

**From:** [OC GCP Questions](#)  
**To:** [REDACTED]  
**Subject:** 21 CFR Part 11 compliance of Site-administered ePRO  
**Date:** Friday, December 01, 2017 12:25:00 PM  
**Attachments:** [REDACTED]

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Good afternoon –

Please see the cleared response (below) from FDA's Office of Medical Policy. Thank you for your patience.

Kind regards,

Doreen M. Kezer, MSN  
Senior Health Policy Analyst  
Office of Good Clinical Practice  
Office of the Commissioner, FDA



This communication does not constitute a written advisory opinion under 21 CFR 10.85, but rather is an informal communication under 21 CFR 10.85(k) which represents the best judgment of the employee providing it. This information does not necessarily represent the formal position of FDA, and does not bind or otherwise obligate or commit the agency to the views expressed.

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**From:** [REDACTED]  
**Sent:** Thursday, November 16, 2017 1:42 PM  
**To:** OC GCP Questions <[gcp.questions@fda.hhs.gov](mailto:gcp.questions@fda.hhs.gov)>  
**Subject:** 21 CFR Part 11 compliance of Site-administered ePRO

Hello,

Can you please provide some insight into the process I have seen with several site-administered ePRO systems.

A site user logs into the application and then hands the tablet to the subject, who then completes the ePRO.

My concern is that there is nothing in the audit trail to document that the subject actually completed the diary since the site staff logs in.

Would you consider these systems compliant?

Response: We would not consider this site-administered ePRO system (as you describe) to be in line with the eSource principles outlined in FDA's guidance, Electronic Source Data in Clinical Investigations. For the purposes of recordkeeping, audit trail, and inspection, the study participant who participates in the outcome measure and enters information in the ePRO device should be identified as the data originator. In the case of the site-administered ePRO systems, the ePRO device should be programmed to accurately reflect that the study participant entered the information in the diary. For more information, see the following FDA guidance documents:

Electronic Source Data in Clinical Investigations, available at  
<https://www.fda.gov/downloads/drugs/guidances/ucm328691.pdf>

Use of Electronic Records and Electronic Signatures in Clinical Investigations Under 21 CFR part 11 –

Questions and Answers, available at <https://www.fda.gov/downloads/drugs/guidancecomplianceregulatoryinformation/guidances/ucm563785.pdf>. See Q18 on page 14 of this guidance.

Would you consider the system compliant if the subject signs the ePRO or if the site confirms by signature that the subject completed the ePRO. I still have concerns about this approach since there is still a potential for fraud and it doesn't meet the criteria of ALCOA.

Response: If the study participant is physically entering the information in the ePRO device, then the ePRO device should be programmed to accurately reflect the study participants as the data originator. A signature by the subject or a confirmation from the site would not meet the eSource principles outlined in the two guidances listed above.

A second question has to do with validation of questionnaires across different technology systems. Is this still a requirement? I believe I saw somewhere that the FDA is not requiring this validation any more.

Response: In general, FDA recommends that sponsors conduct usability testing in small numbers of patients to ensure patients can complete the questionnaire as intended and to ensure that the use of different technology systems does not change how patients would read, comprehend, and respond to a PRO questionnaire (e.g., changes in screen size do not lead a patient to answer a question differently, patients can complete the questionnaire seamlessly irrespective of which technology system used).

Your office is such a help to the industry. Please extend my thanks to your management for this rapid, thoughtful support. I can't thank you enough for your help.

Best,

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