## Attachment 5 - ClinicalTrials.gov Results Reporting Data Entry Screen Shots (DRAFT)

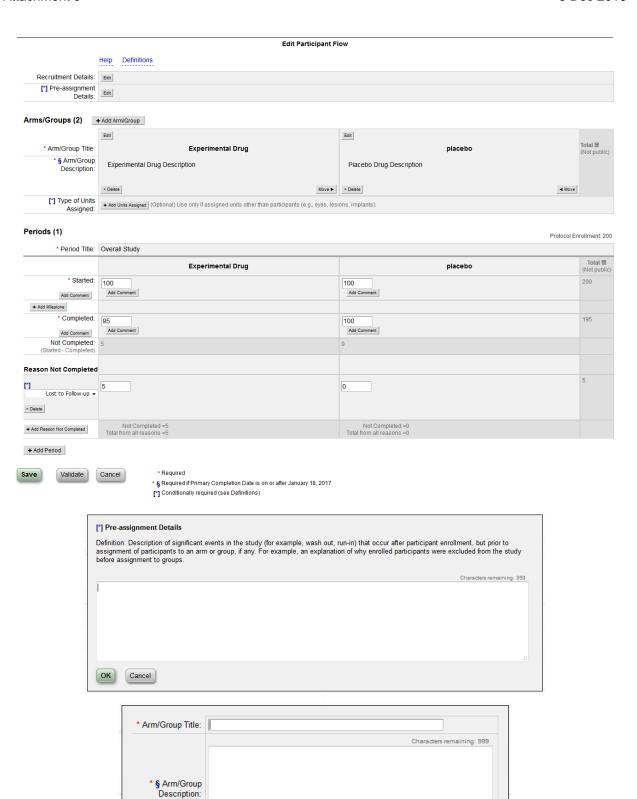
	PRS TEST SYSTEM	
ClinicalTrials.gov PRS Protocol Registration and Results System		
	Login	
Welcome to the ClinicalTrials.gov Protocol Registration and R	Results System (PRS).	OMB NO: 0925-0588 EXPIRATION DATE: 11/30/2018 Burden Statement
This is a test version of the Protocol Regis the production (operational) PRS or Clinic	stration and Results System (PRS). Creating or modifying recor alTrials.gov.	ds in this system will have no effect on
	placed entirely with a copy of the latest data from the productio an account on the production PRS at that time, the same login i	
WARNING: Do not use the PRS Test Sy is not fully compatible with that of the prod	stem to prepare data for the production PRS. This system s luction system.	ometimes runs a software release that
If you notice problems or have questions vupper right corner, after logging in).	while using this test system, please contact us using the Contact	ct ClinicalTrials.gov PRS link (in the
Organization: [	One-word organization name assigned by PRS (sent via email when acco	ount was created)
Username: [		
Password:		
	Login	
See <u>Submit Studies</u> on ClinicalTrials.gov for information on ho Send email to ClinicalTrials.gov PRS Administration	ow to apply for an account, how to register your study, and how	to submit results.
U.S. Na	tional Library of Medicine   U.S. National Institutes of Health   U.S. Department of Health & Human Se	rvices

OMB NO: 0925-0586

EXPIRATION DATE: 11/30/2018

**Burden Statement** 

Public reporting burden for this collection of information is estimated to average 7.0 hours per response for initial registration, 2.0 hours for each of 8 updates to the registration information during the course of the trial, 25.0 hours per response for initial results submission, 8.0 hours for two substantive updates to the results information. These estimates include the time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0586). Do not return the completed form to this address



ОК

Cancel

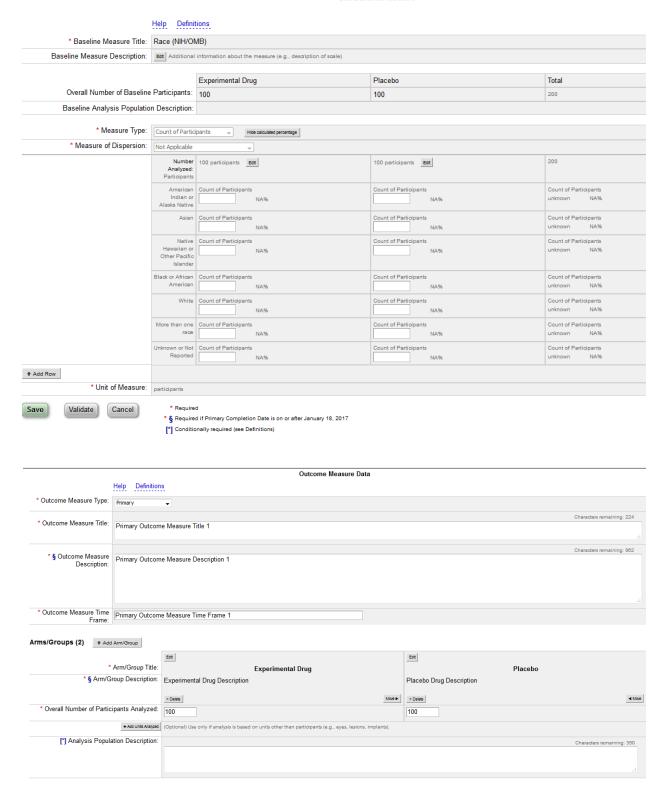
## Edit Baseline Arm/Groups + Add Arm/Group Help Definitions \* Arm/Group Title: Experimental Drug Placebo \* § Arm/Group Description: Experimental Drug Description Placebo Drug Description Move ▶ × Delete Edit Baseline Analysis Population Help Definitions **Experimental Drug** Placebo \* Overall Number of Baseline Participants: 100 100 Tip: Compare number of baseline participants with numbers in Participant Flow ormation about the analysis population when it is different from the assignment in Participant Flow or information about how participants contribute units [\*] Baseline Analysis Population Description: Cancel \* § Required if Primary Completion Date is on or after January 18, 2017 [\*] Conditionally required (see Definitions) Add Baseline Measure Help Definitions Study-Specific Measure Example Age, Continuous Example Age, Categorical Example Age, Customized Example Sex: Female, Male Example Sex/Gender, Customized Example Race (NIH/OMB) Example Ethnicity (NIH/OMB) Example Race/Ethnicity, Customized Race and Ethnicity Not Collected

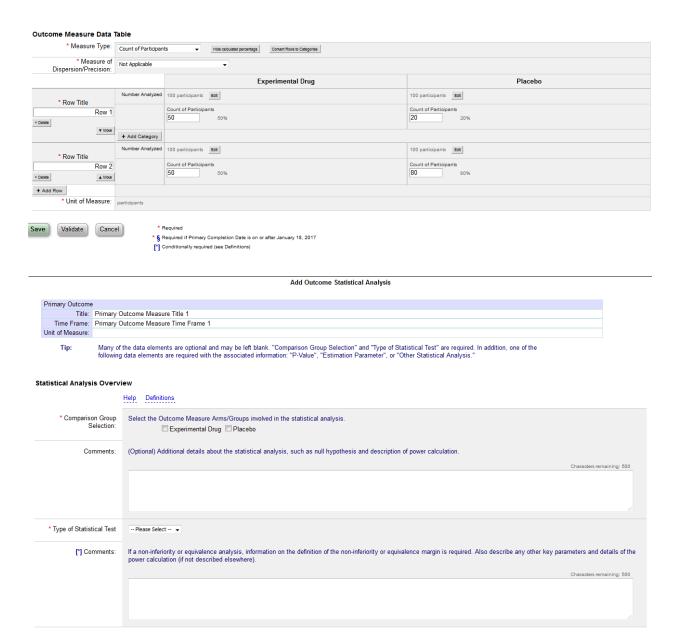
Region of Enrollment

Cancel

Example

## Edit Baseline Measure





Statistical Test of Hypothe	sis	
	Help Definitions	
[*] P-Value:	(If applicable)	
	(e.g. <0.01)	
0		
Comments:	(Optional) Additional information, such as whether or not the p-value is adjusted for multiple comparisons and the a priori threshold for statistical significance.  Characters remaining: 250	
	Characters retriaining, 200	
[*] Method:	(Required if a P-Value is entered)	
	Please Select   ■ If other, please specify:	
Comments:	(Optional) Any other relevant information, such as adjustments or degrees of freedom.  Characters remaining: 150	
	Visiaues reinaining. 130	
Method of Estimation	Help Definitions	
PI Estimation Parameter		
[*] Estimation Parameter:	(If applicable)	
	Please Select   ■ If other, please specify:	
[*] Estimated Value:	Provide the data for the Estimation Parameter.	
Confidence Interval:	(If applicable) ②	
Confidence interval.	% Confidence Interval	
	70 Communities interval	
	Number of sides 2-Sided ▼	
	Lower Limit: Upper Limit:	
Parameter Dispersion Type and Dispersion Value:	(If applicable)	
	Please Select ▼	
Estimation Comments:	(Optional) Any other relevant estimation information, including the direction of the comparison (e.g., describe which arm or comparison group represents the numerator and denominator for relative risk).	
	Characters remaining: 250	
Other Statistical Analysis	Help Definitions	
	If the statistical analysis cannot be submitted using the Statistical Test of Hypothesis or Method of Estimation options, provide a description and the results of the scientifically	
	appropriate test of statistical significance.  Characters remaining: 999	
	Unaractes remaining: 999	
Save Validate Cane		
	<ul> <li>§ Required if Primary Completion Date is on or after January 18, 2017</li> <li>Conditionally required (see Definitions)</li> </ul>	

		Help Definitions	le Def	aults
* § Tim	ne Frame:	Provide a description of the specific period of time over which adverse event data we	ere co	illected (e.g., 1 year, 6 months)
				Characters remaining: 500
				Onascus remaining, 500
[*] Adverse Event	Reporting scription:	If the definition of adverse event and/or serious adverse event, used to collect adverse	se eve	ent information, differs from the clinicaltrials.gov Definitions, describe how the definitions differ.
50	ocription.	Also, optionally provide additional relevant information about adverse event collection	n.	
				Characters remaining: 500
Source Vocabula for Table	ary Name e Default:	Please enter the name and version of the source vocabulary, if any, for adverse ever "Other" adverse event tables, unless otherwise specified.	nt tern	ms. Source Vocabulary will be applied to all adverse event terms entered in the "Serious" and
		(e.g., SNOMED CT, MedDRA 10.0)		
* § Collection a for Table	Approach e Default:	Assessment type will be applied to all adverse event terms entered in the "Serious"	" and '	"Other" adverse event tables, unless otherwise specified.
		If systematic, provide explanation of the method in Additional Description.		
		Please Select		
Save		* Required		
		§ Required if Primary Completion Date is on or after January 18, 2017  Conditionally required (see Definitions)		
		[] Conditionally required (see Definitions)		
		Edit Adverse Event Arm	ıs/Gro	oups
		. Usla Deferitions		
	+ Add An	m/Group Help Definitions		
* Arm/Group Title:	Experim	ental Drug		Placebo
' § Arm/Group Description:	Experim	Characters remaining: ental Drug Description	970	Characters remaining: 975 Placebo Drug Description
				,
	× Delete	M	ove ►	× Delete
		_		
Total for Serious Adverse Events:		0 Affected Participants out of 0 At Risk		0 Affected Participants out of 0 At Risk
Total for Other				
(Not Including Serious) Adverse Events:		0 Affected Participants out of 0 At Risk		0 Affected Participants out of 0 At Risk
Save Cancel		* Required		
		§ Required if Primary Completion Date is on or after January 18, 2017		
		*] Conditionally required (see Definitions)		
				AU 0 W U
			Edit /	All-Cause Mortality
	Help	Definitions		
All-Cause Mortality		Experimental Drug		Placebo
* § Total Number		participants		participants
Affected:				
* § Total Number At		participants		participants
Risk:				
(Save ) (Val	idate	Cancel * Required	201-	,
		<ul> <li>§ Required if Primary Completion Date is on or after January 18,</li> <li>[*] Conditionally required (see Definitions)</li> </ul>	, 2017	

	Edit Serious Adverse Event To	otal		
Help Definit	ions			
Serious Adverse Event(s)	Experimental Drug			Placebo
		0	participants	
		0	participants	
Tip: The Tota  Save Validate Cancel	Number of Participants at Risk is typically equal to the Number of Participants who Started the first Period  * Required  * Required if Primary Completion Date is on or after January 18, 2017	in the Particip	ant Flow. Preview Participant Flow	
	[*] Conditionally required (see Definitions)			
	Results: Add Serious Adverse Event Help Definitions			
* Adverse Event Term:				
* Organ System:	Please Select			
Adverse Event Term Additional Description:				Characters remaining: 280
Source Vocabulary Name:	(table default)			
* § Collection Approach:	Please Select (table default)			
* Required  * § Required if Primary Completion Date is on or after January 18, 2017				
	Edit Frequency Threshold for Reporting Other (Not Inclu	iding Serio	ous) Adverse Events	
	Help Definitions			
* Frequency Threshold for Reporting Ot Adverse Ever	her Enter a number between 0 (no threshold; all events reported) and 5 (only events on the state of the state	ccurring in	greater than 5% of participants in	any Arm/Group are reported).
* Required  * § Required fi Primary Completion Date is on or after January 18, 2017  [*] Conditionally required (see Definitions)				
Help Definition	Edit Other (Not Including Serious) A	dverse Eve	ent Total	
Other Adverse Event(s)	Experimental Drug			Placebo
* Total Number	ticipants		participants	1 lacebo
Affected:				
Risk:	ticipants		participants	
Tip: The Total	Number of Participants at Risk is typically equal to the Number of Participants who Started the first Peri	od in the Part	icipant Flow. Preview Participant Flow	1
Save  Validate  Cancel  Required  Sequired if Primary Completion Date is on or after January 18, 2017  Conditionally required (see Definitions)				
	Results: Add Other (Not Including Serious) Adverse Eve	ent		
	Help Definitions			
* Adverse Event Term:				
* Organ System:	Please Select ▼			
Adverse Event Term Additional Description:  Characters remaining: 250				
Source Vocabulary Name:	(table default)			
* § Collection Approach:	Please Select			
Save Cancel	* Required  * § Required if Primary Completion Date is on or after January 18, 2017  [*] Conditionally required (see Definitions)			

	Edit Limitations and Caveats
Defin	nitions
Overall Limitations and Caveats:	Characters remaining: 250
Overall cirrications and Caveats.	Characters remaining, 200
	If appropriate, please describe limitations of the trial.  Examples: Early termination leading to small numbers of subjects analyzed; Technical problems with measurement leading to unreliable or uninterpretable data.
Save Cancel	
	U.S. National Library of Medicine   U.S. National Institutes of Health   U.S. Department of Health S. Human Services
	Edit Certain Agreements
	Restrictions on PI after Trial is Completed
	*Other than an agreement solely to comply with applicable provisions of law protecting the privacy of human participants.
	<u>Definitions</u>
* Are all Pls Employees of Sponsor?	If all principal investigators are employees of the sponsor, select "Yes".  No
[*] Results Disclosure Restriction on PI(s)?	If there is an agreement between the sponsor (or its agent) and any non-employee PI(s) that restricts the PI's rights to discuss or publish trial results after the <u>Primary Completion Date</u> , select "Yes."
	If there are agreements with multiple non-employee PIs and there is a disclosure restriction on at least one PI, select "Yes."  Yes
PI Disclosure Restriction Type:	Indicate which type of restriction applies. If there are varying agreements with multiple PIs, choose the type below that represents the most restrictive of the agreements (e.g., the agreement with the greatest embargo time period).
	None Selected
	The only disclosure restriction on the PI is that the sponsor can review results communications prior to public release and can embargo communications regarding trial results for a period that is less than or equal to 60 days from the time submitted to the sponsor for review. The sponsor cannot require changes to the communication and cannot extend the embargo.
	The only disclosure restriction on the PI is that the sponsor can review results communications prior to public release and can embargo communications regarding trial results for a period that is more than 60 days but less than or equal to 180 days from the time submitted to the sponsor for review. The sponsor cannot require changes to the communication and cannot extend the embargo.
	Other disclosure agreement that restricts the right of the PI to discuss or publish trial results after the trial is completed.
	If the restriction type is "Other disclosure agreement", please describe the agreement.
	Characters remaining: 500
* Provised	

- \* § Required if Primary Completion Date is on or after January 18, 2017

  [8] Conditionally required (see Definitions)

	Edit Results Point of Contact
	Definitions
* Name or Official Title: (of Investigator)	Enter the specific person's name (e.g., Dr. Jane Smith) or a position title (e.g., Director of Clinical Trials).
* Organization Name:	
* § Phone:	Ext.
* § Email:	
Save	* Required  * § Required if Primary Completion Date is on or after January 18, 2017  [*] Conditionally required (see Definitions)