

Nova Southeastern University Standard Operating Procedure for GCP

Title: <u>Identifying, Handling and Reporting Unanticipated</u> <u>problems/AEs at NSU Centers/Colleges</u>		Version # 1
SOP Number: OCR-AE-001	Effective Date: August 2013	Page 1 of 3

PURPOSE: Information on any unanticipated problems/adverse experiences of subjects should be identified, included as a study finding and evaluated as part of the risk/benefit ratio for the continuance of the study. Throughout this process, the subject's well-being should be maintained.

POLICIES:

- Investigators and CRCs should gather information from subjects about unanticipated problems/adverse subject experiences during and between visits.
- 2. Investigators and CRCs should actively gather information from other reliable and available sources about any potential unanticipated problems/adverse subject experiences during and between visits.
- 3. Any Unanticipated Problem/ Adverse Event should be documented consistently in research chart and the IRB report.
- 4. The principal investigator must report according to the NSU IRB policies and procedures available on http://www.nova.edu/irb/manual/aer.html
- 5. Serious Adverse events, Unanticipated Problems/Adverse Events are reported to the Sponsor and IRB according to their accelerated timeframe.
 - 5.1. Serious Adverse Events
 - 5.1.1. To the Sponsor: Within 24 Hours of Being Notified
 - 5.1.2. To the IRB: Within 24 hours of Being Notified
 - 5.2. Unanticipated Problems/Adverse Events:
 - 5.2.1. To the IRB: within 5 working days

DEFINITION: An Internal Unanticipated Problem/Adverse Event and Serious Adverse Event is one occurring to a subject enrolled at a NSU study center

Procedure for Identifying / Unanticipated Problems/ Adverse Events

- 1. At each study visit, the subject should be sufficiently asked if they have or have had any unanticipated problem/adverse events since prior visit. Documentation of this discussion should be in the research chart.
- 2. Additional sources of unanticipated problem/adverse events should be sought when available. Examples include:
 - 2.1. Significant others should be consulted when available.
 - 2.2. Clinical Observations
 - 2.3. Subject Diaries that may conflict with oral statements
- 3. Detail of documentation of an unanticipated problem/adverse event should include the following:
 - 3.1. Date/Time of onset
 - 3.2. Description of Unanticipated problem/adverse event
 - 3.3. Severity
 - 3.3.1. Mild: Experiencing mild discomfort with insignificant changes in daily activity or clinical status.
 - 3.3.2. Moderate: Makes accommodating changes in normal daily activity but can still function relatively well. Noticeable changes in clinical status.
 - 3.3.3. Severe: Makes major changes in (or is prevented from accomplishing) normal daily activity. Major changes in clinical status.
 - 3.4. Date/Time of resolution (if applicable)
 - 3.5. Association with research study as determined by the Principal Investigator
 - 3.6. Any action or therapy implemented due to unanticipated problem/adverse event.

Procedure for Handling Unanticipated Problems/Adverse Events with the Subject

- 1. Upon identification of an unanticipated problem/adverse event:
 - 1.1. The medically necessary treatment should be determined with the subject's best interest in mind.
 - 1.2. The determination as to suspend or halt the research investigation should be determined.
- 2. The subject should be informed when medical care is needed for intercurrent illness(es).

- 3. Whenever appropriate, treatment within the limitations of the protocol should be exhausted first, unless the subject wishes to withdraw from the protocol.
- 4. All unanticipated problems/AEs should be followed until resolved, referred or determined permanent, or it is determined that there is no resolution.

Procedure for Reporting Unanticipated Problems/AEs and SAEs

- 1. The PI must determine if the event is classified as an Unanticipated Problem / Adverse Event or Serious Adverse Event (defined in this policy).
- 2. If a Serious Adverse Event:
 - 2.1. The immediate report (Note: a more detailed report will promptly follow) is sent to the Sponsor and the IRB within 24 hours of becoming aware of the serious adverse event.
 - 2.2. The more detailed report shall follow upon resolution of the event or as requested by the sponsor/IRB
- 3. If the Unanticipated Problem/AE is not SAE, then the information must be reported to the IRB within 5 working days and according to the Sponsor policy (usually just documentation on the CRFs).
- 4. The mechanism for reporting to the Sponsor may vary according to Sponsor's policy.
- 5. Subject information reported to the IRB and sponsor should only be identified by their code or other de-identified manner.