**Protocol Deviation Report**

**Study Title:**  
A Phase 2, Randomized, Double-Blind, Placebo-Controlled, Multi-Center Study to Evaluate the Safety and Efficacy of Novostatin (Novitor) in Patients with Hypercholesterolemia

**Protocol Number:** NSP-002-2024  
**Sponsor:** Novitor Pharmaceuticals Inc.  
**Study Duration:** March 2, 2024 – September 22, 2024

**Report Version:** 1.0  
**Report Date:** September 30, 2024

**1. Purpose**

This Protocol Deviation Report documents all deviations from the approved study protocol encountered during the trial. It includes details on the nature of each deviation, the rationale, the impact on study integrity and patient safety, and the corrective/preventive actions taken. These deviations are recorded to maintain transparency and ensure compliance with Good Clinical Practice (GCP) guidelines.

**2. Summary of Protocol Deviations**

| **Deviation ID** | **Subject ID** | **Deviation Date** | **Deviation Description** | **Deviation Type** | **Rationale/Justification** | **Impact on Study** | **Corrective/Preventive Actions** | **Status** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| PD-001 | NS-113 | 03/11/2024 | Visit scheduled one day outside the allowable window (allowed ±2 days) for a routine visit. | Minor | Scheduling conflict due to site availability; patient was stable and no safety concerns were identified. | Minimal; visit data acceptable | Rescheduled subsequent visit; reinforced scheduling protocols with site coordinators. | Resolved |
| PD-002 | NS-124 | 04/20/2024 | Missing entry for concomitant medication on CRF; subsequently noted in source documentation. | Minor | Data entry oversight; information was available in the patient’s medical record. | None; data retrospectively captured | Data entry training provided; implemented additional review of CRF entries for critical data. | Resolved |
| PD-003 | NS-128 | 05/05/2024 | Delay in laboratory sample processing, resulting in an 8-hour delay beyond the protocol window. | Major | Temporary technical issue with the laboratory’s transport system. | Potential impact on PK/lipid level accuracy; mitigated by duplicate sample collection | Laboratory contacted; new backup transport system initiated; affected data flagged for review. | Resolved |
| PD-004 | NS-131 | 06/15/2024 | Incomplete documentation of an adverse event (mild headache) during a follow-up visit. | Minor | Investigator oversight; the event was subsequently recorded in the safety database after review. | No significant safety impact | Additional training for investigators on AE documentation; review of site records conducted. | Resolved |

**3. Detailed Deviation Narratives**

**PD-001 – Visit Timing Deviation (Subject NS-113)**

* **Description:** The scheduled visit for subject NS-113 occurred on 03/11/2024, which was one day outside the defined visit window (allowed window: ±2 days from the target date).
* **Rationale:** A scheduling conflict at the site due to limited appointment availability.
* **Impact:** The deviation is considered minor, with no impact on patient safety or data integrity; the data from the visit remains valid.
* **Corrective Actions:** The site rescheduled subsequent visits within protocol-defined windows and reinforced scheduling procedures during staff training sessions.

**PD-002 – Missing Concomitant Medication Entry (Subject NS-124)**

* **Description:** The CRF for subject NS-124 lacked an entry for concomitant medications at one visit, though the information was present in the source medical record.
* **Rationale:** This was an unintentional oversight by the data entry staff.
* **Impact:** No clinical impact, as the missing information was verified and subsequently recorded.
* **Corrective Actions:** Additional data entry training was provided, and an extra review step was implemented to ensure all critical information is captured in the CRF.

**PD-003 – Laboratory Sample Processing Delay (Subject NS-128)**

* **Description:** An 8-hour delay was noted in the processing of the laboratory sample for subject NS-128, exceeding the protocol-defined processing window.
* **Rationale:** A temporary technical issue with the laboratory’s sample transport system.
* **Impact:** Although the delay was significant, duplicate samples were collected, and the primary PK/lipid level data were not adversely affected. The affected data were flagged for additional review during analysis.
* **Corrective Actions:** The laboratory implemented a backup transport system and conducted a review of all sample processing times to prevent future occurrences.

**PD-004 – Incomplete AE Documentation (Subject NS-131)**

* **Description:** An adverse event (mild headache) experienced by subject NS-131 was not fully documented during the initial follow-up visit.
* **Rationale:** Investigator oversight during the CRF completion process.
* **Impact:** The event was minor and did not affect the patient’s overall safety; the AE was later documented after a query from the monitoring team.
* **Corrective Actions:** Investigators received additional training on the importance of comprehensive AE documentation, and periodic reviews of CRF completeness were instituted.

**4. Conclusion**

The protocol deviations documented in this report have been thoroughly reviewed, and appropriate corrective actions have been implemented to prevent recurrence. All deviations were minor to moderate in nature, with no significant impact on patient safety or the integrity of the study data. The successful resolution of these deviations, along with the overall positive outcomes of the Phase 2 trial, supports the decision to move forward to Phase 3 clinical trials.

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