



MTN-042 Operational Guidance #01: Assessment and Documentation of Congenital Anomalies for Geneticist Review

Procedures for assessment of congenital anomalies, infant photography and upload of photos is provided in SSP sections 7.19.8-7.19.10. This operational guidance document supplements currently outlined SSP guidance in conjunction with Data Communique #01, which describes new CRFs available for documentation of congenital anomaly review by an external geneticist.

All congenital anomaly reports will be reviewed by an external consultant geneticist who confirm a final congenital anomaly determination. As part of this review process, sites will be responsible for completing the following:

- Review infant/delivery medical records for reported congenital anomalies.
 - Certified copies of any relevant medical records from evaluations conducted outside the clinic should be obtained, where possible, and filed in the participant binder.
- For enrolled infants, perform clinical assessments including a physical exam to assess for congenital anomalies and complete a full photo survey (if determined to be contributory and consented to by mother)
- Document assessment of the congenital anomaly in as much detail as possible on the source documents including:
 - For **enrolled infants** (born alive, infant IC obtained) complete the following in the infant casebook:
 - **Physical Examination CRF**
 - **Pregnancy Outcome CRF** (in maternal casebook)
 - **AE Log CRF** (if DAIDS criteria for EAE/SAE reporting met)
 - **EAE Report using Infant PTID** (if DAIDS criteria for EAE/SAE reporting met)
 - **Congenital Anomaly Review CRF**, items “Date of report” through “Are photographs available?” (note: the geneticist will complete items “Date of review” through “Comments”)
 - **Photographic Survey CRF** (if photos warranted/consented to)
 - **EAE Upload CRF** (if reported to DAIDS as an EAE)
 - For **non-enrolled infants** (not born alive and/or infant IC not provided) complete the following in the maternal casebook:
 - **Pregnancy Outcome CRF**
 - **Non-Enrolled Infant AE Log CRF** (if DAIDS criteria for EAE/SAE reporting met)
 - **EAE Report using Maternal PTID** (if DAIDS criteria for EAE/SAE reporting met)
 - **Congenital Anomaly Review CRF**, items “Date of report” through “Are photographs available?” (note: the geneticist will complete items “Date of review” through “Comments”)
 - **EAE Upload CRF** (if reported to DAIDS as an EAE)
- Respond to any clinical queries related to submitted congenital anomalies, as needed (see below)

Upload of DAERS EAE Reports to Medidata RAVE

If the congenital anomaly meets DAIDS defined criteria for reporting as an EAE, then a report should be submitted to DAERS (see SSP section 8.17). Report EAE using the infant PTID for enrolled infants. Report EAE using the maternal PTID for non-enrolled infants. All reporting timelines as outlined in the EAE manual should be followed. Once initial comments have been addressed on EAE report, export a PDF of the EAE report for uploading using the **EAE Upload CRF**. If subsequent updates are made to the submitted EAE report, export a copy of the updated report from DAERS. Add a new log line to the **EAE**

Upload CRF and upload the updated report. Inactivate the log line with the previous version of the EAE report.


Photographic Survey and Upload to Medidata RAVE

See SSP section 7.19.9 for details regarding the photographic survey. Additional details including views required and file naming conventions can be found in the MTN-042 Infant Photography Guide (available on the MTN website under Study Implementation Tools). If photos are taken, use the **Photographic Survey CRF** to upload to Medidata RAVE. Select the best photo from each view and upload only one per required view, with the exception of the close-up anomaly images, which should include as many perspectives as possible is requested (front, rear, left and right lateral, as appropriate).

Addressing Queries from the Geneticist

It is possible that after completing their review, the geneticist may request more information from the site in order to make their final determination. Should this be necessary, sites will receive a clinical query from the SCHARP Clinical Safety Associate within Medidata.

All Operational Guidance documents must be printed and filed with regulatory documentation. This guidance will be incorporated into the SSP on next revision.

DocuSigned by:
Ashley J. Mayo
 Signer Name: Ashley J. Mayo
Signing Reason: I approve this document
Signing Time: 06-Feb-2020 | 09:07 EST
E35C3483DC334F639685A017DB5F043C

06-Feb-2020 | 09:07 EST

Ashley Mayo
Sr. Clinical Research Manager, FHI 360

Date

Certificate Of Completion

Envelope Id: D93B4D0B20D54E458D869E7A2730E792	Status: Completed
Subject: Please DocuSign: MTN042_Operational-Guidance-01_v1.0_06FEB2020.pdf	
CF02:	
Project Code/Charge Code: 100123.701.001	
Source Envelope:	
Document Pages: 2	Signatures: 1
Certificate Pages: 5	Initials: 0
AutoNav: Enabled	Envelope Originator:
Envelopeld Stamping: Enabled	Ashley J. Mayo
Time Zone: (UTC-05:00) Eastern Time (US & Canada)	359 Blackwell Street, Suite 200
	Durham, NC 27701-2477
	AMayo@fhi360.org
	IP Address: 67.167.97.33

Record Tracking

Status: Original	Holder: Ashley J. Mayo	Location: DocuSign
2/6/2020 9:00:44 AM	AMayo@fhi360.org	

Signer Events

Ashley J. Mayo
 amayo@fhi360.org
 Family Health International Inc - Part 11
 Security Level: Email, Account Authentication (Required)

Signature

Ashley J. Mayo

Signature Adoption: Pre-selected Style
 Signature ID:
 E35C3483-DC33-4F63-9685-A017DB5F043C
 Using IP Address: 67.167.97.33

Timestamp

Sent: 2/6/2020 9:05:43 AM
 Viewed: 2/6/2020 9:06:32 AM
 Signed: 2/6/2020 9:07:19 AM

With Signing Authentication via DocuSign password
 With Signing Reasons (on each tab):
 I approve this document

Electronic Record and Signature Disclosure:
 Accepted: 11/6/2019 1:40:28 PM
 ID: 65b116f5-2a06-4080-8a0e-fe9e97084303

In Person Signer Events

Signature

Timestamp

Editor Delivery Events

Status

Timestamp

Agent Delivery Events

Status

Timestamp

Intermediary Delivery Events

Status

Timestamp

Certified Delivery Events

Status

Timestamp

Carbon Copy Events

Status

Timestamp

Witness Events

Signature

Timestamp

Notary Events

Signature

Timestamp

Envelope Summary Events

Status

Timestamps

Envelope Sent	Hashed/Encrypted	2/6/2020 9:05:43 AM
Certified Delivered	Security Checked	2/6/2020 9:06:32 AM
Signing Complete	Security Checked	2/6/2020 9:07:19 AM
Completed	Security Checked	2/6/2020 9:07:19 AM

Payment Events

Status

Timestamps

Electronic Record and Signature Disclosure

ELECTRONIC RECORD AND SIGNATURE DISCLOSURE

From time to time, Family Health International Inc - Part 11 (we, us or Company) may be required by law to provide to you certain written notices or disclosures. Described below are the terms and conditions for providing to you such notices and disclosures electronically through the DocuSign system. Please read the information below carefully and thoroughly, and if you can access this information electronically to your satisfaction and agree to this Electronic Record and Signature Disclosure (ERSD), please confirm your agreement by selecting the check-box next to 'I agree to use electronic records and signatures' before clicking 'CONTINUE' within the DocuSign system.

Getting paper copies

At any time, you may request from us a paper copy of any record provided or made available electronically to you by us. You will have the ability to download and print documents we send to you through the DocuSign system during and immediately after the signing session and, if you elect to create a DocuSign account, you may access the documents for a limited period of time (usually 30 days) after such documents are first sent to you. After such time, if you wish for us to send you paper copies of any such documents from our office to you, you will be charged a \$0.00 per-page fee. You may request delivery of such paper copies from us by following the procedure described below.

Withdrawing your consent

If you decide to receive notices and disclosures from us electronically, you may at any time change your mind and tell us that thereafter you want to receive required notices and disclosures only in paper format. How you must inform us of your decision to receive future notices and disclosure in paper format and withdraw your consent to receive notices and disclosures electronically is described below.

Consequences of changing your mind

If you elect to receive required notices and disclosures only in paper format, it will slow the speed at which we can complete certain steps in transactions with you and delivering services to you because we will need first to send the required notices or disclosures to you in paper format, and then wait until we receive back from you your acknowledgment of your receipt of such paper notices or disclosures. Further, you will no longer be able to use the DocuSign system to receive required notices and consents electronically from us or to sign electronically documents from us.

All notices and disclosures will be sent to you electronically

Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through the DocuSign system all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures electronically from us.

How to contact Family Health International Inc - Part 11:

You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows:

To contact us by email send messages to: nzimmerman@fhi360.org

To advise Family Health International Inc - Part 11 of your new email address

To let us know of a change in your email address where we should send notices and disclosures electronically to you, you must send an email message to us at nzimmerman@fhi360.org and in the body of such request you must state: your previous email address, your new email address. We do not require any other information from you to change your email address.

If you created a DocuSign account, you may update it with your new email address through your account preferences.

To request paper copies from Family Health International Inc - Part 11

To request delivery from us of paper copies of the notices and disclosures previously provided by us to you electronically, you must send us an email to nzimmerman@fhi360.org and in the body of such request you must state your email address, full name, mailing address, and telephone number. We will bill you for any fees at that time, if any.

To withdraw your consent with Family Health International Inc - Part 11

To inform us that you no longer wish to receive future notices and disclosures in electronic format you may:

- i. decline to sign a document from within your signing session, and on the subsequent page, select the check-box indicating you wish to withdraw your consent, or you may;
- ii. send us an email to nzimmerman@fhi360.org and in the body of such request you must state your email, full name, mailing address, and telephone number. We do not need any other information from you to withdraw consent.. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process..

Required hardware and software

The minimum system requirements for using the DocuSign system may change over time. The current system requirements are found here: <https://support.docusign.com/guides/signer-guide-signing-system-requirements>.

Acknowledging your access and consent to receive and sign documents electronically

To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please confirm that you have read this ERSD, and (i) that you are able to print on paper or electronically save this ERSD for your future reference and access; or (ii) that you are able to email this ERSD to an email address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format as described herein, then select the check-box next to ‘I agree to use electronic records and signatures’ before clicking ‘CONTINUE’ within the DocuSign system.

By selecting the check-box next to ‘I agree to use electronic records and signatures’, you confirm that:

- You can access and read this Electronic Record and Signature Disclosure; and
- You can print on paper this Electronic Record and Signature Disclosure, or save or send this Electronic Record and Disclosure to a location where you can print it, for future reference and access; and
- Until or unless you notify Family Health International Inc - Part 11 as described above, you consent to receive exclusively through electronic means all notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you by Family Health International Inc - Part 11 during the course of your relationship with Family Health International Inc - Part 11.