DEPARTMENT OF VETERANS AFFAIRS
South Texas Veterans Health Care System
San Antonio, Texas 78229-4404

Research Service Policy Memorandum 11-58

May 13, 2011

RESEARCH STANDARD OPERATING PROCEDURES (SOP)
Defining Investigational Drugs and Completing VA Form 10-9012

1. **PURPOSE**: The purpose of VA Form 10-9012 is to provide pharmacists and other healthcare providers information about drug(s) being tested or evaluated for use in a study protocol that cannot be found in readily available drug reference materials. It identifies the principal investigator for the project as well as the individuals authorized to prescribe the drug(s) being tested or evaluated for use in the study protocol. It also identifies side effects, antidotes, and the designated contact person for questions.

2. **DEFINITIONS:**

a. **Principal Investigator (PI):** A PI is the individual who is accountable for the proposal, the protocol, performance, and culmination of a research or development project. For multi-center clinical trials approved by the local IRB, the PI or Co-PI located at the VA is accountable for all aspects of conduct of the study at the South Texas Veterans Healthcare System (STVHCS). For VA Cooperative Studies Program (CSP) clinical trials, the Site Investigator (SI) is the individual who is accountable for all aspects of conduct of the study at the STVHCS. ***NOTE:*** *The terms PI, Co-PI and SI are considered equivalent for the remainder of this SOP.*

b. **Authorized Prescriber:** A provider who is listed on VA Form 10-9012 as being approved by the Investigational Review Board (IRB) and the Research and Development (R&D) Committee to prescribe the drug(s) being tested or evaluated.

c. **Comparator Drug:** A comparator drug is an agent that the drug(s) being tested or evaluated is being compared to in a clinical trial. A comparator drug may be the current standard of care for the disease state being studied.

d. **Investigational Drug (VHA Handbook 1108.04):** A chemical or biological drug that is used in a clinical investigation.

(1) An investigational drug can be:

(a) a new chemical compound, which has not been released by the Food and Drug Administration (FDA) for general use, or

(b) An approved drug that is being studied for an approved or unapproved use, dose, dosage form, administration schedule, or under an Investigational New Drug (IND) application, in a controlled, randomized, or blinded clinical trial.

(2) Concurrent medications, comparators, or rescue medications used in the investigational trial that are not the drug(s) being studied are not defined as investigational drugs unless they are not commercially approved or not available through commercial channels. Prescription drugs, over-the-counter drugs, nutritional supplements, herbal preparations, and legend items used for diagnosis or treatment and meeting the definition in (1) above, are considered investigational drugs.

3. **ACTION:**

a. **When VA Form 10-9012 is required:**

(1) Form 10-9012 must be completed in its entirety for all drugs being utilized under an Investigational New Drug Application (IND) from the FDA according to 21 CFR Part 312.3.

(2) Form 10-9012 is also required for each commercially available drug when the drug(s) are listed on the IRB application as the study intervention(s) being tested or evaluated and/or are listed for research purposes only outside of local standard practice

NOTE: *For commercially available drug(s) the package insert may be referenced in sections 14 (known side effects and toxicities), 16 (special precautions) and 17 (antidote) for these drugs.*

(3) When the project is a VA Cooperative Study, the centralized Cooperative Clinical Research Pharmacy will send the completed VA Form 10-9012 to the investigator for the required signatures.

b. **Instructions for completing Form 10-9012:**

NOTE: *VA Form 10-9012 may contain information for more than one investigational drug if the drugs are commercially available and are not blinded.*

(1) List the complete title of the study AND the UTHSCSA IRB Number

(2) List the Responsible Investigator (individual who signed the 1572, if applicable)

(3) List the Principal Investigator or CO-PI at the VA if different from the Responsible Investigator

(4) List all drug names including chemical name, generic, and brand if available; also provide the IND number if applicable

(5) List manufacturer/ sponsor

(6) List the name of the company who will be supplying the drug (this may differ from the sponsor, or may also be the research pharmacy if applicable)

(7) Describe the therapeutic classification of the drug (i.e. ACE inhibitor and mechanism of action etc.)

(8) List dosage forms and strengths being used in the protocol

(9a) Check the appropriate box indicating the controlled substance status of the drug

(9b) Only answer this question if the drug is controlled - C IV, C III etc.

(10A) Check appropriate boxes for storage conditions

(10B) For medications that require mixing, indicate the stability of the drug after mixing

(11A) Select route of administration being utilized in the protocol

(11B) Describe in detail the administration directions – dose, route, schedule, length of treatment

(11C) Describe the reconstitution directions for compounded products such as IVs

(12A) If the drug can only be administered by a physician, check box A; if the study nurse can administer the drug to the patient, check box B; if the patient will self administer the medication leave blank

(12B) Indicate route of administration of the drug being utilized in the protocol

(13) Usual dosage range – indicate the commonly used dosage range for the drug; if still investigational, list the dosage ranges that have been studied

(14) List expected adverse events and known rare and/or serious adverse events (found in the Investigator Brochure if unapproved or Package Insert if approved; should be consistent with those listed in the IRB application and the informed consent document)

(15A) Indicate if the study is double blind (placebo controlled) or open label

(15B) If the study is double blind, indicate who has the ability to break the blind in the case of an emergency; this is usually the PI, the research pharmacist, or a sponsor representative

(15C) If the study is double blind, list the contact number(s) for the person responsible for breaking the blind in the case of an emergency (24 hour contact is required; a daytime and an evening number must be provided)

(16) List any special precautions, contraindications, patient education, and drug interactions

(17) Describe any known antidote or supportive care measures in case of an overdose

(18) Check the appropriate box for the type of study being conducted

(19A) – (19D) List authorized prescribers from the 1572 (if applicable) and those with prescribing authority within the VA system (MDs, PAs, ARNPs, or PharmDs); authorized prescribers must be listed on the approved IRB B-2 personnel form and the VA R&D personnel list.

(20) Obtain an original signature of the Principal Investigator along with the date

(21) Submit the form to the Human Subject's Protocol Coordinator in the R&D Office for signature from the UTHSCSA IRB Director and R&D Chairperson.

c. **When VA Form 10-9012 is not required:**

(1) Form 10-9012 is not required for the use of an approved drug for an approved use if it is not the drug(s) being tested or evaluated for use in a study protocol

(2) Form 10-9012 is not required for the use of approved drugs for unapproved indications if it is given for therapeutic rather than investigational purposes (21 CFR § 312.2[d]) outside of a study. ***NOTE:*** *See Off Label Drug Use Guidance at: http://vaww.pbm.va.gov/directive/Guidance%20Off%20Label%20Prescribing.pdf*

(3) Form 10-9012 is not required for a comparator drug (being used according to local standard practice) that is commercially available and is being prescribed according to the FDA approved package labeling as part of a study.

(4) Form 10-9012 is not required for premedications, rescue and concurrent drugs (being used according to local standard practice) if they are commercially available and are prescribed according to the FDA approved package labeling (even if they are supplied by the study sponsor and/or dispensed by the investigational pharmacist).

d. **Changes to VA Form 10-9012**

(1) Should any unanticipated toxicities become evident during the course of the study, in addition to notification of the IRB and protocol sponsor, the Principal Investigator is responsible to provide an updated 10-9012 form to reflect the new toxicities.

(2) When there are any additions to authorized prescribers, the Principal Investigator is responsible for providing an updated 10-9012 form to reflect the additional authorized prescriber.

(3) Updates to VA Form 10-9012 will be initiated and signed by the Principal Investigator and forwarded to the Human Subject's Protocol Coordinator in the R&D Office for signature by the UTHSCSA IRB Director and R&D Chairperson.

(4) Removal of authorized prescribers or administrative changes approved by the IRB to VA Form 10-9012 may be initiated by the Research Pharmacist and forwarded to the Principal Investigator and Human Subject's Protocol Coordinator in the R&D Office for electronic filing.

(5) The Human Subject's Protocol Coordinator will electronically file and notify all applicable parties that the revised VA Form 10-9012 replaces the existing form for file updating.

e. **Storage**

(1) Revised and most recent copies of VA Form 10-9012 must be kept on file in the Research Pharmacy

4. **REFERENCES**: VHA Handbook 1108.04; STVHCS Policy Memorandum 119-08-05; IRB Research Involving a Drug Policy and Procedure; IRB Form O, O-1, O-2 with instructions

5. **RESPONSIBILITY**: ACOS for Research and Development (151)

6. **RESCISSIONS**: Research Service Policy Memorandum 11-58, dated January 13, 2011

7. **RECERTIFICATION**: May 2016

Kimberly Summers, PharmD

KIMBERLY K. SUMMERS, PHARM.D.
Acting ACOS for Research