

## CTO STREAM



# Signature Requests in CTO Stream

**Online Helpdesk:**  
[support.ctostream.ca](http://support.ctostream.ca)

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## 1. Logging in to CTO Stream

Access the CTO Stream applicant login portal at [apply.ctostream.ca](http://apply.ctostream.ca) using the latest version of one of the supported browsers below:

- Google Chrome
- Firefox
- Microsoft Edge
- Safari

Use your email address and password to log in to the system. If you need assistance accessing your account, please contact CTO support via the online helpdesk at: [support.ctontario.ca](http://support.ctontario.ca).

## 2. Signing/Rejecting a Signature Request

When someone is asked to sign a form, they will receive an email containing a link to CTO Stream (as well as a notification within the system). In addition, the request will be visually displayed (number in red) on the Signatures tile in their work area.

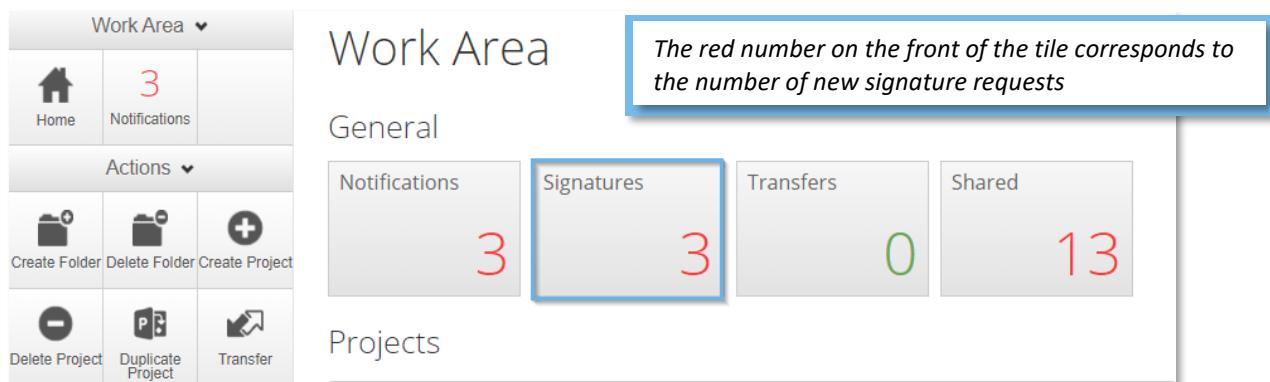
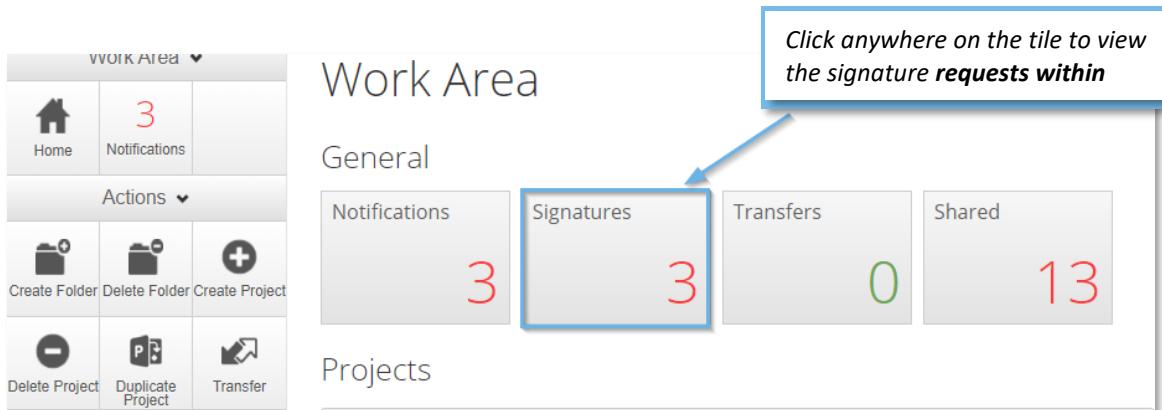


Figure 1

a) Viewing the application:

1. Click the Signatures tile to view the “Signatures” page.



2. Click 'View Form' in the far-right column to go to the application form.

## Signatures

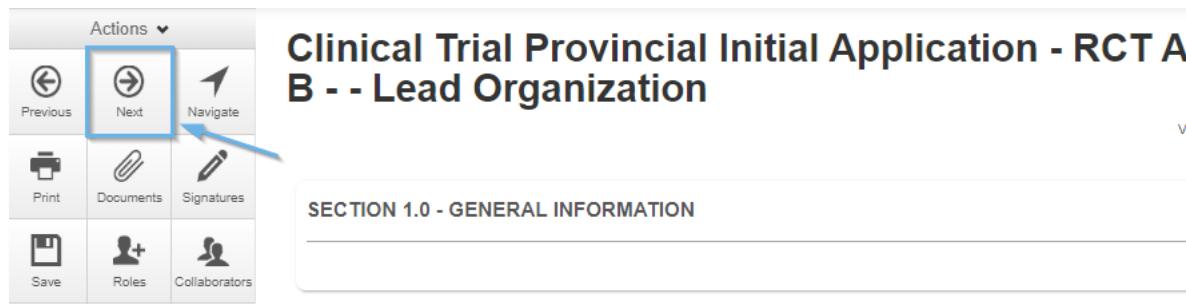
Search Signatures

In the Actions column, click 'View Form'

Type	Project Title	Project ID	Requesting User	Message	Requested Date	Response Date	Status	Action
Institutional Representative	RCT X vs Y	1874	Mr. Scott Tomlinson		12/Nov/2019 15:15		Requested	<a href="#">View Form</a>
Institutional Representative	RCT A vs B	1856	Mr. Scott Tomlinson		12/Nov/2019 14:06		Requested	<a href="#">View Form</a>

3. Review application form.

- You can move between sections and pages of the form by clicking the 'Previous' and 'Next' buttons in the Action Menu on the left-hand side of the screen.



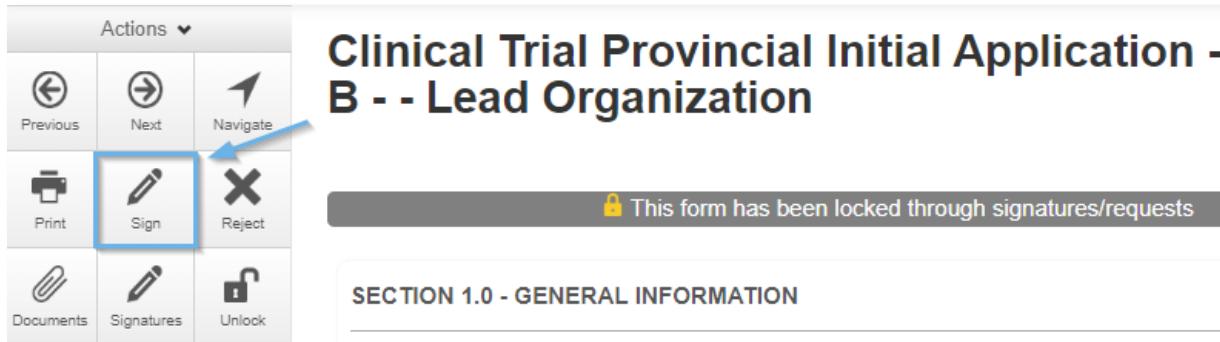
**Clinical Trial Provincial Initial Application - RCT A B -- Lead Organization**

**SECTION 1.0 - GENERAL INFORMATION**

b) Signing the application:

1. Click 'Sign' in the Action Menu on the left of the screen.

- Note: Use the 'Sign' button and not 'Signatures'.*



**Clinical Trial Provincial Initial Application - B -- Lead Organization**

**SECTION 1.0 - GENERAL INFORMATION**

**This form has been locked through signatures/requests**

2. Once the 'Sign' button is pressed an attestation will appear in a pop-up window. The 'signer' must agree to the attestation in order to proceed.

## Signature Declaration

- I attest that, to the best of my knowledge, the information in this application is complete, current and accurate;
- I attest that I am appropriately qualified to conduct this trial, entitled to provide medical oversight under the applicable laws, and that I am a member in good standing with my respective regulatory authority.
- Following the initial submission of this application form, a member of the research team may submit edits to this application on my behalf. I acknowledge that I remain ultimately responsible for REB submissions and the overall conduct of the study in accordance with the currently approved documents. I attest that, should a designate sign on my behalf, the responsibility for corresponding with the REB has been appropriately delegated, and the delegation has been documented.
- As the Centre PI:
  - I assume full responsibility for the scientific and ethical conduct of the trial at this institution
  - I agree to conduct this trial in compliance with TCPS2 (2nd edition of Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans); AND with the provisions of the Ontario Personal Health Information Protection Act and its applicable Regulations; AND with all other applicable laws, regulations or guidelines (e.g., Food and Drugs Act and applicable Regulations; International Conference on Harmonization Guidance E6: Good Clinical Practice);
  - I attest that I have sufficient space, time and resources to conduct this trial; I attest that the Centre Co-Investigator listed in this application (if applicable) is appropriately qualified to assume my responsibilities in the event that I am unable to do so;
  - I attest that all personnel (research team) involved in this trial are appropriately qualified, experienced, or will undergo appropriate training

**Signer must Accept the attestation in order to sign the application**

Accept

Close

- Once Accept is pressed, a second pop-up window appears to **enter your Username and Password**. Click the green 'Sign' button when you are done.

## Sign Form

Please enter your login details in order to sign this form:

Username

Password

Sign

Close

### c) Declining the signature request

- Click the 'Reject' button in the action panel on the left of the screen.

Actions

Previous	Next	Navigate
Print	Sign	Reject
Documents	Signatures	Unlock

**Centre Initial Application - TEST2230 - Hospital A - Principal Investigator**

**🔒 This form has been locked through signatures/requests**

SECTION 1.0 - GENERAL INFORMATION

2. A pop-up window will appear to **enter your email address and password** AND **provide a reason** for rejecting the signature request in the 'reason' field. Click the green 'Reject' button when you are done.
  - **Note:** Providing a reason is mandatory when rejecting a signature request.

