Regulatory Files and Participant Records	CR-211
Clinical Research Standard Practices	**Effective Date:** December 2023

SCOPE AND PURPOSE This document is applicable to the following roles within Penn State College of Medicine and Penn State Health entities engaged in clinical research:

Roles:

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

Federal regulations require documentation of all study-related activities. The regulatory files and participant records, which are periodically reviewed by the sponsor and upon request by the FDA and other regulatory authorities, serve as the site's record of compliance with good clinical practice (GCP).

This standard operating procedure (SOP) describes the steps for fulfilling all regulatory and clinical requirements for collecting, filing, and storing study-related documents and records. This SOP applies to the activities involved in maintaining the regulatory and participant records for all clinical studies involving human subjects in research during all investigational phases of development.

For use of the institution's instance of an eRegulatory system, reference SOP *Use of Florence eBinders for Electronic Records* (CR-406).

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

POLICY AND PROCEDURE STATEMENTS

1. General standards
    a. For each study a series of file folders and/or binders for documents collected during the study will be created. See Research Guidebook for templates.
    b. Maintain and update the file folders or binder as necessary, adding appropriate documents as they are generated or received.
    c. Retain copies of all original and revised documents (e.g., protocol, investigator's brochure, informed consent form).
    d. Ensure that participant records and regulatory files are kept confidential and are stored in a secure, limited-access location.
    e. Prior to scheduled visits by monitors and auditors, review content of regulatory files and participant records for completeness.
    f. Ensure that files are organized and complete following the visit.
    g. College of Medicine and Penn State Health study teams are prohibited from uploading any documents containing PHI to outside platforms as Florence

eTMF/eISF is a HIPAA-compliant environment. A general exception is granted for those documents that contain participant ID numbers, dates, and research device serial numbers as their only PHI elements. Otherwise, a written exception must be obtained from the College of Medicine Clinical Trials Office.

h. When the study is over, review the contents of regulatory files and participant records for completeness.
i. Archive regulatory files and participant records.
j. Label storage boxes clearly and completely.
k. Document inventory of storage boxes.
l. Store in a secure location as required by institutional policy *Retention of Clinical Research Documents* (CR-404).

2. Electronic maintenance of files
    a. For departments/trials not using an eRegulatory platform, most regulatory documents will be stored exclusively on the Penn State Health shared network drive (shared drive) in an electronic format. Documents requiring wet signatures will be stored in a paper-based binder. Such documents that require wet signatures are:
        i. Protocol signature pages
        ii. Delegation of authority logs
        iii. Training logs, except if electronic signatures are permitted by sponsor
        iv. Investigator Brochure signature pages
    b. Monitors will be given direct, read-only access to regulatory documents stored electronically. Monitors may request to be given paper documents.
    c. Regulatory binders provided by sponsor may be dismantled at the discretion to the study team to comply with uniformity with this standard practice.
    d. Current versions of the following documents can be kept in separate binders, and updated as they become available:
        i. IRB Rosters
        ii. IRB Assurance and Compliance Statements
        iii. Local laboratory CLIA, CAP, and Department of Health certificates
        iv. Local laboratory reference ranges
        v. Local laboratory medical director CV and license
        vi. Study team members' CVs, licenses, CITI biomedical research training certificates, and GCP certificates

        These binders are available for review upon request. The rosters and statements are also kept electronically within the shared drive. The obsolete rosters and statements will not be deleted from the shared drive and will continue to be updated on an ongoing basis. The shared drive is backed up daily by the institution. This assures that all information can be reproduced if an audit were to occur.
    e. At the Close Out Visit, the monitor will be given electronic copies of any missing documents not in Sponsor's master file, except those related to the close out submission. It is the policy of the Penn State University IRB to only close studies once a Close Out Visit follow-up letter has been provided. Close Out submission documents will be emailed to the monitor once the study is closed with the IRB.

3. Sponsor/CRO-provided electronic Trial Management File (eTMF)

a. If Sponsor/CRO provides site personnel with direct access to an eTMF platform, it is expected that site personnel will either upload files directly into the eTMF or email files to the Sponsor/CRO, not both.
b. Except for participant identification number, dates, and research device serial numbers, no HIPAA identifiers may be included documents uploaded into a Sponsor/CRO -provided eTMF or other platforms.
c. As monitors have access to the electronic medical record, both on-site and through remote access, uploading unredacted signed consent forms is prohibited into a Sponsor/CRO -provided eTMF or other platforms.

RELATED POLICIES AND REFERENCES

Code of Federal Regulations: Investigational New Drug Application (21 CFR 312.60, 62, & 68)

Code of Federal Regulations: Investigational Device Exemption (21 CFR 812.140)

Code of Federal Regulations: Investigational Device Exemption (45 CFR 164.514 & 530)

International Conference on Harmonization Good Clinical Practice E6(R2)

Retention of Clinical Research Documents (CR-404)

Pharmacy Administrative Manual Investigational Drug Services (Section 1400)

APPROVALS

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HISTORY OF REVIEWS AND REVISIONS

June 2023	
Scope and Purpose, Roles	Updated "Financial Analyst/**Research Accountants**". Added "Regulatory Specialists" and "Central Research Office Personnel."
Policy and Procedure Statements	Subsection "Collecting, filing and storing study-related documents and records" renamed to "General standards" Subsection "Electronic" renamed to include "maintenance of files" Subsection "Sponsor/CRO-provided electronic Trial Management File (eTMF)" added.
History of Reviews and Revisions	Section added.
October 2023	
Scope and Purpose	Removed entities. Add reference to *Retentions of Clinical Research Documents* (CR-406). Notation made that this SOP may be shared with Sponsors and/or CROs upon request.
Policy and Procedure Statements	Add reference to *Use of Florence eBinders for Electronic Records* (CR-406).