, expedited reporting is not request to complete. Grade	uired. If you believe Start date	e expedited Overn 'Primary

Review and Report – Override Option

For rare cases when the system does not recommend an action, but the treating physician feels the event should be reported expeditiously, you may use the **Override** option to submit a report regardless of the action provided on the **Review and Report** page. Make note that you can change the 10-day report to a 24-hour notification, but you cannot override a recommended 24-hour notification to that of a 10-day.

		· ·			Restore recommended action
	Select	Action	Report	Status	Due
			CTEP Expedit	ed Report	
			CTEP 24 Hou	Notification	
The Hou Ove	CTEP I r Notif rride is	Expedited Report and 24 Fication are options whe s selected.	4- en		
					Bestore recommended action
	Select	Action	Report	Status	Due
			CTEP Exped	ted Report (15 Days)	
			CTEP 24 Ho	ar Notification	
CTE com com	P Expe Imercia Imercia	dited Report (15-day) for al agents is an option for al studies only.	or r	Click Restore recommended a cancel the override.	iction to

Review and Report – Adverse Event Table

Advers	se Events					
Select	Expedited Reporting Required?	Adverse Event T	erm	Grade	Start date	*Primary?
	Yes	Dyspepsia: stomac	h pain New	3: Severe symptoms; sur intervention indicated	gical	
✓	Yes	Vomiting: throwing	g up (New)	3: >=6 episodes (separat by 5 minutes) in 24 hrs; feeding, TPN or hospitalization indicated	ter 10 07/22/2013	
	Yes	Nausea: upset stomach <u>New</u>		3: Inadequate oral calori fluid intake; tube feeding, TPN, or hospital zation indicated	or 07/22/2013	\circ
The Select checkbox an adverse event is to be xcluded from the report.			The Start Da here if omitte Adverse Eve	te can be entered ed on the nt page.	The Primary advection of the reselected than one event is reported.	erse event I when mor 5 being

Review and Report

Important: The report not saved to the syste Again, if you were to le browser connection, y would need to reenter information.

The report is still	1. Study, Subject & Course/Cycle 2. Adverse Events 3. Review and Report							
o the system. u were to lose your nnection, you I to reenter all	Subject SS22 Study (7028) A Phase II Study of BAY 43-9006 for Patients with Imatinib and Sunitinib Resistant Gastrointestinal Strom Course/Cycle/ TAC1 ((Cycle=28 days)\nBAY 43-9006: 400mg PO BID) Intervention							
l.	An action is recommended. Exception: If this is a commercial agent only study or an adverse event that occurred more than 30 days after the last administration of investigational agent/intervention, please consult your protocol for specific expedited reporting requirements.							
	Dyspepsia: pain , Grade: 3: Severe or medically significant but not immediately life-threatening; hospitalization or prolongation of hospitalization indicated; disabling; limiting self care ADL.							
	Recon	nmended A	Actions					
	Based on	the data you I	have entered and the	e rules enabled for 1	this study, the foll	owing action is recom	mended:	Override
	Select	Action		Report		Status	Due	
	V	CRE	ATE	CTEP Expedite	d Report	Not started	Due in 10	days
	Adverse Events							
	Select	Expedited Reporting Required?	Adverse Event	[erm	Grade		Start date	*Primary?
-		Yes	Dyspepsia: pain <	New	3: Severe intervent	symptoms; surgical ion indicated	07/22/2013	۲
report, click Report .					When you pre following act	ess the Report but ions:	ton, you will in	itiate the
					CRE.	ATE CTEPExpedited R	eport	
								enort -

Reporter

The information required on the **Reporter** page is the same as AdEERS.

Reporter		(?)
Instructions Enter contact i person from the	nformation for the person report drop down list or enter the deta	ting the adverse event and the treating physician. You can select the ils.
Reporter Details		
* First name		If the reporter and physician are the same
Middle name		Details click this checkbox to copy the
* Last mame		information to the Treating Physician
* E-mail address		Details.
* Phone		
* Fax		
f the Physician is the same as the	e Reporter click here 🗌	
Treating Physician Deta	ils	Enter all mandatory fields then click Save & Continue .
* First name		Note: The information on this page must be
Middle name		completed and saved in order for the report
* Last name		to be saved and the ticket number assigned
* Email address		(see next slide). At this time, CTEP-AERS
* Phone		begins the report due date countdown.
		🛄 Save & Continue 🖽

Report Ticket Number

The report is saved to the system and the ticket number is assigned. The reporter is sent the access key through an e-mail that is generated immediately after completion of the Reporter page.



Please note that the information on the following slides highlight the differences in CTEP-AERS as compared to AdEERS. Please refer to the CTEP-AERS Training Guide or Training Presentation available from the CTEP website if more comprehensive information is needed. CTEP-AERS also includes an online help feature for access to quick instructive information.

Navigation Bar

CTEP-AERS displays the report section tabs at the top of each page.





Adverse Events

The **Adverse Events** page displays again to review and revise entered information or to enter additional adverse events.



Adverse Events – Reporting Death

Please refer to the <u>NCI Guidelines: Adverse Event Reporting Requirements</u> effective September, 2013.

😑 Death NOS C	irade: 5 Verbatim: de	ath	The CTCAE term Specified (NOS) NOS do not req	ns Death Not Otherwise and Sudden Death uire a positive	
Verbatim	death		attribution to su	ıbmit a report.	
* AE term	Death NOS				
* Grade	⊙ 5: Death				
Start date		(mm/dd/yyyy)	End date	(mm/dd/yyyy)	
Did AE cause hospitalization?	?				
Outcomes	Death Hospitalization - initial Life-threatening Disability or Permanen	l or prolonged			
	Congenital Anomaly/E Required Intervention Other Serious (Import	Fetal death sho and perinatal o	ould be reported	as grade 4 Pregnancy, p er (pregnancy loss), und	buerperium, der the
		Pregnancy, pue	rperium, and pe	rinatal conditions SOC.	
		Death Neonata and administra	l should be repo tion – Other (ne	rted as grade 4 General onatal loss), under the	disorders General
		Neither event	should be reporte	ed as a grade 5 event.	

Describe Event

The **Describe Event** page displays with variations to the field labels in AdEERS.



This field has a limit of 4,000 characters.

Course/Cycle

The **Course/Cycle** page displays with slight variations compared to AdEERS.

Study Interventions - Agents

The **Agents** intervention page displays with slight variations compared to AdEERS.

Other Study Interventions

The **Devices, Surgery** and/or **Radiation** intervention page displays, if applicable to the protocol. Very few studies include these interventions at this time.

Subject Details – General

The **Subject Details** section includes several pages, starting with the **General** page.

Subject Details – Disease Information

The Subject Details, Disease Information section is mandatory for all expedited reports.

	- Disease	The Other (disease) field only displays when <i>Hematopoietic malignancy, NOS</i> or <i>Solid tumor, NOS</i> is selected from the Disease name field.	?
	Instructions En	nter the appropriate study disease / condition information for the subject.	
	* Disease nam	ne 🔽	
	Other (disease	e)	
	* Primary site o diseas	Df Begin typing here Show All	
_/	Date of initia diagnosi	al / III is MM YYYYY	
Enter all fields bet continuir next pag	mandatory fore ng to the e.		

Scroll down to the **Metastatic Disease Site** page.

Subject Details – Metastatic Disease Site

The **Subject Details, Metastatic Disease Site** section is optional for adverse event reporting.

Scroll down to the **Pre-Existing Conditions** page.

Subject Details – Pre-Existing Conditions

The Subject Details, Pre-Existing Conditions section is optional for adverse event reporting.

Scroll down to the **Concomitant Medications** page.

Subject Details – Concomitant Medications

The Subject Details, Concomitant Medications section is optional for adverse event reporting.

Scroll down to the **Prior Therapies** page.

Subject Details – Prior Therapies

The **Subject Details, Prior Therapies** section is mandatory for all expedited reports.

Other Causes

The **Other Causes** page is optional for adverse event reporting.

Labs

The **Labs** page is optional for adverse event reporting.

Attribution

The **Attribution** page is mandatory for all expedited reports.

Attribution Instructions For each ad Note: Depending of	lverse event, attribute the l on the rules for this report,	For each select ar the list o	n possible cause, n attribution from of values.	(?)	
attribution. Possible cause	Primary AE SEVERE Dyspepsia: stomach pain	AE 2 SD Nau Que 55		The adverse event m	ust have at
Disease Gastrointestinal stromal tumor Study Agent 724772::Sorafenib (BAY				least <u>one</u> cause with a attribution (i.e., Possi or Definite) to submit	a positive ble, Probable, t the report.
43-9006; Nexavar) (125mg)	·				

🖅 Save & Back

Additional Info

The **Additional Info** page is optional for adverse event reporting. Some fields may not be available depending on the protocol and commercial agent reporting requirements.

The **Review and Submit** page automatically displays sections that require additional information. There are several steps to complete before you can submit the report.

Once expanded, a description of the needed information will be provided as well as a link to the section.

The page requiring additional information displays.

The **Review and Submit** page displays with the corrected section removed. Repeat this process until all sections are complete.

The **Review and Submit** page indicates that the physician signoff must be completed.

Complete the **Review and Submit** page physician signoff and begin the submission process.

Review and Submit - Submitter

The **Submitter** page displays.

Review and Submit - Recipients

The **Recipients** page displays the email addresses of the reporter, physician and submitter.

Review and Submit - Submission Status

The **Submission Status** page displays the successful submission message.

Manage Reports

The **Manage Reports** module provides access to initiated or previously submitted reports and provides options to amend submitted reports or withdraw pending reports.

Manage Reports – Select study and subject

The **Select study and subject** page displays.

	Enter the access key (ticket number, protocol number and subject ID).	
Select study and 'Ticket Number 'Study Regin of 'Subject ID	subjec	2
		Continue →

Manage Reports – Overview

is Withdrawn, Initiated, not submitted or

Overdue.

The **Manage Reports** page displays the information associated with the report.

include: *Edit, Withdraw, Export, Amend, View the Report* or *View Recipients*.

Manage Reports – Edit Option **Edit V**

By selecting **Edit** from the options under the **Action** button, you can add or modify information, then submit report.

Manage Reports – Amend Option

By selecting **Amend** from the options under the **Action** button, you can modify and submit a previously submitted report. Note that the 24-hour notification cannot be amended.

Manage Reports – Withdraw Option

By selecting **Withdraw** from the options under the **Action** button, you can remove a pending report from the system.

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Manage Reports – View Recipients Option

By selecting View Recipients from the options under the Action button, you can access the list of persons who have received the report.

Thank you for participating in the CTEP-AERS training course!

Additional Resources

NCI Guidelines for Investigators: Adverse Event Reporting Requirements for DCTD (CTEP and CIP) and DCP INDs and IDEs.

http://ctep.cancer.gov/protocolDevelopment/electronic_applications/docs/aeguidelines.pdf

NCI CTEP Help Desk (technical issues)

email: ncictephelp@ctep.nci.nih.gov phone: 1-888-283-7457 fax: (301) 948-2242

AEMD Help Desk (medical questions)

email: aemd@tech-res.com phone: (301) 897-7497 fax: (301) 230-0159

CTEP-AERS Training Guide

http://ctep.cancer.gov/protocolDevelopment/electronic applications/docs/CTEP-AERS Training Guide.pdf

CTEP-AERS Online Help

Click any help link within the CTEP-AERS application.