Clinical Trials Monitoring Branch Final Report

Run By: MPASSARELLO

Date:

Audit Date: **Credited Group:** NRG **Auditing Group:** NRG **Audit Category:** Treatment **Audit Type:** Routine audit

Institution CTEP Code: **Name:** **Membership Study Type:** Treatment

Audit Location:

Revision Number: 0 **Revision Date:**

Date of Prior Audit: **Number of Cases Audited:** 3 **Average Annual Accrual:** 6 **Principal Investigator:**

Institution Details

Institution CTEP Code	Institution Name	Role
		Main Member

Audit Outcome Summary

Component	Assessment	Follow up Required (Y/N)	Follow up Due Date	Reaudit Required (Y/N)	Reaudit Time (in months)
Regulatory Documentation Review	Acceptable	No		No	
Pharmacy Review	Acceptable	No		No	
Patient Case Review	Acceptable needs follow-up	Yes	01/31/2019	No	

Institution Staff	Title	Affiliation
	Contact PI	
	Lead Research Associate	

Audit Team	Title	Affiliation
	Quality Control Audit Administrator	NRG Oncology Statistics and Data Management Center

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Central IRB (CIRB) Review

Protocol#	# of Patients	IND or NCI Supplied Agents	Diseases	CTMB Guidelines Deficiency C / M / L	Overall IRB Deficiency	Description of Deficiency and Comments
NRG-GY004 (RegTrial)*	1	Cediranib (AZD2171) (IND ,NCI/PMB), Olaparib (AZD2281) (IND ,NCI/PMB)	Fallopian tube carcinoma, Ovarian epithelial cancer, Primary peritoneal carcinoma	0 / 0 / 0	OK	
NRG-BR003*	1		Invasive breast carcinoma	0 / 0 / 0	OK	
EAY131*	1	Trastuzumab (Herceptin) (IND ,NCI/PMB), Dasatinib (BMS-354825, Sprycel) (IND ,NCI/PMB), Sunitinib malate (SU011248 L-malate) (IND ,NCI/PMB), Pertuzumab (IND ,NCI/PMB), GDC-0449 (Vismodegib) (IND ,NCI/PMB), Nivolumab (BMS-936558, MDX-1106) (IND ,NCI/PMB), Crizotinib (PF-02341066) (IND ,NCI/PMB), AZD1775 (adavosertib) (IND ,NCI/PMB), Trametinib (GSK1120212B) (IND ,NCI/PMB), Dabrafenib (GSK2118436B) (IND	Lymphoma, NOS, Myeloma, NOS, Solid tumor, NOS	0 / 0 / 0	OK	

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EAY131*	1	,NCI/PMB), Afatinib (IND ,NCI/PMB), AZD4547 (IND ,NCI/PMB), MLN0128 (TAK-228) (IND ,NCI/PMB), Palbociclib (PD-0332991) (IND ,NCI/PMB), GDC-0032 (taselisib) (IND ,NCI/PMB), ado-trastuzumab emtansine (IND ,NCI/PMB), AZD9291 (osimertinib) (IND ,NCI/PMB), GSK2636771B (IND ,NCI/PMB), VS-6063 (defactinib hydrochloride) (IND ,NCI/PMB), Erdafitinib (JNJ-42756493) (IND ,NCI/PMB), AZD5363 (IND ,NCI/PMB), Copanlisib dihydrochloride (BAY 80-6946 dihydrochloride) (IND ,NCI/PMB), Binimetinib (IND ,NCI/PMB),	Lymphoma, NOS, Myeloma, NOS, Solid tumor, NOS	0 / 0 / 0	OK	

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Protocol#	# of Patients	IND or NCI Supplied Agents	Diseases	CTMB Guidelines Deficiency C / M / L	Overall IRB Deficiency	Description of Deficiency and Comments
EAY131*	1	LOXO-101 (Larotrectinib sulfate) (IND ,NCI/PMB)	Lymphoma, NOS, Myeloma, NOS, Solid tumor, NOS	0 / 0 / 0	OK	
NRG-LU002*	0		Bronchioloalveolar carcinoma, Non-small cell lung cancer, NOS, Lung adenocarcinoma, Squamous cell lung carcinoma, Lung adenocarcinoma with bronchioloalveolar features	0 / 0 / 0	OK	

Total Protocol(s) Reviewed: 4 **Total Critical/Protocol(s):** 0/4 **Total Major/Protocol(s):** 0/4 **Total Lesser/Protocol(s):** 0/4

*** after Protocol# indicates that Informed Consent Content was reviewed for that protocol**

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Informed Consent Content (ICC) Review

Protocol#	Number of Missing/Incomplete Elements from ICC	CTMB Guidelines Deficiency C / M / L	Overall ICC Deficiency	Description of Missing/Incomplete Elements and Comments
NRG-GY004 (RegTrial)	0	0 / 0 / 0	OK	
NRG-BR003	0	0 / 0 / 0	OK	
EAY131	0	0 / 0 / 0	OK	
NRG-LU002	0	0 / 0 / 0	OK	

Total Protocol(s) Reviewed: 4 **Total Critical/Protocol(s):** 0/4 **Total Major/Protocol(s):** 0/4 **Total Lesser/Protocol(s):** 0/4

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Regulatory Documentation Assessment

Regulatory Documentation Assessment: Acceptable

Follow-up required for IRB? No

Follow-up required for ICC? No

Re-audit Required? No

Overall Comments: Regulatory and Informed Consent Content were found acceptable.

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Pharmacy Review

Were INDs or NCI supplied agents used at this site during the period covered by this audit: Yes

Drug accountability checked during this audit: Yes

Protocol#	Number of NCI DARFs compared to shelf inventory	Number of patients cross checked with NCI	NCI DARFs Completely and Correctly Filled Out	NCI DARFs Protocol andAgent specific	Satellite Records of Dispensing Area	NCI DARFs Kept as Primary Transaction	Return of Study Agent	Study Agent Storage	Adequate Security	Authorized Prescription(s)
NRG-GY004 (RegTrial)	2	1	Compliant	Compliant	Not Reviewed	Compliant	Compliant	Compliant	Compliant	Compliant
EAY131	1	1	Compliant	Compliant	Not Reviewed	Compliant	Compliant	Compliant	Compliant	Compliant

NCI DARFs Completely and Correctly Filled Out?

Protocol NRG-GY004 (RegTrial) Compliant

Protocol EAY131 Compliant

DARFs Protocol and Agent Specific OK?

Protocol NRG-GY004 (RegTrial) Compliant

Protocol EAY131 Compliant

Satellite Records of Dispensing Area OK?

Protocol NRG-GY004 (RegTrial) Not Reviewed
COMMENTS: No satellite used.

Protocol EAY131 Not Reviewed
COMMENTS: No satellite used.

NCI DARFs Kept as Primary Transaction Record?

Protocol NRG-GY004 (RegTrial) Compliant

Protocol EAY131 Compliant

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Return of Study Agent[NCI-sponsored Studies] OK?

Protocol NRG-GY004 (RegTrial) Compliant

Protocol EAY131 Compliant

Study Agent Storage OK?

Protocol NRG-GY004 (RegTrial) Compliant

Protocol EAY131 Compliant

Adequate Security?

Protocol NRG-GY004 (RegTrial) Compliant

Protocol EAY131 Compliant

Authorized Prescription(s) OK?

Protocol NRG-GY004 (RegTrial) Compliant

Protocol EAY131 Compliant

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Pharmacy Assessment

Pharmacy Assessment: Acceptable

Follow-up Required? No

Re-audit Required? No

Pharmacy Narrative: Pharmacy was found to be fully compliant.

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Patient Case Review

Protocol#	Patient#	Category	Result	Description of Deficiency and Comments
NRG-GY004 (RegTrial)	(Announced)	Informed Consent	Lesser	**Deficiency:** - Consent form does not include updates or information required by IRB COMMENTS: Patient Identifier and date required by IRB on each page of ICF not completed.
		Eligibility	OK	
		Treatment	OK	
		Disease Outcome/Response	OK	
		Adverse Event	Lesser	**Deficiency:** - Recurrent under- or over-reporting of adverse events COMMENTS: Grade 1 neuropathy and Gr 2 lymphocytopenia not reported.
		General Data Management Quality	Major	**Deficiency:** - Protocol-specified laboratory tests not done, not reported or not documented COMMENTS: Pulse ox not done or documented cycle throughout treatment as required.- Major - Protocol-specified diagnostic studies including baseline assessments not done, not reported or not documented COMMENTS: Echocardiograms done but not every 16 weeks as required- Lesser - Errors in submitted data COMMENTS: Cycle 1 labs done but entered for the incorrect dates; insignificant dose reporting error; PET/CT done size not evaluable- tumor size reported in error; Cycle 7 Mg done, not reported- Lesser
NRG-BR003	(Un-Announced)	Informed Consent	Lesser	**Deficiency:** - Consent form does not include updates or information required by IRB COMMENTS: Patient Identifier and date required by IRB on each page of ICF not completed.

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Audit Location:

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Patient Case Review

Protocol#	Patient#	Category	Result	Description of Deficiency and Comments
NRG-BR003	(Un-Announced)	Eligibility	OK	
		Treatment	OK	
		Disease Outcome/Response	OK	
		Adverse Event	OK	
		General Data Management Quality	OK	
EAY131	(Announced)	Informed Consent	Lesser	**Deficiency:** - Consent form does not include updates or information required by IRB COMMENTS: Patient Identifier and date required by IRB on each page of ICF not completed. - Other Deficiencies (explain) COMMENTS: Subject signatures on consent forms dated by staff. Consent process note confirms that subject signed on the dates indicated. - Rating: Lesser
		Eligibility	OK	
		Treatment	OK	
		Disease Outcome/Response	OK	
		Adverse Event	OK	
		General Data Management Quality	Lesser	**Deficiency:** - Protocol-specified diagnostic studies including baseline assessments not done, not reported or not documented COMMENTS: Z1A substudy ophthalmologic exam end of cycle 1 not documented.

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Patient Case Review

Protocol#	Patient#	Informed Consent	Eligibility	Treatment	Disease Outcome / Response	Adverse Event	General Data Management Quality
NRG-GY004 (RegTrial)	(Announced)	Lesser	OK	OK	OK	Lesser	Major
NRG-BR003	(Un-Announced)	Lesser	OK	OK	OK	OK	OK
EAY131	(Announced)	Lesser	OK	OK	OK	OK	Lesser

Total # of Patient cases: 3
Total # of Critical deficiencies: 0
Total # of Major deficiencies: 1
Total # of Lesser deficiencies: 5

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Patient Case Assessment

Patient Case Assessment:	Acceptable needs follow-up		
Follow-up required for Informed Consent?	Yes	COMMENTS:	Subject signatures must not be dated by staff.
Follow-up required for Eligibility?	No		
Follow-up required for Treatment?	No		
Follow-up required for Disease Outcome/Response?	No		
Follow-up required for Adverse Event?	No		
Follow-up required for General Data Management Quality?	Yes	COMMENTS:	Required testing must be completed and documented throughout treatment.
Re-audit Required?	No		

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Audit Procedures:

The audit of this Main Member was performed by the NRG Oncology Statistics and Data Management Center (SDMC) in accordance with the September 2017 Clinical Trials Monitoring Branch (CTMB) Audit Guidelines. It was conducted on-site. Audit of affiliate was not required as there was no accrual.

IRB documents and Informed Consent Content were reviewed off-site at the NRG Oncology SDMC. The Main Member pharmacy was audited on-site. This was a routine audit.

4 protocols underwent IRB review, 4 protocols were reviewed for Informed Consent Content (ICC) and no DTLs were required/reviewed. Pharmacy review was performed for 2 protocols. 3 cases were selected for Patient Case Review including one unannounced cases. All 3 cases were fully reviewed for all six patient case review components. There was one case of other group protocols credited to NRG, no DCP cases and no AI cases.

General Comments:

No correspondence was submitted by the institution that affected the information reported on the Preliminary Report. No changes were made to the original Preliminary Report and no amended Preliminary Report was submitted.

Exit Interview Comments:

The Exit Interview was attended by and other members of the research staff.

The results of this audit are classified as follows:

IRB/ICC Review: Acceptable
Pharmacy Review: Acceptable
Patient Case Review: Acceptable, needs follow up

is requested to formulate a Corrective and Preventative Action Plan (CAPA) indicating steps that will be taken to ensure that:

1. Subjects' signatures on consent forms are not dated by staff
2. Required testing during treatment is completed and documented

The CAPA should be itemized according to the numbered list above (not according to each deficiency). It should include specific procedures that will be initiated to prevent/correct each of the issues on the itemized list above. The plan must be on Letterhead from the audited institution and must be signed by the Contact Principal Investigator.

The NCI has initiated strict deadlines for the submission of required CAPA plans. Therefore, it is important that this written plan be submitted to Tamara McLaughlin by January 10,

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2019. Electronic submission is required and should be e-mailed to all three of the following (original copy not required):

passarellom@nrgoncology.org
mclaughlint@nrgoncology.org
famigliettij@nrgoncology.org

If you have any questions, please contact Mimi Passarello at passarellom@nrgoncology.org or by phone at 412-383-2189.

This institution will be scheduled for an NRG Oncology Quality Assurance Audit within three years.

Comments for CRITICAL Regulatory Documentation Review findings:

None

Comments for CRITICAL Pharmacy Review findings:

None

Comments for CRITICAL Patient Case Review findings:

None

Mary M. Passarello MBA

Prepared By **Date** **Approved By** **Date**