

1. CLINICAL DATA MANAGEMENT (CDM)

The Vendor shall oversee the data lifecycle from collection to database lock.

CRF Design & Build: Design of Case Report Forms (CRF) and setup of the Electronic Data Capture (EDC) system.

UAT (User Acceptance Testing): Coordination of UAT and resolution of findings.

Data Cleaning: Ongoing query generation, resolution, and data validation.

Lab Data Management: Integration of external lab data, unit normalization, and reconciliation with the EDC.

Medical Coding: Coding of Adverse Events (MedDRA) and Concomitant Medications (WHODrug Global).

Database Lock: Final quality control (QC), soft lock, and hard lock procedures.

2. CLINICAL RESEARCH ASSOCIATE (CRA) / MONITORING

Site Selection: Conducting Pre-Study Visits (PSV) to assess site suitability.

Site Initiation: Conducting Site Initiation Visits (SIV) and training site staff.

Interim Monitoring: Conducting Interim Monitoring Visits (IMV) to verify Source Data (SDV), drug accountability, and regulatory compliance.

Close-Out: Conducting Close-Out Visits (COV) and archiving site files.

3. BIOSTATISTICS & STATISTICAL PROGRAMMING

SAP Development: Writing and finalizing the Statistical Analysis Plan (SAP) and Mock Shells.

CDISC Standards:

SDTM: Mapping raw data to SDTM domains; creation of define.xml and Reviewer's Guide.

ADaM: Creation of Analysis Data Model datasets.

TLFs: Programming of Tables, Listings, and Figures (TLFs) using SAS.

Statistical Analysis: Conducting the analysis and contributing to the Clinical Study Report (CSR).

4. PHARMACOVIGILANCE (PV) & SAFETY

Safety Database: Setup and maintenance of the safety database.

Case Processing: Receipt, triage, entry, and QC of Serious Adverse Events (SAEs).

Reporting: Expedited reporting to Regulatory Authorities (e.g., FDA/EMA) and Ethics Committees.

Safety Narrative: Writing medical narratives for inclusion in the CSR.

5. PAYMENT SCHEDULE

Upon Contract Signature: 15% of Service Fees.

Upon Final Protocol & SAP Approval: 15% of Service Fees.

Upon First Patient In (FPI): 20% of Service Fees.

Quarterly Payments: Pro-rated based on work completed (units utilized).

Upon Database Lock: 15% of Service Fees.

Upon Delivery of Final TLFs and Datasets: Remaining Balance.

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KEY ASSUMPTIONS

Protocol: Sponsor will provide the final protocol prior to database build.

Edits: Budget includes up to two (2) rounds of review/amendments for the SAP and eCRF. Additional rounds are out-of-scope.

SAE Volume: Budget assumes a maximum of 10 SAEs. Additional SAEs will be billed at the unit rate.

Data Quality: Lab data is assumed to be transferred in a standard ASCII or SAS format requiring minimal restructuring.

Coding Dictionaries: Sponsor holds valid subscriptions for MedDRA and WHODrug or will authorize Vendor to purchase on their behalf.