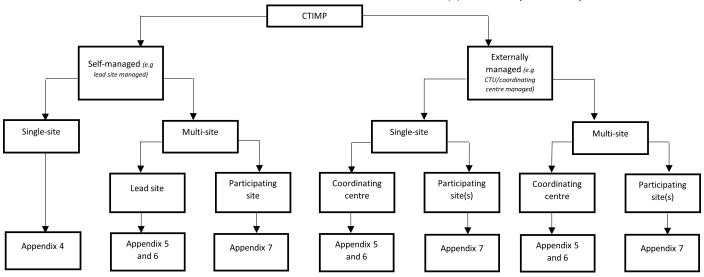


Multi-Site/External Coordinating Centre Trial Master File

(TMF) Contents List for Clinical Trials of Investigational Medicinal Products (CTIMP) – Guidance Page

This contents list should be used by the lead site in a self-managed multi-site CTIMP, or by the external coordinating centre for a single or multi-site CTIMP to create a TMF. In addition to this TMF, a Site-Specific File (SSF) should be created and maintained per participating (research) site using Appendix 6.

Please use the decision tree below to check which contents list(s) is/are required for your trial



Useful definitions

- **Single site self managed trial;** A trial which involves only one research site and where the management of the trial takes place at the same site.
- Single site externally managed trial; A trial which involves only one research site but where the management of the trial sits outside of the research site e.g. with a Clinical Trials Unit (CTU).
- **Multi-site self managed trial;** A trial which involves two or more research sites and where the management of the trial takes place at the lead site.
- Multi-site externally managed trial; A trial which involves two or more research sites but where the management of the trial sits outside of the research sites e.g. with a CTU.
- Lead Site/Coordinating Centre; The site/centre which takes responsibility for the management of the trial, this may be the lead research site or an external coordinating centre e.g. a CTU.
- **Participating site**; Any other research site(s) involved in a trial which do not meet the definition of the lead site listed above.
- **Investigational Medicinal Product;** the active substance or placebo being tested or used as a reference product in a clinical trial.



Tips for using this contents list:

- Not all documents/sections listed below will be applicable to all trials.
 Where an entire section is **not applicable**, it should be marked as such, but the original numbering of the section should be retained, this ensures a consistent filing system across all University of Leicester sponsored trials.
- 2. If a listed document is stored elsewhere, a note to file should be included to record its location and confirm how access can be gained. Where a document is stored electronically, please include the file path.
- 3. Documents should be filed in reverse chronological order (newest on top) with superseded documents marked as such.
- 4. To supersede a document you should;
 - Strike a single line through the front page of the document
 - Write superseded by and add the version and date of the updated document i.e. Superseded by v2.3 01/01/2023
 - Initial or sign and date next to the annotation (please note that anybody undertaking TMF maintenance should be delegated this task on the Delegation of Authority and Signature Log)
- 5. A copy of the relevant contents list should be placed at the front of each TMF/ISF folder. The guidance pages do not require filing.



<u>Multi-Site/External Coordinating Centre Trial Master File (TMF)</u> <u>Contents List for Clinical Trials of Investigational Medicinal Products</u> (CTIMP)

Trial Title:	
Chief Investigator name:	

Section 1: Trial Management		
1.1	List of relevant generic contacts e.g. Sponsor, CTU (if applicable) REC/HRA etc.	
1.2	Gantt Chart (Current and Superseded (if applicable))	
1.3	Trial Documentation version control log/tracker (S-1015 Appendix 3)	
1.0	Section 2: Protocol and Associated Documents	
2.1	Current Protocol signed and dated by the Chief Investigator and Sponsor	
2.2	Superseded Protocol(s) signed and dated by the Chief Investigator and Sponsor	
2.3	Data Flow Diagram (if separate to protocol)	
2.4	Template Protocol Deviation Log (<u>S-1012 Appendix 2</u>)	
2.5	Template File Note (S-1013 Appendix 3)	
2.6	Evidence of peer review (where applicable) (S-1002 – Appendix 2)	
	Section 3: Trial Documentation	
3.1	Current template (non-localised) trial documents e.g. Participant Information Sheets, Template	
	Informed Consent Forms, Letters, Posters, Questionnaires etc	
3.2	Superseded template (non-localised) trial documents e.g. Participant Information Sheets, Template	
	Informed Consent Forms, Letters, Posters, Questionnaires etc (where applicable)	
	Section 4: Initial Regulatory Approvals	
4.1	All initial MHRA/Competent Authority approvals/correspondence e.g. emails/letters confirming Valid	
4.3	Application, GNA, Approval	
4.2	All initial REC approvals/correspondence e.g. emails/letters confirming Valid Application, Provision	
4.3	Opinion, Favourable Opinion All initial HRA approvals/correspondence e.g. emails/letters confirming Initial Assessment, Provision	
4.5	Opinion, Approval	
4.4	Any other applications and approvals <i>e.g. CAG/ARSAC etc. (if applicable)</i>	
4.5	Evidence of NIHR CRN portfolio adoption (where applicable)	
4.6	Confirmation/Evidence of Trial registration e.g. ISRCTN, clincialtrials.gov etc.	
4.7	Combined Review Application and full submission package	
4.8	Relevant Correspondence	
	Section 5: Amendments	
5.1	Substantial Amendment Documents (repeat per substantial amendment)	
	All MHRA/Competent Authority approvals/correspondence e.g. emails/letters confirming Valid	
	Application, GNA, Approval	
	All REC approvals/correspondence e.g. emails/letters confirming Valid Application, Provision Opinion,	
	 Favourable Opinion All HRA approvals/correspondence e.g. emails/letters confirming Initial Assessment, Provision 	
	Opinion, Approval)	
	Any other approvals and supporting documentation e.g. CAG/ARSAC (where applicable)	
	Evidence of amendment submission	



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	Tracked changed amendment documents and cover letter (where applicable)
	Locked amendment tool Relevant segment and an accompany to the segment and accompany to the segment accompany to the segment and accompany to the segment accompany to the segment and accompany to the segment an
5.2	Relevant correspondence Non substantial Amendment Documents (repeat per non-substantial amendment)
5.2	
	REC/HRA approval/correspondence (where applicable)
	Any other approvals and supporting documentation e.g. CAG/ARSAC (where applicable) The second according to the state of the second according to
	Evidence of amendment submission Tradical charged decreased decreased decreased (/ / / / / / / / / / / / / / / / / /
	Tracked changed amendment documents (where applicable)
	Locked amendment toolRelevant correspondence
	Section 6: Annual Reports
6.1	Annual Progress Report (APR) Documentation (repeat per APR)
	Sponsor Acknowledgement of APR
	REC Acknowledgement of APR
	Evidence of submission to REC
	Copy of signed report
6.2	Annual Development Safety Update Report (DSUR) Documentation (repeat per DSUR)
	Evidence of submission to the REC/MHRA (Competent authority)
	MHRA/Competent Authority cover letter
	Copy of signed IB/SmPC annual review form
	Copy of signed report
6.3	Any other annual reports and supporting documents e.g. CAG/funder (if applicable)
6.4	Relevant correspondence
	Section 7: Coordinating Centre Documents (if applicable)
7.1	Template Delegation of Authority and Signature Log (DoA) (S-1010 Appendix 2)
7.2	Coordinating Centre Delegation of Authority and Signature Log
7.3	Coordinating Centre personnel documents (covering the duration of involvement with the trial)
	The following documents should be filed as relevant per person listed on the DoA;
	Signed and dated research CV (HRA template recommended)
	Evidence of GCP training
	Evidence of consent training (if applicable)
	• Evidence of trial specific training e.g. Logs showing protocol training (S-1020, Appendix 1)
	Sponsor SOP read logs (<u>S-1011, Appendix 3</u>)
	Trial Specific SOP read logs (if applicable)
7.4	Coordinating Centre personnel tracking log (A spreadsheet should be maintained which lists all the
	individuals involved in the trial at the site and the dates of relevant documents and training) (<u>S-1015</u>
7.5	Appendix 13) Any other Coordinating Centre documents (if applicable)
7.5	Section 8: Participant Documentation
8.1	Template Screening Log (S-1011 Appendix 5)
8.2	Template Participant Enrolment Log (S-1011 Appendix 6)
	Section 9: Standard Operating Procedures (SOPs)
9.1	Note to file signposting the location of the most current Sponsor SOPs. e.g. web address/electronic
	quality management system
9.2	Current trial specific SOPs or note to file signposting the location (if applicable)
9.3	Superseded trial specific SOPs (if applicable)
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Section 10: Statistics and Analysis		
10.1	Statistical Analysis Plan (must be in place prior to database lock)	
10.2	Procedure for randomisation/code break (if applicable)	
10.2	Master Randomisation List or location e.g. in Sealed Envelope (if applicable)	
10.4	Any other Supporting Documents	
10.4	Section 11: Data Management	
11.1	Current CRF Templates	
11.2	Superseded CRF Templates (if applicable)	
11.3	Evidence of CRF sign off by Chief Investigator, Trial Manager and Statistician (where applicable)	
11.4	DPIA and/or ROPA	
11.4	Data Management Plan	
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11.6	Any other data management documents e.g. overarching data management queries/privacy notices/CRF correction procedures	
	Section 12: Pharmacovigilance/Safety Reporting	
12.1		
	Template Serious Adverse Event (SAE) reporting form (<u>S-1009 Supporting document 1</u>)	
12.2	Superseded template Serious Adverse Event (SAE) reporting form(s) (if applicable)	
12.3	Evidence of SUSAR notification to all participating sites (if applicable)	
12.4	Safety alert updates with evidence of notification to all participating sites (if applicable)	
Section 13: Investigational Medicinal Product(s)		
13.1	Current Investigator Brochure/Summary of Products Characteristics (if applicable with Cl and	
12.2	Pharmacist signed RSI section) Supermodular layestimators Brooks and Community of Brooks at Characteristics (if any live black) with Characteristics (if any live black).	
13.2	Superseded Investigator Brochure/Summary of Products Characteristics (if applicable with Cl and	
13.3	Pharmacist signed RSI section) Investigational Medicinal Product Dossier (IMPD) (if applicable)	
13.4	Current approved IMP/placebo packaging labels	
13.5	Superseded IMP/placebo packaging labels (if applicable)	
13.6	IMP Management/Pharmacy Manual (must include handling and storage of IMP and temperature excursion/recall procedures)	
13.7		
13.7	Prescriptions (if applicable)	
13.8	Superseded IMPTemplate Documents e.g. Accountability Logs, Inventory Logs Forms, Dispensing Logs,	
	Prescription (if applicable)	
13.9	Records of any temperature excursions/product defects/recalls and associated acknowledgement	
	correspondence (if applicable)	
13.10	IMP release documents (e.g. technical/batch/QP release/Certificates of Analysis (CoA))	
13.11	Shipping records for IMP	
13.12	Correspondence with drug manufacturer/drug management company (where applicable)	
13.13	Other Relevant Correspondence	
	Section 14: Clinical Laboratory (if applicable)	
14.1	Lab Manual/Sample Processing Manual	
14.2	List of all laboratories used	
14.3	Certificates of Accreditation for central laboratories	
14.4	Normal Reference Ranges for central laboratories (including revisions)	
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Section 15: Monitoring		
15.1	Trial specific Risk Assessment	
15.2	Trial specific Monitoring Plan	
15.3	Template Monitoring Visit Log (S-1007 Appendix 3)	
15.4	Coordinating Centre Site Initiation Visit (SIV) documentation e.g. agenda, signed closed SIV report and	
	outstanding actions list, signed SIV log and relevant correspondence	
15.5	Coordinating Centre Monitoring documentation e.g. signed closed monitoring visit report(s)/CAPAs and	
	relevant correspondence	
15.6	Coordinating Centre External Audit documentation e.g. signed closed monitoring visit report(s)/CAPAs	
	and relevant correspondence	
15.7	Coordinating Centre Close Out Visit (CoV) documentation e.g. signed closed CoV report/CAPA and	
	relevant correspondence	
15.8	Vendor Monitoring documentation e.g. signed closed CoV report/CAPA and relevant correspondence	
	Section 16: Financial/Legal	
16.1	Grant Application (if applicable)	
16.2	Funding Letter(s)/Financial Agreement(s)	
16.3	Licence Agreements e.g. for validated questionnaires	
16.4	Evidence of Vendor selection/assessments (where applicable)	
16.5	Evidence of procurement (where applicable)	
16.6	Contracts/Contract Addendums (and any relevant correspondence/documents) with all	
	investigators and Sub-contractors/vendors (where applicable) e.g. research agreements, service level	
	agreements, collaboration agreements, safety data exchange agreements, division of responsibilities	
16.7	Participant Identification Centre (PIC) documents (if applicable)	
	Sponsor to PIC site tracker (<u>S-1015, Appendix 5</u>)	
	Sponsor to PIC site documents (repeat per PIC site)	
	Sponsor to PIC site(s) Sponsor Green Light	
	PIC site Confirmation of Capacity and Capability (if applicable)	
	Signed agreement(s) e.g. Sponsor-PIC mNCA	
	Relevant Correspondence	
16.8	Trial Specific Indemnity (including updates where applicable)	
16.9	Sponsor Insurance Certificates covering the duration of the trial	
16.10	Other financial/legal documents/correspondence	
	Section 17: Meetings (where applicable)	
17.1	Trial Steering Committee (TSC) documentation e.g. Charters, Conflict of Interest Forms, Meeting	
	agendas, reports, minutes and correspondence	
17.2	Data Safety Monitoring Committee (DSMC) documentation e.g. Charters, Conflict of Interest Forms,	
	Meeting agendas, reports, minutes and correspondence	
17.3	Investigator meeting documentation e.g. Meeting agendas, reports, minutes and correspondence	
17.4	Trial Management Meeting (TMG) meeting documentation e.g. Meeting agendas, reports, minutes	
	and correspondence	
	Section 18: Publications	
18.1	Copies of all trial analysis publications (including poster presentations/abstracts)	
	Section 19: End of Trial Reporting/Close out activities	
19.1	Signed End of Trial Declaration Form	



19.2	End of trial correspondence e.g. Evidence of End of Trial Declaration submission to and acknowledgement	
	by the Sponsor/REC/HRA/MHRA or competent authority and R&D/I offices	
19.3	Final report	
19.4	Final report correspondence e.g. Evidence of final report submission to and acknowledgement by the Sponsor/REC/HRA/MHRA or competent authority/CAG/ARSAC/R&D/I offices	
19.5	End of Trial Lay Summary for participants	
19.6	Completed End of Trial Sample Declaration form and correspondence (if applicable)	
19.7	Confirmation of completion of publicly accessible database entries e.g. ISRCTN, clinicaltrials.gov	
19.8	Completed End of Sponsor Green Light Checklist	
19.9	Archiving documentation e.g. archiving checklist, details of archiving location and contact	
Section 20: Correspondence		
20.1	Important correspondence with CI/Sponsor and internal site correspondence	
20.2	Newsletters (where applicable)	
20.3	Any other trial specific correspondence (where applicable)	
Section 21: Miscellaneous		
21.1		