

Investigational Products: IP Management and Accountability

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Learning Objectives

- Describe the Code of Federal Regulations (CFR) and Good Clinical Practice (GCP) guidelines as they pertain to study drugs.
- Describe national and state standards and laws applicable to study drugs.
- Describe the lifecycle of an investigational drug.
- Explain how the Investigational Drug Service (IDS) can help Investigators/Study Coordinators fulfill these requirements.

Regulations and Standards

- **Code of Federal Regulations (CFR)**
- **Good Clinical Practice (GCP)**
- **NY State Regulations**
- **Hospital Policy (IRB)**
- The Joint Commission (TJC)
- American Society of Health System Pharmacists (ASHP)
- Hematology Oncology Pharmacy Association (HOPA)

Code of Federal Regulations

General Responsibilities of Investigators

312.60 An investigator is responsible for ensuring that an investigation is conducted according to the signed investigator statement, the investigational plan, and applicable regulations; for protecting the rights, safety, and welfare of subjects under the investigator's care; and for the control of drugs under investigation.

Investigator Record Keeping and Retention

312.62(a) An investigator is required to **maintain adequate records** of the disposition of the drug.

312.62(b) An investigator is required to **prepare and maintain adequate and accurate case histories** that record all observations and other data pertinent to the investigation on each individual administered the investigational drug or employed as a control in the investigation.

312.62(c) An investigator shall **retain records** for a period of **2 years** following the date a marketing application is approved for the drug for the indication for which it is being investigated, or until 2 years after it is D/C and FDA is notified

Handling of Controlled Substances

312.69 If the investigational drug is subject to the [CSA](#), the investigator shall take adequate precautions, including storage of the investigational drug in a [securely locked](#), substantially constructed cabinet, or other securely locked, substantially constructed enclosure, [access to which is limited](#), to prevent theft or diversion of the substance into illegal channels of distribution.

Cabinet must meet NYS regulations – NYS likely to inspect

NYS requires that the site/PI obtain a Class 4 Researcher's license

Good Clinical Practice

What is Good Clinical Practice?

1.24 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

Roles and Responsibilities

4.6.1 Responsibility for **investigational product(s) accountability** at the trial site(s) rests with the **investigator/institution**

4.6.2 Where allowed/required, the investigator/institution may/should **assign some or all of the investigator's/institution's duties** for investigational product(s) accountability at the trial site(s) to an appropriate **pharmacist** or another appropriate pharmacist or another appropriate individual who is under the supervision of the investigator/institution

Record Keeping and Retention (IP Related)

4.6.3 **Maintaining records** of the product's **delivery** to the trial site, **inventory** at the site, **use** by each subject, and the **return** to the sponsor or **alternative disposition** of unused product(s). These records should include:

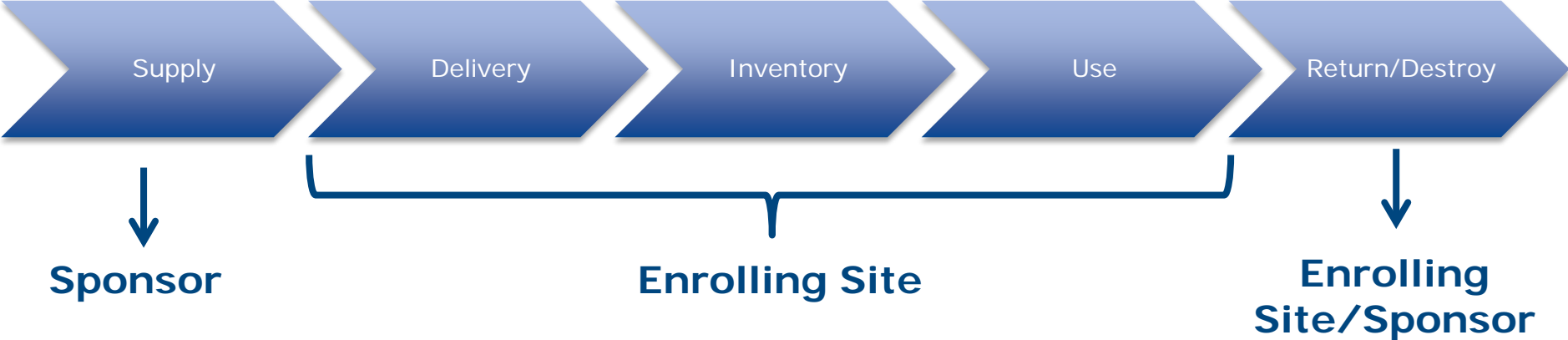
- Dates
- Quantities
- Batch/serial numbers
- Expiration dates
- Unique code number assigned to the product and trial subject

Record Retention (All)

4.9.5 Essential documents should be **retained** until at least **2 years** after the last approval of a marketing application in an ICH region and until there are no pending or contemplated marketing applications in an ICH region or at least 2 years have elapsed since the formal discontinuation of clinical development of the investigational product. These documents should be retained for a longer period, however, if required by the applicable regulatory requirements or by an agreement with the sponsor. It is the responsibility of the sponsor to inform the investigator/institution as to when these documents no longer need to be retained.

Drug Accountability

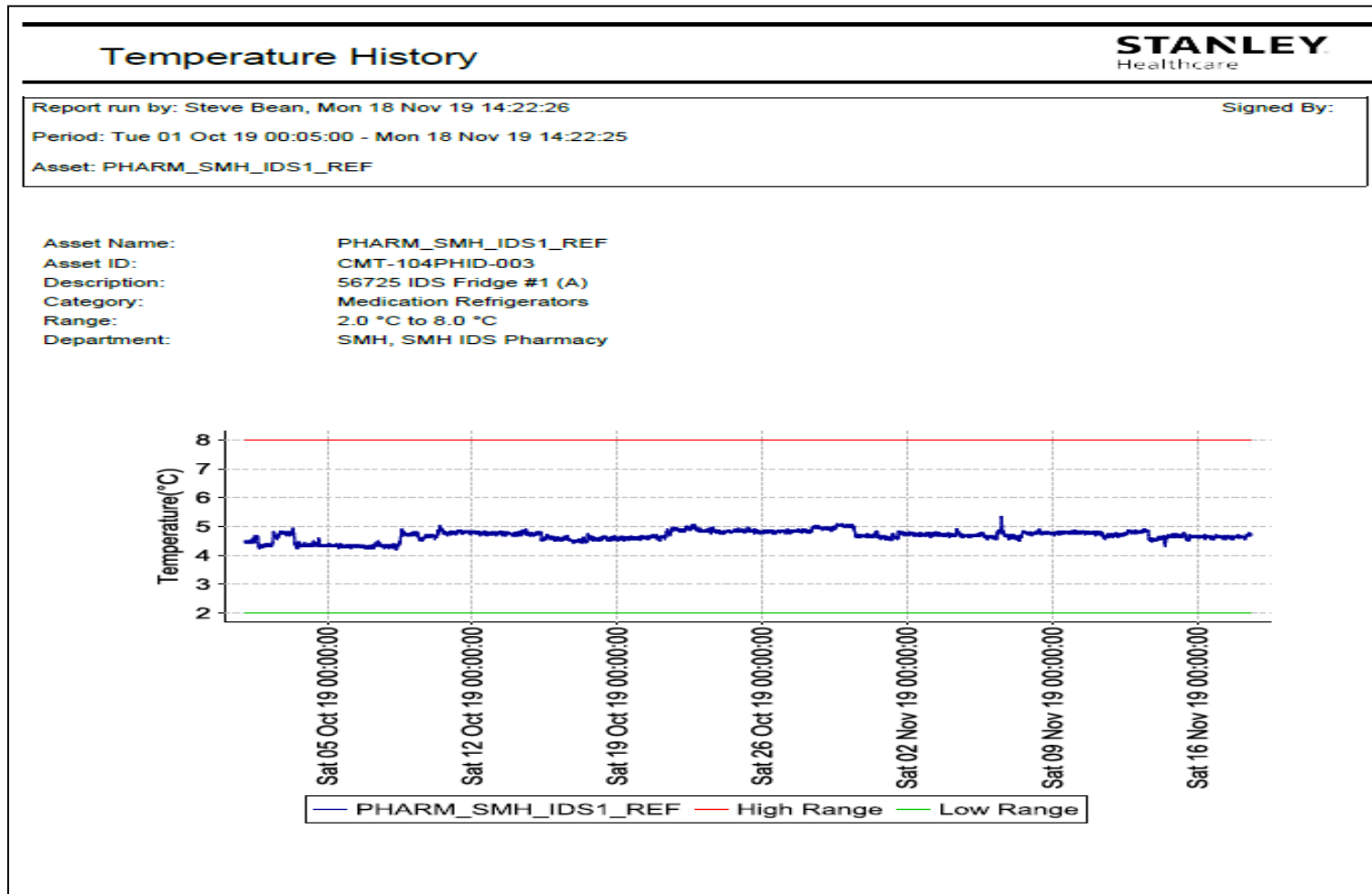
Drug Accountability Lifecycle



Temperature Monitoring (Onsite)

- Storage conditions must be monitored
- Secondary monitoring system should be in place
 - In the event of a temperature excursion the site must be able to
 - IDS utilizes a Min/Max manual recording system for each area provide details to sponsor including when, how long it lasted (ideally),
 - Considered to be the minimum accepted by most sponsors and the “out of range temperatures” reached during the excursion
- Temperatures must be monitored on a daily basis
- Records must be readily available to study monitors upon request
 - A continuous monitoring system with 24/7 alert functionality preferred
 - IDS system records temperatures every 15 minutes via Mobileview by Stanley Healthcare
 - Alerts IDS pharmacists via text messages in the event of an excursion

IDS Continuous Temperature Monitoring



IDS Temperature Log (min/max log)

Temperature Log Month: June, 2015

Investigational Drug Services: Strong Memorial Hospital
 All medication storage areas need to be checked for proper temperature range on a daily basis.
 Storage area ID = Refrigerator #2, room 5-6725
 Temperature range: 2 to 8 degrees C
 High/Low Thermometer Details
 SN: 140495006
 Calibration due date: 07/22/16

Date	Low Temp	High Temp	Current temp	Time Recorded	Reset (Y/N)	Initials
6/1/2015	6	6	6	11:00	Y	DC
6/2/2015	6	6	6	9:35	Y	DC
6/3/2015	6	6	6	8:55	Y	DC
6/4/2015	6	6	6	10:15	Y	DC
6/5/2015	6	6	6	8:00	Y	DC
6/6/2015	sat					
6/7/2015	sun					
6/8/2015	5	6	5	7:40	Y	DC
6/9/2015	5	7	5	9:00	Y	DC
6/10/2015	5	6	5	10:05	Y	DC
6/11/2015	5	6	5	9:20	Y	DC
6/12/2015	5	5	5	10:00	Y	DC

Investigational Drug Inventory

- Inventory log - at minimum must capture
 - Date received, dispensed, returned by patient, returned to sponsor or destroyed onsite (i.e. the lifecycle)
 - Subject information (dispensing's and returns)
 - Bottle/Kit number (if applicable)
 - Lot number
 - Expiration/Retest date (if applicable)

Investigational Drug Use – Subject Specific Product Accountability

Dispensing

- Subject ID
- Date dispensed
- Dose/quantity dispensed
- Lot number/package identifier
- Initials of study staff

Return

- Date of return
- Quantity returned
- Initials of study staff

May be required in addition the overall drug accountability log

Investigational Drug Return/Destruction

- Written approval from the sponsor for ultimate disposition
 - Return to sponsor
 - On-site disposal/destruction
 - Must have formal SOP for on-site destruction

Investigational Drug Return/Destruction

Return to Sponsor

- Date of (return) shipment
- Detailed listing of contents of the shipment
 - Often via use of sponsor's return form
- Name/initial of study staff
- Place copy of return form in shipment and in study file/binder

Destroy Onsite

- Sponsor must provide authorization and guidelines
- Date, quantity, means of destruction
- Name/initial of study staff
- If a controlled substance → NYS, federal regulations apply as well

Investigational Drug Destruction Record



JAMES P. WILMOT CANCER CENTER PHARMACY
INVESTIGATIONAL DRUG SERVICES
INVESTIGATIONAL AGENT DESTRUCTION RECORD

Study ID:

Subject #:

Investigational Agent:

Cycle	Day	Date	Lot	Component	Vials	Vial Status

I certify that the agent(s) referenced above has been disposed of or otherwise destroyed in a manner consistent with institutional policy/Cancer Center Investigational Drug Service policy and procedure.

NAME / TITLE

SIGNATURE

DATE

WITNESS NAME / TITLE

SIGNATURE

DATE

Study Team Tools/References

[OHSP Study Documentation Tool Box](#)

[NCCIH Clinical Research Toolbox](#)

[NIDCR Toolkit for Clinical Researchers](#)

[NCI – Pharmaceutical Management Branch Investigational Drug
Accountability Training Videos](#)

PI Initiated “In-House Study” Thinking Points

- Where does the drug come from?
 - Who is responsible for ordering the drug?
- Who can prepare blinded dose forms?
- How to prepare blinded dose forms?
 - Is it even possible to blind doses?
 - Too bulky, hazardous, chemical instability
- What is required for control/storage of the drug?
 - Security
 - Temperature
 - Documents

PI Initiated “In-House Study” Thinking Points Cont.

- Preparing and dispensing to the patient
 - How/who prepares/dispenses the product?
 - Is maintenance of study blind required?
 - If so then what is dispensing plan?
 - Is it possible to ship the product to the patient at home?
 - Generally discouraged
- Drug returns by the patients
- Disposition/destruction of unused/expired/patient returned drugs

What is an Investigational Drug Service?

The IDS is a division of pharmacy ensuring that the handling, storage, packing, labeling, distribution, and inventory maintenance of investigational agents comply with Good Clinical Practices (GCP), Federal and State regulations, The Joint Commission (TJC) Standards, as well as per the recommendations of the American Society of Health-System Pharmacists (ASHP) and the Hematology Oncology Pharmacy Association (HOPA)

Responsibilities

- Reviewing study protocols before their submission to the institutional review board (IRB)
- Development of guidelines for appropriate dispensing of the study drug
- Development of drug information resources for use by health professionals involved with dispensing and/or administration of the drug (cancer center and inpatient based studies)
- Ensuring that supplies of investigational drugs are stored properly and kept in a secure pharmacy area separate from regular drug supplies
- Maintenance of accurate drug lifecycle and temperature records
- Managing study drug inventory

Services Provided

- Drug and Record Storage
 - Access limited to IDS staff
 - Enhances security and maintenance of blind
 - Archiving of study files via Iron Mountain
- Inventory Control via the “Vestigo Automated Accountability System”
 - Receipt
 - Returns/Destruction
 - Quality Assurance
- Patient randomization
- Dose Calculation/Preparation/Delivery
- Determine the budget for the study

Services Provided Cont.

- Regulatory forms
- Study Meetings
 - SEV/SIV/Monitoring/Close Out
 - Planning/design (in-house)
- Miscellaneous
 - Randomization schemes (with limitations)
 - Odd dosage form preparations
 - Drug packaging/shipping (with limitations)

References

1. Code of Federal Regulations: Selected Regulations & Guidance for Drug Studies. Book 1A. Philadelphia, PA 19103. Clinical Research Resources, LLC.
2. Shehab N, Tamer H. Dispensing Investigational Drugs: Regulatory issues and the role of the investigational drug service. Am J Health- Pharm – Vol 61 [internet] Sep 15, 2004. Available from: <http://www.ajhp.org/content/61/18/1882.full.pdf>
3. U.S. Department of Health and Human Services. Guidance for Industry Systemic Drug Products: Good Clinical Practice: Consolidated Guidance. Available at: <http://www.ajhp.org/content/61/18/1882.full.pdf>
4. Kim, J. PREP Workshop #20: Investigational Drug Accountability. Feinstein Institute of Medical Research. Available at: http://www.feinsteininstitute.org/wp-content/uploads/2014/09/PREP-20_2014-2015.pdf



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