



# CDISC-SEND COMMON ISSUES AND CDER POLICY UPDATES

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# PART I: COMMON ISSUES WITH CDISC-SEND DATA

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## Today's Topics



## SEND at the FDA



Common SEND Data Fitness Issues



FDA Communication on SEND

## It All Starts with SEND



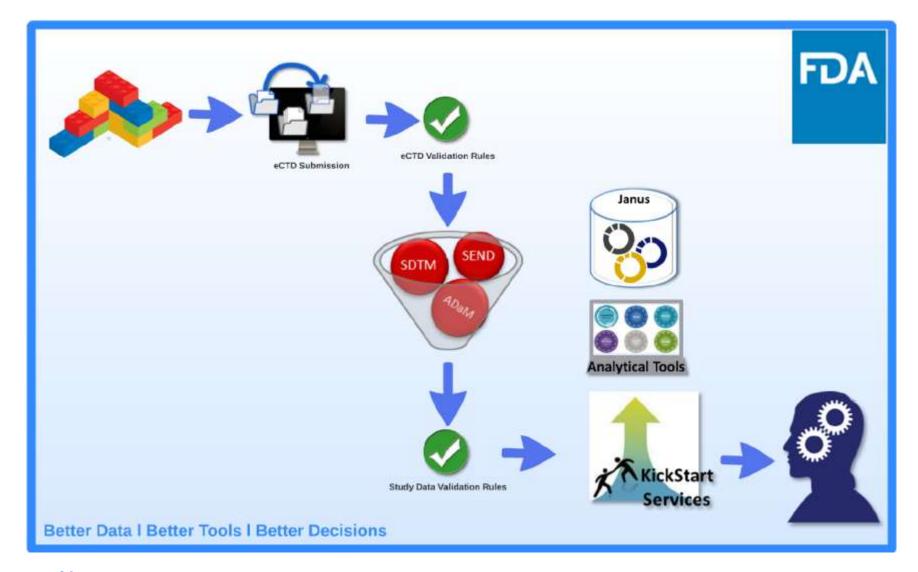


## **Key Concepts**

- Carcinogenicity, single-dose and repeat-dose toxicity, and cardiovascular and respiratory safety pharmacology currently covered by SENDIGv3.0 and SENDIGv3.1 in the FDA Data Standards Catalog.
- 2. SEND should present nonclinical data in a consistent and predictable manner.
- 3. SEND allows exploration of study data and automated creation of tables and graphs.
- Use of SEND electronic data is a process change for the reviewer community within a short timeline for many submissions.
- 5. OCS KickStart service and resources support reviewer use of SEND electronic data.

## Nonclinical Regulatory Review

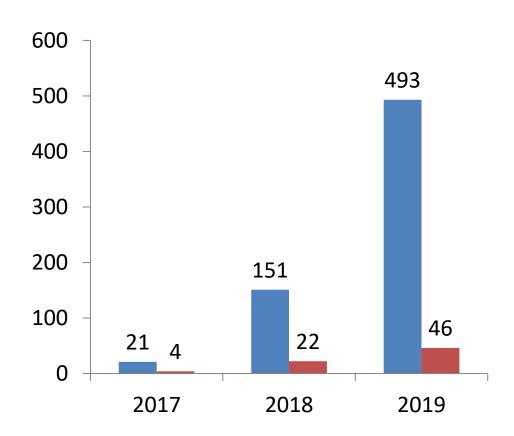












#### **Number of Applications Per Calendar Year**

The types of studies included Repeat-Dose Toxicity, Single-Dose Toxicity, and Carcinogenicity. FDA has received 735 applications with SEND data during this time period.

## Janus Nonclinical

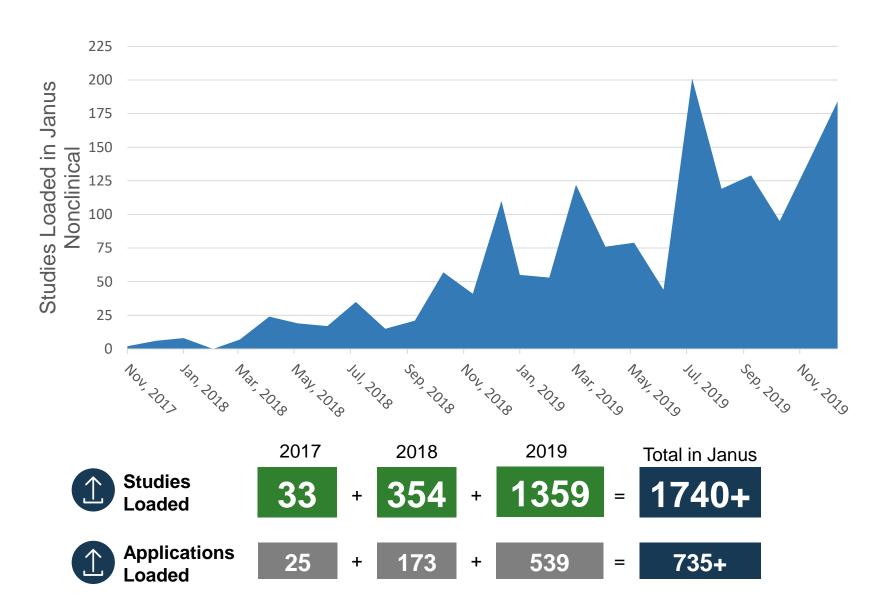




## **Key Concepts**

- . Janus Nonclinical is a database and system that allows reviewers to use SEND datasets for their reviews
- 2. Every SEND study received in an application goes through Janus loading process automatically
- 3. More than 1,740 studies loaded as of Dec. 2019
- 4. Reviewers <u>may</u> request a Kickstart Service to help them with their application in Janus Nonclinical consisting of:
  - One-on-one training
  - Data Fitness Analysis
  - Help with study data exploration and analysis
- 5. Reviewers may also receive support from the Office of Computational Science (OCS) Service Desk

## **SEND Studies in Janus Nonclinical**



## The KickStart Service





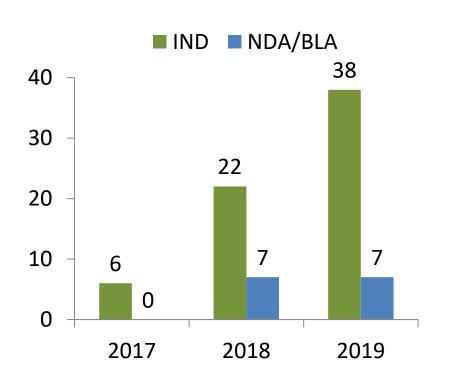
## **Key Concepts**

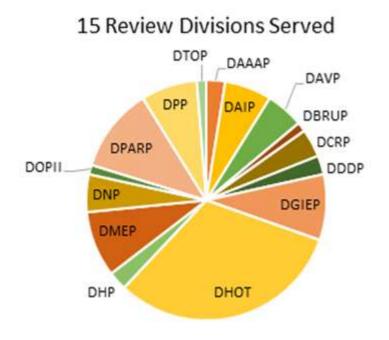
- KickStart is offered by OCS to all Pharm/Tox reviewers for their applications.
- Pre-KickStart Training includes overviews of:
  - The SEND Standard
  - Nonclinical Study Data Reviewers Guide (nSDRG)
  - Define.xml
  - Janus Nonclinical features
- The KickStart Service covers:
  - A data fitness assessment with sponsor report and details to reviewer for issues that impact use of data
  - Shows reviewers how to explore study data using Janus Nonclinical and how to produce tables and graphs that can be used in review documents
  - Prepare graphs and tables for key analyses using Janus Nonclinical

## KickStart Services for Nonclinical Review



#### Applications Through End of December 2019





**Calendar Year Counts** 

Kickstart service provided when:

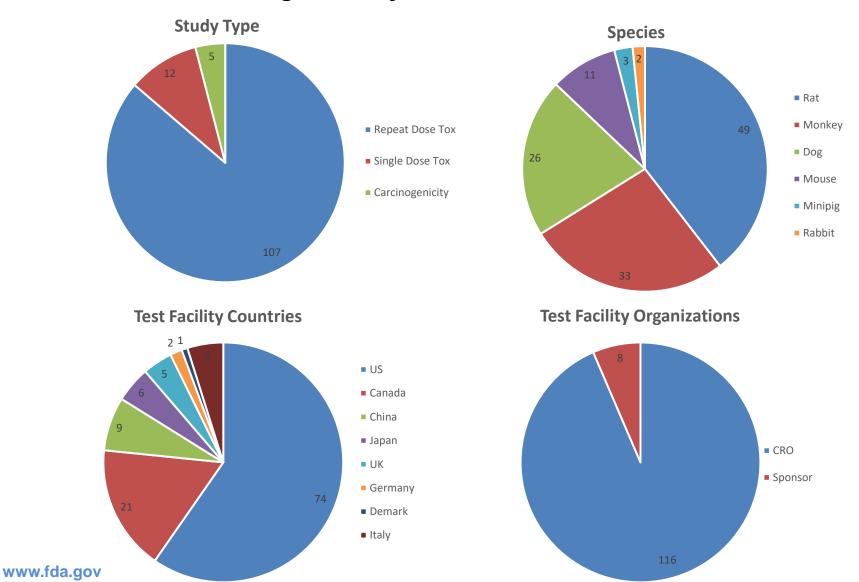
- Study loaded into Janus Nonclinical
- Reviewer requests service

One or two studies per application generally reviewed

## Studies Included in KickStart Applications



Through End of December 2019



11

## Pre-KickStart Training



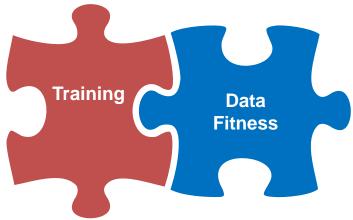
- For first KickStart service, the KickStart team provides reviewers with general training on the SEND topics, including:
  - Domains
  - Controlled Terminology
  - Overview of the nSDRG
  - Introduction to the define file
  - Introduction to Janus Nonclinical



### KickStart Data Fitness Assessment



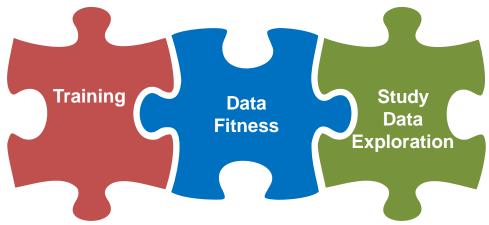
- Automated and manual review of SEND datasets and associated nSDRG and define.xml files
  - Verify compliance with standards and FDA rules/recommendations
  - Confirm and document data not submitted
  - Check consistency across study files and documents
  - Ensure summarizations included in study report can be reproduced
- Issues that affect data analysis are discussed with reviewer
- Sponsor data fitness report details all issues identified



## KickStart Data Exploration Session

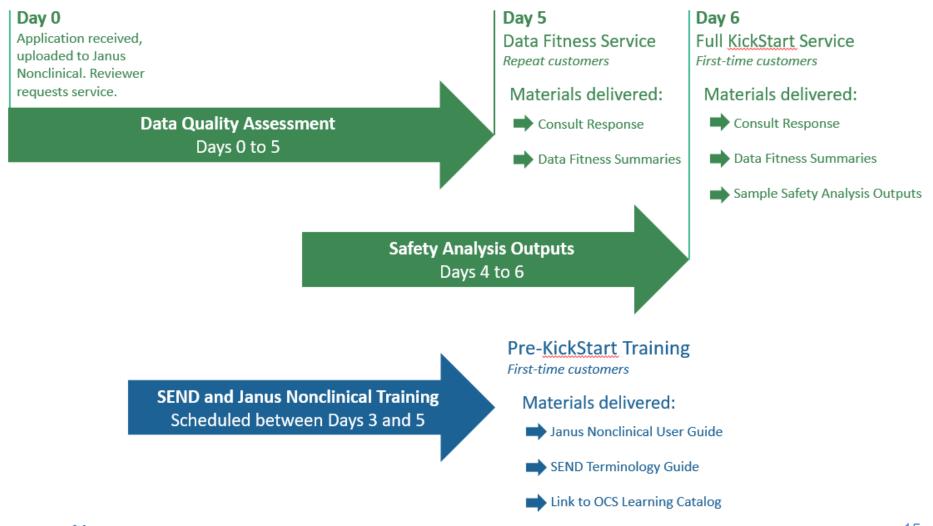


- Interactive look at the best way to interact with application study data using Janus Nonclinical
- Show tables and graphs from key domains with findings aligned with study report when possible
- Provide outputs may be used as part of application review documents



## **KickStart Timeline Overview**





## SEND Study Package Issues for Discussion

#### Define.xml

Submission Files, File Naming, StudyName Attribute

#### ISO8601 Values

• Dates, Date/Times, Durations

#### Standardization of Timing Variables

VISITDY/--NOMDY, timing relative to dose, unscheduled tests

#### **Categorical Results**

LBSTRESN and the FDA Study Data Technical Conformance Guide

#### Replacement Values for Results Outside Limit of Quantitation

Submission of --CALCN

#### **Codes and Abbreviations**

• Impact on reviewers when these are undefined

## File Naming – define.xml



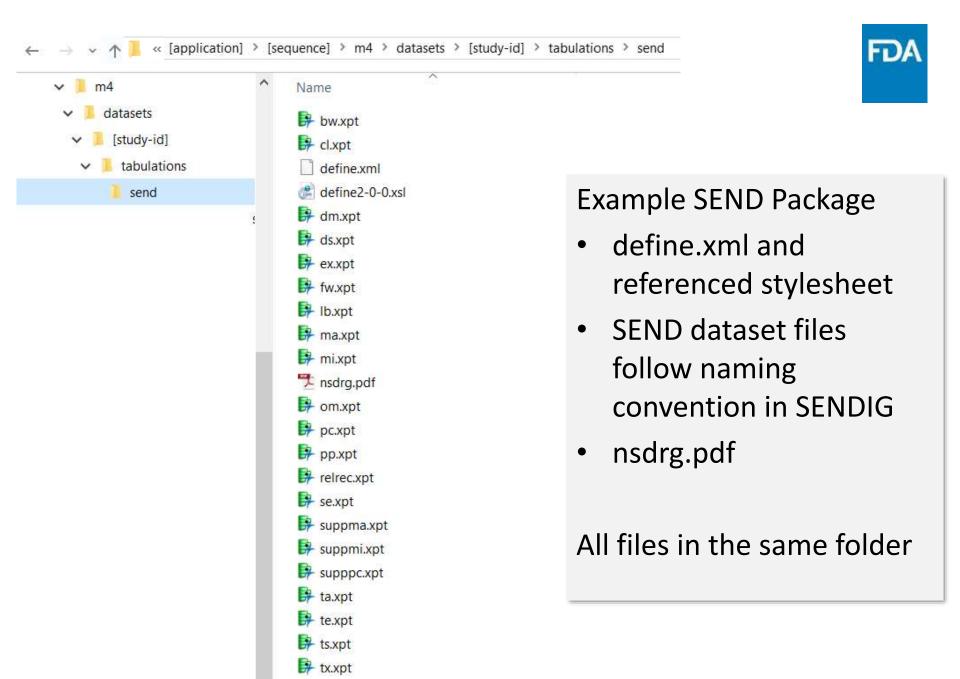
- Use "define.xml"
- Required stylesheet name is included in the define.xml file:

```
xml-stylesheet type="text/xsl"
href="define2-0-0.xsl"
```

- Some older stylesheets also reference define.css
- Submit the files in the study tabulation/send folder with the datasets

#### Some incorrect naming seen....

data-definitions-2-0-0.xsl
data-definitions-css.css
data-definitions-xml.xml
define-1.xml
define-2.xml
define2-0-0.xsl
define-css.css
define-xml.xml
-data-definitions-table-xml.xml
-data-definition-table-define-2-0-0-xsl.xsl
-data-definition-table-define-2-0-0-xsixsi



## Define.xml StudyName



#### **Study Data Technical Conformance Guide**

#### 4.1.3.2 General Considerations

For nonclinical studies, the define.xml StudyName element value must contain the sponsor's study identifier, consistent with the study identifier used in the eCTD folder structure under Module 4; refer to Section 7.1 for additional information about the Module 4 folder structure.

## StudyName at FDA

- In 44% of studies reviewed by Kickstart in calendar 2019, StudyName does not conform to the Technical Conformance Guide
- StudyName identifies the study in the SEND files to Janus Nonclinical
- StudyName, when aligned with the eCTD submission study identifier, gives a reviewer a consistent identifier for the study
- StudyName may need to be updated by sponsor prior to submission

## ISO 8601 Values



- ISO 8601 format in SEND
  - Dates and/or Times
  - Intervals and Durations of Time
- Certain domain variables use ISO 8601 format
- Some TS/TX Parameters use ISO 8601 format for –VAL
- SENDIG indicates when ISO 8601 format is used

Include only ISO 8601 formatted text when the SENDIG indicates that this format is used and no other formats.

### Common Data Fitness Issues



Analysis of Kickstart Data Fitness Results for 68 studies in 45 applications in calendar 2019 identified a number of key themes:

- Incorrect reporting of timing variables needed for summarization and analysis of results
- Incorrect reporting of categorical data
- Omission of the numeric value to use in calculations as a replacement for a text result

Undefined codes/abbreviations included in datasets



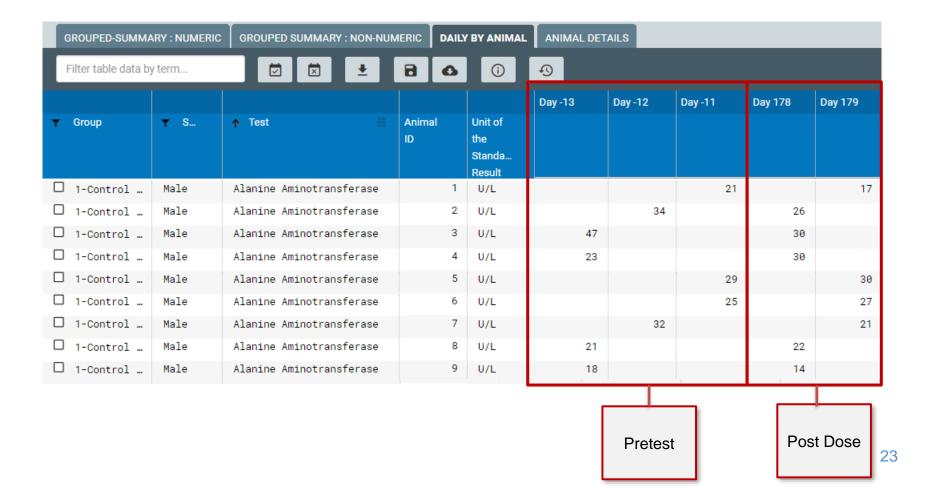
# Common Issues with Standardization of Timing Variables

- Planned/nominal day does not align data with the study report summary
- Incorrect reporting of timing for tests or observations scheduled relative to dose
- Incorrect reporting of result from unscheduled tests or observations.

## VISITDY/--NOMDY Used for Analysis



Example: Study Schedule indicates each animal has two sample collections: One pretest and one at the conclusion of dosing. Sponsor reported actual collection day in VISITDY. Reviewer must adjust days prior to use of data in summary analyses.



## VISITDY/--NOMDY and —ELTM Use for Analysis



Example: Sponsor reported sample collection day in VISITDY when samples collected at times relative to dose. Tabular data is therefore mislabeled; graphs of results relative to dose do not include data for timepoints > 24 hrs post dose



## Timing Relative to Dose



- Elapsed Time --ELTM
  - uses ISO8601 duration format
  - describes amount of time relative to the dose event
- Time Point Reference --TPTREF
  - Description of the dose event that the elapsed time –ELTM is relative to
  - Consider the dosing regimen for the study in --TPTREF
    - For timed infusion, inhalation, or other dosing over time, include whether elapsed time is relative to start or end of the dose
    - For multiple doses per day, include which dose the elapsed time is relative to

From the SENDIG: It is recommended that --TPTREF be as descriptive as possible so the reference time point can be inferred without looking at other variables.

## Timing Relative to Dose



Example: 1 hr infusion, twice per day.

Sample collection 2 hrs after start of  $1^{st}$  infusion day 1 and 2 hrs after start of  $2^{nd}$  infusion day 28.

Use --ELTM=PT2H to represent 2 hours post dose

<u>Common issue</u>: --TPTREF is not specific to the specific dose during the day or to the start/end of the dose.

For example if --TPTREF is "Day 1 Dose" and "Day 28 dose" --ELTM and --TPTREF together would not match the study report: "2 hours after Day 1 Dose" and "2 hours after Day 28 Dose"

Be specific in --TPTREF: "Start of 1st Day 1 Dose" and "Start of 2nd Day 28 Dose"

From the SENDIG: It is recommended that --TPTREF be as descriptive as possible so the reference time point can be inferred without looking at other variables.

## Unscheduled Tests/Observations



- Results from unscheduled tests or observations are generally tabulated separately in the study report tables.
- In SEND, for an unscheduled test result or observation:
  - SENDIG 3.0, VISITDY with no value identifies an unscheduled result
  - In SENDIG 3.1, --USCHFL="Y" identifies an unscheduled result
- Correct flagging of unscheduled results in SEND allows reviewer to align results with study report.
  - Unscheduled data can be included/excluded
  - Using only text variables to label unscheduled results is not sufficient

VISITDY	LBDTC	LBDY	LBTPT	LBTPTNUM	
15	2018-01-23	15	Unsch Vet Request	6	
22	2018-01-30	22		•	
22	2018-01-30	22		•	
22	2018-01-30	22		•	

# Data Fitness Issues with Reporting of Categorical Test Results

- Seen in the Laboratory Test Results (LB) dataset
- Issue with including LBSTRESN for categorical results
  - Refer to the FDA Technical Conformance Guide, section 4.1.3.3
  - SEND has no specific flag for categorical results
  - Define-xml value-level metadata inconsistently reported
  - Janus attempts to identify non-numeric tests using LBSTRESN

## Example Incidence Counts for LB in Janus



GROUPED SUM	MMARY : NUMERIC	GROUPED SUMMARY :	NON-NUMERIC DAILY	BY ANIMAL ANIMAL DETA	AILS		
Filter table dat	ta by term		<b>±</b>	(i) (5)			
				Female			
Category	Test	Day	Value	Control [Terminal,Recove	Low [Terminal,Recove	Mid [Terminal,Recove	High [Terminal,Recove
URINALYSIS	Protein		29 N	19	19	19	20
URINALYSIS	Protein		29 0.3 (g/L)	7	4	4	
URINALYSIS	Protein		29 1 (g/L)		1		
URINALYSIS	Protein		29 Negative	4	2	4	14
URINALYSIS	Protein		29 Trace	8	12	11	6
URINALYSIS	Protein		43 N	10	10	9	10
URINALYSIS	Protein		43 0.3 (g/L)		2	3	2
URINALYSIS	Protein		43 1 (g/L)				
URINALYSIS	Protein		43 Negative	3	1	4	2
URINALYSIS	Protein		43 Trace	7	7	2	6

Tests with no LBSTRESN reported with summary incidence counts in Janus Nonclinical

## Example of Incorrect Standardization



					Male				
Day	T Category	T Test	Unit of the Standa_ Result		Group 1,0mg/kg/d_ [Terminal,R	Group 4,600- 400mg/kg/ [Terminal,R	Group 2,60mg/kg/_ - Terminal	Group 3,200mg/k - Terminal	
-8									
	URINALYSIS	Protein	g/L	Mean	0.000 (Text)			0.000 (Text)	
	URINALYSIS	Protein	g/L	Std Dev	±0,000				
	121200200	and the second		1	(Text)	(Text)		(Text)	
	1				(Text)	(Text)		(Text)	
	1		Animal ID		(Text)	(Text)		(Text)	Result in Charact
	1				(Text)				Result in Charact
			Animal ID		(Text)	Duy		Result	Result in Charact
			Animal (D		(Text)	Day -8		Result 0 0	Result in Charact
			Animal ID 1881		(Text)	Cuy -8 -8		Result e e e e	Result in Charact
			Animal ID 1001 1002 1003		(Text)	-8 -8 -8		Result 0 0 0 0 0 0	Result in Charact

Semi-quantitative urine protein test are in SEND with the result range in LBSTRESC and with values incorrectly in LBSTRESN. This causes Janus Nonclinical to report means and standard deviations on those numeric results rather than incidence counts.

ANIMAL DETAILS [2]

DAILY BY ANIMAL [2]

CLOSE

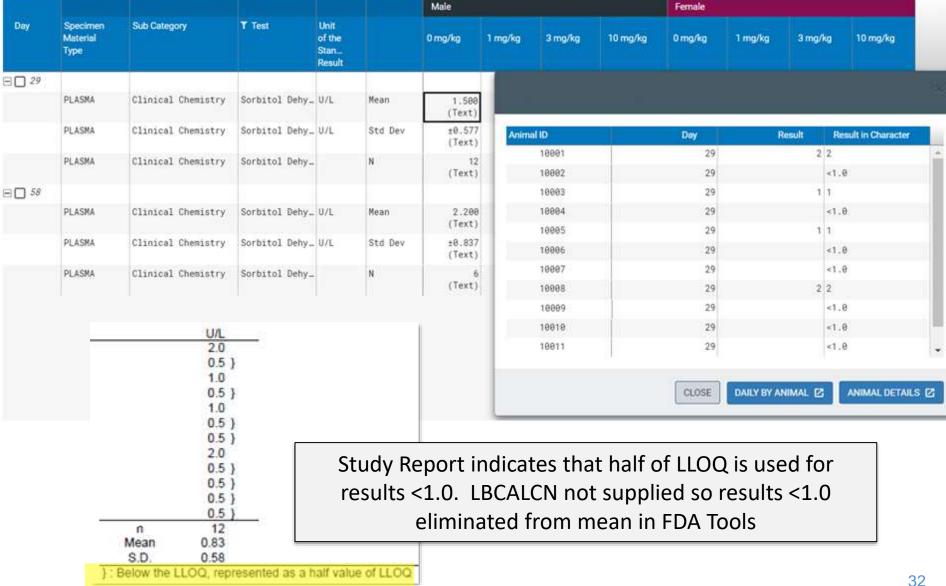


# Data Fitness Issues with Character Replacement Values

- Sponsor omitted character replacement values for use in PC or LB summary calculations in approximately half the studies reviewed:
  - Most commonly missing for plasma concentration results reported in the PC dataset.
  - Should be reported in SUPP-- dataset, with --CALCN in the QNAM variable and the replacement value in QVAL.
    - For example SUPPPC would have entries with PCCALCN.
- Use of group mean results supplied in study report is impaired when replacement values are not submitted.

## **Example: LBCALCN Not Supplied**





## Undefined Code/Abbreviations included in the Dataset



- Almost 50% of studies have codes/abbreviations in the SEND datasets in variables where they are not expected.
  - Frequently without a definition
  - For some studies, the nSDRG notes generally that abbreviations are defined in the study report.
- Codes and abbreviations have been seen as result values, in reason fields, as finding modifiers and in comments.
- Undefined unit abbreviations (not part of the published UNIT codelist) have also been submitted.

## Examples of Undefined Code/Abbreviations

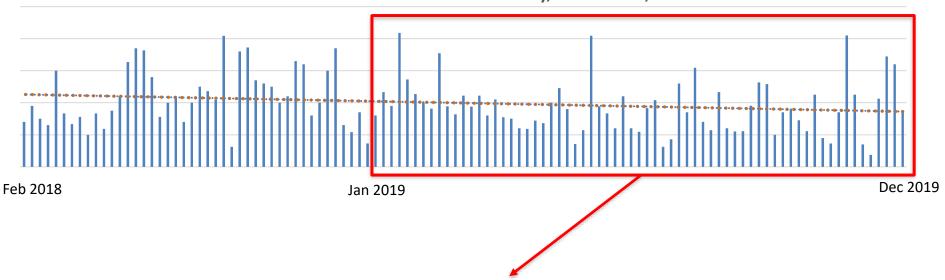


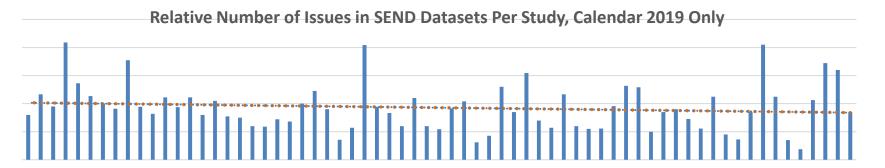


## SEND Data Quality Assessment









## **Key Points**



- FDA saw significant increase in number of studies containing SEND datasets in the past year
- FDA Pharm/Tox Reviewers transitioning to utilize SEND datasets alongside the study report
- Complete and correct SEND datasets are critical for seamless, confident use of SEND datasets by FDA reviewers
- Some common issues in a SEND dataset can complicate or even prevent FDA reviewers use of those SEND datasets
- The FDA KickStart team identifies issues in SEND data to communicate with industry, identify trends, and help reviewers maximize use of their SEND datasets

#### **FDA SEND Communications**





#### How We Communicate

- Responses to questions sent to eData@fda.hhs.gov
- 2. Technical Conformance Guide Updates
- 3. FDA Business Rule Updates
- 4. Sponsor-Specific Study Data Fitness Reports
- 5. PhUSE Presentations, Papers, and Posters
  - PhUSE US Connect
  - PhUSE Computational Science Symposium (CSS)
- 6. CDISC Collaborations
  - CDISC-SEND Face-to-Face (F2F) Public Forums



# OND Responses to Common SEND Questions

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U.S. Food and Drug Administration
Center for Drug Evaluation and Research
Office of New Drugs

SBIA Webinar/June 15, 2020



#### Purpose

Based on feedback the Agency is receiving from industry (e.g., eData mailbox, conferences), responses to commonly asked questions have been prepared to increase communication and disseminate this information across a larger audience. Additional information has also been included to facilitate the understanding of SEND requirements for nonclinical submission to the Office of New Drugs (OND) and the Office of Biostatistics (OB).

#### Outline



- Commonly asked Questions about SEND
- SEND Requirements versus the Technical Rejection Criteria (including the simplified ts.xpt)

www.fda.gov



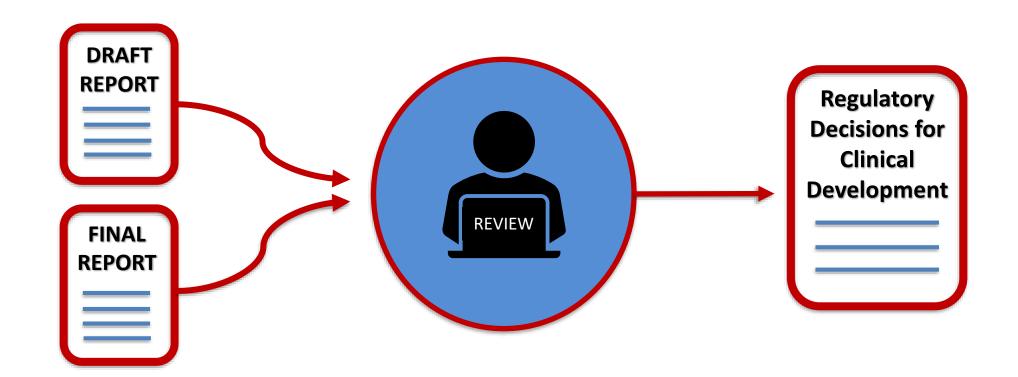
#### **COMMONLY ASKED QUESTIONS ABOUT SEND**

edata@fda.hhs.gov





A: SEND datasets are required when submitting a draft or final study report for study types modeled in an FDA supported SEND Implementation Guide (SENDIG) version.

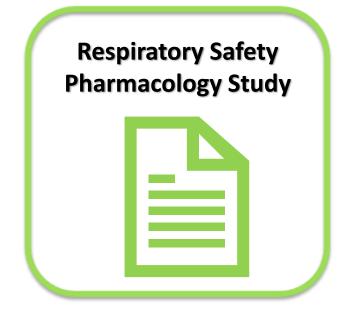


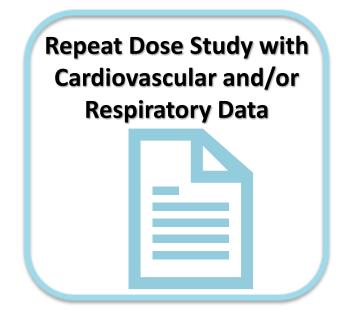
### Q: SEND for Safety Pharmacology & SENDIG v3.1?



A: For cardiovascular and respiratory test results collected during safety pharmacology studies or other study types that are modeled in SENDIG version 3.1, SEND datasets are required for studies initiated after March 15, 2019 for NDA/BLAs or after March 15, 2020 for commercial INDs. In vitro cardiovascular studies are not currently modelled in SEND.







#### Q: FDA Support for SENDIG-DART?



A: SENDIG-DART (Developmental and Reproductive Toxicology) version 1.1, which models embryo-fetal development studies, is **NOT** currently on the FDA Data Standards Catalog.

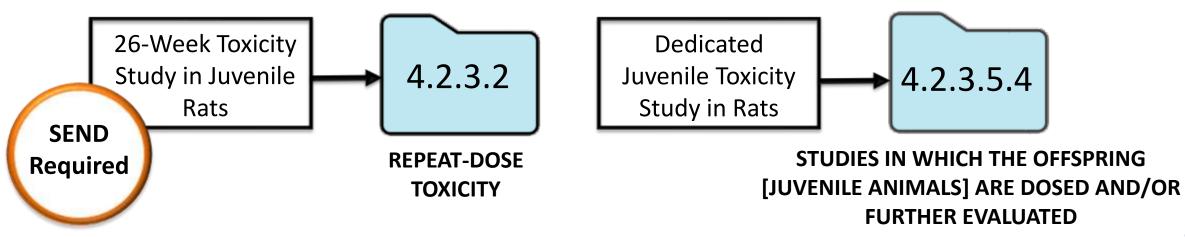
New study data standards (e.g., SENDIG-DART v1.1) will be required for studies started 24 months after the publication of a Federal Register notice (FRN) announcing FDA support of the standard and placement on the FDA Data Standards Catalog.



#### Q: SEND for Juvenile Animal Studies?



A: Although dedicated juvenile studies are out of scope for SENDIG v3.0 and v3.1, SEND is required for repeat dose toxicology studies using standard toxicity endpoints in juvenile animals (reflected in the age of the animal at study initiation).





#### Q: SEND for Animal Rule Studies?

A: The Federal Register Notice was published announcing FDA support of the CDISC SDTM v1.8 & CDISC SENDIG-AR v1.0 on March 15, 2020. These new standards will be required in submissions to FDA effective March 15, 2022.



#### Q: Study Data Standardization Plan (SDSP) Use?



A: The SDSP is used during development to communicate the intent to submit SEND datasets for completed, ongoing, and planned studies. It allows for the identification of potential data standardization issues and timely discussion with the review division, if needed.

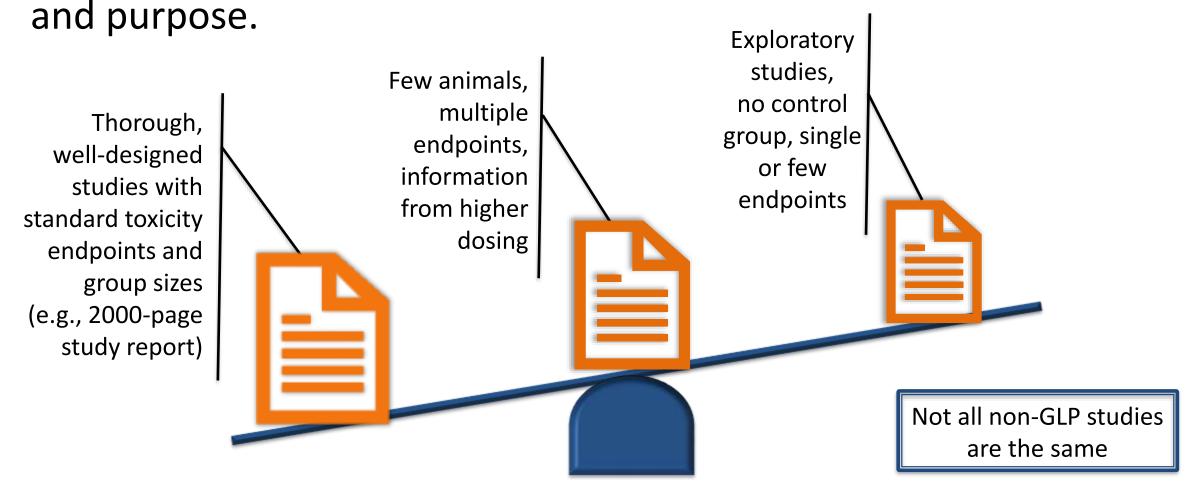
Ideally it is provided in the early stages of the application and may be updated as clinical development progresses.

It can also be used to communicate the intended use of simplified ts.xpt files.



#### Q: SEND for Non-GLP Studies?

Non-GLP studies can be highly variable in content, study design,



#### Q: SEND for Non-GLP Studies?



A: SEND facilitates the review process for any study report submitted. At this time, and as previously stated, for studies that are modeled in a supported SENDIG on the FDA Data Standards Catalog, SEND is required for GLP and non-GLP studies.

CDER/OND is currently evaluating if certain non-GLP studies can be excluded from this requirement. Any future decision on this topic will be communicated in the Study Data Technical Conformance Guide (TCG).

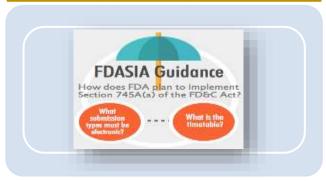


# SEND REQUIREMENTS VERSUS THE TECHNICAL REJECTION CRITERIA

### Standardized Study Data



#### 745A (a) Binding Guidance



Requires that submissions under section 505(b), (i), or (j) of the FD&C Act and submissions under section 351(a) or (k) of the Public Health Service Act (PHS Act) be submitted in electronic format specified by the Food and Drug Administration







- Binding Guidance: FDA policy on requirements for submission of standardized study data
- Published December 17, 2014

- Lists data standards supported and required by FDA in electronic submissions
- Updated as needed

- Describes how industry should submit standardized study data in NDAs, BLAs, INDs and ANDAs
- Updated twice per year



## Electronic Study Data Requirements

For CDER/OND, the following nonclinical study types are required to have SEND datasets as defined by study initiation date:

SEND Requirement Dates for Nonclinical Studies Modelled in SEND					
(Studies started after these dates require SEND datasets)					
Study Types Modelled in SEND	NDAs/BLAs	Commercial INDs			
	December 17, 2016	December 17, 2017			
Single Dose Toxicity,	(SENDIG v3.0)	(SENDIG v3.0)			
Repeat Dose Toxicity, and					
Carcinogenicity Studies	March 15, 2019	March 15, 2020			
	(SENDIG v3.1)	(SENDIG v3.1)			
Cardiovascular and Respiratory Safety Pharmacology Studies	March 15, 2019 (SENDIG v3.1)	March 15, 2020 (SENDIG v3.1)			

#### SEND Requirements, eCTD Structure, and the TRC



Seq. 0001





**Nonclinical** Studies

**SEND Requirement** (FDA Data Standards Catalog)



**CNS** Safety Pharm SSD = 3-19-2020



CV Safety Pharm SSD = 3-19-2020



1-Month Rat Toxicity SSD = 2-15-2015



1-Month Dog Toxicity SSD = 5-10-2019



Rat Fertility and Early Embryonic Development SSD = 2-15-2015

**eCTD Structure** (ICH M2)



Safety Pharmacology



Repeat-Dose Toxicity



Fertility and Early **Embryonic Development** 

**TRC Check** (Initial Activation)\*





Use simplified ts.xpt when appropriate



No



SSD = Study Start Date

\*Any future updates will be communicated in the TRC for 16 Study Data and the sdTCG

## Enforcement of SEND Requirements: The Technical Rejection Criteria (TRC)



- Automated Validation Process
- Added to the existing eCTD validation criteria to enforce compliance with the SEND requirements for study types modeled in an FDAsupported SEND Implementation Guide (SENDIG) version.
- Industry will be given a 90-Day notice prior to activation

For nonclinical studies, the Technical Rejection Criteria (TRC) will only apply to eCTD Modules 4.2.3.1 (single-dose toxicity), 4.2.3.2 (repeat-dose toxicity), and 4.2.3.4 (carcinogenicity) when initially activated.

#### SEND Requirements and the TRC



# SEND Requirement timelines are <u>SEPARATE</u> from TRC activation and implementation timelines

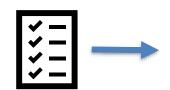
#### **FDA Data Standards Catalog**

- Electronic Standardized Data Requirements
- Lists Dates of Implementation

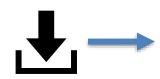
#### **Technical Rejection Criteria**

- Internal System for Study Validation
- Enforcement of the Data Requirements
- Will check relevant eCTD Modules

1-Month Rat Toxicity Study Study Start Date = 1-1-2019 REQUIRES SEND



Module 4.2.3.2 Repeat Dose Toxicity



TRC checks all studies submitted to a specific Module as outlined in the TRC for Study Data



What is the SEND requirement based on study type and initiation date?

Where is this study submitted in eCTD format?

Is a simplified ts.xpt needed based on TRC?

#### Submission to Appropriate eCTD Modules





Rat Juvenile Animal Toxicity

STF = pre-clinical-study-report

At this time, there is NO SEND Requirement

(Based on the FDA Data Standards Catalog)



Module 4.2.3.5.4 (Studies in which the offspring (juvenile animals) are dosed and/or further evaluated)

- ✓ CORRECT eCTD Folder
- ✓ Not currently checked by Technical Rejection Criteria
- ✓ No need to include simplified ts.xpt



Module 4.2.3.2 (Repeat-Dose Toxicity)

#### ! Incorrect eCTD Folder

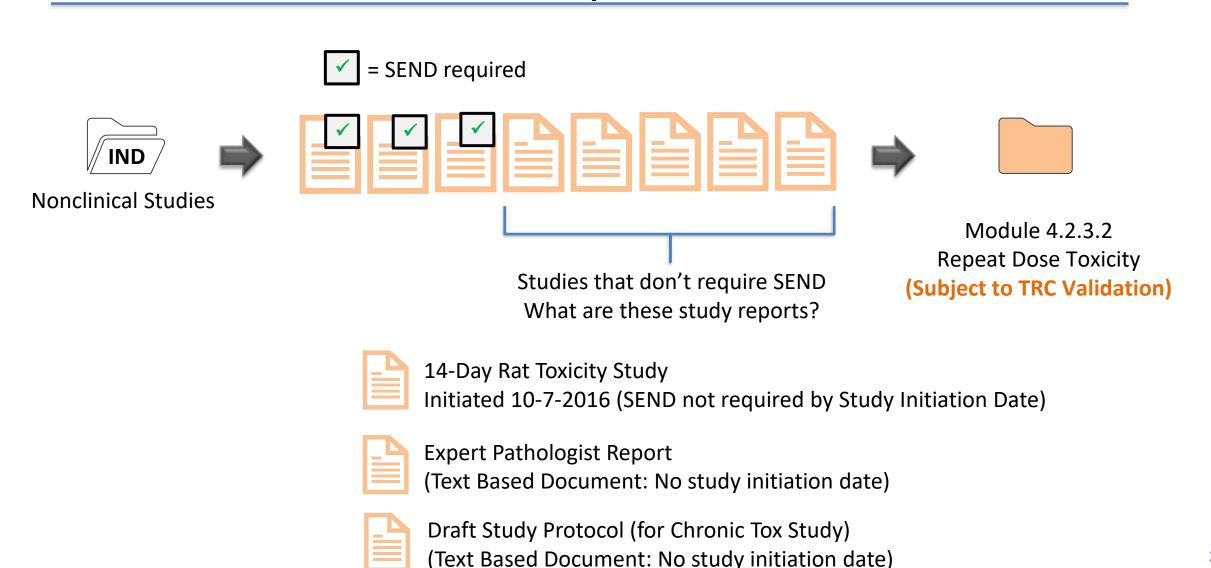
Would be subject to the Technical Rejection Criteria Validation
Would require simplified ts.xpt or would not be accepted at the electronic gateway



#### **USING THE SIMPLIFIED TS.XPT**

# Nonclinical Submissions, eCTD Structure and SEND Requirements





## How will the TRC Identify Studies <u>not</u> Requiring SEND?



28-Day Rat Toxicity
SSD = Dec. 12, 2018
SEND Required ✓
Full ts.xpt ✓

28-Day Rat Toxicity
SSD = Feb. 2, 2015 \_\_\_\_

SEND **NOT** Required SSD Prior to requirement

Expert Pathologist Report
SSD = NA

SEND **NOT** Required Text Based Document





4.2.3.2 Toxicology Need Additional Machine Readable Information



Simplified ts.xpt
Explained in Study Data TCG
& TRC for Study Data

SSD = Study Start Date NA = Not Applicable

## FDA

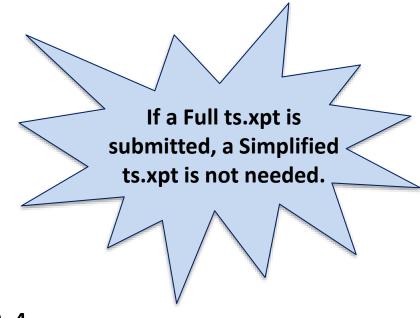
## Full and Simplified ts.xpt files

#### Full ts.xpt

- Accompanies SEND datasets
- Follows published CDISC Standard

#### Simplified ts.xpt

- Used when SEND datasets are <u>not</u> required for submissions in Modules 4.2.3.1, 4.2.3.2 or 4.2.3.4
- Needed when using a STF file tag of:
  - pre-clinical-study-report
  - legacy-clinical-study-report
  - study-report-body



STUDYID	TSPARMCD	TSVAL	TSVALNF
Study ID in STF	STSTDTC	yyyy-mm-dd	(Leave blank)

STUDYID	TSPARMCD	TSVAL	TSVALNF
Study ID in STF	STSTDTC	(Leave blank)	NA

## Using the Simplified ts.xpt



- The Agency encourages the use of simplified ts.xpt prior to the activation of Technical Rejection Criteria (TRC).
- *Initial* TRC activation will only include Modules 4.2.3.1, 4.2.3.2, and 4.2.3.4 (single-dose toxicity, repeat-dose toxicity and carcinogenicity)
- If sponsors submit a simplified ts.xpt with safety pharmacology studies (Module 4.2.1.3) to accommodate internal practices or processes, it will <u>not</u> interfere with the submission. [Note: Upon *initial* activation, Module 4.2.1.3 will not be subject to the TRC.]



### Study Data TCG and TRC

Study Data Technical Conformance Guide (TCG) provides additional information on the TRC and the nonclinical use of the simplified ts.xpt

## Section 8.2.2: Support on Data Validation Rules

- Explains when and how to use the simplified ts.xpt for nonclinical submissions
- Provides link to free and opensource software for creating Simplified ts.xpt files



#### Resources



- For questions about submitting study data please contact: <a href="mailto:edata@fda.hhs.gov">edata@fda.hhs.gov</a>
- Study Data Technical Conformance Guide (March 2020): <a href="https://www.fda.gov/industry/fda-resources-data-standards/study-data-standards-resources-da
- Technical Rejection Criteria: <a href="https://www.fda.gov/industry/study-data-standards-resources/study-data-submission-cder-and-cber">https://www.fda.gov/industry/study-data-standards-resources/study-data-submission-cder-and-cber</a>
- Electronic Common Technical Document (eCTD): <a href="https://www.fda.gov/drugs/electronic-regulatory-submission-and-review/electronic-common-technical-document-ectd">https://www.fda.gov/drugs/electronic-regulatory-submission-and-review/electronic-common-technical-document-ectd</a>
- Standardized Study Data Guidance: <u>Guidance for Industry, Providing Regulatory Submissions in Electronic Format — Standardized Study Data (PDF - 131 KB)</u>
- Webinar: Most Common Issues with CDISC-SEND Data in FDA Toxicology Review (September 12, 2019): <a href="https://www.fda.gov/about-fda/center-drug-evaluation-and-research-cder/kickstart">https://www.fda.gov/about-fda/center-drug-evaluation-and-research-cder/kickstart</a>
- Webinar: The FDA Study Data Technical Conformance Guide v4.4 (November 22, 2019): <a href="https://www.fda.gov/drugs/cder-small-business-industry-assistance-sbia/sbia-webinars">https://www.fda.gov/drugs/cder-small-business-industry-assistance-sbia/sbia-webinars</a>



That concludes the SBIA presentations. We are going to take a quick break to review the submitted questions and will begin answering them in a few minutes.