



Transfer targeted eCOA data to trigger EDC calculations, adverse events, and more, without cluttering the EDC with unnecessary data.

Overview

Veeva eCOA and Veeva EDC share a productized, Veeva-maintained connection that eliminates the need to build and support custom API middleware. Because eCOA natively captures electronic source data, study teams can monitor survey results directly within eCOA rather than unnecessarily mapping data (such as daily patient diaries) into EDC visit schedules. For this reason, Veeva's eCOA to EDC integration is designed specifically for targeted data mapping.

When specific eCOA data is useful within the EDC, such as eClinRO values needed to feed EDC calculations, or post-injection data used to trigger adverse event workflows, study builders configure the system to automatically transfer those designated fields. This ensures that critical data flows seamlessly into the EDC to trigger downstream processes in real time, while the primary eCOA dataset remains the clean, centralized source of truth within the eCOA system.

How it Works

- Using a JSON configuration file, study builders map designated eCOA fields to destination Case Report Form (CRF) fields in Veeva EDC and configure rules to specify exactly what data triggers a transfer.
- Once a patient or clinician submits a relevant COA, the Veeva eCOA rules engine evaluates the JSON mapping and automatically pushes the populated field values to the predefined EDC CRFs.
- Data transfers can include individual field values, complete COAs, data summaries, or dynamically calculated scores.

Business Benefits



Accelerates safety and clinical decision-making

Incorporating targeted eCOA data into the EDC automatically informs downstream processes and triggers adverse event workflows.



Reduces effort and increases accuracy

Automated, rule-driven transfers eliminate manual data transcriptions and their associated delays and errors.



Prevents EDC database clutter

Direct access to eCOA data and monitoring tools provides a clean system of record without unnecessarily duplicating continuous diary data into rigid EDC visit schedules.