

VIA UNITED PARCEL SERVICE AND EMAIL

Cincinnati Children's Hospital Medical Center  
Attention: Kacey Appel, Senior Specialist  
3333 Burnet Avenue, ML2008  
Cincinnati, Ohio 45229  
[kacey.appel@cchmc.org](mailto:kacey.appel@cchmc.org)

Re: Submission of Clinical Trial Results Information Pursuant to 42 U.S.C. 282(j)  
**FDA Reference Number: CDER-2020-114**  
NCT02778880

Dear Ms. Appel:

Based on an initial review of Food and Drug Administration (FDA) records; information from the ClinicalTrials.gov data bank operated by the National Library of Medicine, a part of the National Institutes of Health; and any available public information, it appears that Cincinnati Children's Hospital Medical Center is the "responsible party"<sup>1</sup> for the above-identified clinical trial, which appears to be an "applicable clinical trial"<sup>2</sup> subject to the requirements of section 801 of the Food and Drug Administration Amendments Act of 2007, including its implementing regulations in 42 CFR part 11. A responsible party for an applicable clinical trial is required to submit to the ClinicalTrials.gov data bank certain results information for the clinical trial; such results information generally must be submitted no later than one year after the primary completion date of the applicable clinical trial, unless the responsible party has submitted a certification of delay.<sup>3</sup>

FDA has identified potential noncompliance related to the above-identified clinical trial, titled "A Randomized Controlled Trial of Intranasal Sub-dissociative Dosing of Ketamine Compared to Intranasal Fentanyl for Treatment of Pain Associated with Acute Extremity Injuries in

---

<sup>1</sup> See section 402(j)(1)(A)(ix) of the Public Health Service Act (PHS Act) (42 U.S.C. 282(j)(1)(A)(ix)) and 42 CFR 11.10 for the definition of *responsible party*.

<sup>2</sup> See section 402(j)(1)(A)(i) and (iii) of the PHS Act (42 U.S.C. 282(j)(1)(A)(i) and (iii)) and 42 CFR 11.10 for definitions of *applicable clinical trial*.

<sup>3</sup> See section 402(j)(3)(E) of the PHS Act (42 U.S.C. 282(j)(3)(E)) and 42 CFR part 11, subpart C for results information submission requirements.

Children,” which is a Phase 3, randomized, parallel-assignment clinical trial comparing the analgesic effect of intranasal sub-dissociative dosing of ketamine and intranasal fentanyl in children presenting to the emergency department with acute extremity injuries. It appears that results information for the above-referenced applicable clinical trial has not been submitted to the ClinicalTrials.gov data bank. Your institution should review the records of this clinical trial and determine whether your institution submitted all required results information. If your institution determines that results information is required and due for this clinical trial, please submit the results information promptly.

Failure to submit clinical trial information required under section 402(j) of the Public Health Service Act (PHS Act) (42 U.S.C. 282(j)), including information required under the regulations found in 42 CFR part 11, is a prohibited act under section 301(jj)(2) of the Federal Food, Drug, and Cosmetic Act (FD&C Act) (21 U.S.C. 331(jj)(2)). FDA intends to further review and assess the above-identified clinical trial beginning 30 calendar days after you receive this letter. If FDA determines that your institution is not in compliance with all applicable requirements of section 402(j) of the PHS Act (42 U.S.C. 282(j)) and 42 CFR part 11, your institution may receive from FDA a Notice of Noncompliance,<sup>4</sup> and FDA may thereafter initiate an administrative action seeking a civil monetary penalty.<sup>5</sup> In addition to civil monetary penalties, violations of section 301(jj) of the FD&C Act (21 U.S.C. 331(jj)) could also result in other regulatory action, such as injunction and/or criminal prosecution.

As requested, please review the clinical trial records and submit any required results information to the ClinicalTrials.gov data bank. You can access the ClinicalTrials.gov website at <https://register.clinicaltrials.gov>. If you have any questions about this letter, you may call Mark S. Miller, Pharm.D., at (301) 796-2798. Please have the FDA Reference Number provided at the top of this letter available when you call. Alternatively, you may e-mail him at [CDER-OSI-Advisory@fda.hhs.gov](mailto:CDER-OSI-Advisory@fda.hhs.gov). Please include the FDA Reference Number with any e-mail communications.

---

<sup>4</sup> See section 402(j)(5)(C)(ii) of the PHS Act (42 U.S.C. 282(j)(5)(C)(ii)).

<sup>5</sup> Under section 303(f)(3)(A) of the FD&C Act (21 U.S.C. 333(f)(3)(A)), “[a]ny person who violates section 301(jj) [of the FD&C Act (21 U.S.C. 331(jj))] shall be subject to a civil monetary penalty of not more than \$10,000 for all violations adjudicated in a single proceeding.” Moreover, section 303(f)(3)(B) of the FD&C Act (21 U.S.C. 333(f)(3)(B)) provides that “[i]f a violation of section 301(jj) [of the FD&C Act (21 U.S.C. 331(jj))] is not corrected within the 30-day period following notification under section 402(j)(5)(C)(ii) [of the PHS Act (42 U.S.C. 282(j)(5)(C)(ii))], the person shall, in addition to any penalty under subparagraph (A), be subject to a civil monetary penalty of not more than \$10,000 for each day of the violation after such period until the violation is corrected.” The civil monetary penalty amounts listed in this letter reflect the amounts listed in the statute. These amounts are updated annually to reflect inflation, as required by the Federal Civil Penalties Inflation Adjustment Act of 1990 (Pub. L. No. 101-410, 104 Stat. 890 (1990) (codified as amended at 28 U.S.C. 2461, note 2(a)), as amended by the Federal Civil Penalties Inflation Adjustment Act Improvements Act of 2015 (Sec. 701 of the Bipartisan Budget Act of 2015, Pub. L. No. 114-74, November 2, 2015). For the most up-to-date amounts, please see 45 CFR 102.3.

We request that you submit a written response to FDA within 30 calendar days after you receive this letter, stating the actions that you have taken in response to this letter. If you believe that your institution has complied with applicable requirements, please provide us with your reasoning and include any supporting information for our consideration. Please direct your response to the address below and include the FDA Reference Number in all correspondence relating to this matter.

Mark S. Miller, Pharm.D., BCPS, RAC  
CAPT, USPHS  
Branch Chief  
Compliance Enforcement Branch  
Division of Enforcement and Postmarketing Safety  
Office of Scientific Investigations  
Office of Compliance  
Center for Drug Evaluation and Research  
U.S. Food and Drug Administration  
Building 51, Room 5352  
10903 New Hampshire Avenue  
Silver Spring, MD 20993

Sincerely yours,

*{See appended electronic signature page}*

David C. Burrow, Pharm.D., J.D.  
Director  
Office of Scientific Investigations  
Office of Compliance  
Center for Drug Evaluation and Research  
U.S. Food and Drug Administration

Cc: Theresa Frey, M.D., Cincinnati Children's Hospital Medical Center  
[theresa.frey@cchmc.org](mailto:theresa.frey@cchmc.org)

Matthew R. Mittiga, M.D., Cincinnati Children's Hospital Medical Center  
[matthew.mittiga@cchmc.org](mailto:matthew.mittiga@cchmc.org)

-----  
**This is a representation of an electronic record that was signed electronically. Following this are manifestations of any and all electronic signatures for this electronic record.**  
-----

/s/  
-----

DAVID C BURROW  
07/23/2020 11:18:45 AM