

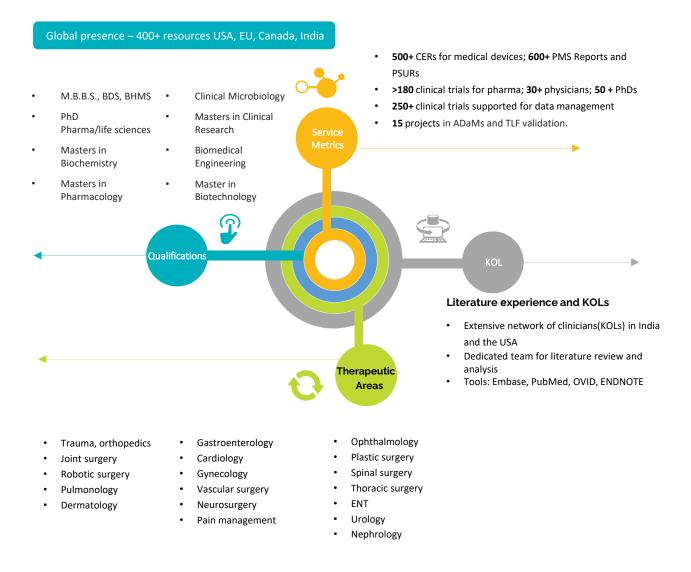
Growth partnership for a self-care centric lifestyle

Innovation | Acceleration | Growth



HCL Medical Affairs Center of Excellence

Medical affairs CoE



Medical device clinical evaluation report and PMS services



- Gap assessments for CER
- Creation/update of clinical evaluation plan and report for EU, China, Australia
- Periodic risk evaluation reports (PRER) China



- Creation and update of PMS plan, PMS report, PSUR,
- Creation of SSCP, PMCF plan and report
- Validation of clinical claims



- Literature search and analysis
- Complaint analysis medical records
- Risk-benefit analysis
- Risk management file review

Clinical trials – End-to-end services

Medical writing

- Clinical trial documents
- Publications
- Posters, brochures, flyers, manuscripts
- Scientific slide decks
- Medical information documents
- Standardized process flow for content creation

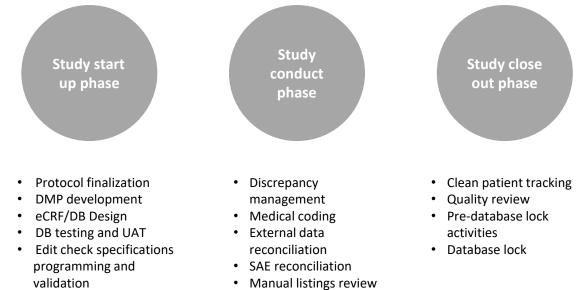
Biometrics

- Study setup phase
- Data management
- EDC platforms and standards
- Statistical consulting
- Statistical analysis plan
- SAS programming
- Reporting and analysis

Safety management

- Review subject eligibility
- SAE management
- Medical monitoring
- Medical coding
- PSURs, PBRERs, PADER, clinical overview documents

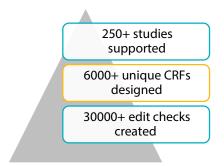
Clinical data management service overview



• Go-Live

Capabilities and platform

- Clinical data management offers flexible service offerings
- Several customer audits with <5% minor observations and been part of ISO and DCGI audits





- Oracle clinical
- OC RDC
- eTrials
- RAVE
- Oracle InForm
- AgClinical

Standards

Medical coding

- MedDRA, WHOdDrug Industry standards
- CDISC
- CDASH
- SDTM
- ADaM

Oncology | Cardiovascular | Dermatology | Respiratory | Gastroenterology Endocrinology | Nephrology

Biostatistics overview

Support end-to-end activities including protocol development, study design, sample size estimation, randomization schedules and programming activities

Statistical analysis plans (SAP)

SAS[®] programming (generation of tables, listings and figures programming)

Statistical/medical reporting as per ICH E9/E3 guidelines

CDISC® Study Data Tabulation Model (SDTM) mapping and conversion,

generation of ADaM (Analysis of Data Models)

Analysis dataset programming and documentation

Interim analysis for early decision making

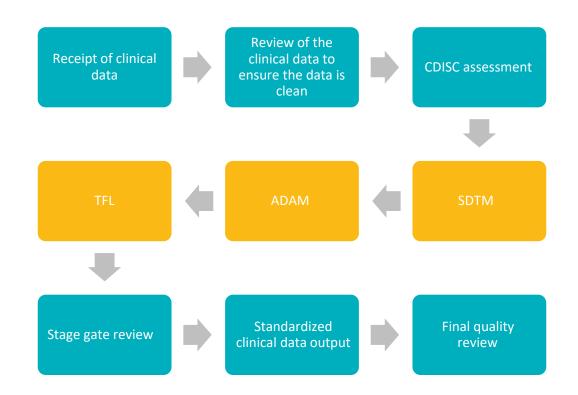
Tables, listings and figures validation and quality control

Ad hoc statistical support

Interpretation and reporting of data for clinical trial reports and publications

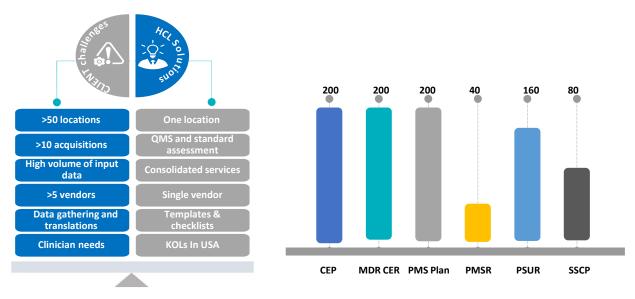


Statistical programming flow



- Successfully completed around 15 projects in ADaMs and TLF validation
- 10 ongoing projects in medical devices
- * 100 % high accuracy rate and client appreciation for on-time delivery

Centralized clinical support for a large medical device leader



Volume increase from 100 to 680+ documents in 5 years



CER creation template creation



Support in notified body audits



Flowchart for PMCF assessment



Dedicated medical writing team comprising technical writers, medical writers, SMEs, expert quality reviewers and copy editors







100% Adherence to timelines



One-stop solution

Case study : Centralized clinical support for a large medical device leader



Dr. Praveen Kandula Nephrologist



Dr. Joshua Cardiothoracic Surgeon



Dr. Ira Davis Pediatric Nephrologist



Dr. Swetha Kandula Dermatologist



Dr Prashanth Sreeramoju General Surgeon



Dr. Radha Annamalai Ophthalmologist



Dr. Rahul Pannala Gastroenterologist



Dr. Suresh Chandra Surgical Gastroenterologist & Laproscopic Surgeon



HCL medical affairs - Subject matter experts



Dr. Sreedhar Bunga MBBS, MPH 19yrs in Clinical Research



Dr. Padma Priya MBBS, MSc CRRA 15+yrs in Pharma & Medical Devices



Dr. Arun Bhaskar MBBS, MMST (IIT Kharagpur) 10+ years in Clinical Research



Rashmi Angeline Grace V MBA,Msc IT 13 yrs in Clinical Data Management



Thambidurai Muthusamy Masters in Pharmacy 10+yrs in Pharma & Medical Devices



Lakshmi C A Masters in Biotechnology 13+ years in Clinical Research



Bharath Kumar Yakkala Masters in Statistics 8+ years in Clinical Research

HCL experience with notified bodies

Notified body review comments

Clarifications on clinical evidence of devices based on available information, appraisal criteria, request for submission of device promotional materials, query on PMCF plan requirement, CER sections on device claims and clinical benefits to substantiate scientifically sound evidence CERs completed Class I, IIa, IIb & III – 500 CERs MDR CERs - 50

PMS experience Creation of 150 PMS plans, 200 PMS reports, 73 PSURs, 10 PMCF plans, 2 SSCPs

Notified body audits BSI, TUV SUD, TUV Rheinland, DEKRA and DQS 20 engagements (US/Japan/EU customer)

- >100 CERs went through the NB review and had < 5% observations
- HCL has supported a US client during BSI's Assessment of technical documentation for one of the CERs and received positive feedback with no major findings on the CER
- HCL supported CE certification of two products belonging to Japan OEMs. Both the CERs written by HCL were accepted by NBs.

CDM case study 1



- The client is one of the world's largest pharmaceutical companies based in the US
- Handling huge volume of external data reconciliation including outliers while performing endto-end activities for phase 3 study
- Reconciling vendor data (Lab & SAE)with clinical database data is time-consuming and tedious

Challenges

- · Introduced SAS system to avoid manual reconciliation of vendor lab data and SAE
- SAS reports were programmed in such a way highlighting the discrepancies to be reviewed by data managers





- Reviewers can easily compare the lab data, SAE data and clinical data in stringent timelines while reviewing overall data.
- Reconciliation process was streamlined with access to all key stakeholders
- Readily available metrics, reduced reconciliation time up to 75%

Outcome

CDM case study 2



- The client is a global pharmaceutical company dedicated to clinical trials. The challenge during reconciliation activities were vendor sending the external data (Lab data, SAE data)in a different format template from agreed over the initial agreement discussion
- Large multicentric clinical trial services involving multiple geography and vendors
- Delay in transferring the data impacts the whole reconciliation process delay and in analyzing the critical data
- Established a procedure to ensure external data transfer in agreed format from all vendors. Maintaining uniformity in the reference ranges and units as defined in the protocol
- Perform test transfer before production
- Review and clean external data on an ongoing basis





Seamless functioning with multiple vendors and sites throughout the world

Efforts been channelized properly and rework on reconciliation data format have been eliminated by 80%

Outcome

SAS programming case study 1



- Validating correctness of raw data for multicenter phase III study
- If data discrepancies are identified in later stages, like in reports, then the whole process has to be repeated and likely lead to corrections in SDTMS, ADAMS and REPORTS (also database unlock rarely)
- This could impact study timelines, cost and data quality
- **Challenges**
- Use of standard macros for early detection of discrepancies from the raw data using edit check ٠ programming (both manual and system-driven).





100% clean datasets Saves a significant amount of time

Outcome

SAS programming case study 2



Validation and output review for critical and most-critical data

Challenges

- · Risk-based validation approach for primary and secondary endpoints
- Pass through multiple QC gateways
- Parallel approach on both production and validation process •

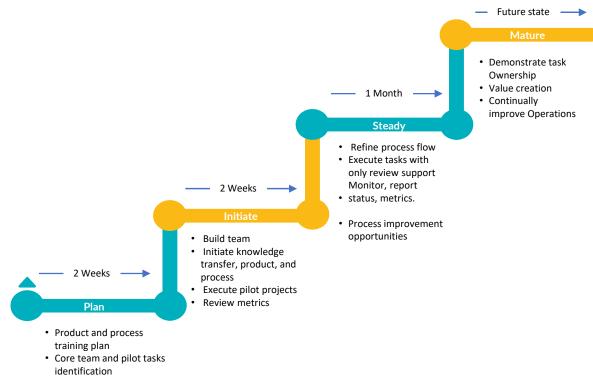




- First-time quality
- High accuracy
- On-time delivery of datasets (SDTM's, ADAM's)and TFL analysis reports

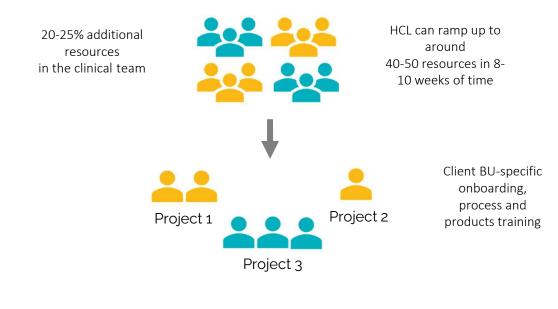
Outcome

Change management / transition approach



Identify key metrics

Scalability, training, and issue resolution



Project alignment

Associate development plan	Skill GAP assessment done for all associates and training are provided per the gaps identified	Strong governance mechanism jointly managed by HCL & Client	
		HCL Client Partner	Client Sourcing Head
Critical resource developmental plan	Critical resources are identified and rated by HCL and client managers and a developmental are initiated.	HCL Delivery Head	Client Program Owner
Succession &	Succession plan and rotation plan are put in a place to ensure associates are rotated to mitigate personal dependencies.	HCL Program Manager	Client Program Manager
Rotation Plan		HCL MA Team	Client MA Team
		Resolved	Escalated to next level

Continuous monitoring of program health and course correction through:

Weekly status reporting | Monthly project reviews | Quarterly business reviews

FOR MORE INFORMATION, PLEASE CONTACT

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www.hcltech.com

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