Public Disclosure of Clinical Trials Information (ClinicalTrials.gov)

Category: Research  
Responsible Office: CTSI/Clinical Research Office  
Responsible Executive: Vice President for Research and Economic Development  
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Summary

ClinicalTrials.gov is a publicly available registry and results database of federally and privately supported clinical trials conducted in the United States and around the world. It is maintained by the National Library of Medicine (NLM) of the National Institutes of Health (NIH). ClinicalTrials.gov captures significant summary protocol information before and during the trial as well as summary results and adverse event information of a completed trial. The website helps potential participants (e.g., patients) find trials, enhances the design of clinical trials and prevents duplication of unsuccessful or unsafe trials, improves the evidence base that informs clinical care, increases the efficiency of drug and device development processes, improves clinical research practice, and builds public trust in clinical research. Federal laws and regulations as well as editors of prominent medical journals require registration of a clinical trial.

Clinical and translational research conducted at the University at Buffalo (UB) is supported by a NIH Clinical and Translational Science Award (CTSA). Uniform use of ClinicalTrials.gov is essential to efficiently support clinical research across the University and to ensure the continued support of the CTSA, which provides critical resources for conducting translational research.

In order to facilitate compliance with ClinicalTrials.gov, the University provides education and assistance to investigators through UB’s Clinical and Translational Science Institute (CTSI) ClinicalTrials.gov team. The team monitors ClinicalTrials.gov records to assist with record keeping and to assure compliance with federal regulations. The UB CTSI has a growing online library of video resources that are housed on the UB CTSI YouTube page and are also accessible on the CTSI website’s Educational Modules page. The resources include ClinicalTrials.gov-related instructional videos that delineate the steps from registering the study to reporting the study results and other relevant information on ClinicalTrials.gov. The most recent version of the UB ClinicalTrials.gov Registration and Results Guide is available here. Links to additional resources are available at the end of this document.

Policy

POLICY STATEMENT

This policy establishes the University at Buffalo requirements for public disclosure of clinical trial information (registration and results) to ensure compliance with the federal regulations, laws, and policy.

BACKGROUND

Requirements for trial registration and result reporting flow from several federal legal requirements and other related organizational policies. Source requirements include:
1) The Food and Drug Administration Modernization Act of 1997 (US Public Law 105-115) (FDAMA)

2) The Food and Drug Administration Amendments Act of 2007 (US Public Law 110-85) (FDAAA)

3) Clinical Trials Registration and Results Information Submission (42 CFR Part 11) (effective January 18, 2017)


In addition, this policy addresses compliance with publishing requirements outlined by the International Committee of Medical Journal Editors (ICMJE) and procedures from Centers for Medicare and Medicaid Services (CMS) billing requirements.

APPLICABILITY

This policy applies to all Principal Investigators conducting clinical trials within the University at Buffalo.

DEFINITIONS

Additional definitions can be found at http://prsinfo.clinicaltrials.gov/definitions.html.

Clinical Trial:

Applicable Clinical Trial, or ACT (FDAAA): includes interventional studies (with one or more arms) of FDA-regulated drugs, biological products or devices that meet one of the following conditions: (a) the trial has one or more sites in the U.S.; (b) the trial is conducted under an FDA investigational new drug application (IND) or investigational device exemption (IDE); or the trial involves a drug, biologic or device that is manufactured in the U.S. or its territories and is exported for research. There are two types of FDAAA-defined applicable clinical trials which must be registered and results reported:

- Applicable Clinical Drug Trial: A controlled clinical investigation, other than a Phase I clinical investigation, of a drug or biological product subject to FDA regulation; and
- Applicable Clinical Device Trial: A controlled trial with health outcomes of devices subject to FDA regulation, other than small feasibility studies or pediatric post-market surveillance required by FDA.

Registration is required for applicable clinical trials (ACT) initiated after September 27, 2007 or ongoing as of December 26, 2007.

Clinical Trial (NIH): A research study in which one or more human subjects are prospectively assigned to one or more interventions (which may include placebo or other control) to evaluate the effects of those interventions on health-related biomedical or behavioral outcomes.

- NIH requires registration and results reporting for all NIH-supported clinical trials, regardless of study phase, type of intervention, or whether or not they are subject to FDAAA.

Qualifying Trial (CMS): The activity must be a clinical trial that qualifies for coverage (as specified in CMS Section 310.1 of the Medicare National Coverage Determination Manual) and the purpose of the trial must be the evaluation of an item or service that falls within a
Medicare benefit category (e.g., physicians’ services, durable medical equipment, diagnostic test, etc.). The trial must have therapeutic intent and must enroll patients with diagnosed disease, not only healthy volunteers.

**Clinical Trial (ICMJE):** A clinical trial is a research project that prospectively assigns human participants or groups of humans to one or more health-related interventions to evaluate the effects on health outcomes—includes drugs, biologies, devices, surgical procedures, and behavioral treatments. This definition includes Phase I studies.

**ClinicalTrials.gov:** ClinicalTrials.gov is a searchable, public registry and results database of clinical studies.

**Controlled:** For the purposes of 42 CFR Part 11, all clinical trials with one or more arms and pre-specified outcome measure(s) are considered controlled.

**Primary Completion Date:** The date that the final subject was examined or received an intervention for the purpose of final collection of data for the primary outcome measure, whether the clinical trial concluded according to the pre-specified protocol or was terminated. In the case of clinical trials with more than one primary outcome measure with different completion dates, this term refers to the date upon which data collection is completed for all of the primary outcomes.

The due date for reporting results for an ACT is 12 months from the Primary Completion Date (not the Study Completion Date).

**Principal Investigator (PI):** The individual who is responsible and accountable for conducting the clinical trial.

**Responsible Party (RP):** The term used by 42 CFR Part 11 to designate the entity or individual responsible for the clinical trial and for submission of clinical trial information. FDAAA defines the responsible party as the person who is responsible for conducting a clinical trial, has access to and control over the data from the clinical trial, has the right to publish the results of the trial and must meet all of the requirements under this regulation. The University deems the terms Principal Investigator and Responsible Party to be synonymous for purposes of this policy.

**Protocol Registration System (PRS):** The PRS system is a web-based data entry system used by ClinicalTrials.gov for investigators to register a clinical study or submit results information for a registered study. Investigators must have a PRS account to register study information on ClinicalTrials.gov: [https://register.clinicaltrials.gov/](https://register.clinicaltrials.gov/).

- **National Clinical Trial (NCT) Number:** The NCT# is a unique identifier assigned by ClinicalTrials.gov to a study that has been successfully registered at its site. The NCT number must be included on claims for items and services provided in clinical trials that are qualified for coverage as specified in the Medicare National Coverage Determination Manual.

**Study Completion Date:** Final date on which data was (or is expected to be) collected.

**RESPONSIBILITY**

It is the responsibility of the Principal Investigator to ensure registration and results reporting are completed and updated, and in the timeframes required, by FDAAA, NIH,
CMS, ICMJE, and PCORI. The Principal Investigator must assess whether his/her study meets one or more of the categories below to determine if registration in the ClinicalTrials.gov PRS system is required:

- Any study meeting the World Health Organization (WHO) definition of Clinical Trial which is intended for publication in a journal adhering to International Conference of Medical Journal Editors (ICMJE) policy
- Any study funded in whole or in part by the National Institutes of Health (NIH) which meets the NIH definition of a Clinical Trial (National Institutes of Health (NIH) policy)
- Any study which meets the definition of “Applicable Clinical Trial” as defined by Food and Drug Administration Amendments Act of 2007 (FDAAA 801)
- Any study which meets the definition of Qualifying Clinical Trials as outlined in Center for Medicare & Medicaid Services (CMS) National Coverage Determination (NCD) 310.1 and which intends to bill Medicare for Routine Costs (NCD 310.1)
- Any study funded by the Patient-Centered Outcomes Research Institute (PCORI) which meets the required definition (i.e., PCORI Reporting Policy, p. 5).

The Principal Investigator can opt, at Investigator’s discretion, to voluntarily register their study even if it does not meet one or more of the categories that require registration.

Determining Responsible Party

The Responsible Party has the sole authority to approve and release the record; all records must be reviewed and released by the Principal Investigator (i.e., Responsible Party at UB).

Use the NIH’s flow sheet and information on the ClinicalTrials.gov website to determine who the Responsible Party is and what option should be selected.

NIH-funded Clinical Trials in ClinicalTrials.gov:


Definitions of Responsible Party:


For studies initiated and written by an investigator at the University at Buffalo (UB), UB is the Sponsor and the PI of the study should be the Responsible Party, listed as “Principal Investigator.”

If the Principal Investigator is the holder of the IND/IDE, the PI is the “Sponsor-Investigator” for ClinicalTrials.gov registration.

For studies under industry sponsorship, the pharmaceutical or biotech organization is responsible for trial posting and maintenance on ClinicalTrials.gov. The contract should clearly outline the Responsible Party.

For cooperative studies where the University at Buffalo is not the coordinating center, verify that the sponsor is not the University at Buffalo, and the coordinating center is the Responsible Party for registering on ClinicalTrials.gov.

If the Responsible Party is a student, resident, or fellow, the Faculty Supervisor should be listed as the Overall Study Official in the Contracts section and should be given edit rights by adding them to the “Access List” on the Record Summary page.
In the event the Responsible Party of a registered trial leaves the institution, the PI and Department should work with the UB PRS administrators to ensure that one of the following will occur:

- If the study is closed and is an ACT or NIH-funded clinical trial, results are entered.
- If another investigator agrees to be PI, the registration and reporting requirements are transferred to the new PI.
- The ClinicalTrials.gov registration is transferred to the PI’s new institution.

If the Responsible Party is arriving at the University at Buffalo and has active registered study record(s) at their prior institution, they should contact one of the UB PRS Administrators as the Responsible Party may need a university account and may need to transfer the registered study record(s) to UB. Transfer depends on IRB review, grant ownership, study status, and status of Responsible Party as Investigator-Sponsor.

**Consequences of Noncompliance**

As of July 21, 2022, failure to comply with the regulations set forth in 42 CFR Part 11 or the NIH Policy may result in:

- Penalties to the Responsible Party and the institution of $13,237 per study, per day.
- Violations of section 301(jj) of the FD&C Act (21 U.S.C. 331(jj)) could result in other regulatory action, such as injunction and/or criminal prosecution.
- The withholding of remaining or future federal (e.g., NIH) grant funding to the institution or the Investigator or recovery of monies already allocated.
- Public notice of failure in registry/results database.

In addition, failure to register a trial in accordance with ICMJE guidelines may result in the rejection of the study publication.

The University at Buffalo leadership will address the failure of staff members to comply with clinical trial disclosure requirements as follows:

- IRB approval will be held until registration is complete for studies that meet the definition of an ACT, Qualifying Trial, or NIH-funded clinical trial.
- UB PRS administrators will send the study team email notifications regarding required record maintenance. Failure to respond to requests can result in escalation to the department chair after two notifications have been sent.
- If results for an ACT or NIH-funded clinical trial are overdue, all of the PI’s new IRB submissions will be held at the point of Continuing Review.

**PROCEDURE**

The University at Buffalo’s ClinicalTrials.gov institutional account, SUNYBuffalo, must be used when registering a clinical trial.

PRS User Accounts are created, maintained, enabled and disabled by the UB PRS Administrators. The UB PRS administrators have the ability to change the ownership of the ClinicalTrials.gov record, as necessary.
Principal Investigators are required to have a PRS User Account. If an account is needed, the Principal Investigator can request one by contacting the UB PRS administrators at UBClinicalTrialsgov@buffalo.edu.

An applicable clinical trial is entered by the PRS User using the Protocol Registration System (PRS) on the ClinicalTrials.gov website: https://register.clinicaltrials.gov/.

Once a trial record has been published on the ClinicalTrials.gov website, it remains in the system even after a trial has closed and cannot be deleted.

Records released to the public website are required to be updated periodically depending on the protocol’s recruitment status:

- Recruiting records require updates every six months.
- Non-recruiting records require annual updates.
- Responsible Parties should update their records within 30 days of a change to:
  - Recruitment status;
  - Overall Recruitment status; or
  - Completion Date.

- Results must be submitted no later than one year after the trial’s primary completion date. The Responsible Party may request to delay the submission of results information for an ACT by submitting a good cause extension request via the ClinicalTrials.gov PRS system prior to the date (i.e., the day before) that results information would otherwise be due.

The Principal Investigator has the overall responsibility to ensure that the record is verified, updated, and re-released as needed, or at least every six months or annually for non-recruiting records.

After a protocol has been entered or updated and marked Complete, the Investigator, designated as the Responsible Party for a study, has the authority and responsibility to Approve and Release the record to the PRS reviewers. If there are “problems” with the study record, modifications will be required within two weeks. ClinicalTrials.gov identifies “problem records” as having any of the following issues:

- Record has Errors
- Entry Not Completed
- Ready for Review and Approval
- Update Not Released
- Not Recently Updated
- Never Released
- Late Results per FDAAA

The UB PRS Administrators are responsible for following up on problem records as necessary. The PRS system sends an automatic email notification to the Investigator and to the PRS Administrators when a protocol is entered or modified in the registration database. These notifications can be used to assess the ongoing activity of protocols.
Notifications from the UB PRS Administrators will be addressed to the Principal Investigator. If the Principal Investigator has not complied within two weeks, a second notice will be sent. If the Principal Investigator is non-compliant with the deadline given in the second notice, the department chair should be notified, as failure to comply with registering a new protocol or updating a registered protocol in the time specified in the second notice may result in suspension of IRB approval of the protocol.

**Contact Information**

UB PRS Administrators  
Email: UBClinicalTrialsgov@buffalo.edu  
Website: https://www.buffalo.edu/ctsi.html

CTSI  
875 Ellicott Street  
Buffalo, NY 14203

**Related Information**

**University Documents:**  
UB ClinicalTrials.gov Registration and Results Guide

**Related Links:**

1. National Coverage Determination (NCD) Implementation of Mandatory Reporting of an 8-Digit Clinical Trial Number on Claims  
   https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/StdRev/FAQs/FAQs.html

   https://www.govinfo.gov/content/pkg/PLAW-110publ85/pdf/PLAW-110publ85.pdf

3. FDAMA Section 113 – Guidance for Industry “Information Program on Clinical Trials for Serious or Life-Threatening Diseases and Conditions”.  

4. International Committee of Medical Journal Editors (ICMJE)  
   http://www.icmje.org/about/icmje/faqs/clinical-trials-registration/

5. U.S. National Library of Medicine/National Institutes of Health “FAQ: ClinicalTrials.gov Questions”


7. “Elaboration of Definitions of Responsible Party and Applicable Clinical Trials”  

8. Clinical Trials Registration and Results Information Submission, Final Rule 42 CFR Part 11  

9. NIH Policy on the Dissemination of NIH-Funded Clinical Trial Information  