

# MONITORING VISIT REPORT

## VISIT INFORMATION

<b>Protocol Title:</b>	A Randomized, Open-Label, Multicenter, Phase 3 Trial Comparing Veliparib Plus Carboplatin and Paclitaxel Versus Investigator's Choice of Standard Chemotherapy in Subjects Receiving First Cytotoxic Chemotherapy for Metastatic or Advanced Non-Squamous Non-Small Cell Lung Cancer (NSCLC) and Who Are Current or Former Smokers
<b>Protocol Name:</b>	M14-359
<b>Site Name / Site #:</b>	California Cancer Associates for Research and Excellence / SITE-033
<b>Site Address:</b>	Encinitas, USA
<b>Site Activation Date:</b>	2024-05-11
<b>Monitoring Visit Date:</b>	2025-03-22
<b>Visit Type:</b>	On-Site
<b>CRA:</b>	CRA-007

## SUMMARY OF MONITORING VISIT

This Interim Monitoring Visit (IMV) was conducted on 22-Mar-2025 at California Cancer Associates for Research and Excellence (Site 033) for Protocol M14-359. This visit served as the first on-site assessment by the new monitor (CRA-007) following the transition of monitoring responsibilities. The primary objective was to re-establish oversight following a significant monitoring interval of 174 days (approximately 6 months) since the last visit (Remote Visit 3 on 29-Sep-2024). Due to this extended gap, the focus of the visit was heavily weighted toward Source Document Verification (SDV) backlog clearance, Investigator Site File (ISF) reconciliation, and an assessment of data integrity for the subjects who completed the study during the unmonitored period. The Principal Investigator, Dr. Sarah Miller, and Study Coordinator, Jessica Chen, were present; however, the new CRA notes this is the first visit to the site, and familiarity with site operations is still developing. While the site staff remained cooperative, the lack of interim monitoring has resulted in a noticeable accumulation of administrative and data-related deficiencies that require urgent attention.

During the review of the Electronic Data Capture (EDC) system and source documents, a backlog of overdue queries was discovered--12 queries aged >30 days were identified during the SDV review, with 5 of these aged >45 days. Furthermore, SDV identified significant discrepancies accumulated during the monitoring gap; specifically, 8 subjects had CRF data that did not match source documents regarding concomitant medication stop dates and adverse event grading. It was observed that numerous data corrections were made in the eCRF during the gap period (Oct 2024 - Feb 2025) without documented justification in the source notes or monitor oversight, raising a GCP compliance concern. The ISF review indicated that while the regulatory binder was structurally intact, it was not complete; several essential documents, including safety reports and correspondence generated during the gap period, had not been filed. Additionally, a review of the previous monitoring report indicated that 3 prior actions remain unresolved for >5 months, despite the site's previous indication that they were being addressed.

Given the volume of findings, the CRA was unable to complete 100% SDV for all data points generated during the 6-month gap in this single visit. A risk-based approach was adopted to prioritize safety data and primary endpoint verification for the 9 completed subjects and the 1 ongoing subject. An accumulated data quality debt requires an immediate remediation plan. The site has been instructed to prioritize the resolution of the 12 overdue queries and to provide source documentation for the unjustified data corrections within 5 business days. A follow-up remote contact is scheduled for 05-Apr-2025 to track progress before the next on-site visit.

### Overall Impression:

The site is experiencing significant data hygiene issues due to the prolonged absence of monitoring oversight, resulting in a backlog of queries, filing deficiencies, and SDV discrepancies that require immediate remediation.

### Exit Interview Comments:

Dr. Miller and Ms. Chen acknowledged the findings regarding the backlog. Ms. Chen explained that without regular CRA prompts, the

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query resolution process was deprioritized in favor of clinical care. Dr. Miller committed to reviewing the unjustified data corrections personally. The site accepted the remediation plan to clear the query backlog within 10 days.

## URGENT ISSUES

### Yes

- A. Accumulated data quality debt requires immediate remediation plan: 12 overdue queries and widespread SDV discrepancies across 8 subjects.
- B. GCP Compliance: Numerous data corrections made to eCRF without source document justification during the 6-month monitoring gap.

## PERSONS PRESENT

Name	Position/Title
Dr. Sarah Miller	Principal Investigator
Jessica Chen	Study Coordinator

## ENROLLMENT STATUS

<b>Screened:</b>	16
<b>Consented:</b>	11
<b>Pre Randomization Failure:</b>	5
<b>Randomized:</b>	10
<b>Completed:</b>	9
<b>Ongoing:</b>	1
<b>Withdrawn:</b>	0

### Recruitment Plan Notes:

Enrollment is currently paused as the site has nearly reached its individual cap and the study is closing to enrollment globally. The site successfully randomized 10 subjects against a target of 21. No new recruitment activities are planned; focus is on data cleaning for the completed subjects.

**Recruitment Rate Adequate?** Yes

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## MONITORING CHECKLIST

### Informed Consent

1	Is the current IRB/EC-approved ICF version being used?	Yes	No
2	Was ICF signed prior to any study procedures?	Yes	No
3	Is the correct version of the ICF signed and dated by subject and person obtaining consent?	Yes	No
4	Is re-consent required and if so, has it been obtained?	N/A	No

### Site Staff/Facilities

5	Is the Principal Investigator available for supervision?	Yes	No
6	Are Sub-Investigators qualified and delegated appropriately?	Yes	No
7	Is the Study Coordinator trained and familiar with the protocol?	Yes	No
8	Are pharmacy facilities adequate and secure?	Yes	No
9	Are laboratory facilities certified and adequate?	Yes	No
10	Is equipment calibrated and maintained?	Yes	No
11	Is the Site Delegation Log current and signed?	Yes	No
12	Is the Site Training Log complete?	No	Yes - SC to update training log.
13	Are CVs and Medical Licenses current for all staff?	Yes	No

### Investigator Site File / Monitoring Activities

14	Is the Investigator Site File (ISF) complete and up to date?	No	Yes - Site to file all backlog documents.
15	Are essential documents current?	No	Yes - Obtain FDF.
16	Is the Site Visit Log signed by the monitor?	Yes	No
17	Are follow-up actions from prior visits complete?	No	Yes - Resolve 3 aged actions immediately.

### Research Ethics Board

18	Is IRB/EC approval current for protocol and ICF?	Yes	No
19	Are protocol amendments approved?	Yes	No
20	Have safety reports been submitted to the IRB/EC?	No	Yes - Submit safety reports to IRB.
21	Is annual renewal current?	Yes	No
22	Is site-specific consent approved?	Yes	No
23	Is SAE reporting compliant with IRB requirements?	Yes	No

### Safety

24	Are Adverse Events (AEs) reported in a timely manner?	No	Yes - SC re-training on timely entry.
25	Are SAEs followed to resolution?	Yes	No
26	Is pregnancy reporting compliant?	N/A	No
27	Are protocol deviations documented?	No	Yes - Log deviation.
28	Is the safety database reconciled with the EDC?	No	Yes - Reconcile AE dates.
29	Are SUSAR notifications acknowledged and filed?	No	Yes - PI to sign SUSARs.
30	Are DSMB recommendations implemented?	Yes	No
31	Is the risk-benefit assessment current?	Yes	No

### Compliance

32	Is protocol compliance acceptable?	No	Yes - Review protocol timelines.
33	Is GCP compliance maintained?	No	Yes - Provide justification for data changes.
34	Is regulatory compliance current?	Yes	No

### Study Investigational Product

35	Is IP storage adequate?	Yes	No
36	Is IP accountability current?	No	Yes - Update accountability logs.
37	Is IP dispensing correct?	Yes	No
38	Are IP returns documented?	No	Yes - Log returns.
39	Is temperature monitoring compliant?	Yes	No

### Study Supplies/Vendors

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40	Are lab kits and supplies adequate?	Yes	No
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## Source Document Verification & Review

41	Are source documents available?	Yes	No
42	Was SDV completed per the monitoring plan?	No	Yes - Continue SDV at next visit.
43	Were data discrepancies identified?	Yes	Yes - Issue queries.
44	Does CRF data match source documents?	No	Yes - Correct CRF.
45	Is query resolution timely?	No	Yes - Resolve overdue queries.
46	Are data corrections documented?	No	Yes - Create Note to File.

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## SOURCE DOCUMENT VERIFICATION & CHART REVIEW

Subject	Visits Reviewed	Comments	Action Required
033-004	Visit 6, Visit 7	Discrepancy: Start date of Ondansetron i	Query issued.
033-008	End of Treatment	Subject completed study in Dec 2024. Fin	Query issued.
033-009	Visit 9	Weight recorded as 72.5kg in source, ent	Query issued.
033-001	Survival Follow-up	Date of last contact listed as 15-Jan-20	Query issued.

## FOLLOW-UP FROM PRIOR VISIT

Action: Provide updated lab normal ranges for 2024 | Status: Open | Action item from Visit 3 (Sept 2024) remains unresolved. Ranges still missing from ISF.

Action: File Note to File regarding missed temperature log download in Aug 2024 | Status: Open | NTF drafted but never signed or filed.

Action: Update Delegation Log with end dates for former Sub-I | Status: Open | Log remains incomplete regarding former staff member.

## CRA ASSESSMENT

This visit highlighted the risks associated with extended monitoring gaps. While Site 033 has successfully randomized subjects and maintained patient safety, the data quality has suffered significantly during the 174-day absence of CRA oversight. The discovery of 12 overdue queries, unfiled safety reports, and unjustified data corrections indicates a drift in GCP compliance that must be arrested immediately. The Study Coordinator is capable but requires the regular 'check-ins' provided by monitoring visits to maintain administrative discipline. The accumulated data quality debt requires immediate remediation. I have established a strict timeline with the site to clear the query backlog and file missing documents within 10 days. I will perform a remote check-in on 05-Apr-2025 to verify these actions. If the backlog is not cleared by the next visit, escalation to the Project Manager may be necessary.