Investigational Drug Accountability, Storage, Dispensing, and Return	CR-213
Clinical Research Standard Practices	**Effective Date:** September 2024

SCOPE AND PURPOSE The document is applicable to the people and processes of the following Penn State College of Medicine and Penn State Health entities specified below engaged in clinical research:

X	Principal Investigator	X	Regulatory Specialists
X	Sub-Investigators	X	Key Study Ancillary Personnel
X	Study Coordinators/Associates		Financial Analyst/Contract Management Accountants
	Data Specialist		Central Research Office Personnel

This standard operating procedure (SOP) describes the processes at investigative sites for the receipt, storage, dispensing, reconciliation and return or authorized destruction of the investigational drug (study drug). This SOP applies to all procedures related to all clinical studies subject to investigational new drug (IND) regulations for drugs and biologics during all investigational phases of development. It describes the steps followed by this clinical research site from the time the study drug is received on-site until it is either returned to the sponsor or destroyed on-site at the sponsor's request.

If the investigative site includes an Investigational Drug Service Pharmacy with policies related to drug accountability, storage, and returns, the policies at the investigative site should be followed.

This SOP may be shared with Sponsors and/or CROs upon request.

POLICY AND PROCEDURE STATEMENTS

1. Receipt and inventorying of study drug
    a. Upon receipt of the study drug, inventory the shipment, ensuring that the information on the packing slips matches exactly with what has been sent to the site, including:
        i. Study protocol number
        ii. Amount
        iii. Lot numbers and kit numbers (if applicable)
        iv. Quantity per carrier/container (if easily verified)
        v. Expiration dates
        vi. Any other sponsor-specific information
    b. Promptly bring any discrepancies to the attention of the sponsor.
    c. If the sponsor includes a form in the shipment to acknowledge receipt, obtain the appropriate signature and forward the form to the sponsor/CRO.

d. If the sponsor requires used of an IRT/IWRS to acknowledge shipment receipt, confirm as directed.
e. If the shipment included a temperature monitoring device, download and review the temperature information.
f. Retain a copy of all shipping documents for the regulatory files.
g. Ensure that any supplies required for the blinding of the study drug are available.
h. Document receipt on the drug accountability form.

2. Storage
    a. Store study drug in a secure environment with access limited to essential research personnel, according to the storage requirements detailed in the protocol or supplied by the sponsor in a supplementary document. Ensure that study drug is stored at the appropriate temperature, maintaining a storage area temperature log. A minimum, maximum, and current temperature reading should be recorded on all business days.
    b. Follow any special requirements for controlled substances required at this investigative site in addition to those specified by the regulations.
    c. Ensure that the randomization code, if appropriate, has been received.

3. Dispensing of study drug
    a. The following individuals may dispense the study drug:
        i. Physician Principal Investigator and/or Co-/Sub-Investigators
        ii. Pharmacist
        iii. Certified Nurse Practitioners (CRNP) and Physician Assistants (PA) if study drug dispensing is included on the Protocol of Practice and as permitted by the credentialing office for the investigative site
    b. Ensure that each time study medication is dispensed, the drug accountability form is completed. Documentation will include:
        i. Amount dispensed
        ii. Lot number and/or kit number of product dispensed
        iii. Name of individual dispensing study drug
        iv. Participants number
        v. Participants initials (if applicable)
        vi. Date (and time, if appropriate) of dispensing
        vii. Dose for product dispensed
    c. Ensure that study drug supplies are adequate and within an appropriate expiration date.
    d. Alert the monitor when additional supplies will be required.
    e. If emergency breaking of the study drug blind is medically necessary, document all circumstances appropriately.

4. Return/destruction of study drug
    a. After use by the participant, all used containers/units, if appropriate, should be returned to the person responsible for drug accountability at the site.
        i. Document the date (and time if applicable) returned and amount of drug returned on the accountability log.
        ii. If containers/units are missing, document the reasons.

iii. Note any discrepancies between amounts used by participant and amounts expected to be used and document the reasons.
iv. Document destruction of the used container/unit or return to sponsor as indicated by the policy at the investigative site.

b. At the conclusion of the study, ensure that the all documentation regarding receipt, storage, dispensing, and return of used containers is complete, accurate, and ready for review at the monitor's termination visit.
c. Ensure that the study drug is available for the monitor to inventory and prepare for return shipment to the sponsor/CRO if applicable.
d. Destruction of study drug at the site may be undertaken so long as such procedures are permitted by this site's OSHA and biohazard materials policies and have been reviewed by the sponsor.
e. Provide the sponsor with written documentation of the destruction of the study drug.
f. Maintain a copy in the regulatory files.

RELATED POLICIES AND REFERENCES

Code of Federal Regulations: Investigational New Drug Application (21 CFR 312.50, 56, 59, 60, 61, 62, 68, 69)

Compliance Program Manual, Bioresearch Monitoring Program, Clinical Investigators and Sponsor-Investigators (Program# 7348.811); U. S. Food and Drug Administration; 22 July 2020

Guidance for Industry Oversight of Clinical Investigations: A Risk-Based Approach to Monitoring; U. S. Food and Drug Administration; August 2013

International Conference on Harmonization Good Clinical Practice E6(R2)

APPROVALS

Approved:	Kevin Gardner, Jr., MS, BSN, RN, CCRC Director, College of Medicine Clinical Trials Office Adam McDowell, BA, JD, CRA Director, Office of Research Affairs, Contracts Thomas Brydebell Director, Office of Research Affairs, Grants Elizabeth Galgocy, MEd, RN, CIP Director, Research Quality Assurance, Human Research Trials
Authorized:	Neal Thomas, MD, MSc Associate Dean of Clinical Research Sheila Vrana, PhD Associate Dean of Research

DATE OF ORIGIN AND REVIEWS

Date of origin: February 2010

Review Date(s): October 2021, June 2022, February 2024

CONTENT REVIEWERS AND CONTRIBUTORS

Director, College of Medicine Clinical Trials Office

Director, Office of Research Affairs, Contracts

Director, Office of Research Affairs, Grants

Director, Research Quality Assurance, Clinical Trials

Lead Pharmacist, Investigational Drug Service, Milton S. Hershey Medical Center

HISTORY OF REVIEWS AND REVISIONS

February 2024	
Scope and Purpose	Entities removed as all research at Penn State Health facilities are required to follow the policies and SOPs of College of Medicine is Updated "Financial Analyst/**Contract Management Accountants**". Added "Regulatory Specialists" and "Central Research Office Personnel." Notation made that this SOP may be shared with Sponsors and/or CROs upon request.
Approvals	"Authorized" and "Approved" switched to align with CR-101.
History of Reviews and Revisions	Section added.