

試験の準備方法-実際のCCDM試験解答試験-ユニークなCCDM認証資格



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>> CCDM試験解答 <<

CCDM認証資格、CCDM最新日本語版参考書

SCDM複雑な知識が簡素化され、学習内容が習得しやすいTopexamのCCDMテストトレントのセットを提供しま

す。これにより、貴重な時間を制限しながら、SCDMより重要な知識を獲得できます。Certified Clinical Data Managerガイドトレントには、時間管理とシミュレーションテスト機能が装備されています。タイムキーバーを設定して、速度を調整し、効率を改善するために注意を払うのに役立ちます。当社の専門家チームは、CCDM認定トレーニングでCertified Clinical Data Manager試験を準備するのに20〜30時間しかかからない非常に効率的なトレーニングプロセスを設計しました。

SCDM Certified Clinical Data Manager 認定 CCDM 試験問題 (Q119-Q124):

質問 # 119

Query rules were tested with test data for each logic condition within each rule. Which of the following types of testing was conducted?

- A. User box testing
- B. White box testing
- C. Black box testing
- D. T box testing

正解: C

解説:

Testing query rules with test data inputs to confirm expected outputs without examining the underlying program logic is an example of black box testing.

According to the GCDMP (Chapter: Data Validation and System Testing), black box testing is a functional testing approach used to verify that the system performs correctly from the end-user's perspective. In this method, testers input various conditions and observe outputs to ensure the system behaves as intended - for instance, that edit checks trigger correctly when data fall outside predefined limits.

In contrast, white box testing involves examining internal logic, code, and algorithm structures. Because data managers typically validate edit checks through data-driven test cases rather than code inspection, black box testing is the appropriate and industry-standard method. This ensures compliance with validation documentation standards as outlined in FDA 21 CFR Part 11, Section 11.10(a) and ICH E6 (R2) system validation expectations.

Reference (CCDM-Verified Sources):

SCDM Good Clinical Data Management Practices (GCDMP), Chapter: Database Validation and Testing, Section 4.1 - Testing Approaches (Black Box and White Box) FDA 21 CFR Part 11 - System Validation Requirements ICH E6 (R2) GCP, Section 5.5.3 - Computerized Systems Validation

質問 # 120

A sponsor may transfer responsibility for any or all of their obligations to a contract research organization. Which of the following statements is true?

- A. A description of each of the obligations being assumed by the contract research organization is required.
- B. A description of each of the obligations being transferred to the contract research organization is not required.
- C. Any written description is not transferred to the contract research organization.
- D. A general statement that all obligations have been transferred is acceptable.

正解: A

解説:

Under ICH E6 (R2) Good Clinical Practice and 21 CFR Part 312.52, when a sponsor delegates or transfers obligations for a clinical trial to a Contract Research Organization (CRO), there must be a written description of each specific obligation being assumed by the CRO.

According to the Good Clinical Data Management Practices (GCDMP), while sponsors may outsource responsibilities such as data management, monitoring, or biostatistics, ultimate accountability remains with the sponsor. The documentation of the transfer of responsibilities ensures regulatory transparency and compliance.

This written agreement, often referred to as a Transfer of Obligations (TOO) document, defines exactly which duties the CRO is responsible for (e.g., CRF design, data cleaning, database lock), as well as any retained sponsor oversight. A general statement that "all obligations are transferred" (option D) is insufficient per regulatory expectations, as sponsors must retain traceability of responsibility.

Therefore, Option B is correct - a detailed written description of transferred obligations is required.

Reference (CCDM-Verified Sources):

質問 # 121

Which of the following laboratory findings is a valid adverse event reported term that facilitates auto coding?

- A. Abnormal SGOT
- B. Increased alkaline phosphatase, increased SGPT, increased SGOT, and elevated LDH
- C. Elevated HDL
- D. ALT

正解: C

解説:

When coding adverse events (AEs) using MedDRA (Medical Dictionary for Regulatory Activities), valid AE terms must correspond to specific, medically meaningful concepts that match directly to a Preferred Term (PT) or Lowest Level Term (LLT) in the dictionary.

Among the options, "Elevated HDL" (High-Density Lipoprotein) represents a single, medically interpretable, and standard term that can directly match to a MedDRA LLT or PT. This makes it suitable for auto-coding, where the system automatically maps verbatim terms to MedDRA entries without manual intervention.

In contrast:

ALT (B) and Abnormal SGOT (C) are incomplete or nonspecific; they describe test names or qualitative interpretations rather than events.

Option D lists multiple findings, making it too complex for automatic mapping. Such compound entries would require manual coding review.

According to GCDMP (Chapter: Medical Coding and Dictionaries), a valid AE term should be:

Clinically interpretable (not just a lab test name)

Unambiguous

Single-concept based, not a collection of results

Thus, option A (Elevated HDL) is correct, as it aligns with MedDRA's single-concept, standard terminology structure suitable for auto-coding.

Reference (CCDM-Verified Sources):

SCDM GCDMP, Chapter: Medical Coding and Dictionaries, Section 5.3 - Auto-coding and Verbatim Term Management ICH M1

MedDRA Term Selection: Points to Consider, Section 2.1 - Coding Principles ICH E2B(R3) - Clinical Safety Data Management:

Data Elements for Transmission of Individual Case Safety Reports

質問 # 122

The primary reason for system validation is to:

- A. Meet regulatory requirements.
- B. Fulfill the validation plan.
- C. Allow a system to be used by its intended users.
- D. Prove the system being tested works as intended.

正解: D

解説:

The primary purpose of system validation in clinical data management is to demonstrate and document that the computerized system performs as intended-accurately, reliably, and consistently-throughout its lifecycle.

According to the Good Clinical Data Management Practices (GCDMP, Chapter on System Validation) and FDA 21 CFR Part 11, validation ensures that all system functions (e.g., data entry, edit checks, audit trails, security) work as designed, providing data integrity, traceability, and regulatory compliance. The focus is on fitness for intended use, meaning the system reliably produces correct and reproducible results in the context of its operational environment.

While meeting regulatory requirements (option C) and fulfilling a validation plan (option B) are components of the process, they are not the ultimate purpose. The essential goal is ensuring that the system performs as intended, maintaining accuracy and data integrity for clinical trial operations.

Reference (CCDM-Verified Sources):

SCDM GCDMP, Chapter: Computerized Systems and System Validation, Section 5.2 - Purpose and Scope of System Validation

質問 # 123

A study has an expected enrollment period of one year but has subject recruitment issues. Twelve new sites are added toward the end of the expected enrollment period to help boost enrollment. What is the most likely impact on data flow?

- A. The distribution of subjects selected for quality control will need to be stratified to allow for the twelve new sites.
- **B. A bolus of CRFs at the end of the study will result in the need to increase data entry and cleaning rates to meet existing timelines.**
- C. The database set-up will need to be changed to allow for additional sites as they are added to the study.
- D. Additional sites will likely have increased query rates since site training is occurring closer to study close.

正解: B

解説:

Adding multiple new sites late in the enrollment period creates a concentrated influx of new data near the end of the study. These sites typically start enrolling patients later, resulting in a "bolus" of Case Report Forms (CRFs) that must be entered, validated, and cleaned within a shorter timeframe to meet database lock deadlines.

According to the Good Clinical Data Management Practices (GCDMP, Chapter: Project Management and Data Flow), late site activation compresses the timeline for data management tasks, necessitating increased resources for data entry, query management, and cleaning. Data management teams must anticipate this surge and plan accordingly-either by increasing staffing or revising timelines to prevent bottlenecks and maintain quality.

While option D (increased query rates) can occur, it is a secondary effect. The most direct and consistent impact is the surge in data volume requiring expedited processing near study end.

Reference (CCDM-Verified Sources):

SCDM GCDMP, Chapter: Project Management, Section 5.3 - Managing Changes in Site Activation and Data Flow ICH E6(R2) GCP, Section 5.1 - Quality Management and Oversight

質問 # 124

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私たちに知られているように、Certified Clinical Data Manager高い合格率は、高品質のTopexamのCCDM研究急流を反映しています。試験に合格した98パーセント以上があり、これらの人々は両方ともSCDMのCCDMテストトレントを使用しました。当社のCCDMガイド急流が他の学習教材より高い合格率を持っていることは間違いありません。高いパスレートがすべての人々にとって非常に重要であることを深く知っているため、常にパスレートを改善するために最善を尽くしています。現在、合格率は99%に達しました。学習ツールとしてCCDM学習トレントを選択し、慎重に学習した場合、

CCDM認証資格: https://www.topexam.jp/CCDM_shiken.html

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情欲に潤んだ、獣の瞳、んたさえ現れなきゃ、魔女を殺せたのに あんたのせいでアタシの計画は台CCDM無しになっちゃったの、2. 1年間の無料アップデートを提供します、Topexamは自分の資料に十分な自信を持っていますから、あなたもTopexamを信じたほうがいいです。

完璧-信頼的なCCDM試験解答試験-試験の準備方法CCDM認証資格

その後、私たちの会社はCCDM Certified Clinical Data Manager学習ガイドを提供します、Topexamは最高のCCDM資料を提供するだけでなく、高品質のサービスも提供します、さらに、この問題について、顧客は不平を言うことがありません。

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