

	Standard Operating Procedures
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Procedure Category:	Document Management and Storage
Procedure CLN-05-01:	Investigator Study File

Procedure Overview

This procedure describes the necessary activities performed by MICHHR personnel in preparing and maintaining the Investigator Study File (ISF) for a clinical study.

Responsible Individuals

Qualified MICHHR personnel (including, but not limited to, Study Coordinator and Research Assistant); Director, MICHHR; Investigational Study Drug Manager

Procedure

The following steps define the necessary tasks to create and maintain the Investigator Study File.

1. Prior to study initiation, MICHHR personnel obtain a file folder or binder from the sponsor/CRO to facilitate file maintenance and organization.
2. MICHHR personnel date stamps all incoming documents, logs all items into the study-specific log book and forwards them to the designated MICHHR personnel for review and action.
3. Following review, documents are filed in the ISF. Documents are filed in reverse chronological order (most recent on top) under tabs determined by the sponsor/CRO. The turnaround time from receiving to filing should be less than one week.
4. For all documents listed below (except as noted), versions of documents obtained at study start and any updated or revised versions of the same documents must be retained in the ISF by MICHHR personnel.
5. The following materials must be initially included in the ISF:
 - Form FDA-1572 (Statement of Investigator): This form is required for all Phase 1 – 3 studies and optional for Phase 4 and 5 studies, as determined by the sponsor/CRO. Any changes to the FDA-1572 may be made by either correcting information on the current, original form and obtaining the investigator signature/initials and date acknowledging changes, or by completing a new form. MICHHR personnel must ensure that the Study Manager is promptly notified whenever a Principal, Coinvestigator, or Subinvestigator is added or replaced during a clinical study.
 - Curricula Vitae of all members listed on the FDA-1572 and Signature Authorization Form (SAF), as well as, any members on revised or updated

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Approval Signature, Date:	


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FDA-1572s and Signature Authorization Forms (SAF). All CVs should be dated and signed by the individual represented. CVs are updated at least every other year.

- Authorized Representative Signature Record / Signature Authorization Form (SAF). This form must be signed and initialed by all study staff members involved in the study, particularly those who record data for the study. The SAF must be updated whenever changes to study staff occur.
- Laboratory Certifications Protocol - required calibration or validation records and Normal Ranges for Laboratory Values.
- Complete, final, and fully executed study protocol (including signature page and synopsis)
- IRB membership list, including positions
- IRB approval(s)
- Approved Informed Consent Form
- Advertising information, if applicable
- Study budget - study-related financial and legal information (e.g. budgets, payments, Clinical Study Agreement (CSA), etc) may be filed in the Investigator Study File. These documents must be removed prior to any audit by a regulatory agency.
- Letter of Agreement with sponsor
- (IB). If an investigator is doing more than one study with the same test article or several Investigators at the same institution are doing the same study; only one Investigator's Brochure need be maintained. The IB may be stored in a separate notebook at the request of the sponsor/CRO (see SOP CLN-05-03).
- Site Visit Log (sponsor/CRO provided)
- Telephone Log (see Appendix 2 - to be used if not provided by sponsor)
- Master Patient Log (MPL) or equivalent (e.g. hardcopy of computer listing, etc). The MPL includes CPI numbers for all subjects (including those who were screened but not enrolled). This document must be maintained for at least 15 years after trial completion.
- Substantive correspondence to and from sponsor/CRO
- Investigator Meeting Notebook / Investigator's Meeting Minutes.

6. As the study progresses, additional documents may be collected for filing. They include, but are not limited to:
- Each complete, final and fully executed amendment or addendum to the protocol

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- IRB Fee Letter
- Letter of Indemnification
- Electronic Mail
- IRB correspondence (e.g. cover letters notifying the IRB of serious adverse events, IB updates, notification letter regarding study completion or discontinuance.
- Revised, IRB-approved Informed Consent Forms
- Laboratory test results; may be filed in specified subjects CRF notebook. Specimen Submission Records (if required)
- Ongoing sponsor/CRO correspondence (e.g. study newsletters, Investigator's Brochure Updates)
- Miscellaneous sponsor forms
- Clinical pharmacy records (e.g. Investigational Drug Release Authorization, Medication Dispensing Records, shipping invoices for all investigational material, returned goods forms, emergency randomization code card/envelopes, and if applicable, code break documentation, investigational material inventory and Drug Accountability Record. Items under this section may be placed in a separate Clinical Pharmaceutical Operations notebook stored in the Investigational Drug Services Department.
- WAERS reports and any additional relevant AE information, SAE/pregnancy notification letters to and from the investigator, Pregnancy Report Forms and relevant memos, sponsor templates for SAE/Pregnancy reporting.
- Publications and literature, if applicable
- Regulatory information including: GCP guidelines, and appropriate local government/institutional regulations.
- Research Summary Report
- Statement of Clinical Study Discontinuance
- Investigator Authorization of Clarification Letter

Notes:

1. Additions or modifications may be made to the ISF notebook following any internal or external audits. See SOPs CLN-03-11, CLN 04-05 and CLN-06-02.
2. MICHIR personnel contact the sponsor/CRO for approval prior to discarding the ISF, even if retention requirements appear to have been met. See SOP CLN-03-07.

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Documentation

Documentation for this procedure includes all documentation generated by MICHIR, IRB and the sponsor/CRO related to the study protocol.

Relevant Definitions

Principal Investigator (PI) - the licensed physician who has ultimate responsibility for the conduct of a clinical study.

Co Principal Investigator - any individual who shares responsibility equally with the Principal Investigator for the conduct of a clinical study.

Subinvestigator Co- Investigator - any individual member of the clinical trial team designated and supervised by the Principal and/or Co- Principal Investigator at a clinical site to perform critical trial-related procedures and/or to make important trial-related decisions (e.g., associates, residents, and research fellows).

Investigator's Brochure - a compilation of clinical and non-clinical data on the Investigational product(s) that are relevant to the study of the product(s) in human subjects.

Investigator Study File - a required, study site-specific file located at or stored by an investigator site that contains the documentation required by regulatory agencies and the sponsor/CRO.

Telephone Log - documentation of substantive sponsor/CRO communications. These may include communications pertaining to adverse events; deviations or modifications of inclusion/exclusion criteria; interpretations of protocol procedures; randomization code breaks; significant study site issues.

Appendices

Appendix 1 Sample Master Patient Log (to be used if sponsor does not provide one)

Appendix 2 Telephone Contact Log

Deviation Approval

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The Director, MICHHR or designee, must approve deviation from this procedure. The Director, MICHHR or designee, must store documentation of the deviation approval.

Procedure Author
 Manager, Research Support Core

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