PM-303 STANDARD OPERATING PROCEDURE FOR REGULATORY FILE AND SUBJECT RECORDS

I. INTRODUCTION AND PURPOSE

Federal regulations require documentation of all study-related activities. The regulatory files and subject records, which are periodically reviewed by the sponsor, and upon request by the FDA, serve as the site's record of compliance with good clinical practice (GCP).

This standard operating procedure (SOP) describes the steps for fulfilling all regulatory, and clinical requirements for collecting, filing and storing study-related documents and records.

2. SCOPE

This SOP applies to the activities involved in maintaining the regulatory and subject records for all clinical studies conducted at this investigative site subject to investigational new drug (IND) regulations for drugs and biologics during all phases of development.

3. APPLICABLE REGULATIONS AND GUIDELINES

21 CFR 312.60	General responsibilities of investigators
21 CFR 312.62	Investigator recordkeeping and record retention
21 CFR 312.68	Inspection of investigator's records and reports

4. REFERENCES TO OTHER APPLICABLE SOP'S

GA-102	Responsibilities of the Research Team
SS-204	Protocol Start-Up
PM-304	Sponsor/CRO Monitoring Visits
PM-305	Study Termination Visit
DM-501	Data Management
QA-601	Audits

5. ATTACHMENTS

A. Regulatory Files Checklist

6. RESPONSIBILITY

This SOP applies to those members of the clinical research team involved in conducting clinical trials at this research site. This includes the following:

- Principal investigator
- Sub-investigator
- Research Director/Manager
- Research coordinator
- Support staff

7. DEFINITIONS

The following definitions from the International Conference on Harmonisation, Good Clinical Practice: Consolidated Guideline apply to this SOP.

Confidentiality: Prevention of disclosure, to other than authorized individuals, of a sponsor's proprietary information or of a subject's identity.

Direct Access: Permission to examine, analyze, verify, and reproduce any records and reports that are important to evaluation of a clinical trial. Any party (e.g., domestic and foreign regulatory authorities, sponsors, monitors, and auditors) with direct access should take all reasonable precautions within the constraints of the applicable regulatory requirement(s) to maintain the confidentiality of subjects' identities and sponsor's proprietary information.

Documentation: All records, in any form (including, but not limited to, written, electronic, magnetic, and optical records; and scans, x-rays, and electrocardiograms) that describe or record the methods, conduct, and/or results of a trial, the factors affecting a trial, and the actions taken.

Essential Documents: Documents that individually and collectively permit evaluation of the conduct of a study and the quality of the data produced.

Inspection: The act by a regulatory authority(ies) of conducting an official review of documents, facilities, records, and any other resources that are deemed by the authority(ies) to be related to the clinical trial and that may be located at the site of the trial, at the sponsor's and/or contract research organization's (CRO's) facilities, or at other establishments deemed appropriate by the regulatory authority(ies).

Quality Assurance (QA): All those planned and systematic actions that are established to ensure that the trial is performed and the data are generated, documented (recorded), and reported in compliance with GCP and the applicable regulatory requirement(s).

Source Documents: Original documents, data, and records (e.g., hospital records, clinical and office charts, laboratory notes, memoranda, subjects' diaries or evaluation checklists, pharmacy dispensing records, recorded data from automated instruments, copies or transcriptions certified after verification as being accurate and complete, microfiches, photographic negatives, microfilm or magnetic media, x-rays, subject files, and records kept at the pharmacy, at the laboratories, and at medico-technical departments involved in the clinical trial).

8. PROCESS OVERVIEW

A. Collecting, filing and storing study-related documents and records.

9. PROCEDURES

A. COLLECTING, FILING AND STORING STUDY-RELATED DOCUMENTS AND RECORDS

RESPONSIBILITY	DESCRIPTION OF PROCEDURE
Research coordinator	For each study, create a series of file folders or start a binder for documents collected during the study (Attachment A, Regulatory Files Checklist). Maintain and update the file folders or binder as necessary, adding appropriate documents as they are generated or received. Retain copies (certified copies in electronic format) of all original or and revised documents (e.g., protocol, investigator's brochure, informed consent form).
Research coordinator	Ensure that subject records and regulatory files are kept confidential and are stored in a secure, limited-access location.
Research coordinator Support Staff	Prior to appointments scheduled by monitors and auditors, review content of regulatory files and subject records for completeness. Ensure that files are organized and complete following the appointment.
Research coordinator	When the study is over, review the contents of regulatory files and subject records for completeness by comparing with the checklists. Archive regulatory files and subject records. Label storage boxes clearly and completely. Document inventory of storage boxes. Store in a secure location for the required period of time.

Attachment A

Regulatory Files Checklist

INVESTIGATOR'S BROCHURE

File the most recent version of the Investigator's Brochure along with all previous versions.

PROTOCOL and CASE REPORT FORMS

File a copy of the complete final protocol for this study. If required by the sponsor, ensure that the protocol title page has been signed and dated by the principal investigator.

PROTOCOL AMENDMENTS

In this file, retain copies of any amendments to the original final protocol made by the sponsor or the investigator. Modifications may be in the form of new pages to be inserted in the protocol, an addendum to the protocol in the form of a letter, or contained in the body of an amended protocol. All three types of modifications should be filed here.

Note that all protocol amendments must be reported to your Institutional Review Board (IRB). Also, protocol amendments that increase the risk to the subject in any way must receive IRB approval prior to implementation.

FORM FDA 1572

A copy of the signed original FDA Form 1572 Statement of Investigator should be filed in this section. The form should list the name of the principal investigator and include any subinvestigators, if applicable. Any changes to the FDA Form 1572 should be submitted to the sponsor and to the IRB.

INVESTIGATOR CVs

Include copies of the current CVs for all personnel listed on the FDA Form 1572.

IRB CORRESPONDENCE

File in this section all correspondence between the investigator and the IRB regarding this protocol. Examples of documents to retain are comments from the IRB on the consent form or the protocol, the IRB approval letter(s), advertisements for the study approved by the IRB, yearly renewals of approval, site updates to the IRB, serious adverse event reports, notification to the IRB of IND safety reports, and a letter notifying the IRB of the completion of the study.

IRB-APPROVED INFORMED CONSENT FORM

The original approved IRB consent form(s) should be filed in this section, as well as any amended or renewed consent forms.

LABORATORY CERTIFICATION

A copy of the most recent certificate issued showing the expiration date.

RANGE OF NORMAL VALUES for the REFERENCE LABORATORY

A copy of the range of normal laboratory values used for this study will be filed here. If the units or ranges differ from those previously supplied to the sponsor, these must be submitted to the sponsor and a copy filed in this section. Retain the previous listing and ensure that the revised listing incorporates the effective date of change.

Note that if your certificate has expired and you have not received the updated certificate, include the most recent approval letter in this section. When the updated certificate arrives, attach the approval letter to it. Forward a copy to the sponsor and retain a copy in this section.

SAE REPORTS and IND SAFETY REPORTS

All serious adverse events must be reported promptly to the sponsor and to the IRB. File copies of all IND safety reports sent by the sponsor here, as well.

DRUG ACCOUNTABILITY

Items to be included in this section are:

1. Sponsor investigational drug shipping inventory
2. Drug dispensing log
3. Return shipment documentation

MONITORING LOG

At each visit from the sponsor, the log sheet should be signed and dated by all sponsor personnel and the purpose of the visit noted.

INCLUSION/EXCLUSION LOG (if applicable)

Retain a list of all subjects who signed the informed consent form and were screened for entry into the study. A list of the subjects who were enrolled, as well as those who did not meet the entry criteria, must be retained. A confidential patient list is kept in the Blue Folders at Sonora's main office.

SIGNATURE LIST

File a list of the signatures of all study site personnel who entered, edited or deleted study data in the source documents and case report forms.

FINAL STUDY REPORT

A copy of the final clinical study report provided by the sponsor should be kept in this section.

SPONSOR CORRESPONDENCE

File in this section all correspondence between the investigator and sponsor, except for items dealing with protocol changes (which go into the Protocol file) and financial matters (which are filed separately).