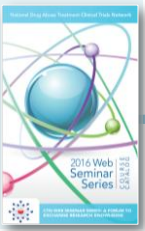


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CTN INVESTIGATOR TOOLBOX – AN ORIENTATION

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CTN WEB SEMINAR SERIES:
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Learning Objectives

- Identify the location of the CTN Policies and Procedures, Bylaws, and the Investigator Toolbox.
- Describe the structure and some of the main tools and documents within each section of the Toolbox.
- Understand the ways in which the Toolbox can be used as a resource for those involved in developing, implementing and managing clinical trials.

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Investigator Toolbox Development and Origin

- CTN Policies and Procedures Guide V6.0 – recently updated: <http://www.ctndsc2.com/>
– Reminder - CTN studies must comply with all federal policies and the P&P provides highlights
- Current ByLaws: <http://www.ctndsc2.com/>
– Inclusion of new definitions and new CTN structure
- Request for Applications (RFA) number: RFA-DA-15-008 (The NDAT CTN UG1): <http://grants.nih.gov/grants/guide/rfa-files/RFA-DA-15-008.html>

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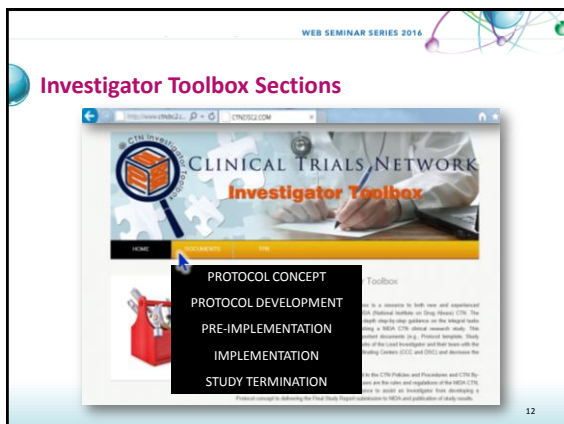
Investigator Toolbox Development and Origin

- The Toolbox provides elaboration and details on the CTN Policies & Procedures document sections.
- This website is dynamic, with new documents, updates, and resources added frequently.
- Suggestions from users are always welcome.

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The Clinical Trials Network Investigator Toolbox

- The Clinical Trials Network (CTN) Investigator Toolbox is a resource designed to provide guidance to both new and experienced investigators that are conducting studies within the NIDA (National Institute on Drug Abuse) CTN.
- The Toolbox provides templates and examples for key documents and in-depth step-by-step guidance on the integral tasks associated with developing, implementing, and publishing a NIDA CTN clinical research study.



Protocol Concept

- Protocol Concept Introduction
- Design and Analysis SIG input on early-phase trials in the CTN
- Research Development Committee (RDC)- CTN concept submission and review process and procedures

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Concept Submission Procedures

Research Development Committee
CTN Concept Submission and Review Process and Procedures

General Guidelines for CTN Concepts

- The RDC reviews all CTN study concepts including those that are submitted investigators or special interest groups as investigator-related concepts and those that are in response to specific CTN requests for concepts.
- All CTN study concepts should be no more than 3 pages (not including separate title page and references), with [Appendix 11.1.1.1](#) and [Appendix 11.1.1.2](#) as separate title page and references.
- Concepts proposing ancillary studies need to be accompanied by a letter from the Lead Investigator(s) of the primary/parent protocol indicating that the ancillary concept has been reviewed and approved by the Lead Team.
- Concepts proposing ancillary genetics studies need to follow the specific guidelines developed jointly by the CCIN and the NDA Genetics Consortium.
- CTN study concepts should be submitted to the RDC Chair, [Dennis Dorman, \[ddorman@nctn.org\]\(mailto:ddorman@nctn.org\)](#), with a copy to the CCIN RDC, [Dr. Geoffrey Kohn, \[geoffrey.kohn@nctn.org\]\(mailto:geoffrey.kohn@nctn.org\)](#).
- Concepts are reviewed using current NCI categories: [Overall Impact, Significance, Innovation, Approach, and Endpoints](#). Consideration is also given to the [L1, N1, and L2 categories](#).
- [http://nctn.org/nci/nci-review-process.html#review](#)
- Additionally, concepts are considered with respect to feasibility, stage of science and readiness for multiple trials, and scientific and potential sustainability of the interventions. See [http://nctn.org/nci/nci-review-process.html#review](#) for more information. CTN involvement of CTP representatives in the concept development and study design is strongly encouraged.

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Protocol Development

- Protocol Template
- Management of Key Study Documents
- Protocol Review Board/DSMB
- Registering a CTN Study on ClinicalTrials.gov
- Important Study Responsibilities
- Multicenter Trial Start Up and Timeline
 - Pre-Implementation Calculator
 - Protocol Timeline/Milestone Calculator

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 The College of American Pathologists
verifies that the laboratory named below

Medical Laboratories
[Redacted] **MD**
[Redacted] **Virginia**

Lab # [Redacted]
CLIA # [Redacted]
NCLAP # [Redacted]

Accredited Laboratory

 has met all applicable standards for accreditation and is hereby accredited by the College of American Pathologists' Laboratory Accreditation Program. Inspection should occur prior to May 2, 2019 for mutual accreditation.

Accreditation does not necessarily involve a change in direct ownership, in staffing and management, or in any requirements set by CMS.

Signature _____ *Signature* _____
Chief, Laboratory Accreditation President, College of American Pathologists

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graph TD
    A[Information gathering] --> B[If there is only 1 RCT with a full-text version of the study (this information can be found in the WHO database)]
    A --> C[If there are 2 or more studies with a full-text version of the study (this information can be found in the WHO database)]
    B --> D[If there is only 1 RCT with a full-text version of the study (this information can be found in the WHO database)]
    C --> E[If there are 2 or more studies with a full-text version of the study (this information can be found in the WHO database)]
    D --> F[Then both RCTs will be CRF]
    E --> F
  
```

Information gathering

If there is only 1 RCT with a full-text version of the study (this information can be found in the WHO database)

If there are 2 or more studies with a full-text version of the study (this information can be found in the WHO database)

If there is only 1 RCT with a full-text version of the study (this information can be found in the WHO database)

If there are 2 or more studies with a full-text version of the study (this information can be found in the WHO database)

Then both RCTs will be CRF

For RCTs "Risks of bias" (ROB) [2008]

ROB requires:

- 1) First looking into 4 of 6 items
- 2) ROB will be as 0, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150, 151, 152, 153, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 164, 165, 166, 167, 168, 169, 170, 171, 172, 173, 174, 175, 176, 177, 178, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 229, 230, 231, 232, 233, 234, 235, 236, 237, 238, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251, 252, 253, 254, 255, 256, 257, 258, 259, 260, 261, 262, 263, 264, 265, 266, 267, 268, 269, 270, 271, 272, 273, 274, 275, 276, 277, 278, 279, 280, 281, 282, 283, 284, 285, 286, 287, 288, 289, 290, 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, 362, 363, 364, 365, 366, 367, 368, 369, 370, 371, 372, 373, 374, 375, 376, 377, 378, 379, 380, 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739,

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Study Termination Final Study Report Preparation

Final Study Report Preparation

Introduction and Purpose

Lead investigators will submit a final study report to NIDA CCRN within four months of database lock.

In general, the Final Study Report should include sufficient detail to allow an understanding of the study, not just focus on the data collected in the study, utilizing the primary outcome identified in the protocol and Statistical Analysis plan to address the primary outcome statement. When the data tables may generate additional length, it is expected that the last portion of the Final Study Report will be approximately 20 pages. The following sections should be included:

- 1. Descriptive Information**
 - CCRN number and CCRN title of the protocol, version number and date of the last protocol
 - The name, role, and mailing address of the lead investigator and each co-investigator
 - The specific community treatment programs or sites where the study was performed
 - Dates for enrollment of the first participant and final completions of the last participant
 - Date of the Final Study Report, along with signature
 - Brief executive summary of the goals and results presented
- 2. Rationale and Aims of the Study (short description from the protocol)**
- 3. Clinical Trial Design (short description from the protocol)**
- 4. Statistical Analysis**
 - Primary analyses only, per the original protocol and a statement of the conclusions drawn from this analysis
 - Primary outcome analyses may include sensitivity of the primary outcome to missing data and investigation of site effects and interactions, consistent with the primary analysis approach defined in the protocol and/or statistical analysis plan
 - Primary analysis by sex/gender and race/ethnicity per NIDA P-values
 - Results from any interim analyses, and any modifications made

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Investigator Toolbox Next Steps

- Add more materials and examples.
- Obtain feedback on existing content and ideas for new tools, documents, and materials – direct comments to the Toolbox support team at:
 CTNtoolbox@emmes.com
- Share materials developed by others (e.g., site tools that may be relevant for other study sites).
- Alternatively, contact Dee Blumberg directly at dblumberg@emmes.com.

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Questions / Comments

Alternatively, questions can be directed to the presenter(s) by sending an email to CTNtraining@emmes.com.

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Next Topic...

**CTN-0044 WEB-TX: A
Review of the Primary
and Secondary
Outcomes**

**Wednesday, May 25, 2016
at 1:00 pm ET**

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CTN Web Seminar Series: A Forum to Exchange Research Knowledge

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