
Standardized Format for Electronic Submission of NDA and BLA Content for the Planning of Bioresearch Monitoring (BIMO) Inspections for CDER Submissions Guidance for Industry

DRAFT GUIDANCE

This guidance document is being distributed for comment purposes only.

Comments and suggestions regarding this draft document should be submitted within 60 days of publication in the *Federal Register* of the notice announcing the availability of the draft guidance. Submit electronic comments to <https://www.regulations.gov>. Submit written comments to the Dockets Management Staff (HFA-305), Food and Drug Administration, 5630 Fishers Lane, Rm. 1061, Rockville, MD 20852. All comments should be identified with the docket number listed in the notice of availability that publishes in the *Federal Register*.

For questions regarding this draft document, contact CDER-BIMO-NDA-BLA-request@fda.hhs.gov.

**U.S. Department of Health and Human Services
Food and Drug Administration
Center for Drug Evaluation and Research (CDER)**

**February 2018
Electronic Submissions**

Standardized Format for Electronic Submission of NDA and BLA Content for the Planning of Bioresearch Monitoring (BIMO) Inspections for CDER Submissions Guidance for Industry

Additional copies are available from:
Office of Communications, Division of Drug Information
Center for Drug Evaluation and Research
Food and Drug Administration
10001 New Hampshire Ave., Hillandale Bldg., 4th Floor
Silver Spring, MD 20993-0002
Phone: 855-543-3784 or 301-796-3400; Fax: 301-431-6353
Email: druginfo@fda.hhs.gov
<https://www.fda.gov/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/default.htm>

**U.S. Department of Health and Human Services
Food and Drug Administration
Center for Drug Evaluation and Research (CDER)**

**February 2018
Electronic Submissions**

Technical specifications associated with this guidance are provided as a separate document and are updated periodically:

- *Bioresearch Monitoring Technical Conformance Guide*

For the most current version of this document, refer to the CDER Guidances web page at <https://www.fda.gov/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/default.htm>.

Contains Binding Provisions and Nonbinding Recommendations

Draft — Not for Implementation

TABLE OF CONTENTS

I.	INTRODUCTION.....	1
II.	BACKGROUND	2
A.	Electronic Submissions to FDA Under Section 745A(a) of the Federal Food, Drug, and Cosmetic Act	2
B.	NDA and BLA Content for BIMO	3
III.	DESCRIPTION OF CLINICAL STUDY-LEVEL INFORMATION, SUBJECT- LEVEL DATA LINE LISTINGS BY CLINICAL SITE, AND SUMMARY-LEVEL CLINICAL SITE DATASET.....	6
A.	Clinical Study-Level Information.....	6
1.	<i>A Comprehensive and Readily Located Table Listing All Clinical Sites That Participated in Clinical Studies</i>	<i>7</i>
2.	<i>A Table Listing All Entities to Whom the Sponsor Has Contracted Clinical Study-Related Activities</i>	<i>7</i>
3.	<i>Protocol, Protocol Amendments, and Annotated Case Report Form(s).....</i>	<i>7</i>
B.	Subject-Level Data Line Listings by Clinical Site.....	8
C.	Summary-Level Clinical Site Dataset	8
IV.	SUBMITTING CLINICAL STUDY-LEVEL INFORMATION, SUBJECT-LEVEL DATA LINE LISTINGS BY CLINICAL SITE, AND SUMMARY-LEVEL CLINICAL SITE DATASET.....	9

1 **Standardized Format for Electronic Submission of NDA and BLA**
2 **Content for the Planning of Bioresearch Monitoring (BIMO)**
3 **Inspections for CDER Submissions**
4 **Guidance for Industry¹**
5
6

7 **I. INTRODUCTION**
8

9 This draft guidance describes the electronic submission of certain data and information in
10 standardized formats, and supersedes the previously issued draft guidance for industry *Providing*
11 *Submissions in Electronic Format — Summary Level Clinical Site Data for CDER’s Inspection*
12 *Planning*.² This guidance applies to electronic submissions of data and information from all
13 major (i.e., pivotal) studies³ used to support safety and efficacy claims in new drug applications
14 (NDAs), biologics license applications⁴ (BLAs) regulated by the Center for Drug Evaluation and
15 Research (CDER), and supplemental applications containing new clinical study reports. It also
16 applies when these data and information are submitted in certain investigational new drug
17 applications⁵ (INDs) in advance of a planned NDA, BLA, or supplemental submission.
18

19 CDER uses the data and information described in this guidance to plan bioresearch monitoring
20 (BIMO) inspections⁶ to facilitate the timely identification of sites for inspection and to ensure
21 that field investigators from the Food & Drug Administration’s (FDA or Agency) Office of
22 Regulatory Affairs (ORA), which is the office responsible for the conduct of the inspections,
23 have the information needed to conduct the inspections. Twenty-four months after this draft

¹ This guidance has been prepared by the Office of Compliance in the Center for Drug Evaluation and Research in consultation with the Office of Translational Sciences, the Office of Biostatistics, the Office of New Drugs, and the Office of Business Informatics.

² See FDA draft guidance for industry *Providing Submissions in Electronic Format — Summary Level Clinical Site Data for CDER’s Inspection Planning*. For the most recent version of a guidance, check the FDA Drugs guidance web page at <https://www.fda.gov/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/default.htm>.

³ For questions regarding whether a study is considered major (i.e., pivotal), applicants should consult the relevant review division.

⁴ This guidance applies only to BLAs regulated by CDER. See “Drug and Biological Product Consolidation” in the *Federal Register* of June 26, 2003 (68 FR 38067), available at <https://www.federalregister.gov/documents/2003/06/26/03-16242/drug-and-biological-product-consolidation>.

⁵ See FDA guidance for industry *Providing Regulatory Submissions in Electronic Format – Certain Human Pharmaceutical Product Applications and Related Submissions Using the eCTD Specifications*.

⁶ See section 704(a) of the Federal Food, Drug, and Cosmetic Act (FD&C Act) (21 U.S.C. 374(a)) and 21 CFR 312.58 (sponsors and contract research organizations), 312.68 (clinical investigators), 312.120(a)(ii), and 314.106(b) (foreign studies not conducted under an IND).

Contains Binding Provisions and Nonbinding Recommendations

Draft – Not for Implementation

24 guidance has been finalized, the data in NDAs and BLAs described in this guidance must be
25 submitted electronically in the format specified in this guidance.⁷

26
27 In section 745A(a) of the Federal Food, Drug, and Cosmetic Act (FD&C Act), Congress granted
28 explicit authorization to FDA to specify, in guidance, the electronic format for submissions
29 under section 505(b), (i), or (j) of the FD&C Act (21 U.S.C. 355(b), (i), or (j)) and submissions
30 under section 351(a) or (k) of the Public Health Service Act (PHS Act) (42 U.S.C. 262(a) or (k)).
31 Accordingly, to the extent that this document provides such requirements, as indicated by the use
32 of the words *must* or *required*, this document is not subject to the usual restrictions in FDA’s
33 good guidance practices (GGP) regulations, such as the requirement that guidances not establish
34 legally enforceable responsibilities. See 21 CFR 10.115(d).

35
36 To comply with GGP regulations and make sure that regulated entities and the public understand
37 that guidance documents are nonbinding, FDA guidances ordinarily contain standard language
38 explaining that guidance documents should be viewed only as recommendations unless specific
39 regulatory or statutory requirements are cited. FDA is not including this standard language in
40 this guidance document because it is not an accurate description of this guidance. Insofar as this
41 guidance specifies the format for electronic submissions pursuant to section 745A(a) of the
42 FD&C Act, it will have binding effect.

43
44

II. BACKGROUND

A. Electronic Submissions to FDA Under Section 745A(a) of the Federal Food, Drug, and Cosmetic Act

45
46
47
48
49
50 The 745A(a) Implementation Guidance sets forth general information on how FDA interprets
51 and intends to implement the electronic submission requirements of section 745A(a) of the
52 FD&C Act. The 745A(a) Implementation Guidance states that it is not feasible to describe and
53 implement the electronic format(s) that would apply to all the submissions covered by section
54 745A(a) in one guidance document. Instead, FDA will periodically issue guidances specifying
55 the electronic format for certain types of submissions. The FDA guidance for industry *Providing*
56 *Regulatory Submissions in Electronic Format — Certain Human Pharmaceutical Product*
57 *Applications and Related Submissions Using the eCTD Specifications* (eCTD Guidance)
58 specifies the general format for certain types of electronic submissions using the Electronic
59 Common Technical Document (eCTD), including the specifications for Module 5.⁸

60

⁷ See section 745A(a) of the FD&C Act and FDA guidance for industry *Providing Regulatory Submissions in Electronic Format — Submissions Under Section 745A(a) of the Federal Food, Drug, and Cosmetic Act* (745A(a) Implementation Guidance).

⁸ The current version of the associated technical specification entitled *The eCTD Backbone Files Specification for Module 1* provides additional information. See FDA eCTD web page at <https://www.fda.gov/Drugs/DevelopmentApprovalProcess/FormsSubmissionRequirements/ElectronicSubmissions/cm153574.htm>.

Contains Binding Provisions and Nonbinding Recommendations

Draft – Not for Implementation

61 In addition to the more general information and implementation timelines found in those
62 guidances, this draft guidance provides additional information regarding the format to be used
63 for electronic submission of NDA and BLA content for the planning and conduct of CDER
64 BIMO inspections, using the eCTD.

65

B. NDA and BLA Content for BIMO

66

67
68 FDA is responsible for making regulatory decisions about the approval of marketing applications
69 and supplements for drugs and biological products, based, among other things, on the Agency's
70 review of data, including clinical safety and efficacy data, submitted in support of NDAs, BLAs,
71 and NDA and BLA supplements.⁹ Section 314.50 (21 CFR 314.50) describes the general
72 content and format of NDAs and supplements, and includes the following requirements:

73

74 An application for a new chemical entity will generally contain an application form, an
75 index, a summary, five or six technical sections, case report tabulations of patient data,
76 case report forms, drug samples, and labeling, including, if applicable, any Medication
77 Guide required under part 208 of this chapter. Other applications will generally contain
78 only some of those items, and information will be limited to that needed to support the
79 particular submission. These include an application of the type described in section
80 505(b)(2) of the [FD&C Act], an amendment, and a supplement. The application is
81 required to contain reports of all investigations of the drug product sponsored by the
82 applicant, and all other information about the drug pertinent to an evaluation of the
83 application that is received or otherwise obtained by the applicant from any source.

84

85 Section 314.50(d) describes the technical sections of an application and requires that each
86 technical section "contain data and information in sufficient detail to permit the [A]gency to
87 make a knowledgeable judgment about whether to approve the application or whether grounds
88 exist under section 505(d) of the [FD&C Act] to refuse to approve the application."
89 Requirements for the clinical data technical section of the application are described in §
90 314.50(d)(5), including the following sections of particular pertinence to this guidance:

91

92 • Requirements for inclusion of a description of, and certain other information regarding,
93 each controlled (see § 314.50(d)(5)(ii)) and uncontrolled clinical study (see §
94 314.50(d)(5)(iii)). Section 314.50(d)(5)(ii) further specifies that the Clinical Data Section
95 of the application "includ[es] the protocol and a description of the statistical analyses
96 used to evaluate the study."

97

98 • Requirement for:

99

100 [a] description and analysis of any other data or information relevant to an evaluation of
101 the safety and effectiveness of the drug product obtained or otherwise received by the
102 applicant from any source, foreign or domestic, including information derived from

⁹ For the purposes of this guidance, all references to drugs include both human drugs and biological products regulated by CDER.

Contains Binding Provisions and Nonbinding Recommendations

Draft – Not for Implementation

103 clinical investigations, including controlled and uncontrolled studies of uses of the drug
104 other than those proposed in the application, commercial marketing experience, reports in
105 the scientific literature, and unpublished scientific papers [see § 314.50(d)(5)(iv)].
106

- 107 • Requirement that:

108 [i]f a sponsor has transferred any obligations for the conduct of any clinical study to a
109 contract research organization, a statement [be included] containing the name and address
110 of the contract research organization, identification of the clinical study, and a listing of
111 the obligations transferred. If all obligations governing the conduct of the study have
112 been transferred, a general statement of this transfer — in lieu of a listing of the specific
113 obligations transferred — may be submitted [see § 314.50(d)(5)(x)].
114

115
116 In addition, § 314.50(f) describes requirements for submission of case report forms and
117 tabulations. Case report forms and tabulations, as discussed in § 314.50(f), include study data
118 tabulations, statistical analysis datasets, data listings, and patient profiles.¹⁰ Specifically, as
119 pertinent to this guidance:

- 120
121 • Section 314.50(f)(1) states that:

122 [t]he application is required to contain tabulations of the data from each adequate and
123 well-controlled study under § 314.126 (Phase 2 and Phase 3 studies as described in §§
124 312.21 (b) and (c) of this chapter), tabulations of the data from the earliest clinical
125 pharmacology studies (Phase 1 studies as described in § 312.21(a) of this chapter), and
126 tabulations of the safety data from other clinical studies. Routine submission of other
127 patient data from uncontrolled studies is not required. The tabulations are required to
128 include the data on each patient in each study, except that the applicant may delete those
129 tabulations which the [A]gency agrees, in advance, are not pertinent to a review of the
130 drug's safety or effectiveness.
131

- 132
133 • Section 314.50(f)(3) states that “[t]he applicant shall submit to FDA additional case
134 report forms and tabulations needed to conduct a proper review of the application, as
135 requested by the director of the FDA division responsible for reviewing the application.”
136

137 Because the reliability of clinical trial data is critical to the approval decision, all CDER review
138 disciplines share responsibility for evaluating data integrity. CDER’s Office of Scientific
139 Investigations (OSI), in the Office of Compliance, has specific responsibility for verifying the
140 integrity of data submitted to CDER in support of applications and supplements, and for
141 determining whether clinical trials are conducted in compliance with applicable FDA regulations
142 and statutory requirements, including those intended to ensure the rights and welfare of human
143 research subjects.
144

¹⁰ See “Study Data Technical Conformance Guide” at
<https://www.fda.gov/ForIndustry/DataStandards/StudyDataStandards/default.htm#guides>

Contains Binding Provisions and Nonbinding Recommendations

Draft – Not for Implementation

145 Clinical data are a central component of most NDAs and BLAs submitted to CDER. As part of
146 the review process, CDER may request ORA investigators conduct on-site inspections of clinical
147 investigators, sponsors/applicants, contract research organizations, and institutional review
148 boards involved in clinical trials that were submitted in support of applications for product
149 approval.¹¹ During these inspections, ORA investigators may obtain, copy, and verify records
150 for FDA-regulated clinical trials with regard to, among other things: (1) subject case histories;
151 (2) storage and disposition of the investigational product under 21 CFR part 312; and (3) clinical
152 data to ensure they are maintained, tabulated, and submitted in compliance with the regulations
153 in parts 312 and 314 (21 CFR parts 312 and 314).¹²

154
155 To meet its review performance goals in accordance with CDER good review management
156 principles and practices for products covered by the Prescription Drug User Fee Act (PDUFA),
157 CDER generally initiates inspection planning early in the application review process (i.e., during
158 the filing determination and review planning phase).¹³ CDER's inspection planning includes (1)
159 the selection of clinical investigator sites and other regulated entities for on-site inspections, and
160 (2) the preparation of assignment memos and background packages that are provided to ORA
161 investigators that perform FDA's BIMO inspections. The following data from NDAs and BLAs
162 are used to facilitate the timely planning and conduct of inspections:

- 163
164 • Identification of all entities to which sponsors have transferred regulatory obligations for
165 clinical trial-related activities
- 166
167 • Locations of clinical study-related documentation (Applicant/Sponsor/Contract Research
168 Organization records)
- 169
170 • Locations of clinical investigator sites
- 171
172 • Case report tabulations of data for each patient in each study that are needed to conduct a
173 proper review of the application

174
175 In addition, in an effort to provide a more timely approach to site selection, CDER has developed
176 a risk-based model to select clinical investigator sites for inspection. The model uses an array of
177 risk parameters across clinical investigator sites associated with marketing applications. To
178 facilitate site selection, the model uses a summary-level clinical site dataset that describes and
179 summarizes the characteristics and outcomes of clinical investigations, both at the study level
180 and at the level of the individual study site. CDER anticipates that the risk-based model will
181 provide for earlier identification of clinical investigator sites for inspection and, therefore, that

¹¹ See section 704(a) of the FD&C Act and 21 CFR 56.115, 312.52(b), 312.58, 312.68, 312.120(a)(1)(ii), and 314.106(b).

¹² See §§ 312.57, 312.58(a), 312.62, and 314.50.

¹³ See the FDA guidance for review staff and industry *Good Review Management Principles and Practices for PDUFA Products*. Agency guidance on electronic submissions will be updated regularly to reflect the evolving nature of the technology and the experience of those using this technology.

Contains Binding Provisions and Nonbinding Recommendations

Draft – Not for Implementation

182 these inspections will be conducted earlier in the review cycle. Using the risk-based site
183 selection model is advantageous because it facilitates good review management practices, as
184 described in the *21st Century Review Process Desk Reference Guide*.¹⁴ The completion of
185 inspections earlier in the review cycle also provides applicants the opportunity to address
186 significant inspection observations earlier in the process.

187
188 Study-specific data (both clinical study-level information and clinical site data)¹⁵ submitted to
189 FDA as part of NDA and BLA packages are described below in section III. The required
190 electronic format for these submissions is described in section IV, below, and the accompanying
191 Bioresearch Monitoring Technical Conformance Guide.

192
193
194 **III. DESCRIPTION OF CLINICAL STUDY-LEVEL INFORMATION, SUBJECT-**
195 **LEVEL DATA LINE LISTINGS BY CLINICAL SITE, AND SUMMARY-LEVEL**
196 **CLINICAL SITE DATASET**

197
198 Reviewers from OSI, the Office of New Drugs (OND), and the Office of Biostatistics rely on
199 timely access to accurate data in NDA and BLA submissions to issue inspection assignments as
200 early in the review process as possible. This is important to ensure that inspection results are
201 available:

- 202
203 (1) To inform OSI’s assessment of data integrity and human subject protection
204 (2) To make recommendations to OND regarding data reliability
205 (3) To permit time for the applicant to address any significant inspection findings
206

207 In the past, applicants have frequently provided this information in variable data formats that are
208 not conducive to timely inspection planning or conduct of inspections. A consistent process for
209 submitting data and information used for routine BIMO inspections is therefore critical to meet
210 the PDUFA timeline goals. To accelerate the process of inspection planning, including the
211 identification of inspection sites, FDA relies on the following items in NDAs, BLAs, and NDA
212 and BLA supplemental applications containing major (i.e., pivotal) study reports used to support
213 safety and efficacy claims.

214
215 **A. Clinical Study-Level Information**
216

217 The items described in this section are used to facilitate inspection planning, including site
218 selection, and the conduct of inspections.
219

¹⁴ See the *CDER 21st Century Review Process Desk Reference Guide*, available at <https://www.fda.gov/AboutFDA/CentersOffices/OfficeofMedicalProductsandTobacco/CDER/ManualofPoliciesProcedures/default.htm>.

¹⁵ See, e.g., § 314.50(d)(5) (clinical data) and § 314.50(f) (case report forms and tabulations).

Contains Binding Provisions and Nonbinding Recommendations

Draft – Not for Implementation

220 1. *A Comprehensive and Readily Located Table Listing All Clinical Sites That*
221 *Participated in Clinical Studies*
222

223 Information concerning clinical sites that participated in clinical studies is relied on to inform the
224 selection of sites for inspection. Accurate contact information is also important because it
225 enables ORA to contact clinical investigators to schedule inspections, and to ensure that
226 inspections are directed to occur at the correct location (i.e., where records are available for
227 review).
228

229 For each study, the applicant should generate a table that includes the name of the clinical
230 investigator at each site, the site identification number, the site address (street address, city, state,
231 and country), and contact information for the site (phone number, fax number when available,
232 and e-mail address when available). When the clinical investigator at a site has changed during
233 the course of the study, the name of the most recent clinical investigator should be listed, with
234 the name(s) of the previous clinical investigator(s) listed in parentheses beneath it. If the
235 applicant is aware of changes to a clinical investigator's site address or contact information since
236 the clinical investigator's participation in the study began, this updated information should also
237 be provided.
238

239 2. *A Table Listing All Entities to Whom the Sponsor Has Contracted Clinical Study-*
240 *Related Activities*¹⁶
241

242 Information concerning clinical study-related activities for major (i.e., pivotal) studies that have
243 been contracted out to other entities is also relied on to inform the selection of sites for
244 inspection, and includes a description of the following:
245

- 246 • All entities to which the sponsor(s) of these studies transferred responsibility for any or
247 all of their regulatory responsibilities
248
- 249 • The study functions that were contracted
250

251
252 For example, transferred responsibilities in a clinical trial may include, but are not limited to,
253 clinical site monitoring, randomization, and drug distribution.
254

255 3. *Protocol, Protocol Amendments, and Annotated Case Report Form(s)*
256

257 The protocol, protocol amendments, and copy of the associated annotated case report form(s) for
258 major (i.e., pivotal) studies used to support safety and efficacy in the application are relied on for
259 the conduct of inspections.¹⁷
260

¹⁶ See §312.23(a)(1)(viii), §312.52, and §314.50(d)(5)(x).

¹⁷ See § 314.50(d).

Contains Binding Provisions and Nonbinding Recommendations

Draft – Not for Implementation

261 **B. Subject-Level Data Line Listings by Clinical Site**

262
263 To verify key study data during inspections, subject-level data line listings by clinical site are
264 provided to ORA investigators. By-site listings for major (i.e., pivotal) studies, including studies
265 with different treatment indications, include listings for each clinical site that consented subjects
266 and contain primary data points in addition to derived data. For example, for a pain trial in
267 which subjects recorded pain scores in a diary, the actual diary scores (i.e., the raw data) are
268 primary data points that were used to calculate the derived primary endpoint and any other
269 derived protocol elements (e.g., an eligibility criterion).

270 271 **C. Summary-Level Clinical Site Dataset**

272
273 The summary-level clinical site dataset, named “clinsite,” contains data from major (i.e., pivotal)
274 studies used to support safety and efficacy claims and is intended:

- 275
276 (1) To characterize individual clinical investigator sites
277 (2) To describe aspects of the studies associated with those clinical investigator sites
278 (3) To present the characteristics and outcomes of the study at the site level

279
280 The summary-level clinical site dataset, submitted in the format described in the FDA Data
281 Standards Catalog, provides critical information to assist with site selection.¹⁸

282
283 The data in the summary-level clinical site dataset comprise data elements collected under the
284 regulations in part 312 (specifically in § 312.62(b), case histories, and § 312.64, investigator
285 reports) and maintained, tabulated, and submitted under the regulations in part 314 (specifically
286 in § 314.50(d)(5), clinical data section, and § 314.50(f), case report forms and tabulations) or in
287 21 CFR part 601 (specifically in § 601.2 and 601.14(a), applications for biologics licenses;
288 procedures for filing).

289
290 A single summary-level clinical site dataset contains data from all major (i.e., pivotal) studies
291 used to support safety and efficacy in the application, including studies with different treatment
292 indications. The dataset includes data independently for each study when clinical investigator
293 sites are involved in multiple studies in support of an application. Summary-level site data are
294 not requested for biopharmaceutical, clinical pharmacology, or animal studies.

295
296 Specifications for the electronic format of the submission of the items described in sections III.A,
297 III.B, and III.C of this guidance are provided in the Bioresearch Monitoring Technical
298 Conformance Guide. This technical specifications document is provided separately and will be
299 updated periodically.

300
301

¹⁸ For required data formats, see the “FDA Data Standards Catalog,” available at <https://www.fda.gov/forindustry/datastandards/studydatastandards/default.htm>.

Contains Binding Provisions and Nonbinding Recommendations

Draft – Not for Implementation

302 **IV. SUBMITTING CLINICAL STUDY-LEVEL INFORMATION, SUBJECT-LEVEL**
303 **DATA LINE LISTINGS BY CLINICAL SITE, AND SUMMARY-LEVEL**
304 **CLINICAL SITE DATASET**

305
306 The clinical study-level information, subject-level data line listings by clinical site, and
307 summary-level clinical site dataset files submitted with NDAs, BLAs, and NDA and BLA
308 supplemental applications must be submitted electronically by using the FDA Electronic
309 Submission Gateway (ESG) or by using appropriate physical media.¹⁹

310
311 More information on submitting the clinical study-level information, the subject-level data line
312 listings by clinical site, and the summary-level clinical dataset is provided in the Bioresearch
313 Monitoring Technical Conformance Guide, which contains data elements for electronic
314 submission of these items.

315
316 In eCTD format,²⁰ the clinical study-level information, the subject-level data line listings by
317 clinical site, and the summary-level clinical site dataset are included in Module 5 – Clinical
318 Study Reports. The files are linked into the Study Tagging File (STF) for each study. Leaf titles
319 for these data are named “BIMO [list study ID, followed by brief description of file being
320 submitted].” In addition, a BIMO STF is constructed and placed in Module 5.3.5.4 – Other
321 study reports and related information. The study ID for this STF is *bimo*. Files described in
322 section III of this guidance, Description of Clinical Study-Level Information, Subject-Level Data
323 Line Listings by Clinical Site, and Summary-Level Clinical Site Dataset, are linked to this BIMO
324 STF, using file tags as indicated below.

325

Requested Item	STF File Tag	Used For	Required File Formats
III.A.1-2	data-listing-dataset	General clinical study-level information	.pdf
III.A.3	Protocol-or-amendment	Protocol and Protocol Amendments, by study	.pdf
III.A.3	annotated-crf	Sample annotated case report form, by study	.pdf
III.B*	data-listing-dataset	Data listings, by study	.pdf

¹⁹ See the FDA guidance for industry *Providing Regulatory Submissions in Electronic Format—Certain Human Pharmaceutical Product Applications and Related Submissions Using the eCTD Specifications*. See also the technical specifications document *Transmitting Electronic Submissions Using eCTD Specifications*, available at <https://www.fda.gov/downloads/Drugs/DevelopmentApprovalProcess/FormsSubmissionRequirements/ElectronicSubmissions/UCM163567.pdf>.

²⁰ See eCTD Backbone File Specification for Study Tagging Files v. 2.6.1 at <https://www.fda.gov/downloads/Drugs/DevelopmentApprovalProcess/FormsSubmissionRequirements/ElectronicSubmissions/UCM163560.pdf>. See also FDA eCTD web page at <https://www.fda.gov/drugs/developmentapprovalprocess/formssubmissionrequirements/electronicsubmissions/ucm153574.htm>.

Contains Binding Provisions and Nonbinding Recommendations

Draft – Not for Implementation

		(Line listings, by site)	
III.C*	data-listing-dataset	Site-level dataset, across studies	.xpt
III.C*	data-listing-data-definition	Define file	.pdf
*See also the Bioresearch Monitoring Technical Conformance Guide			

326

327

328 The BIMO Reviewer’s Guide is placed in the BIMO STF in PDF format, with the leaf title
329 “BIMO Reviewer Guide,” and its file tag is “study-report-body.” The BIMO Reviewer’s Guide
330 contains a description of the BIMO elements being submitted, with hyperlinks to those elements
331 in Module 5.

332

333 For general help with eCTD submissions, please send your questions to ESUB@fda.hhs.gov.²¹

²¹ See FDA eCTD web page at <https://www.fda.gov/drugs/developmentapprovalprocess/formsubmissionrequirements/electronic submissions/ucm153574.htm>.