

	Office of Sponsor and Regulatory Oversight	Document #: 203
	Clinical Trial Records Policy	Revision #: 2
		Effective Date: 06FEB2020

1. Purpose

To establish and describe the Office of Sponsor and Regulatory Oversight (OSRO) Clinical Trial Records policy.

2. Scope

- 2.1. OSRO in the Center for Cancer Research (CCR), National Cancer Institute (NCI) shall establish and control the policy.
- 2.2. Investigators, research team members and other departmental personnel and external NIH collaborators and contractors when they are working on studies conducted under a CCR-held Investigational New Drug application (IND), Investigational Device Exemption (IDE), or a National Institutes of Health (NIH) Institutional Review Board (IRB)-approved protocol using a Non-Significant Risk device (NSR) under OSRO oversight or supported by a CCR-held Master File under OSRO oversight shall follow the policy.
- 2.3. FDA regulated research records. These are records required by 21 CFR that pertain to the clinical trial, investigational drugs or devices, safety reports, and the annual and final clinical study reports.
- 2.4. Limitations
 - 2.4.1. Personnel are not bound to this policy when working on non-IND, IDE or NSR studies and/or no interdepartmental collaboration with OSRO as Sponsor is required.
 - 2.4.2. Nothing in this policy will supersede NCI, NIH or Health and Human Services (HHS) requirements.

3. Responsibilities

- 3.1. CCR Management is committed to providing resources to meet the requirements for implementing a Clinical Trial Records policy and supporting its continual improvement.
- 3.2. OSRO personnel are responsible for understanding and using the Clinical Trial Records policy.
- 3.3. Investigators are responsible for complying with this policy.
- 3.4. The OSRO Director is responsible for establishing and maintaining the Clinical Trial Records policy.

4. References

- 4.1. [ICH E6\(R2\) Good Clinical Practice: Integrated Addendum to ICH E6\(R1\) Guidance for Industry \(FDA\), March 2018](#)
- 4.2. [21 CFR 312.62 Investigational New Drug Application: Investigator recordkeeping and record retention](#)
- 4.3. [21 CFR 812.140 Investigational Device Exemptions: Records](#)
- 4.4. [NIH Records Management Program, NIH Intramural Records Retention Schedule Items](#)

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4.5. [45 CFR 46.115\(b\) HHS Policy for Protection of Human Research Subjects](#)

5. Definitions

Refer to the OSRO Lexicon.

6. Policy

6.1. Records

- 6.1.1. The investigator/institution will maintain adequate and accurate source documents and trial records that include all site essential regulatory documents and pertinent observations on each of the trial participants.
 - 6.1.1.1. Source data should be attributable, legible, contemporaneous, original, accurate, and complete.
 - 6.1.1.2. Changes to source data should be traceable, should not obscure the original entry, and should be explained if necessary (e.g., via an electronic automated audit trail).
- 6.1.2. Investigators will retain records for 2 years after FDA approval of the investigational drug, or for device trials 2 years after the study is discontinued and FDA is notified or for 2 years from date the records are no longer required for device approval action in compliance with Federal Regulations, whichever is longer.
- 6.1.3. OSRO as the Sponsor will determine if documents should be retained for a longer period, if required by the applicable regulatory requirements. It is the responsibility of the Sponsor to inform the investigator/institution as to when these documents no longer need to be retained.
- 6.1.4. If an investigator or Sponsor transfers custody of IDE records to another person, FDA must be notified within 10 working days after the transfer occurs.
- 6.1.5. NIH maintains its own records management program. It is the Investigator's responsibility to meet the most restricted document retention time.

6.2. Record Access

- 6.2.1. The Sponsor should ensure that the protocol or other written agreement specifies that the investigator(s)/institution(s) provide direct access to source data/documents for trial-related monitoring, auditing, Institutional Review Board (IRB) review, and regulatory agency inspection.
- 6.2.2. The Sponsor should verify that each participant has consented, in writing, to direct access to his/her original medical records for trial-related monitoring, auditing, IRB review, and regulatory inspection.
- 6.2.3. Authorized FDA employees shall be permitted at reasonable times and in a reasonable manner to inspect and copy all records relating to an inspection.

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- 6.2.4. Collaborator representatives, according to Agreements, may be permitted at reasonable times and in a reasonable manner, coordinated by OSRO, to inspect records relating to a protocol.
- 6.3. Site Essential Regulatory Documents for the Conduct of a Clinical Trial
 - 6.3.1. Essential documents permit evaluation of the trial conduct and the quality of the data produced. They serve to demonstrate the compliance of the investigator, sponsor and monitor with the standards of Good Clinical Practices (GCP) and applicable regulatory requirements.
 - 6.3.2. The trial master file should be established at the beginning of the trial by the Sponsor. Each site will maintain a site study file that contains the site essential documents.
 - 6.3.3. The Sponsor and investigator/institution should maintain a record of the location(s) of their respective essential documents including source documents. The storage system used during the trial and for archiving (irrespective of the type of media used) should provide for document identification, version history, search, and retrieval.
 - 6.3.4. When a copy is used to replace an original document (e.g., source documents, CRF), the copy should fulfill the requirements for certified copies.
 - 6.3.5. The investigator/institution should have control of all essential documents and records generated by the investigator/institution before, during, and after the trial.
- 6.4. Documents needed prior to the start of the trial (before OSRO will authorize clinical trial activation/start of screening and enrollment).
 - 6.4.1. During the planning stage, the following documents should be generated and should be on file before the trial may start.
 - 6.4.1.1. The items marked in **BOLD TEXT** in Table 1 are required before any tentative or target date for a Site Initiation Visit (SIV) will be confirmed as the scheduled SIV date.
 - 6.4.1.2. All items in Table 1 (#1 – 34) are required before OSRO will authorize clinical trial activation/start of screening and enrollment via an OSRO Site Activation notification email sent to the Principal Investigator.

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Table 1. Required documents prior to **Site Initiation Visit** (**bold**) and Site Activation (*non-bold*).

#	Document Title	Purpose	Comment
<i>Important: If the text is in Bold, the document is required before the SIV will be scheduled.</i>			
1.	Investigator's Brochure	To document that relevant and current scientific information about the investigational product has been provided to the investigator.	
2.	Protocol and Amendments Sample blank Case Report Form (CRF)	To document the protocol/amendment(s) and CRF/data collection forms.	Includes: 1. eCRF specifications with documentation of Study team approval and sign-off by an authorized team member, OR blank eCRFs with documentation of Study team approval and sign-off by an authorized team member 2. Sponsor approval of blank eCRFs (signed memo)
3.	Investigator Agreement	To document investigator agreement to conduct the protocol according to the approved protocol/amendment(s).	Must be a current Form FDA 1572 for IND studies OSRO Investigator of Record form for IDE/NSR studies
4.	Financial Disclosure Form(s) for the Principal Investigator listed in Section 1 of Form FDA 1572	To document investigator financial interest and risk mitigation.	Includes: 1. Protocol evaluation for need for financial disclosure (OSRO Form F02-401-S01) 2. Financial disclosure form (OSRO Form F01-401-S01)
5.	Information given to trial participants <ul style="list-style-type: none"> • Informed Consent Form(s) • Other written information • Advertisement for participant recruitment 	<ul style="list-style-type: none"> • To document the informed consent. • To document that participants will be given appropriate written information (content and wording) to support their ability to give fully informed consent. • To document that recruitment measures are appropriate and not coercive. 	Requirement for recruitment advertisements applies to non-NIH multicenter study participating sites and need to be only in the Site Essential Documents file.

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#	Document Title	Purpose	Comment
	<i>Important: If the text is in Bold, the document is required before the SIV will be scheduled.</i>		
6.	Financial Aspects of Trial (when the site is not the NIH Clinical Center/NCI)	To document the financial agreement between the investigator/institution and the sponsor for the trial.	Applies only when participating clinical sites include non-NIH sites and an agreement governs the payments to non-NIH sites.
7.	Insurance Statement (when applicable)	To document that compensation to participant(s) for trial-related injury will be available.	
8.	Signed Agreement Between Involved Parties (when applicable)	To document agreements.	
9.	Dated, Documented Approval/Favorable Opinion of IRB of the following: <ul style="list-style-type: none"> • Protocol and any amendments • Informed consent form(s) • Any other written information to be provided to the participant(s) • Advertisement for participant recruitment (if used) • Participant compensation (if any) • Any other documents given approval/favorable opinion 	To document that the trial has been subject to IRB review and given approval/favorable opinion. To identify the version number and date of the document(s).	If the approved version-controlled documents are not detailed in the letter, the list of IRB submission attachments and approved documents must be included.
10.	IRB Composition	To document that the IRB/IEC is constituted in agreement with GCP.	NIH IRB Memo regarding IRB Rosters suffice for the NIH Clinical Center IRB. Copy to be retained in the essential document files of the Sponsor. However, requirement for IRB roster would apply to non-NIH multicenter IDE study participating sites.

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#	Document Title	Purpose	Comment
<i>Important: If the text is in Bold, the document is required before the SIV will be scheduled.</i>			
11.	Regulatory Authority's Authorization / Approval / Notification of Protocol (where required)	To document appropriate authorization / approval / notification by the regulatory authority(ies) has been obtained prior to trial initiation in compliance with the applicable regulatory requirement(s).	
12.	Curriculum Vitae and/or Other relevant Documents Evidencing Qualifications of Investigators	To document qualifications and eligibility to conduct trial and/or provide medical supervision of participants.	Includes all investigators listed on the current Form FDA 1572 for IND studies or the OSRO Investigator of Record form for IDE/NSR studies. Staff identified as: 1. Principal Investigator 2. Sub-Investigators
13.	Site Study Personnel Training Records	To document site study personnel training pertinent to clinical research and, even more specifically to the clinical trial.	To include Investigational Device training if applicable.
14.	Staff Signature List/Delegation of Tasks Log	To document who has been authorized by the PI to carry out protocol-specific activities, tasks and functions.	May be titled the site Delegation of Authority Log at non-NIH sites.
15.	Normal Value(s)/Range(s) for Medical/Laboratory/Technical Procedures and/or Test(s) included in the Protocol	To document normal values and/or ranges of the tests.	
16.	Medical/Laboratory/Technical Procedures/Tests <ul style="list-style-type: none"> – Certification or – Accreditation or – Established quality control and/or external quality assessment or – Other validation (where required) 	To document competence of facility to perform required test(s), and support reliability of results.	

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#	Document Title	Purpose	Comment
<i>Important: If the text is in Bold, the document is required before the SIV will be scheduled.</i>			
17.	Sample of Label(s) attached to Investigational Product Container(s)	To document compliance with applicable labeling regulations and appropriateness of instructions provided to the participants.	Only located in the essential document files of the Sponsor For Device Studies – copy of the device labeling.
18.	Instructions for Handling of Investigational Product(s) and Trial-Related Materials (if not included in protocol or Investigator’s Brochure)	To document instructions needed to ensure proper storage, packaging, dispensing, and disposition of investigational product(s) and trial-related materials.	
19.	Shipping Records for Investigational Product(s) and Trial-Related Materials	To document shipment dates, batch numbers and method of shipment of investigational product(s) and trial-related materials. Allows tracking of product batch, review of shipping conditions, and accountability.	
20.	Certificate(s) of Analysis of Investigational Product(s)	To document identity, purity, and strength of investigational product(s) to be used in the trial.	Only located in the essential document files of the Sponsor
21.	Decoding Procedures for Blinded Trials	To document how, in case of an emergency, identity of blinded investigational product can be revealed without breaking the blind for the remaining participants’ treatment.	
22.	Master Randomization List	To document method for randomization of trial population.	Only located in the essential document files of the Sponsor
23.	Pre-Trial Monitoring Report	To document that the site is suitable for the trial.	
24.	Trial Site Initiation Monitoring Report	To document that trial procedures were reviewed with the investigator and the investigator’s trial staff.	
In addition:			
25.	IRB Approved Protocol with Protocol Number	To document the approved protocol	Including a signed protocol signature page

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#	Document Title	Purpose	Comment
<i>Important: If the text is in Bold, the document is required before the SIV will be scheduled.</i>			
26.	IRB Approved Protocol Amendment with Protocol Number and Amendment Code	To document the approved protocol	Including a signed protocol amendment signature page
27.	Sponsor Activation Memo	To document the Sponsor Approval to Activate the study	
28.	Data Management Plan (DMP) – as part of the protocol or standalone document	To document the data handling procedures	Only located in the essential document files of the Sponsor
29.	Principal Investigator Medical License	To document the PI license status	If the PI is not an MD, then a Sub-Investigator medical license is required
30.	IRB Reliance Agreement / Memo of Understanding (if applicable)	To document the authority of the IRB of record	
31.	OHRP Federal Wide Assurance	To document the FWA of the IRB of record	
32.	Manual of operational procedures (MOP) or standard operating procedures (SOPs) for clinical trial related procedures, tests, assessments, activities required per protocol but not detailed in the Protocol	To document the procedures not detailed in the protocol	
33.	NIH Office of Research Support and Compliance (ORSC) confirmation that manufacturing facilities are qualified (when applicable)	To document that the NIH Clinical Center has approved the study product manufacturing facilities	It is a PI responsibility to ensure compliance with NIH ORSC requirements for qualification of manufacturing facilities
34.	Relevant communications other than site visits, i.e., memos, correspondence, meeting notes, telephone contact notes	To document relevant communications	

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6.5. Documents needed during the conduct of the trial.

6.5.1. The documents listed in Table 2 should be added to the study files listed in Section 6.4 as evidence that all new relevant information is documented as it becomes available.

Table 2. Required documents during the trial.

#	Document Title	Purpose	Comment
1.	Investigator's Brochure Updates	To document that investigator is informed in a timely manner of relevant information as it becomes available.	
2.	Any Revision to: <ul style="list-style-type: none"> • Protocol/amendment(s) and Case Report Forms • Informed Consent form • Any other written information to be provided to the participant(s) • Advertisement for participant recruitment (if used) 	To document revisions of these trial related documents that take effect during trial.	<ol style="list-style-type: none"> 1. Study team eCRF specifications and the corresponding approval (signed memo) or Study team blank eCRFs and corresponding approval (signed memo) 2. Sponsor approval (signed memo) of blank eCRFs
3.	Dated, Documented Approval/Favorable Opinion of IRB of the following: <ul style="list-style-type: none"> • Protocol amendments • Revision(s) of: <ul style="list-style-type: none"> – Informed consent form(s) – Any other written information to be provided to the participant(s) – Advertisement for participant recruitment (if used) • Any other documents given approval/favorable opinion • Continuing review of trial (where required) 	To document that the amendment(s) and/or revision(s) have been subject to IRB/IEC review and were given approval/favorable opinion. To identify the version number and date of the document(s).	<ol style="list-style-type: none"> 1. If the approved version-controlled documents are not detailed in the letter, the list of IRB submission attachments and approved documents must be included. 2. Requirement for recruitment advertisements applies to non-NIH multicenter study participating sites.
4.	Regulatory authorities Authorization/approval/Notification of Protocol (where required)	To document compliance with applicable regulatory requirements.	

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#	Document Title	Purpose	Comment
5.	Curriculum Vitae for New Investigator(s) and/or Sub-investigator(s) and/or Other relevant Documents Evidencing Qualifications of Investigators	To document qualifications and eligibility to conduct trial and/or provide medical supervision of participants.	
6.	Updates to Staff Signature List/Delegation of Tasks Log	To document who has been authorized by the PI to carry out protocol-specific activities, tasks and functions.	Include update if applicable Form FDA 1572 for IND studies OSRO Investigator of Record form for IDE/NSR studies
7.	Updates to Signed Financial Disclosure Form(s) for the Principal Investigator listed in Section 1 of the Form FDA 1572	To document investigator financial interest and risk mitigation.	
8.	Updates to Site Study Personnel Training Records following amendments or adding of new study personnel	To document site study personnel training pertinent to clinical research and, even more specifically to the clinical trial.	
9.	Updates to Normal Value(s)/Range(s) for Medical/Laboratory/Technical Procedures and/or Test(s) included in the Protocol	To document normal values and/or ranges that are revised during the trial.	
10.	Updates of Medical/Laboratory/Technical Procedures/Tests <ul style="list-style-type: none"> • Certification • Accreditation • Established quality control and/or external quality assessment • Other validation (where required) 	To document that tests, remain adequate throughout the trial period.	
11.	Documentation of Investigational Product(s) and Trial-Related Materials Shipment	To document shipment dates, batch numbers and method of shipment of investigational product(s) and trial-related materials. Allows tracking of product batch, review of shipping conditions, and accountability.	

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#	Document Title	Purpose	Comment
12.	Certificate(s) of Analysis for New Batches of Investigational Product(s)	To document identity, purity, and strength of investigational product(s) to be used in the trial.	Only located in the essential document files of the Sponsor
13.	Monitoring Visit Reports	To document site visits by, and findings of, the monitor.	
14.	Relevant Communications Other Than Site Visits <ul style="list-style-type: none"> • Memos • Correspondence e.g., letters, email • Meeting notes • Telephone contact notes 	To document any agreements or significant discussions regarding trial administration, protocol deviations, trial conduct, serious adverse event (SAE) reporting.	
15.	Signed Informed Consent Forms	To document that consent is obtained in accordance with GCP and protocol and dated prior to participation of each participant in trial. Also, to document direct access permission.	Only located in the essential document files of the Site Can be a description of the NIH Clinical Center informed consent process
16.	Source Documents	To document the existence of the participant and substantiate integrity of trial data collected. To include original documents related to the trial, to medical treatment, and history of participant.	Only located in the essential document files of the Site Can be a description of the NIH Clinical Center medical records and research records standard process
17.	Signed, Dated, and Completed Case Report Forms (CRF)	To document that the investigator or authorized member of the investigator's staff confirms the observations recorded.	Can be a description of the NIH Clinical Center clinical data management standard process
18.	Documentation of CRF Corrections	To document all changes/additions or corrections made to CRF after initial data were recorded.	Can be a description of the NIH Clinical Center clinical data management standard process
19.	Notification by Investigator to Sponsor of Serious Adverse Events and Related Reports	Notification by investigator to sponsor of serious adverse events and related reports in accordance with GCP.	
20.	Notification by Sponsor and/or Investigator, where applicable, to regulatory authority(ies) and IRB(s) of Unexpected Serious Adverse Drug reactions, Unanticipated Adverse Device Effect and of Other safety Information	Notification by sponsor and/or investigator, where applicable, to regulatory authorities and IRB(s) of unexpected serious adverse drug reactions and of other safety information in accordance with GCP.	

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#	Document Title	Purpose	Comment
21.	Notification by Sponsor to Investigators of Safety Information	Notification by sponsor to investigators of safety information in accordance with GCP.	
22.	Interim or Annual Reports to IRB and Regulatory Authority(ies)	Interim or annual reports provided to IRB in and to authority(ies) in accordance with GCP.	
23.	Subject Screening Log	To document identification of participants who entered pre-trial screening. If not enrolled, reason is specified.	<ol style="list-style-type: none"> 1. Only located in the essential document files of the Site 2. At study closeout, a redacted version will be collected and retained in the Sponsor file
24.	Subject Identification Code List	To document that investigator/institution keeps a confidential list of names of all participants allocated to trial numbers on enrolling in the trial. Allows investigator/institution to reveal identity of any participant.	Only located in the essential document files of the Site
25.	Subject Enrollment Log	To document chronological enrollment of participants by trial number.	<ol style="list-style-type: none"> 1. Only located in the essential document files of the Site 2. At study closeout, a redacted version will be collected and retained in the Sponsor file
26.	Investigational Products Accountability at the Site	To document that investigational product(s) have been used according to the protocol.	
27.	Record of Retained Body Fluids/Tissue Samples (if any)	To document location and identification of retained samples if assays need to be repeated.	
28.	Documentation of Investigational Product Destruction	To document destruction of unused investigational products by sponsor or at site.	
In addition:			
29.	Investigation product storage temperature records	To document the product storage temperature	
30.	OSRO Site Protocol Non-Adherence Log (OSRO Form F01-104-S02)	To document non-adherence from the protocol	
31.	Site Notes to Study File	To document the site notes	

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6.6. Documents needed after completion or termination of the trial.

6.6.1. All the documents identified in Sections 6.4 and 6.5 should be in the study file together with the documents listed in Table 3.

Table 3. Required documents after trial completion or termination.

#	Document Title	Purpose	Comments
1.	Investigational Product Accountability at Site	To document that the investigational product(s) have been used according to the protocol. To document the final accounting of investigational product(s) received at the site, dispensed to participants, returned by the participants, and returned to sponsor.	
2.	Documentation of Investigational Product Destruction	To document destruction of unused investigational products by sponsor or at site.	
3.	Completed Subject Identification Code List	To permit identification of all participants enrolled in the trial in case follow-up is required. List should be kept in a confidential manner and for agreed upon time.	Only located in the essential document files of the Site
4.	Audit Certificate (if available)	To document that audit was performed.	Only located in the essential document files of the Site
5.	Final Site Close-Out Monitoring Report	To document that all activities required for trial close-out are completed, and copies of essential documents are held in the appropriate files.	
6.	Treatment Allocation and Decoding Documentation	Returned to sponsor to document any decoding that may have occurred.	Only located in the essential document files of the Site
7.	Final Report by Investigator to IRB where required, and where applicable, to the Regulatory Authority(ies)	To document completion of the trial.	
8.	Clinical Study Report	To document results and interpretation of trial.	

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6.7. For Nonsignificant Risk (NSR) Device studies, the following documents will be required:

- 6.7.1. Table 1 – Items: 1, 3, 4, 8, 9, 10, 12, 13, 14, 17, 18, 19, 20, 23, 24, 25, 26, 27, 29, 30, 31, 34
- 6.7.2. Table 2 – Items: 1, 2, 3, 5, 6, 8, 10, 11, 12, 13, 14, 15, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31
- 6.7.3. Table 3 – Items: 1, 2, 4, 5, 7, 8

6.8. This Policy shall be reviewed periodically and updated as necessary.

7. Change Summary

Revision Number	Effective Date	Description of Change
1	19SEP2019	New Document
2	06FEB2020	<ol style="list-style-type: none"> 1. Added Non-Significant Risk (NSR) device studies to Scope Step 2.2 and Policy Step 6.7. 2. Table 1. Identification of documents required before Site Initiation Visit and before Site Activation. Addition of comments column. 3. Tables 2 and 3. Addition of comments column. 4. Added hyperlinks to all references (Section 4 References).