1. PURPOSE

To standardize handling of study-related documents that are required to:

- Allow any member of the research staff to understand how to enroll and complete a subject's enrollment visit
- Maintain a level of performance for research staff consistent with Good Clinical Practice (GCP)
- Provide documentation expectations for research staff
- Facilitate document accrual to be 'audit ready'

To ensure that the activities related to research study performance/management and patient safety/welfare are completely and accurately documented in a timely and legible manner.

2. SCOPE

Applies to Principal Investigator (PI) and, when delegated by the PI, additional Investigators, Study Coordinators (SCs), and other designated site personnel. This policy specifically applies to FDA-regulated clinical trials.

3. RESPONSIBILITIES

It is the responsibility of the PI to ensure that all staff are trained in and aware of the proper documentation of all procedures and aspects of the conduct of clinical trials. The PI may delegate the responsibility for certain types of documentation but, in the end, the PI is responsible.

4. BACKGROUND

Clinical research is an essential part of the drug development process and is only useful if the integrity and accuracy of the data collected are impeccable.

5. PROCEDURE

5.1. Regulatory Binder

5.1.1. The Regulatory Binder includes those documents needed in the event of an audit.

5.1.2. The Regulatory Binder is maintained by the Regulatory Data Specialist (RDS) or SC unless the PI assumes this responsibility in writing.

5.1.3. The Regulatory Binder may include, as applicable:

5.1.3.1. **Protocol:** A copy of the current protocol. If it is a multi-center sponsored project, a protocol signed and dated by the PI may be required; the protocol serves as a contract between the PI and sponsor by defining the actions to be taken on behalf of the sponsor;

all protocol modifications (e.g., amendments, addenda, revisions, etc.) are filed in this section

5.1.3.2. **Investigator's Brochure (IB)/Drug insert:** A GCP-mandated compilation of the clinical and non-clinical data on the investigational product relevant to its study in human subjects is made available by the sponsor to the PI.

5.1.3.3. **FDA Form 1571:** To be completed for Investigator-initiated studies if the Investigator is required to apply for an IND and Creighton University is acting as the sponsor.

5.1.3.4. **Statement of Investigator (FDA Form 1572):** Listing of the PI and Investigators, but signed only by the PI.

5.1.3.5. **Curriculum Vitae of the Investigators** (signed and dated, including each Investigator's CV) with current licenses: CVs should be updated every two (2) years with signature and date.

5.1.3.6. **Laboratory information**: The site laboratory's Good Laboratory Practices (GLP) certification, Clinical Laboratory Improvement Amendments (CLIA), or College of American Pathologists (CAP) licensure document or other accreditation certification, and the laboratory reference ranges.

5.1.3.7. **Correspondence**: All original pertinent correspondence between PI/sponsor (this includes copies of adverse event notifications, faxes, emails, newsletters, etc.) and between Study Monitor/sponsor/SC:

5.1.3.7.1. To the sponsor

5.1.3.7.2. From the sponsor

5.1.3.7.3. Email/phone messages

5.1.3.7.4. Meeting notes

5.1.3.7.5. Memo/note to file

5.1.3.8. Institutional Review Board (IRB) files

5.1.3.8.1. Membership roster and IRB letter of assurance

5.1.3.8.2. IRB correspondence: See SOP CLN-41.00, "Handling IRB Correspondence"

5.1.3.9. **Test article accountability records** that encompass receipt, usage, and return of test article (refer to SOP CLN-22.00, "FDA Drug/Device Regulatory File Management")

5.1.3.10. **Additional: Sections** of the Regulatory Binder may include:

5.1.3.10.1. Sample inventory

5.1.3.10.2. Signature log

5.1.3.10.3. Master subject list

5.1.3.10.4. Sample Case Report Forms (CRFs)
5.1.3.10.5. Miscellaneous
5.1.3.10.6. Internal correspondence
5.1.3.10.7. Monitoring log that contains monitor visits with dates and signatures

5.2. Recruitment Plan
- 5.2.1. Potential subjects are recruited only via mechanisms that have been approved by the IRB.
- 5.2.2. The PI or her/his designee may be asked to present proposed recruitment methods at the study initiation meeting.
- 5.2.3. Recruitment methods are documented in the Study Recruitment Plan; copies of the recruitment plan are distributed to the recruiting staff, the PI, and to all administrative staff.

5.3. Recruitment Log and Study Participant (SP) Roster
- 5.3.1. A Recruitment Log noting all contact with potential SPs is maintained for each study. Information noted on the log includes date, recruiter, referral source, reason for exclusion, and other information as defined in the protocol.
- 5.3.2. All non-enrolled SPs may be questioned about willingness to be entered into potential SP database.
- 5.3.3. An SP roster of all participants who originally enrolled in the study (drop-outs and completed subjects) is maintained for each study.

5.4. Informed Consent Form (Refer to SOP CLN-12.0, “Informed Consent”)

5.5. Source Documents (see SOP CLN-16.00, “Preparing and Managing Source Documents”)

5.6. Deviations/Violations to Protocol:
- 5.6.1. For each protocol violation that occurs, a “Reporting Form for Reportable New Information” is to be completed as soon as the violation is discovered within 10 working days.
- 5.6.2. Protocol deviations not affecting subject safety will be reported to the IRB at the next Continuing Review or Termination Report.
- 5.6.3. To generate awareness of what sorts of deviations or violations can occur and how the unit in general should respond, all deviations/violations should be discussed at a clinical research staff meeting.

5.7. Case Report Form Completion
- 5.7.1. For each subject enrolled in a study, it is required that a CRF be completed and signed by the PI, even when a subject fails to complete the study.
- 5.7.2. In order to ensure subject anonymity, patients are not identified by their names but by identification codes (e.g., study code, medical record number, etc.).

5.8. Investigator versus Staff Responsibility
- 5.8.1. At the study start-up meeting (refer to SOP CLN-5.0, "Site Initiation"), the Director/designee and SC provide the PI with a listing of PI responsibilities according to 21 CFR Section 312.
- 5.8.2. Any clinical trial responsibility that the PI is delegating to the SC will be noted on the Staff Responsibility List.
- 5.8.3. The PI reviews and signs both sheets at study initiation, or as required by the sponsor, and updates as needed.
- 5.8.4. Signed copies are maintained in the central file.

5.9. Telephone Notes
- 5.9.1. The SC maintains a record of all pertinent conversations with PIs, IRB, sponsor, or SPs.
- 5.9.2. The record serves as a verification of what information was communicated and what actions were taken.
- 5.9.3. The Telephone Note includes name of study, date/time of conversation, name of the individual who was contacted/conversed, and a short description of what was discussed.

5.10. Final Study Reports
- 5.10.1. IRB Report: Upon completion or conclusion of the study, the RDS or SC and PI submit a final report to the IRB.
- 5.10.2. Financial Summary: Within 30 days of study completion or conclusion, the Grants and Contracts Coordinator/SC/RDS submits a notice to Grants Administration.
- 5.10.3. Sponsor Report: If requested in the contract, the PI submits a final study report to the sponsor.

5.11. Medication Accountability Record (Refer to SOP CLN-20.00, "IP Handling")

5.12. Study Termination Form (Refer to SOP CLN-7.00, "Study Termination")

6. TERMS & ABBREVIATIONS

CRF Case Report Form
CRO Clinical Research Office
GCP Good Clinical Practice
IB Investigator Brochure
ICH The International Conference on Harmonisation
IND Investigational New Drug
IRB Institutional Review Board
PD Protocol Deviation
PI Principal Investigator
RDS Regulatory Data Specialist
SP Study Participant

7. REFERENCES

7.1. Title 21 CFR 50.20 - General Requirements for Informed Consent
7.2. Title 21 CFR 50.25 - Elements for Informed Consent
7.3. Title 21 CFR 56.111 - Criteria for IRB Approval of Research
7.4. Title 21 CFR 312.7 - Promotion and Charging for Investigational Drugs
7.5. Title 21 CFR 812.20 - Application for Devices
7.6. FDA Information Sheet - Recruiting of Study Subjects
7.7. FDA Information Sheet - A Guide to Informed Consent
7.8. FDA Information Sheet - Payment to Research Subjects

8. ATTACHMENTS

None