Baylor College of Medicine

Office of Clinical Research

Principal Investigator Responsibilities for Investigator-Initiated Studies

OCR-P-06-01

1. Purpose:

1.1. To outline the responsibilities of Principal Investigator (PI) in the development, implementation, conduct, and closure of an Investigator-Initiated clinical research study.

2. SCOPE:

2.1. This procedure applies to all investigator-initiated clinical research studies coordinated by the Office of Clinical Research (OCR) and Collaborating Research Units (CRU).

3. PROCEDURES:

3.1. PI is responsible for development, implementation/conduct and oversight of clinical research study.

3.2. PROTOCOL DEVELOPMENT:

- **3.2.1.** PI is responsible for scientific development of the study and for ensuring that the protocol contains all the required elements to meet the study objectives per federal guidelines and applicable local and federal regulations.
- **3.2.2. Study Team**: PI is responsible for communicating and coordinating with study team throughout the development of protocol. Study team may include:
 - Regulatory Coordinator (Reg C)
 - Research Nurse (RN)
 - Research Coordinator (RC)
 - Data Manager (DM)
 - Statistician
 - Database Developer
 - Investigational Pharmacist
 - Co-investigators (e.g., radiologists, pathologists, other physician subspecialists, psychologists, etc.)
- **3.2.3. External Reviews:** PI is responsible for identifying any external review entities (sponsors or regulatory agencies e.g., FDA, Recombinant Advisory Committee, etc.) that must review the initial protocol and/or any ongoing modifications to the protocol.
- **3.2.4.** Institutional Review Board (IRB): PI is responsible for submission of protocol to IRB of record. If IRB of record is an external IRB, PI is responsible for submission of protocol to Baylor College of Medicine (BCM) IRB reliance.

- **3.2.5. Other Institutional Reviews:** PI is responsible for the submission of protocol application for administrative approval from affiliate sites, and applicable institutional committees (e.g., biosafety, laser, internal scientific review, etc.).
- **3.2.6.** Clinical Trial Agreement (CTA): For multi-site trial, PI is responsible for ensuring that appropriate CTA is in place.
- **3.2.7. Budget:** PI is responsible for approval of final budget. Budget may accompany grant or other funding opportunity submissions. For multi-site trials PI is responsible for approval of final budgets incorporated into CTAs.
- **3.2.8. Qualifying Clinical Trials (QCT):** PI is responsible for understanding and complying with rules for billing third party payers for services rendered in the clinical research context. This includes ensuring that services for study subjects enrolled in clinical research studies are billed in accordance with the Medicare coverage analysis determination and that appropriate documentation exists in the medical record.
- **3.2.9. ClinicalTrials.gov:** PI is responsible for registration, initial submission, maintenance of study and result submission at ClinicalTrials.gov, as applicable.

3.3. TRAINING AND CREDENTIALS

- **3.3.1.** PI is responsible for providing current documentation of his/her credentials as well as those of co-investigators and study staff.
- **3.3.2.** Required credentials include:
 - Curriculum vitae (signed and dated within previous 2 years)
 - Current professional license (e.g., medical, nursing)
 - Human Subject Protection (HSP) training documentation
 - Health Information Privacy and Security (HIPs) training documentation
 - Good Clinical Practice (GCP) training documentation (for FDA regulated/NIH funded studies unless required by sponsor)
 - Research Conflict of Interest (RCOI) training documentation
 - Documentation of other training required by affiliate sites
- **3.3.3.** PI is responsible for ensuring that co-investigators and study staff are knowledgeable about the protocol and their duties and for providing additional training when applicable.

3.4. PROTOCOL IMPLEMENTATION AND STUDY CONDUCT OVERSIGHT:

- **3.4.1. Study Tools:** PI is responsible for working with RN/RC/DM, study statistician and database developer to ensure the availability of appropriate study tools for protocol implementation, including study initiation tools, eligibility checklists, manual of operations, data collection forms (eCRFs), pre-printed orders, etc., prior to enrollment of the first subject.
- **3.4.2. Study Conduct Oversight:** PI is responsible for real time monitoring of study conduct:
 - **3.4.2.1.Accrual:** PI is responsible for monitoring accrual to the study to ensure accrual is occurring at the anticipated rate as well as to ensure appropriate interim analyses or closure occur at appropriate times based on the trial design.
 - **3.4.2.2.Informed Consent:** PI is responsible for ensuring study subject informed consent prior to initiation of any research-related procedures.
 - **3.4.2.3.Eligibility:** PI or designated co-investigator is responsible for confirming eligibility of each subject through review of eligibility checklist and source documentation.
 - **3.4.2.4.Protocol Compliance:** PI is responsible for reviewing each case record to determine compliance with the protocol including:
 - **3.4.2.4.1.**Appropriate administration of study treatment (investigational product and other treatment or supportive care required by the protocol).
 - **3.4.2.4.2.**Performance of protocol-specified clinical, laboratory, and radiographic assessments.
 - **3.4.2.4.3.** Submission of samples for research (e.g. pharmacokinetic samples, histopathology samples, correlative biology or imaging studies).
 - **3.4.2.4.4.** Assessment and interpretation of reports of response, study endpoints or determination of Off Study criteria.
 - **3.4.2.5.Study Data Capture:** PI is responsible for documentation of his/her timely review of case report forms (CRFs) for each subject. The task of completing CRFs may be delegated to RN, RC and/or DM but PI maintains overall responsibility for quality, content and timeliness of study data capture.
 - **3.4.2.6.Adverse Events:** PI or designated co-investigator is responsible for timely assessment of adverse events and Unanticipated Problems (UP). PI is

- responsible for confirming documentation and submission of requisite reports at local (e.g., IRB, DSMC) and national level (e.g., FDA).
- **3.4.2.6.1.**PI and designated co-investigator reviews study correspondence (paper or e-mail), weekly reports, flow charts, Serious Adverse Event (SAE) and UP reports on a regular basis. PI and designated co-investigator must sign-off or document that review has occurred.
- **3.4.2.6.2.**PI or designated co-investigator is responsible for assessing whether AEs represent dose limiting toxicities (DLTs) or dose modifying toxicities and making determination about further study dose modifications/subject accrual, if applicable.
- **3.4.2.6.3.**PI or designated co-investigator is responsible for obtaining additional information for adverse events from the treating physician, as necessary.
- **3.4.2.6.4.**PI is responsible for determining whether an AE warrants modification to the protocol or consent form.
- **3.4.2.6.5.**PI is responsible for determining whether an AE warrants suspension of further study accrual and notify all members of the study team immediately if a study is suspended for safety concerns.
- **3.4.2.7.Protocol Endpoints:** PI is responsible for timely evaluation of protocol endpoints that impact study design and patient accrual, e.g., response assessments.
- **3.4.2.8.Data Safety Monitoring:** PI is responsible for ensuring that any applicable Data Safety Monitoring Board (DSMB) or Data Safety Committee (DSC) is convened at the intervals specified in the Data Safety Monitoring plan outlined in the IRB approved protocol.
- **3.4.3. Records:** PI is responsible for ensuring retention/storage of the study records per local and federal regulations and per departmental and institutional policies.
- **3.4.4.** Coverage: PI is responsible for ensuring that there is appropriate coverage for PI responsibilities in the event of a planned or unplanned absence.

3.5. PROTOCOL AMENDMENTS:

- **3.5.1.** PI is responsible for initiating any necessary changes in protocol or informed consent document during study conduct including:
 - Making amendment to protocol and consent form
 - Informing the IND holder, if applicable
 - Developing a plan for subject's notification and re-consenting, if applicable
 - Submitting amendment to IRB of record, BCM IRB reliance, affiliate institutions and appropriate regulatory agencies
- **3.5.2.** PI is responsible for reviewing amendment content with OCR CRM to determine if an amendment to the budget is required and notify financial analyst as applicable.
- **3.5.3.** PI is responsible for reviewing amendment content with OCR CRM, RN/RC to determine if any changes in study processes or operational documents are required.

3.6. STUDY REPORTING:

- **3.6.1. Annual Reports:** PI is responsible for submitting annual reports to IRB of record, BCM IRB reliance and other regulatory and oversight agencies as appropriate.
- **3.6.2.** PI is responsible for submitting closure/final reports to IRB of record and other regulatory bodies as appropriate and for closing the study account.

3.7. QUALITY ASSURANCE:

3.7.1. PI is responsible for facilitating Quality Assurance (QA) review per OCR QA Program including access to study files by OCR QA analyst, resolution of QA findings and development of corrective action plan and preventive measures when applicable.

4. MATERIALS AND REFERENCES:

- **4.1.** Collaborative Institutional Training Initiative (CITI) website: https://about.citiprogram.org/en/homepage/
- **4.2.** ICH Harmonized Tripartite Guideline For Good Clinical Practice (ICH GCP): http://www.ich.org/fileadmin/Public_Web_Site/ICH_Products/Guidelines/Efficacy/E6/E6R2Step_4_2016_1109.pdf

- **4.3.** 45 CFR Part 46 Protect of Human Subjects: https://www.hhs.gov/ohrp/regulations-and-policy/regulations/45-cfr-46/index.html
- **4.4.** 21 CFR 312, Subpart D, Responsibilities of Sponsors and Investigators: https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfcfr/CFRSearch.cfm?CFRPart=312 &showFR=1&subpartNode=21:5.0.1.1.3.4

5. VERSION/REVISION HISTORY:

APPROVAL DATE	VERSION	OWNER	APPROVE R	REVISION SUMMARY
2-6-18	01	OCR	ELC	