1. **Purpose**

To describe the system for managing reports of non-adherence to clinical protocols for which the Office of Sponsor and Regulatory Oversight (OSRO) is Sponsor.

2. **Scope**

2.1. This SOP applies to any non-adherence to an approved protocol and related procedures, the use of controlled (validated or qualified) equipment, and physical monitoring excursions (e.g., temperature, relative humidity, and room pressure).

2.2. This SOP applies to studies conducted under a Center for Cancer Research (CCR)-held Investigational New Drug (IND) application or Investigational Device Exemption (IDE) under OSRO oversight.

2.3. Reports of non-adherence to Good Clinical Practices (GCP), and the Title 21 Code of Federal Regulations (CFR) are governed by this procedure.

2.4. **Limitation**

2.4.1. This procedure does not apply to CCR clinical studies when OSRO is not serving as Sponsor.

3. **Responsibilities**

3.1. Office of Sponsor and Regulatory Oversight (OSRO) personnel shall follow this procedure.

3.2. Clinical study staff when working on studies conducted under a CCR-held IND or IDE under OSRO oversight shall submit reports of non-adherence to OSRO per OSRO Policy.

3.3. OSRO Operations administers the Clinical Protocol Non-Adherence System.

4. **References**

4.1. 104 Corrective and Preventive Action Policy

5. **Definitions**

Refer to the OSRO Lexicon.

6. **Procedure**

6.1. Protocol non-adherence events are documented in F01-104-S02 Site Protocol Non-Adherence Log.

6.1.1. A working copy of the Log shall be maintained for each protocol by the study site.

6.1.2. The working copy is named using the convention <protocol number> <PI’s last and first names> OSRO Site Protocol Non-Adherence Log.xlsx.

6.1.3. The working copy is stored in the site’s essential regulatory documents file for each protocol.
6.2. Clinical study staff will report any noncompliance with the clinical trial protocol, GCP, or protocol-specific procedural requirements on the part of a participant, the Investigator, or the study site staff inclusive of site personnel performing procedures or providing services in support of the clinical trial.

6.2.1. Clinical study staff will document the noncompliance in the relevant protocol’s F01-104-S02 Site Protocol Non-Adherence Log working copy.

6.3. Any noncompliance discovered by OSRO Clinical Monitors will be noted as an observation and discussed with the study staff.

6.3.1. If the noncompliance is unresolved, then the OSRO Clinical Monitor will request that the study staff enter the event in the protocol’s F01-104-S02 Site Protocol Non-Adherence Log working copy.

6.4. Each noncompliance will be reported to the site’s Institutional Review Board (IRB) per its guidelines.

6.5. Each noncompliance will be documented in the participant’s source records.

6.6. Each protocol’s F01-104-S02 Site Protocol Non-Adherence Log will be emailed to OSROMonitoring@mail.nih.gov on the first business day of the month.

6.7. OSRO copies of submitted Logs will be archived on the OSRO Clinical Site Monitoring SharePoint site.

6.8. Metrics

6.8.1. Metrics of site protocol non-adherence reporting will be presented to OSRO Management on a periodic basis.

6.9. This SOP shall be reviewed periodically and updated as necessary.

7. Associated Documents

7.1. F01-104-S02 Site Protocol Non-Adherence Log

8. Change Summary

<table>
<thead>
<tr>
<th>Revision Number</th>
<th>Effective Date</th>
<th>Description of Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>24OCT2019</td>
<td>New Document</td>
</tr>
</tbody>
</table>