



28 NOV 2025

Subject: Case Validation Process for RPGA Close-Out

Dear MOHCCN Member,

This document is a follow-up to the Phase 1 Close-Out and Transition Planning communication sent on May 7, 2025. Its purpose is to outline the data requirements that TFRI will use to validate cases associated with executed Research Project Grant Agreements (RPGAs). This validation is necessary to confirm that the work has been completed in accordance with the Network's Guidelines and Policies and to remain eligible for the associated funding. Please refer to the [MOHCCN Policies & Guidelines](#) for details, specifically the [Gold Cohort Standards Policy](#), the Clinical Data Model and related documents, and the [Sequencing Metadata Policy](#). Please note that incomplete or absent data for a case will be subject to partial or full refund of the associated funds.

For each case, TFRI will validate the presence of the following data components from reports generated at each CanDIG node:

✓ **Normal DNA whole-genome sequencing (WGS):**

- .bam or .fastq.gz file
- Must include full WGS alignments

✓ **Tumour DNA whole-genome sequencing (WGS):**

- .bam or .fastq.gz file
- Must include full WGS alignments

✓ **Tumour RNA whole-transcriptome sequencing (WTS) – Tier A cases only:**

- .bam or .fastq.gz file
- Must include WTS alignments

✓ **Gene expression matrices (CSV or equivalent); mutation calls (.vcf and .tbi)**

✓ **Digital H&E slide, as applicable:**

- Confirmation of digitized H&E image on file (as reflected in the Cohorts Data Dashboard)

✓ **Clinical data**

Best efforts should be made to complete fulsome clinical data curation and deposition to CanDIG by March 31st, 2026. If there are resource constraints to



curating the fulsome set of clinical data, the following clinical data fields must be ingested, at minimum, to be eligible to retain the full amount of Health Canada funding per case. The below fields will be used during case validation checks for RPGA closures.

For cases that have the minimum clinical data fields, it is expected that fulsome clinical data will be curated and deposited to CanDIG by **June 30, 2026**. This work should be supported by institutional funding and other funding sources.

Minimum Clinical Data Fields for data deposited in fiscal year 2025-26, as indicated by the Clinical Data Standards Sub-Committee

Schema	Clinical Data Field (Fields in italics are identifier fields)
Sample Registration	<i>program_id</i>
Sample Registration	<i>submitter_donor_id</i>
Sample Registration	<i>submitter_specimen_id</i>
Sample Registration	specimen_tissue_source
Sample Registration	tumour_normal_designation
Sample Registration	specimen_type
Sample Registration	<i>submitter_sample_id</i>
Sample Registration	sample_type
Donor	<i>program_id</i>
Donor	<i>submitter_donor_id</i>
Donor	gender
Donor	sex_at_birth
Donor	date_of_birth
Donor	date_resolution
Specimen	<i>program_id</i>
Specimen	<i>submitter_donor_id</i>
Specimen	<i>submitter_specimen_id</i>
Specimen	<i>submitter_primary_diagnosis_id</i>
Specimen	specimen_collection_date
Specimen	specimen_anatomic_location
Primary Diagnosis	<i>program_id</i>
Primary Diagnosis	<i>submitter_donor_id</i>
Primary Diagnosis	<i>submitter_primary_diagnosis_id</i>
Primary Diagnosis	date_of_diagnosis
Primary Diagnosis	cancer_type_code
Primary Diagnosis	primary_site
Primary Diagnosis	basis_of_diagnosis



We thank you for your continued dedication to making the Network a success.

Isabel Serrano
Managing Director MOHCCN
Terry Fox Research Institute