



## **Who's Afraid of a Digital TMF? Challenges and Opportunities in the Future of the TMF Standard**

Presented by Jay Smith, Vice President Product, TransPerfect Life Sciences



# Meet the Speaker

Jay Smith

**Title:** Vice President Product, Trial Interactive

**Organization:** Transperfect Life Sciences

Jay currently leads product management at TransPerfect, where he is responsible for the Trial Interactive platform. Prior to joining TransPerfect, he led product teams at Medidata Solutions, Sparta Systems, VenueNext, and Cureatr.

Over his career, Jay has overseen the creation and management of solutions spanning eTMF, CTMS, EDMS, QMS, RTSM, EDC, LMS, and eISF. Earlier in his career, he also developed and managed products for RIMS, RDMS, and Submission Publishing.



## Disclaimer and Disclosures

- The views and opinions expressed in this presentation are those of the author(s) and do not necessarily reflect the official policy or position of CDISC.*



# Agenda

1. TMF Challenges
2. Industry & Strategic Drivers
3. Digital Data Flow
4. Digital Clinical Ecosystem
5. eTMF Interconnects
6. Digital Document Workflows
7. AI & Hyperautomation
8. Benefits & Learnings
9. Benefits Gained
10. Roadmap
11. Next Steps

# Introduction

## Current state of trial master file (TMF):

- Still heavily document-centric
- Historically composed of documents, PDFs, and scanned signatures
- Metadata still limited, manual, and inconsistent
- Metadata definition varies greatly
- Wildly different coding and metadata standards with a shifting landscape
- Systems largely disconnected







## Challenges with the Current Model

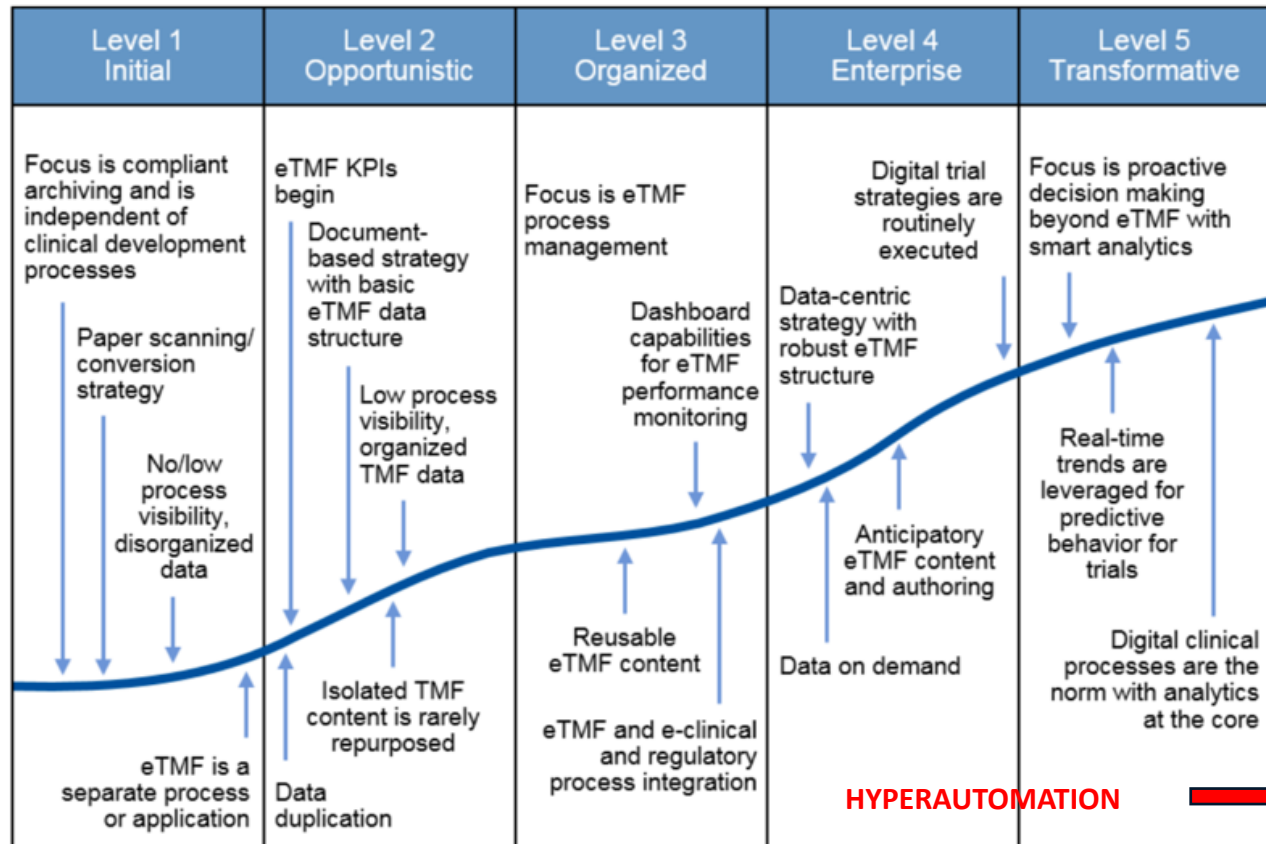
- High manual effort
- Poor interoperability
- TMF treated as only an archive
- Monolithic silos
- Standard is permissive, de facto
- Hard to leverage for analytics or AI

# Industry Drivers



- eTMF systems are becoming more advanced, incorporating data structure, CTMS, and complementary systems
- Agency harmonizations like EU CTR (EU 536/2014) and FDAAA 801 will simplify registration and study start up in different regions
- Larger sites starting to leverage their own enterprise site technology instead of systems provided by sponsors and CROs
- IRB/ECs are (slowly) undergoing digital transformations
- Multi-modal data fusion frameworks, often using AI, are getting a foothold to simplify EDC
- Use of decentralized trials is accelerating with more patient centricity
- TransCelerate and other vendor-based platforms making steady progress, for example eConsent
- Adoption of ICH M11, ADaM, FHIR, ODM, eCTD continue to grow

# eTMF Strategic Drivers



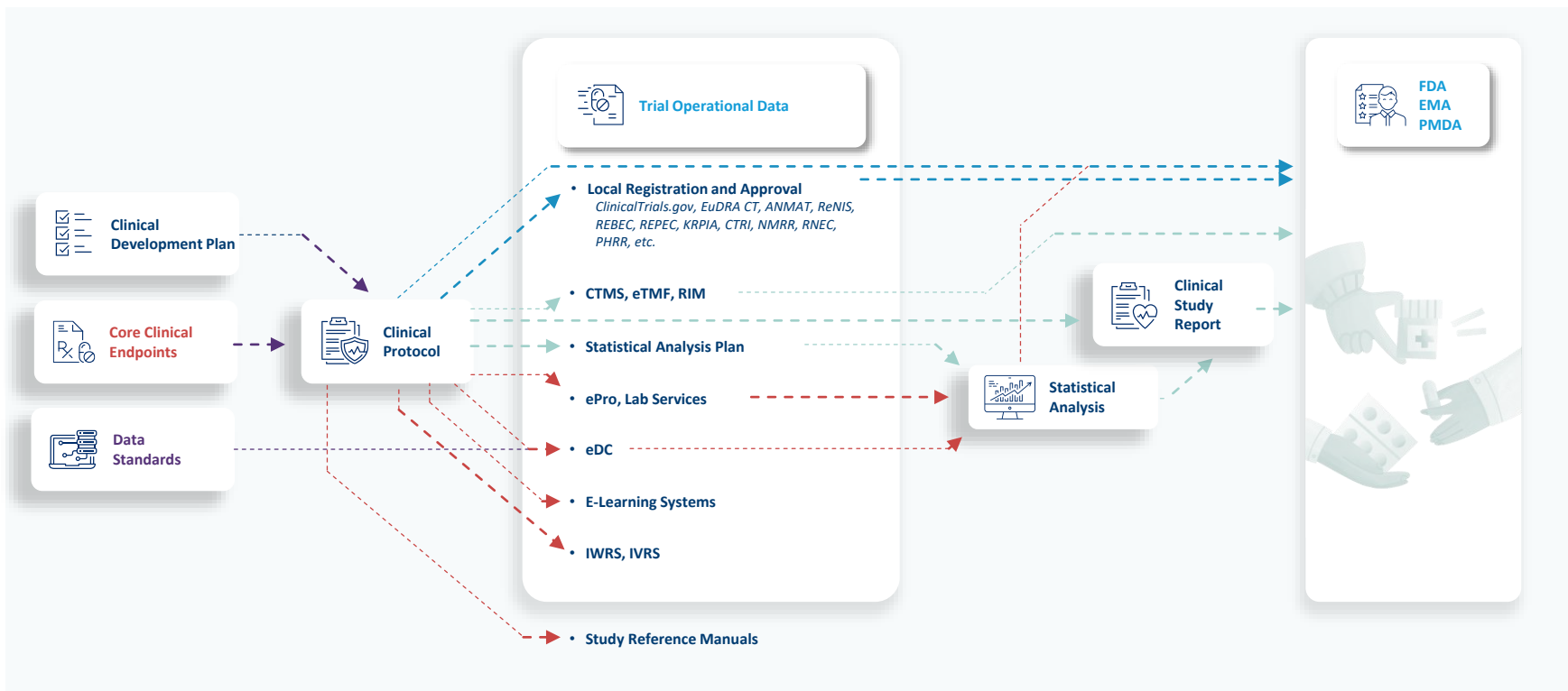
## How can we...

- Transform workstreams?
- Capture real metadata?
- Make proactive decisions?
- Interoperate digitally?

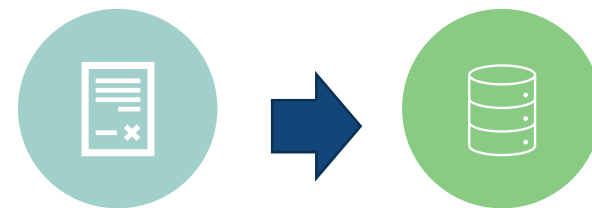
Source: Gartner, "The Trial Master File Function Lifecycle: From Reactive to Strategic," 2019



# Clinical Trial Information Flow



# The Continuing Journey



DOCUMENT-  
CENTRIC

DIGITAL  
SOLUTIONS

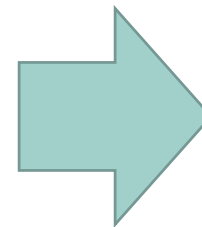


DISCONNECTED  
SILOS



INDUSTRY  
STANDARDS

PRAGMATIC  
CONVERSION



INTERACTION  
AND  
CONNECTION

# The Digital Clinical Ecosystem



Electronic Data Capture  
(EDC)



Clinical Trial  
Management  
System (CTMS)



Sites and Electronic  
Investigator Site File  
(eISF)



Learning  
Management  
System (LMS)



Institutional Review  
Board (IRB/EC)  
Regulators and Agencies



Electronic Trial  
Master File (eTMF)

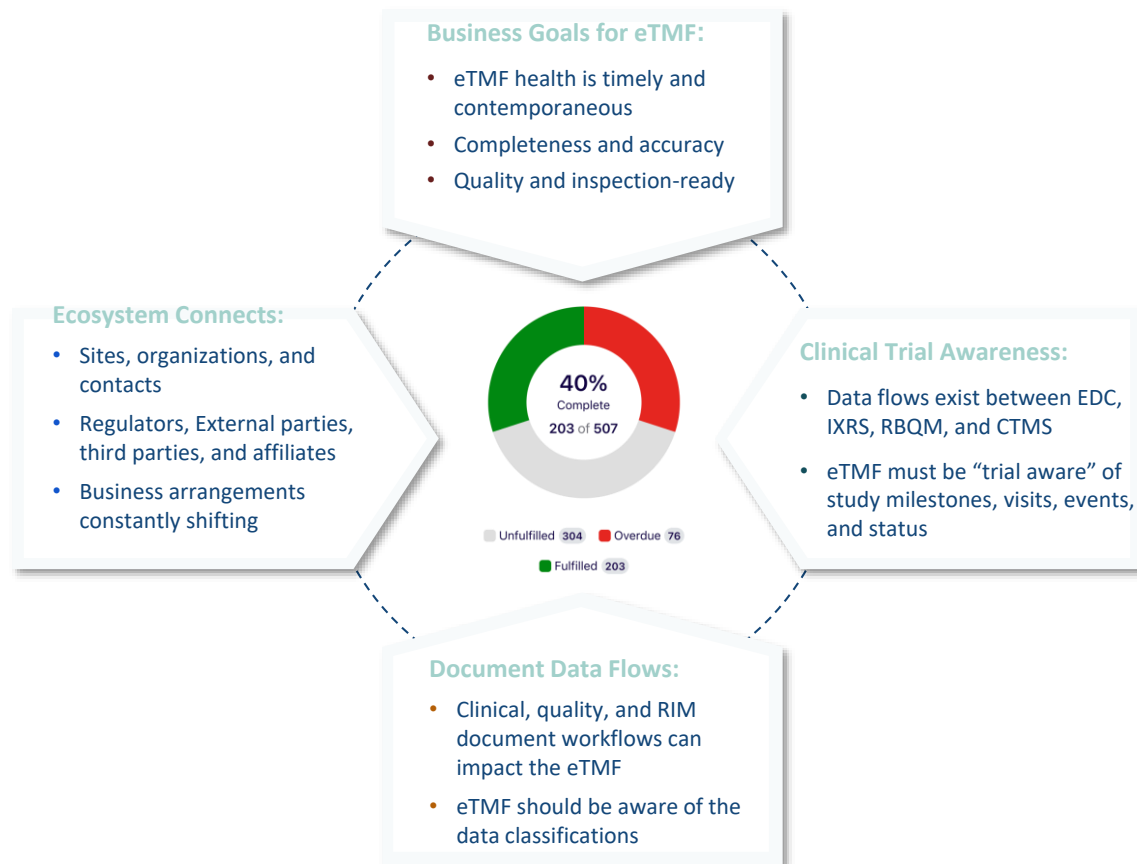


Randomization and Trial  
Supply Management  
(RTSM)



Clinical Data  
Repository and  
Analytics

# eTMF Inter-Connects



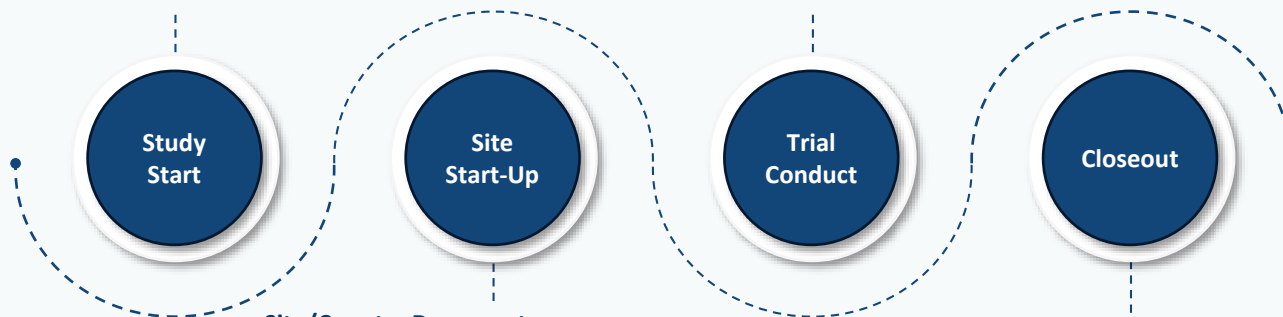
# eTMF Integration Points

## Protocol Creation

- Prepare eTMF with basic information needed to provision the study (IP, protocol #, etc.)
- Trial information - product, protocol number, protocol title, phase, type
- Labs and third-party vendors

## Mid-Trial Updates

- New sites indicates new sets of docs against site milestones
- New investigator requires new 1572, CV, etc.
- Monitoring approved visit reports and letters
- Study, country, and site milestones that indicate a new document must be provided (e.g., protocol amendment)



### Site/Country Documents

- Country/study status based on TMF milestone completion
- Countries - where the study will be conducted
- Automatic update of clinical sites that will participate and the principal investigators, sub-investigators, and site staff who will participate

### Study Milestone Updates

- DB lock and archival milestones and study status that close out and archive the trial in the TMF
- Final regulatory documents archived in the TMF

## eTMF Integration Points

- Studies
- Countries
- Sites
- Investigators
- Contacts
- Participants
- Visits
- Milestones
- Safety/PV
- Issues
- Activities
- Organizations
- Events and Milestones
- Documents





<b>1572 Form</b>	Electronic form filled out that provides investigator, site, contact, and organization data to CTMS and eTMF
<b>Delegation Log</b>	Written form that tracks site personnel changes with their delegations, used for access, training, and documentation requirements.
<b>SUSAR</b>	AE/SAE forms with fielded data is extracted into document metadata, notification workflow is initiated to capture acknowledgements from investigators and agencies are notified
<b>Informed Consent</b>	eConsent process is initiated that activates a patient account, provides remote telephony or virtual meeting to ensure comprehension and compliance, and captures an eSignature (eIC)
<b>Training Certificate &amp; Evidence</b>	Training Certificates and Logs are outputs of the Site Training program, Investigator Meetings, eLearning, coursework, and compliance activities. These must be stored in the eTMF, recorded in the CTMS, and carefully tracked.
<b>Clinical Trial Agreement</b>	Can be generated from the budgeting system and reviewed online in a collaboration space, or directly from a contracting solution
<b>Feasibility Questionnaire</b>	Fully-electronic feasibility questionnaires can provide consistent data from sites that may be captured and re-used to assist in planning and future decision-making
<b>eCRF</b>	EDC, ePRO, eCOA
<b>Protocol Deviation</b>	Electronic form that can be captured immediately into a workflow in the CTMS
<b>Note to File</b>	A Quality Management workflow, with QA signatories and approvers
<b>Subject Enrollment Log (Redact)</b>	Can be generated from the EDC and generated (if necessary) to an electronic document as evidence
<b>Site Monitoring Log</b>	Can be generated from the EDC and generated (if necessary) to an electronic document as evidence

# Digitization of Trial Documents into Fully Digital Business Workflows

# Metadata is the New Index

## 4.1.1.1 Study Object (ResearchStudy) JSON Example

```
{
  "resourceType": "ResearchStudy",
  "id": "study-001",
  "identifier": [
    {
      "use": "official",
      "system": "https://clinicaltrials.gov",
      "value": "NCT01234567",
      "type": {
        "coding": [
          {
            "system": "http://terminology.hl7.org",
            "code": "CT",
            "display": "Clinical Trial Number"
          }
        ]
      },
      "assigner": {
        "display": "ClinicalTrials.gov"
      }
    }
  ],
  "title": "A Phase III Randomized Study of Drug",
  "status": "active",
  "description": "This study aims to evaluate the effect of the drug on hypertension.",
  "primaryPurposeType": {
    "coding": [
      {
        "system": "http://terminology.hl7.org/Code",
        "code": "treatment",
        "display": "Treatment"
```

## 4.2.1.1 Trial Document Object (DocumentReference) JSON Example

```
{
  "resourceType": "DocumentReference",
  "id": "doc-001",
  "identifier": [
    {
      "use": "official",
      "system": "http://example.org/documents",
      "value": "ICF-123456"
    }
  ],
  "status": "current",
  "type": {
    "coding": [
      {
        "system": "http://loinc.org",
        "code": "34108-1",
        "display": "Informed Consent Form"
      }
    ]
  },
  "description": "Informed Consent Form for Clinical Trial",
  "extension": [
    {
      "url": "http://example.org/fhir/StructureDefinition/tmf-level",
      "valueString": "Site"
    },
    {
      "url": "http://example.org/fhir/StructureDefinition/tmf-zone",
      "valueString": "Central Trial Documents"
    }
  ]
}
```

# AI “Hyperautomation” in the TMF Workflow

## Manual Clinical Trial Review Process

MANUAL  
PROCESS



## Human-in-the-Loop Review Process

AI / IDP  
PROCESS

Starts with classification and metadata extraction from key documents

Continues with edit checks, quality checks, image analysis to flag issues

Eventually, predicts missing documents, does cross-checks against Clinical Trial

Total Libraries

24

↗ +2 this month

Total Prompts

156

↗ +2 this month

Avg Response  
Time

24s

↘ -0.3s today

Token Usage

1.4M

↗ +12% this month

System is Healthy

Tue, Sep 30, 2025



All systems are running normally.

Doc Accuracy

86.5%

↗ +2 this month

Doc Issues

120

20% of all Docs

Docs with PHI

1.2K









40% of all Docs

Doc Throughput

42/sec

↘ -0.3s today

Status Notifications

-  **julian** Created new prompt library **eTMF Library** 32m ago
-  **maya** Updated user **dmytro** 45m ago
-  **cirill** Created new prompt **Meeting Minutes Template** 1h ago
-  **jordan** Created new prompt **Form FDA 1527** 2h ago
-  **cirill** Created new prompt **Patient Consent Form** 3h ago
-  **maya** Updated prompt **Clinical Study Protocol** 4h ago
-  **jordan** Created new prompt library **Financial Reports** 6h ago
-  **dmytro** Updated prompt **Protocol** 1d ago

Doc Accuracy of Each Type

DOCUMENT TYPE	TOTAL DOC	ACCURACY	STATUS	REQUIRED ACTION
Acceptance Of Investigator's Brochure	15,000	<div><div></div></div> 98%	✓ Good	-
CAP Certificate	5,000	<div><div></div></div> 98%	✓ Good	-
CLIA Certificate	12,000	<div><div></div></div> 100%	✓ Good	-
Expedited Safety Report	300	<div><div></div></div> 99%	✓ Good	-
Form FDA 1572	1,200,000	<div><div></div></div> 92%	✓ Good	-
Informed Consent Form	1,240,000	<div><div></div></div> 76%	! Critical	<a href="#">Investigate Results</a>
Monitoring Visit Report	7,000,000	<div><div></div></div> 100%	✓ Good	-
Protocol Signature Page	1,200,000	<div><div></div></div> 81%	! Critical	<a href="#">Investigate Results</a>

# Benefits of a Pure Metadata Approach



## Reduced data entry

Across all integrated systems.  
Improved inspection, searching.



## De-risk integrations

As above, data is fungible across ecosystem.  
Integrations become low risk or unnecessary.



## More, higher quality metadata

Quality improves with automation.  
Extraction often limited by human effort.



## AI foundations

Deterministic automation (completeness checks).  
Probabilistic AI (insights, risk detection).

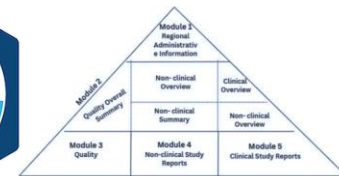


## Digital → intelligence

Document extraction still requires HITL  
support automation.  
AI/LLM requires data for intelligence.



# Lessons Learned from Past Initiatives



## ODM(Operational Data Model)

- Highly prescriptive technology approach (XML)
- Completely flexible structure
- Designed for data, not documents
- Focused on metadata and data model
- Focused use cases on subject data (not comprehensive)
- High machine readability (can be parsed easily by any software)
- Allows expansion and extensions
- Poor human readability
- Industry adoption is optional and strong

## ICH eCTD (Electronic Common Technical Document)

- Highly prescriptive technology approach (XML)
- Highly prescriptive index structure
- Designed for submissions and documents, not data
- Comprehensive use cases to capture all submission types (except med device)
- Poor machine readability (requires specialized software)
- Limited flexibility, not expandable
- Poor human readability
- Industry adoption is weak but enforced

# TMF Digitalization Roadmap



## 2024–2025

- Public roadmap published
- Vendor panel started
- Interoperability discussions

## 2026

- Public review/comment period
- Controlled terminology finalized

## 2027

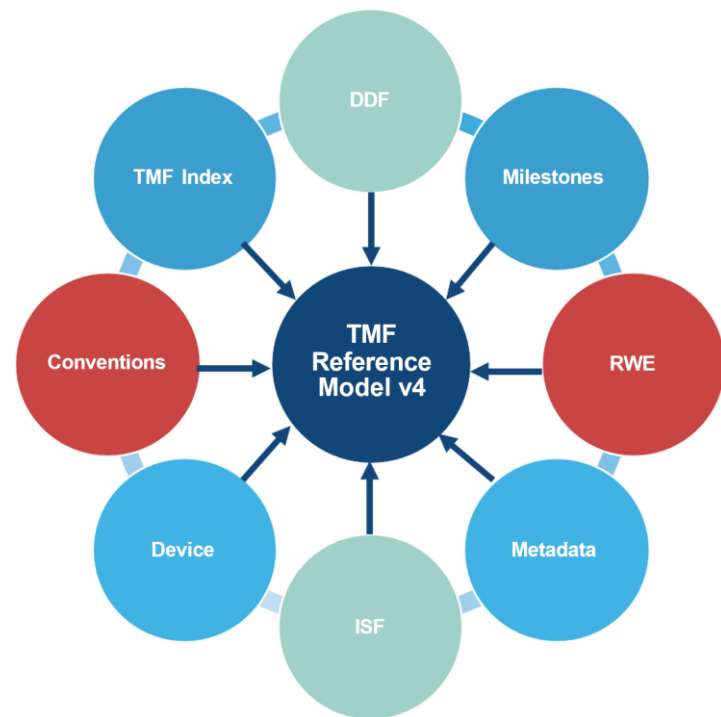
- CDISC TMF RM4 released
- USDN 1.0

## (Possible) Future

- Merge with DDF/USDN
- Data-first, metadata-centric TMF

# Actions and Next Steps

- Sponsors and CROs should consider their entire clinical ecosystem, going beyond their four walls
- Vendors should consider data standards as a baseline requirement for their systems
- Can focus to solve iterative, pragmatic use cases that solve real operational business challenges
- Should look to view these standards as the pragmatic baseline for system interoperability
- Eventually, should look to extend TMF into DDF and align with USDN





**Thank You!**

