#### **NCI CLINICAL TRIALS REPORTI**

Public reporting burden for this collection of information is estimated for reviewing instructions, searching existing data sources, gather the collection of information. An agency may not conduct or spocollection of information unless it displays a currently valid OME estimate or any other aspect of this collection of information, incl. Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, M completed form to this address.

#### **NG PROGRAM (CTRP) SYSTEM**

OMB No.: 0925-0600 Expiration Date: 08/31/2019

ated to average 30 minutes per response, including the time and maintain the data needed, and complete and review nsor, and a person is not required to respond to, a 3 control number. Send comments regarding this burden luding suggestions for reducing this burden to: NIH, Project D 20892-7974, ATTN: PRA (0925-0600). Do not return the

# CTRP Trial Registration Batch Upload Specificatio

#### **About this Document**

This document provides you with everything you need to know to upload clinical trial data to the

### **Template Instructions**

The Template Instructions worksheet provides detailed instructions for preparing yo

#### Sample Trial Data

The Sample Trial Data worksheet provides an example of what a typical batch uplc **Note:** The worksheet that contains your trial data MUST always be the FIRST work

#### **Trial Data Pick List**

The *Trial Data Pick List* worksheet contains sets of valid values for many of the dat The values are displayed in pick lists when you select an appropriate data element The pick lists have been provided to assist you in filling out these cells quickly and However, if you prefer, you can type the values instead.

**Note:** The drop-down lists will not work if you delete this worksheet.

#### **Trial Data Element Specifications**

The specifications worksheet includes the following information:

- 1 Data elements
- 2 Order in which the data elements *must be* presented. The element orde
- 3 Data element requirements. Requirements differ for original, updated, a
- 4 Valid values. The system accepts only those values listed in this docum
- 5 Comments. Additional information that helps you to ensure successful

#### **NIH and NCI Values**

The NIH & NCI Values worksheet provides all acceptable values for the following d

- 1 Funding Mechanisms
- 2 Institute Codes
- 3 NCI Division/Program Codes
- 4 NIH Institute Codes

#### **NCI Code Definitions**

The NCI Division/Program Code Definitions worksheet lists the long form of each o

## **Country Codes**

The Country Codes worksheet lists the 3-letter country codes for all countries that s

#### **State and Province Codes**

The State and Province Codes worksheet lists the 2- or 3-letter state/province/territ

## **Oversight Authorities**

The Oversight Authorities worksheet lists the names of oversight authorities for all

## **Trial Status Date Diagram**

The Trial Status Date diagram illustrates the relationships between trial start dates,

# <u>n for Complete Trials</u>

e CTRP Trial Registration system, including the following:
our data and uploading them to the system.
ad file looks like. sheet (tab) in the file.
a elements in the <i>(Sample) Trial Data</i> worksheet. cell. accurately.
er is set up for you in columns in the Sample Trial Data tab. and amended submissions. nent. upload of your data.
ata elements:

f the division/program acronyms.

submit clinical trial data to the CTRP system.

:ory codes for the United States, Canada, and Australia.

countries that submit clinical trial data to the CTRP system.

primary completion dates, and completion dates.

# How to Up

### **Before You 1**

Contact the CTRO Note: Once you ha

# **Main Steps f**

- 1 Prepare t
- 2 Prepare t
- 3 Upload yo

# **Preparing T**

- 1 Ensure th
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- 2 Create a
- 3 Copy the Most cells
- 4 Delete the

5 Click the

Arrows a

5a. If arro

5b. If no a

#### You mus

- \* List trial
- \* Do not (
- \* Conforn
- \* Identify

6 Delete all

7 Delete the

# **Preparing T**

1 Prepare a

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If using tr

3 Provide th

4 Zip all tria

The trial (

Note: Sor

# **Uploading Y**

1 Open yo

2 Follow the

https://wiki.

# oload Clinical Trial Data to the CTRP Trial Registration S

#### Begin

at ncictro@mail.nih.gov to request approval for sending batch files to CTRP. Include your login name, firs ve received approval, you do not have to request approval for subsequent uploads.

## or Uploading Your Data

he trial data file.

he trial documents Zip file.

our files to the CTRP system via the NCI Trial Registration application batch upload web page at https://trial

#### rial Data Files

nat your trial conforms to the supported criteria. This template supports the following:

rentional trials

plete (Data Table 4 Funding Sponsor Category is 'National', 'Externally Peer-Reviewed' or 'Institutional') triandments to complete CTRP trials with "Abstraction Verified Response" or "Abstraction Verified No Response tes to complete CTRP trials with the processing status "Accepted" and beyond rials per data file

ole grants per submitted trial

ole IND/IDE per submitted trial

eric contacts for Responsible Party or Sponsor

ole "Other" trial identifiers

**Tip**: You can add NCT IDs when updating or amending registered trials.

**Note**: You can request a list of CTRP persons and organizations along with PO-IDs from the CTRO at ncictro@mail.nih.gov.

Or, you can use the search organization/person feature in the CTRP Trial Registration application to ascer

new Excel spreadsheet (.xls) that will contain the mandatory and optional data for the trial(s) as specified i

Sample Trial Data and Trial Data Pick List tabs to your new spreadsheet.

s on the Sample Trial Data tab for which there are a defined set of valid values have drop-down lists. Thes

e sample data from the Sample Trial Data tab in your new spreadsheet. Optionally, you can rename the tal

cell in which you want to enter data.

re displayed whenever a drop-down list is available.

ws are displayed next to the cell, click the arrow and select the appropriate value from the drop-down list. arrows are displayed, enter the appropriate information using the valid values in this template.

#### t adhere to the following requirements:

elements required for registration in the order specified in the *Trial Data Element Spec* tab in this spreads change the spelling of data elements or valid values. Changes to spelling or to the order of the trial element to the valid values guidelines when entering trial data. Valid values for each of the trial elements, where a each trial uniquely. For example, append your cancer center unique trial identifier to the file name.

empty columns that may appear after the last data element column.

e Trial Data Pick List worksheet from your new file.

#### rial Document Zip Files

a separate Zip file containing applicable trial documents (e.g. Protocol, IRB approval, Informed Consent, Pa overwriting existing files when the system extracts your latest upload, rename the document files if they are ple, prefix files with a unique trial identifier such as XXXX\_document name.doc.

ial identification prefixes, ensure that each of a given trial's document file names is unique.

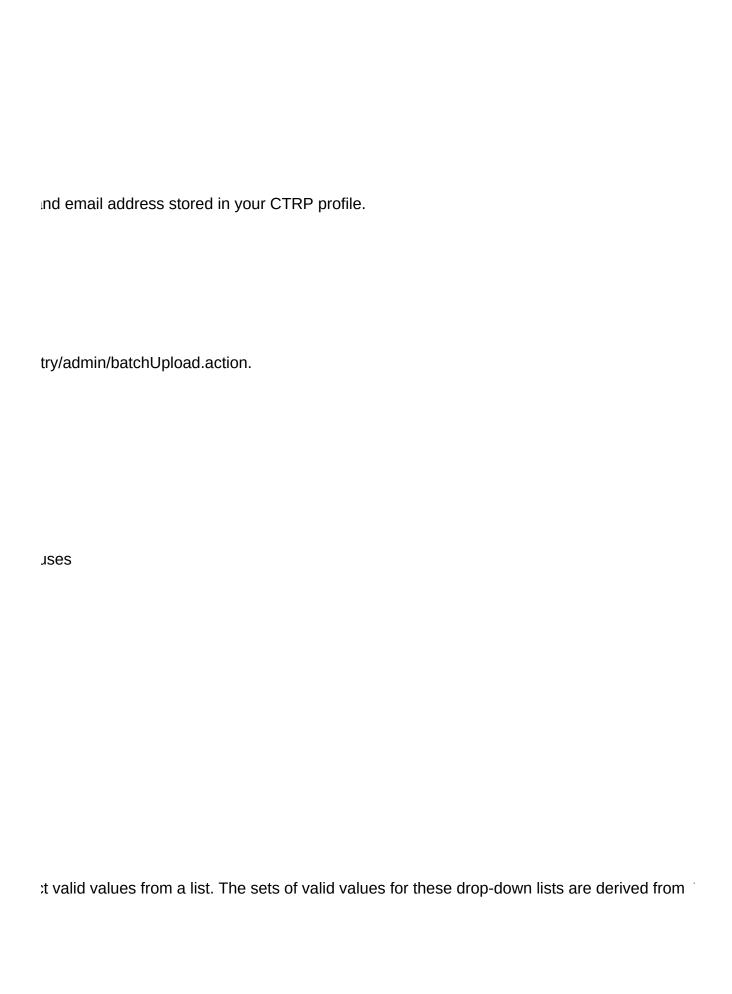
ne document names (including their extensions) in the file containing the trial data. Up to seven (7) files call-related documents. Do not include pathnames in the Zip files.

document Zip file that you intend to upload MUST NOT include folders or other Zip files. All trial-related document Zip files.

ne elements will be ignored when updating existing CTRP trials via batch upload.

#### our Files

ur browser and navigate to the NCI Trial Registration application batch upload web page at https://trials.nc e instructions provided on the Batch Trial Upload web page. For more comprehensive information, see the <a href="mailto:nci.nih.gov/x/Ey0ZCQ">nci.nih.gov/x/Ey0ZCQ</a>



load to fail. Similarly, the addition of new/extra trial elements will also cause a failure. In the <i>Trial Data Element Spec</i> or other valid value tabs in this spreadsheet.
hange Memo) for the trials in the data file. For trial amendments, you can include either a Chaetailed instructions and best practices for file preparation, refer to the CTRP Registration Site
e single trial record.
/ord documents ( .doc) or Adobe PDFs (.pdf). No other file types are currently accepted. Zip f
lmin/batchUpload.action.  1 User's Guide at:







	А	В	С	D	E	F
1	Unique Trial Identifier	Submission Type	NCI Trial Identifier	Amendment Number	Amendment Date	Lead Organization Trial Identifier
2	10	0				53112
3	1000	A	NCI-2009- 00001	A1	39938	1234
4	2001	0				12345
5	3000	O				65432
6	4000	O				1233
7	5000	U	NCI-2009- 00001			12308

	G	Н	I	J	K
1	NCT	Other Trial Identifier	Title		Primary Purpose
2	NCT000123	123;123-A	A Phase I study of Taxol in refractory leukemia in children	Interventional	Treatment
3	NCT00045		Phase III Study of Zoladex Adjuvant to Radiotherapy in Unfavorable Prognosis Carcinoma of the Prostate	Interventional	Treatment
4			A Phase I trial of Ifosfamide and Taxol in refractory Pelvic Malignancies	Interventional	Treatment
5			Phase III study of priming with granulocyte-macrophage colony stimulating factor (rhu-gm-csf)and of three induction regimens in adult patients (over 55) with acute non-lymphocytic leukemia	Interventional	Treatment
6			Phase III Comparison of Methotrexate, Vinblastine, Doxorubicin, and Cisplatin (MVAC) vs. Doxorubicin and Cisplatin (AC) in Women with Advanced Primary or Recurrent Metastatic Carcinoma of the Uterine Endometrium	Interventional	Other
7	NCT009876	321-12	An Open-Labeled, Non- Randomized Phase I Study of Alvocidib (Flavopiridol) Administered with Oxaliplatin and Fluorouracil/Leucovorin in Patients with Advanced Solid Tumors	Interventional	Treatment

	L	М	N	0	Р	Q
	Purpose]	[Primary Purpose] Other Text	Phase		[Sponsor] Organization PO-ID	Responsible Party
2			I			Principal Investigator
3			III			Sponsor
4			1		654512	Sponsor
5			111			Principal Investigator
6	Other	Laboratory	NA	Yes	87654	Sponsor
7			I			Sponsor

	R	S	Т	U	V	W
1	[Responsible Party] Investigator Person PO-ID	[Responsible Party] Title	[Responsible Party] Affiliation Organization PO-ID	[Lead Organization] Organization PO-ID	[Principal Investigator] Person PO-ID	Data Table 4 Funding Category
2		Principal Investigator	123		1234	Institutional
3						Institutional
4					87456	Institutional
5	1234	Principal Investigator		12345		Institutional
6					45689	Institutional
7						Institutional

	X	Υ	Z	AA	AB
1	[Data Table 4 Funding Sponsor/Source] Organization PO-ID		[NIH Grant] Funding Mechanism	[NIH Grant] Institute Code	[NIH Grant] Serial Number
2			F34	AG	72345
3					
4		IM	K08;CO6	HV;AO	97521;012345
5					
6					
7		BR			

	AC	AD	AE	AF	AG	АН
		Current Trial Status	Why Study Stopped?	Current Trial Status Date	Study Start Date	Study Start Date Type
2	CTEP	Complete		8/1/2010	2/1/2009	Actual
3			Accrual target was reached for this phase of the study	8/2/2009	1/2/2009	Actual
4	CTEP;CTEP	In Review		8/3/2009	12/3/2010	Anticipated
5		Approved		8/4/2009	12/4/2010	Anticipated
6			Closed prematurely	8/5/2009	1/5/2009	Actual
7		Approved		8/1/2009	12/1/2010	Anticipated

	Al	AJ	AK	AL	AM	AN	AO
1	Completion Date	Completion	Study Completion Date	Study Completion Date Type	IND/IDE Type	IND/IDE Number	IND/IDE Grantor
2	08/01/10	Actual					
3	10/02/11	Anticipated					
4	10/3/2011	Anticipated					
5	9/4/2012	Anticipated					
6	8/5/2009	Actual			IND;IND	67899;10,264	CDER;CDER
7	12/1/2011	Anticipated					

	AP	AQ	AR	AS	AT	AU	AV
	IND/IDE Holder Type		[IND/IDE] NCI Division /Program	[IND/IDE] Availability of Expanded Access?	[IND/IDE] Expanded Access Record	FDA regulated	Studies a US FDA regulated Device Product
2						Yes	
3						Yes	
4						Yes	
5						Yes	
6	NIH;NCI	NIA;NA	NA;DCP	Yes;	NCT0123456 7;	Yes	
7						Yes	

	AW	AX	AY	AZ	BA	ВВ
1		Pediatric Post-Market Survelliance	Exported from the US	FDA Regulatory Information Indicator	Indicator	Data Monitoring Committee Appointed Indicator
2				No		Yes
3				No		Yes
4				Yes	Yes	Yes
5						
6				No		Yes
7				No		Yes

	BC	BD	BE
1	Protocol Document File Name	IRB Approval Document File Name	Participating Sites Document File Name
2	protocol_document_T10.doc	IRB_Approval.doc	Participating_ Sites_T10.xls
3	protocol_document_T1000.doc	IRB_Approval_06082007.doc	Participating_ Sites_T1000_ new.xls
4	protocol_document_T2001.doc	IRB_Approval_T2001.doc	Participating_ Sites_T2001. xls
5	3000_protocol_document.doc	3000_IRB_Approval.doc	3000_Particip ating_Sites.xl s
6	4000_protocol_document.doc	4000_IRB_Approval.doc	4000_Particip ating_Sites.xl s
7			

	BF	BG	ВН	BI
	Informed Consent Document File Name	Other Trial Related Document File Name	Change Memo Document Name	Protocol Highlight Document Name
2	10_Informed_Consent.PDF	10_Other_do cument.doc		
3			Change_mem o_doc.doc	
4	Informed_Consent_T2001.PDF	Other_docum ent_T2001.do c		
5	3000_Informed_Consent.PDF	3000_Other_ document.doc		
6	4000_Informed_Consent.PDF	4000_Other_ document.doc		
7				

Submissio	n TypeYes_No	Trial Type	Primary Purpose	Primary Purpose Additional Quali
Α	No	Interventiona	I Basic Science	Other
0	Yes	Observationa	l Diagnostic	
U			Health Services Rese	earch
			Other	
			Prevention	
			Screening	
			Supportive Care	
			Treatment	

Phase	Country Co	d(State Code	Responsible PartSponsor Contact TypData Table 4 Funding Cate	
Phase  Early Phase  I I/II II II/III III IV NA	I ABW AFG AGO AIA ALA ALB AND ANT ARE ARG ARM ASM ATA ATF	AK AL AR AZ CA CO CT DE FL GA HI IA ID IL	Principal Investiga Personal Sponsor Generic Sponsor Investigator	National Externally Peer-Reviewed Institutional
	ATG AUS AUT AZE BDI BEL BEN BFA BGD BGR BHR BHS BIH BLM BLZ BMU BOL BRA BRN BTN BVT BWA CAF CAN CCK	IN KS KY LA MD ME MI MN MS MT NC ND NE NJ NN NY NY OK OR PA RI SC SD		
	CHE CHL CHN CIV CMR COD COG COK	TN TX UT VA VT WA WI WV		

COL WY COM  $\mathsf{AB}$ CPV ВС CRI MB CUB NB NLCXR NS CYM CYP  $\mathsf{NT}$ CZE NU DEU ON DJI PΕ DMA QC SK DNK YTDOM ACT DZA ECU NSW EGY NT ERI QLD **ESH** SA **ESP TAS** VIC **EST** WA ETH FIN FJI FLK FRA FRO  $\mathsf{FSM}$ GAB GBR **GEO GGY** GHA GIB GIN GLP GMB **GNB** GNQ **GRC** GRD GRL **GTM** GUF GUM **GUY** HKG **HMD** 

HND HRV HTI HUN

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**IRQ** 

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KHM

KIR

KNA

KOR **KWT** 

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LBN

LBR

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MAC

MAF

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MDA MDG

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MEX

MHL

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MLI

MLT

MMR

MNE

MNG MNP

MOZ

MRT

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YEM

ZAF

ZMB

**ZWE** 

#### NIH Grant Funding Mechanis NIH Grant Institute CodeNCI Division/Program Code

CCR
CCT/CTB
CTEP
DCB
DCCPS
DCEG
DTP
DCP
DEA
OD
OSB/SPORES

CIP CDP TRP RRP N/A

K23 K24 K25 K26 K30 K99 KD1 KL1 KL2 L30 L32 L40 L50	HK HL HM HO HP HR HS HV HX HY IP JT LM MD
M01	MH
N01	MN
N02	NB
N03	NH
N43 N44	NR
P01	NS NU
P20	OA
P30	OC
P40	OD
P41	OF
P42	OH
P50	OL
P51	OR
P60	PC
P76	PH
PL1	PR
PN1	PS
PN2	RC
R00	RD
R01	RG
R03	RM
R04	RR
R06	RX
R08	SC
R13	SF
R15	SH
R17	SM
R18	SP
R21	SU
R24	TI
R25	TP
R30	TS
R33	TW
R34	VA
R36	WC
R37	WH

R41 R42 R43 R44 R49 R55 **R56** R90 RC1 RC2 RC3 RC4 RL1 RL2 RL5 RL9 RS1 S06 S10 S11 S21 S22

WT

T02 T03 T06 T09 T14 T15 T32 T34 T35

SC1 SC2 SC3 T01

T42 T90 TL1 TU2

T36 T37

U01 U09 U10 U11

U13 U14 U17 U18

U19 U1A U1Q

U1S

U1T

U1V

U21

U22

U23

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U27

U2G

U2R

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**U57** 

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UC6

UC7

UD1

UE1

UE2

UH1

UH2

UH3

UL1

UR1

UR3 UR6

UR8

US3

US4

UT1

UT2

VF1

X01

X02

X06

X98

Y01

Y02

Z01 Z02

### **Current Trial Status**

## Date Type IND/IDE TypeIND/IDE GrantoiIND/IDE Holder Typ

In Review Actual IND CDER Investigator Organization Approved Anticipated IDE CBER Active CDRH Industry NIH Closed to Accrual Closed to Accrual and Intervention NCI Temporarily Closed to Accrual

Temporarily Closed to Accrual and Intervention

Complete Administratively Complete

Withdrawn

#### **NIH Institution**

**NEI-National Eye Institute** 

NHLBI-National Heart, Lung, and Blood Institute

NHGRI-National Human Genome Research Institute

NIA-National Institute on Aging

NIAAA-National Institute on Alcohol Abuse and Alcoholism

NIAID-National Institute of Allergy and Infectious Diseases

NIAMS-National Institute of Arthritis and Musculoskeletal and Skin Diseases

NIBIB-National Institute of Biomedical Imaging and Bioengineering

NICHD-Eunice Kennedy Shriver National Institute of Child Health and Human Develop

NIDCD-National Institute on Deafness and Other Communication Disorders

NIDCR-National Institute of Dental and Craniofacial Research

NIDDK-National Institute of Diabetes and Digestive and Kidney Diseases

NIDA-National Institute on Drug Abuse

NIEHS-National Institute of Environmental Health Sciences

NIGMS-National Institute of General Medical Sciences

NIMH-National Institute of Mental Health

NINDS-National Institute of Neurological Disorders and Stroke

NINR-National Institute of Nursing Research

NLM-National Library of Medicine

CIT-Center for Information Technology

CSR-Center for Scientific Review

FIC-John E. Fogarty International Center for Advanced Study in the Health Sciences

NCCAM-National Center for Complementary and Alternative Medicine

NCMHD-National Center on Minority Health and Health Disparities

NCRR-National Center for Research Resources (NCRR

CC-NIH Clinical Center

OD-Office of the Director

# **IND/IDE Expanded Access Status**

Available No longer available Temporarily not available Approved for marketing

ment

Trial elements Order	Trial data element	Required for original submission
1	Unique Trial Identifier	Yes
2	Submission Type	Yes
3	NCI Trial Identifier	
4	Amendment Number	
5	Amendment Date	
6	Lead Organization Trial Identifier	Yes
7	NCT	
8	Other Trial Identifier	

9	Title	Yes
10	Trial Type	Yes
11	Primary Purpose	Yes
12	[Primary Purpose] Additional	Yes if Primary Purpose is 'Other'
	Qualifier	
13	[Primary Purpose] Other Text	Yes if Primary Purpose is 'Other'
14	Phase	Yes
15	Pilot Trial?	
16	[Sponsor] Organization PO-ID	Yes
17	Responsible Party	
	,	
18	[Responsible Party] Investigator	Yes if 'Responsible Party' is PI or
19	Person PO-ID [Responsible Party] Title	Sponsor Investigator Yes if 'Responsible Party' is PI or
	, , , , , ,	Sponsor Investigator
20	[Responsible Party] Affilliation Organization PO-ID	Yes if 'Responsible Party' is PI or Sponsor Investigator
21	[Lead Organization] Organization PO-ID	Yes
22	[Principal Investigator] Person PO-ID	Yes
23	Data Table 4 Funding Category	Yes
24	[Data Table 4 Funding Sponsor/Source] Organization	Yes
	PO-ID	

25	Program Code	
26	[NIH Grant] Funding Mechanism	Yes: if NIH grant exists
27	[NIH Grant] Institute Code	Yes: if NIH grant exists
28	[NIH Grant] Serial Number	Yes: if NIH grant exists
29	[NIH Grant] NCI Division/Program Code	Yes: if NIH grant exists
30	Current Trial Status	Yes
31	Why Study Stopped?	Yes if Current Trial Status is Withdrawn, Temporarily Closed to Accrual, Temporarily Closed to Accrual and Intervention or Administratively Complete
32	Current Trial Status Date	Yes
33	Study Start Date	Yes

34	Study Start Date Type	Yes
35	Primary Completion Date	Yes
36	Primary Completion Date Type	Yes
37	Study Completion Date	
38	Study Completion Date Type	Voc. if IND/IDE trial
39	IND/IDE Type	Yes: if IND/IDE trial
40	IND/IDE Number	Yes: if IND/IDE trial
41	IND/IDE Grantor	Yes: if IND/IDE trial
42	IND/IDE Holder Type	Yes: if IND/IDE trial

43	[IND/IDE] NIH Institution	Yes If IND/IDE trial AND (IND/IDE Holder Type) = NIH
44	[IND/IDE] NCI Division /Program	Yes if IND/IDE trial AND If (IND/IDE Holder Type) = NCI
45	[IND/IDE] Availability of Expanded Access Expanded Access?	Yes if IND/IDE trial
46	[IND/IDE] Expanded Access Record	If (Has Expanded Access?) = Yes
47	Studies a US FDA regulated Drug Product	
48	Studies a US FDA regulated Device Product	
49	Unapproved/Uncleared Device	
50	Pediatric Post-Market Survelliance	
51	Product Exported from the US	
52	FDA Regulatory Information Indicator	
53	Section 801 Indicator	Yes if FDA Regulatory Information Indicator is 'Yes'
54	Data Monitoring Committee Appointed Indicator	
55	Protocol Document File Name	Yes

56	IRB Approval Document File Name	Yes
57	Participating Sites Document File Name	
58	Informed Consent Document File Name	
59	Other Trial Related Document File Name	
60	Change Memo Document Name	

61	Protocol Highlight Document Name	

Required for amendment	Required for update	Valid Values
Vee	Vac	
Yes	Yes	O, A, U
Yes	Yes	
Yes		
Yes		

Yes		Max 4000 characters
Yes	Yes	Interventional, Observational
Yes	Yes	Treatment, Prevention, Supportive Care, Screening, Diagnostic, Health Service Research, Basic Science, Other
Yes if Primary Purpose is 'Other'	Yes if Primary Purpose is 'Other'	Other
Yes if Primary Purpose is 'Other'	Yes if Primary Purpose is 'Other'	
Yes	Yes	Early Phase I, I, I/II, II, II/III, III, IV, NA, Yes, No
Yes		
		PI, Sponsor, Sponsor Investigator
Yes if 'Responsible Party' is PI or Sponsor Investigator	Yes if 'Responsible Party' is PI or Sponsor Investigator	
Yes if 'Responsible Party' is PI or Sponsor Investigator	Yes if 'Responsible Party' is PI or Sponsor Investigator	
Yes if 'Responsible Party' is PI or Sponsor Investigator	Yes if 'Responsible Party' is PI or Sponsor Investigator	
Yes		
Yes		
Yes	Yes	National, Externally Peer- Reviewed, Institutional
Yes	Yes	- Constant of the Constant of

Yes: if NIH grant exists	Yes: if NIH grant exists	Refer Funding Mechanism in Valid Values worksheet.
Yes: if NIH grant exists	Yes: if NIH grant exists	Refer Institute Code in Valid Values worksheet.
Yes: if NIH grant exists	Yes: if NIH grant exists	format: 5 or 6 digits
Yes: if NIH grant exists	Yes: if NIH grant exists	Refer NCI Division/Program Code in Valid Values worksheet. Specify only the code.
Yes	Yes	In Review, Approved, Active, Closed to Accrual, Closed to Accrual and Intervention, Temporarily Closed to Accrual and Intervention, Complete, Administratively Complete are applicable to original submission, amendment and update. Withdrawn status is only applicable to Update functionality.
Yes if Current Trial Status is Withdrawn, Temporarily Closed to Accrual, Temporarily Closed to Accrual and Intervention or Administratively Complete	Yes if Current Trial Status is Withdrawn, Temporarily Closed to Accrual, Temporarily Closed to Accrual and Intervention or Administratively Complete	
Yes	Yes	
Yes	Yes	

Yes		Actual, Anticipated
Yes	Yes	
Yes	Yes	Actual, Anticipated
Yes: if IND/IDE trial	Yes: if IND/IDE trial	IND, IDE
Yes: if IND/IDE trial	Yes: if IND/IDE trial	
Yes: if IND/IDE trial	Yes: if IND/IDE trial	CDER, CBER, CDRH
Yes: if IND/IDE trial	Yes: if IND/IDE trial	Investigator, Organization, Industry, NIH, NCI

Yes If IND/IDE trial AND (IND/IDE Holder Type) = NIH	Yes If IND/IDE trial AND (IND/IDE Holder Type) = NIH	Refer NIH Institution in Valid Values worksheet.
Yes if IND/IDE trial AND If (IND/IDE Holder Type) = NCI	Yes if IND/IDE trial AND If (IND/IDE Holder Type) = NCI	Refer NCI Division/Program Code in Valid Values worksheet.
Yes if IND/IDE trial	Yes if IND/IDE trial	Yes, No, Unknown
If (Has Expanded Access?) = Yes	If (Has Expanded Access?) = Yes	
		Yes, No,
		Yes, No
Yes if FDA Regulatory Information Indicator is 'Yes'	Yes if FDA Regulatory Information Indicator is 'Yes'	Yes, No
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Yes	
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### Comments

O - original submission (including the first submission to CTRP); A - amendment submission to the already published trial in CTRP; U - update to the CTRP trial. Amendment submission can be accepted only if the trial processing status is 'Abstraction Verified Response' or 'Abstraction Verified No Response'. Update can be submitted for trials that have been accepted or have processing status other than 'Submitted' and 'Rejected'. See Processing Status Transition tab for information about trial processing statuses

This element is applicable to amendment submission and update to the CTRP trials only. This is the trial identifier assigned by the CTRP. Amendment can only be accepted for trials that have 'Abstraction Verified Response' or 'Abstraction Verified No Response' processing status in CTRP. Update can be submitted for trials that have 'Accepted' status and above.

This element is applicable to amendment submission only. Use amendment number that is recorded in user's system.

This element is applicable to amendment submission only. Use date of amendment as documented in the amended protocol document. Format mm/dd/yyyy.

AS IS in the protocol document & assigned by the lead organization (unique in the lead organization system)

Unique identifier assigned to the published trials in PRS (ClinicalTrials.gov)

If more than one exists, provide them in one column separated with semicolon (;)

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Currently only Interventional trials are
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Use value 'Other' if Primary Purpose value
is 'Other' (this applies to interventional
trials only)
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Provide description if Primary Purpose is
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Will be recorded only if Phase value is NA.
Default: No

Data Table 4 element, no LOV exists, codes are specific to cancer centers

If more than one grant is recorded provide this value for all grants separated by semicolon (;)

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Defaults to N/A if not specified. If more than one grant is recorded provide this value for all grants separated by semicolon (;)

1) Trials with current trial status 'Withdrawn' are not accepted for the original submission. 2) Submission of amendment or update to existing study with Completed, Administratively Completed, Withdrawn and Disapproved current trial status are not accepted. 3) Please use 'In Review' status at submission of pre-IRB approved study.

Mandatory if Current Trial Status is Withdrawn, Temporarily Closed to Accrual, Temporarily Closed to Accrual and Intervention or Administratively Complete

Date when the status has came in effect. Format: mm/dd/yyyy

Date that enrollment to the protocol begins. Format: mm/dd/yyyy

Only current/past date (in respect to batch upload date) is accepted for actual type and only future date is accepted for anticipated type. 'Anticipated' type is valid for 'In Review' and 'Approved' and 'Withdrawn' current trial status only. 'Actual' type is valid for any other current trial status besides 'In Review', 'Approved' and 'Withdrawn'. For more information check State-Dates tab in this file.

Date that the final subject was examined or received an intervention for the purposes of final collection of data for the primary outcome, whether the clinical trial concluded according to the prespecified protocol or was terminated. Format: mm/dd/yyyy

Only current/past date (in respect to batch upload date) is accepted for actual type and only future date is accepted for anticipated type. 'Actual' type is valid for 'Administratively Complete' or 'Complete' current trial statuses only. 'Anticipated' type is valid for any other current trial status besides 'Administratively Complete' or 'Complete'. For more information check State-Dates tab in this file.

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- 1) Include file extension. 2) if you have at least two files with the same name, rename files (ex. prefix unique trial identifier to document name). 3) Submit dummy file if IRB approval is not required with the statement 'IRB' approval is not required'. 4) Submit dummy file with the following info: name of Review Board (address, phone, email) and Board Affiliation name in case of pre-IRB approved studies submission. 5) One IRB Approval is only needed.
- 1) Include file extension. 2) f you have at least two files with the same name, rename files (ex. prefix unique trial identifier to document name). 3) Requited if case of multi-site trial and if the participation sites information is not included in the protocol document. 4) If participating site changes (recruitment status, program code) or collaborator's info change occur, submit this document for amendment or update
- 1) Requited if is not included in the protocol document.2) Include file extension. 3) f you have at least two files with the same name, rename files (ex. prefix unique trial identifier to document name).
- 1) Include file extension. 2) f you have at least two files with the same name, rename files (ex. prefix unique trial identifier to document name).
- 1) This element is applicable to the amendment only and includes the changes that occurred in the protocol document due to amendment. 2) Include file extension. 3) f you have at least two files with the same name, rename files (ex. prefix unique trial identifier to document name).

1) This element is applicable to the amendment only and includes the protocol document with highlighted changes from the previous version. 2) Include file extension. 3) f you have at least two files with the same name, rename files (ex. prefix unique trial identifier to document name).

Funding Mechanism	Institute Code	NCI Division/Program Code	
B01	AA	CCR	
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B09	AF	CIP	
C06	AG	CDP	
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DP2	АМ	DCB	
DP3	AO	DCCPS	
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NIH Institution
NEI-National Eye Institute
NHLBI-National Heart, Lung, and Blood Institute
NHGRI-National Human Genome Research Institute
NIA-National Institute on Aging
NIAAA-National Institute on Alcohol Abuse and Alcoholism
NIAID-National Institute of Allergy and Infectious Diseases
NIAMS-National Institute of Arthritis and Musculoskeletal and Skin Diseases
NIBIB-National Institute of Biomedical Imaging and Bioengineering
NICHD-Eunice Kennedy Shriver National Institute of Child Health and Human Development
NIDCD-National Institute on Deafness and Other Communication Disorders
NIDCR-National Institute of Dental and Craniofacial Research
NIDDK-National Institute of Diabetes and Digestive and Kidney Diseases
NIDA-National Institute on Drug Abuse
NIEHS-National Institute of Environmental Health Sciences
NIGMS-National Institute of General Medical Sciences
NIMH-National Institute of Mental Health
NINDS-National Institute of Neurological Disorders and Stroke
NINR-National Institute of Nursing Research
NLM-National Library of Medicine
CIT-Center for Information Technology
CSR-Center for Scientific Review
FIC-John E. Fogarty International Center for Advanced Study in the Health Sciences
NCCAM-National Center for Complementary and Alternative Medicine
NCMHD-National Center on Minority Health and Health Disparities

NCRR-National Center for Research Resources (NCRR CC-NIH Clinical Center OD-Office of the Director

NCI Division/Program Code
CCR
ССТ/СТВ
CTEP
DCB
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DTP
DCP
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OD
OSB/SPOREs
CIP
CDP
TRP
RRP
N/A

Definition	
Center for Cancer Research	
Center for Cancer Training / Cancer Training Branch	
Cancer Therapy Evaluation Program	
Division of Cancer Biology	
Division of Cancer Control and Population Sciences	
Division of Cancer Epidemiology and Genetics	
Developmental Therapeutics Program	
Division of Cancer Prevention	
Division of Extramural Activities	
Office of the Director, NCI, NIH	
Organ Systems Branch (OSB) /Specialized Programs of Research Excellence (SPOREs)	
Cancer Imaging Program	
Cancer Diagnosis Program	
Translational Research Program	
Radiation Research Program	
Not applicable	

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Heard And Mc Donald Islands	HMD
Holy See (Vatican City State)	VAT
Honduras	HND
Hong Kong	HKG
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Jamaica	JAM
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Latvia	LVA
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Lesotho Liberia	LSO LBR
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Liechtenstein	LIE
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Luxembourg	LUX
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Namibia	NAM
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Niue	NIU
Norfolk Island	NFK

Northern Mariana Islands	MNP
Norway	NOR
Oman	OMN
Pakistan	PAK
Palau	PLW
Palestinian Territory	PSE
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Papua New Guinea	PNG
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Peru	PER
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Poland	POL
Portugal	PRT
Puerto Rico	PRI
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Reunion	REU
Romania	ROU
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Rwanda	RWA
Saint Barthelemy	BLM
Saint Helena	SHN
Saint Kitts And Nevis	KNA
Saint Lucia	LCA
Saint Martin (French Part)	MAF
Saint Pierre and Miquelon	SPM
Saint Vincent And The Grenadines	VCT
Samoa	WSM
San Marino	SMR
Sao Tome And Principe	STP
Saudi Arabia	SAU
Senegal	SEN
Serbia	SRB
Seychelles	SYC
Sierra Leone	SLE
Singapore	SGP
Slovakia (Slovak Republic)	SVK
Slovenia	SVN
Solomon Islands	SLB
Somalia	SOM
South Africa	ZAF

South Georgia And The South Sandwich Islan	SGS
Spain	ESP
Sri Lanka	LKA
Sudan	SDN
Suriname	SUR
Svalbard And Jan Mayen Islands	SJM
Swaziland	SWZ
Sweden	SWE
Switzerland	CHE
Syrian Arab Republic	SYR
Taiwan	TWN
Tajikistan	TJK
Tanzania	TZA
Thailand	THA
Timor-Leste	TLS
Togo	TGO
Tokelau	TKL
Tonga	TON
Trinidad And Tobago	TTO
Tunisia	TUN
Turkey	TUR
Turkmenistan	TKM
Turks And Caicos Islands	TCA
Tuvalu	TUV
Uganda	UGA
Ukraine	UKR
United Arab Emirates	ARE
United Kingdom	GBR
United States	USA
United States Minor Outlying Islands	UMI
Uruguay	URY
Uzbekistan	UZB
Vanuatu	VUT
Venezuela	VEN
Viet Nam	VNM
Virgin Islands (British)	VGB
Virgin Islands (U.S.)	VIR
Wallis And Futuna Islands	WLF
Western Sahara	ESH
Yemen	YEM
Zambia	ZMB

Zimbabwe	ZWE
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## Country UNITED STATES

## Country 3-letter codeState/Province

USA

Alabama

Alaska

Arizona

Arkansas

California

Colorado

Connecticut

Delaware

Florida

Georgia

Hawaii

Idaho

iaaiio

Illinois

Indiana

Iowa

Kansas

Kentucky

Louisiana

Maine

Maryland

Massachusetts

Michigan

Minnesota

Mississippi

Missouri

Montana

Nebraska

Nevada

**New Hampshire** 

**New Jersey** 

**New Mexico** 

**New York** 

North Carolina

North Dakota

Ohio

Oklahoma

Oregon

Pennsylvania

Rhode Island

South Carolina

South Dakota

Tennessee

		Texas Utah Vermont Virginia Washington West Virginia Wisconsin Wyoming
CANADA	CAN	Alberta British Columbia Manitoba New Brunswick Newfoundland and Labradol Northwest Territories Nova Scotia Nunavut Ontario Prince Edward Island Quebec Saskatchewan Yukon
AUSTRALIA	AUT	TUROTT
		Australian Capital Territory New South Wales Northern Territory Queensland South Australia Tasmania Victoria Western Australia

## 2-3 letter state/province cod Old values

AL

ΑK

ΑZ

AR

CA

CO

СТ

DE

FL

GΑ

ΗΙ

ID

IL

IN IA

KS

KY

LA

ME

MD

MA

MΙ

MN

MS

MO

MT

ΝE

NV NH

NJ

NM

NY

NC

ND

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SC

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VT

VA WA

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