QA-601 STANDARD OPERATING PROCEDURE FOR AUDITS

I. INTRODUCTION AND PURPOSE

This standard operating procedure (SOP) describes the operations followed at this investigative site when an audit (internal, sponsor/CRO and FDA), occurs to assess this site's extent of compliance with regulatory requirements/guidelines and SOPs for conducting clinical research.

2. SCOPE

This SOP applies to the procedures to prepare for an audit of all clinical studies conducted at this site. It describes the steps followed by the site from the time the audit is scheduled until all follow-up activities associated with the audit have been completed.

3. APPLICABLE REGULATIONS AND GUIDELINES

21 CFR 312.60	General responsibilities of investigators
21 CFR 312.62	Investigator recordkeeping and record retention
21 CFR 312.64	Investigator reports
21 CFR 312.66	Assurance of IRB review

4. REFERENCES TO OTHER APPLICABLE SOP'S

All SOPs are applicable to this SOP.

5. ATTACHMENTS

A. Preparing for an Audit Checklist

6. RESPONSIBILITY

This SOP applies to those members of the clinical research team involved in arranging, managing, or participating in the audit 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.

Audit: A systematic and independent examination of trial-related activities and documents to determine whether the evaluated trial-related activities were conducted, and the data were recorded, analyzed, and accurately reported according to the protocol, sponsor's standard operating procedures (SOPs), good clinical practice (GCP), and the applicable regulatory requirement(s).

Audit Trail: Documentation that allows reconstruction of the course of events.

Compliance: Adherence to all the trial-related requirements, good clinical practice (GCP) requirements, and the applicable regulatory requirements.

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.

Good Clinical Practice (GCP): A standard for the design, conduct, performance, monitoring, auditing, recording, analyses, and reporting of clinical trials that provides assurance that the data and reported results are credible and accurate, and that the rights, integrity, and confidentiality of trial subjects are protected.

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).

Quality Control (QC): The operational techniques and activities undertaken within the quality assurance system to verify that the requirements for quality of the trial-related activities have been fulfilled.

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).

Standard Operating Procedures (SOPs): Detailed, written instructions to achieve uniformity of the performance of a specific function.

8. PROCESS OVERVIEW

A. Preparing for the audit

B. During the audit
C. Following up after the audit

9. PROCEDURES

A. PREPARING FOR THE AUDIT

RESPONSIBILITY	DESCRIPTION OF PROCEDURE
PI Research coordinator Support staff	If notified of an FDA audit, notify the sponsor as soon as possible by e-mailing or calling the assigned monitor Ensure that all documentation, including informed consent forms, source documents, CRFs, and the regulatory binder for the study identified as the focus of the audit are accurate, complete and available for review by the auditor (Attachment A, Preparing for an Audit Checklist).
Research coordinator	Ensure that the study drug dispensing records are accurate, complete and available for review. If there were any instances in which emergency breaking of the blind was required, have that documentation available.
Research Director/Manager Research coordinator Support staff	Ensure that records of staff qualifications and training are available for review by the auditor.

B. DURING THE AUDIT

RESPONSIBILITY	DESCRIPTION OF PROCEDURE
PI Research Director/Manager Research coordinator	Meet with the auditor or inspector. Request to see identification, and if this is an FDA audit, request Form FDA 482. Provide orientation and access to the study records and files. Provide copies of requested study-related documents. Ensure that questions posed by the auditor or inspector are answered by appropriate study personnel.

C. FOLLOWING UP AFTER THE AUDIT

RESPONSIBILITY	DESCRIPTION OF PROCEDURE

PI Research coordinator	Participate in the exit interview with the auditor or inspector. If this was an FDA audit, request Form FDA 483, if available.
Research coordinator Investigator	Respond to the audit report as soon as possible after its receipt. Reply to each item in the report, providing clarification or steps that will be taken to institute corrective action.

Attachment A

Preparing For An Audit Checklist

Protocol Name_____

Sponsor_____

I. ORGANIZATION		YES	N/A	COMMENTS
	Sponsor (if an FDA audit)			
	IRB			
Notify all parties involved with the clinical study	Subinvestigators			
	Pharmacy			
	Laboratories			
	Medical records			
	Administration			
	Legal counsel			
	Reserve work space for the auditor			

General overview of the study	Prepare a general overview of the study			
List of subjects	List all personnel and responsibilities delegated			
	List all subjects enrolled including name, address, and/or phone number, date enrolled and completed, medical record number (to be kept as a reference for site research staff)			
	List all subjects screened			

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2. FILES MANAGEMENT		**YES**	**N/A**	**COMMENTS**
Organize all regulatory files by general **heading arranged in chronological order**	Protocol (all versions)			
	Investigator's Brochure (all versions)			
	Protocol amendments			
	Form FDA 1572 (all versions)			
	CVs for PI and subinvestigators listed on all versions of Form FDA 1572			
IRB files	Approval letter (initial) for initial protocol with			

	original informed consent			
	Amendment approval(s) with approved informed consent (if applicable)			
	Informed consent forms (originals) for enrolled subjects			
	Informed consents for screened subjects			
	Status reports for:			
	· Yearly renewal(s)			
	· Adverse events			
	· Deaths			
	· Study termination			
	· Final summary			
Communications	Sponsor correspondence			
	CRO correspondence			
	Monitoring log			
Laboratory	Laboratory certification and normal ranges			
	Drug log to include:			
Drug	· Receipt of drug			
accountability	· Dispensing			

	· Return			
Subject documents	Completed CRFs for each subject enrolled			
	Source documents for each subject enrolled			

3. REVIEW		**YES**	**N/A**	**COMMENTS**
Collect and review for each	CRFs completed for each subject enrolled			
subject enrolled	Data correction forms for CRFs			
	Source documents for each subject enrolled that document the following:			
Medical records and/or study files	· Condition of subject at time of entry into the study (i.e., all inclusion/exclusion criteria are met)			
	· Exposure to test article			
	· Concomitant medications			
	· Clinical assessments of the subject during the course of the study			
	· Laboratory reports			
	· Diagnostic tests			
	· Dose modifications			

	· Adverse events/death			
	· Protocol exemptions			
	· Early termination			