

MTN-026

Study Product Considerations

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Microbicide Trials Network

Pittsburgh, PA

USA





Presentation Overview

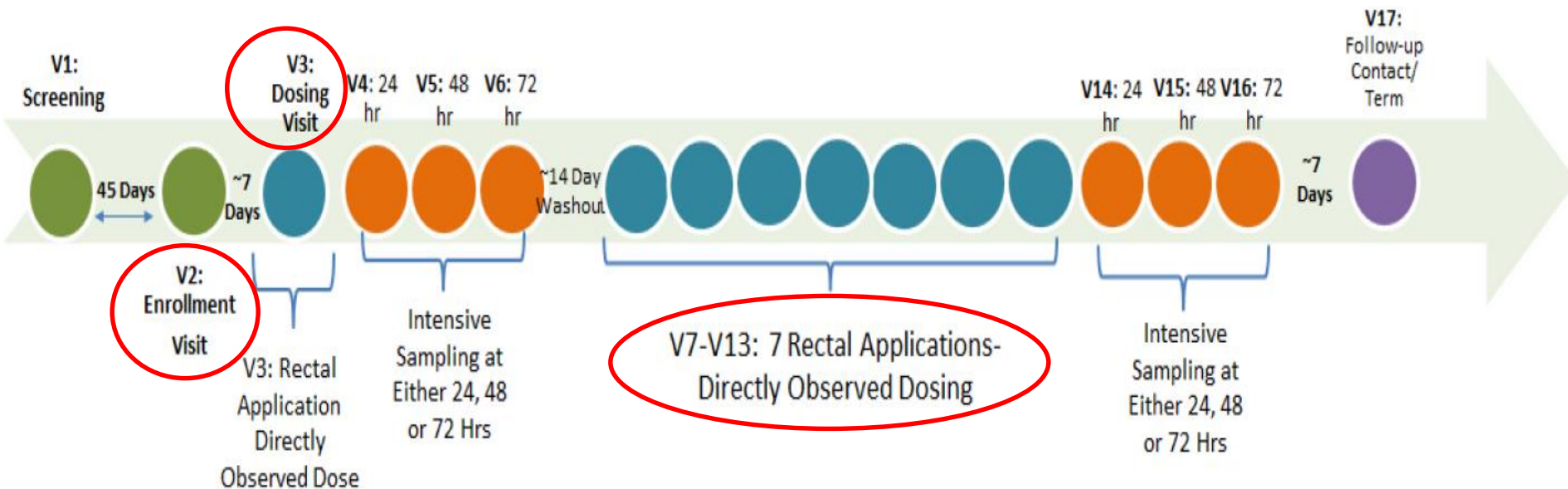
- Study Gel Prescription Completion
- Study Gel Supply and Labeling
- Chain of Custody, Accountability, Unused Gel Retrieval>Returns
- Study Gel Request Slip & Management Slip Completion
- Study Gel Complaints



Reference Materials

- MTN-026 Protocol, Version 2.0
 - Section 6
- MTN-026 SSP Manual
 - Section 6

Study Visit Schedule & Regimen



- **Visit 2/Enrollment Visit – Randomization; No Study Product.**
- **Visit 3/Single Dose Administration Visit.**
- **Visits 7*-13/Study Product Administration Visits - DOD.**

*One dose of gel for as-needed at home use will be provided to the participant at Visit 7.



Visit 2/Enrollment Visit

- The study database (via the Medidata Balance module) will assign the participant to a treatment arm and the Randomization Date and Time will appear automatically on the Randomization eCRF.
- A participant is considered enrolled in the study once this step takes place



Visit 3/

Single Dose Administration Visit

- Completion of **Prescription** by clinic staff/authorized prescriber will occur at the **Visit 3** (occurs at BIDI)
- **Prescription** is a 2 part no carbon required (NCR) paper document. The top white is the original (pharmacy) and the bottom is yellow (clinic).
- Fax to SCC CRS pharmacy
- A supply of 50 prescriptions is provided to the clinic staff
- Supply of prescriptions at BIDI and SCC



Visit 3/

Single Dose Administration Visit

- Once the study product arrives the RN at BIDI, RN confirms that the study product has arrived in a good condition and records on MTN-026 Participant-Specific Study Product Transportation Form.
- This form should be returned to the pharmacy along with the temperature monitoring device and delivering container.
- The original prescription should be delivered to SCC CRS pharmacy on the **same day**.

MTN-026 STUDY GEL PRESCRIPTION

Instructions: All entries must be made in blue or black ink. Press firmly when completing this form. Corrections may be made by drawing a line through incorrect entries, recording correct information, and initialing and dating the correction.

CRS Name:	
CRS ID:	

Participant ID:

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Did the participant provide written informed consent for enrollment into MTN-026? YES NO Clinic Staff Initials: _____

Dapivirine 0.05% or Placebo Gel

Sig: Insert entire contents of one (1) applicator into rectum as directed.

Quantity: Sufficient to last for one plus seven consecutive days of study gel administration. Study gel may be refilled as needed for the duration of the study product administration period.

Authorized Prescriber Name (*please print*): _____

Authorized Prescriber Signature: _____

Date:

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dd *MMM* *yy*

Clinic Staff Instructions: Once the prescription is completed, deliver white original (labeled "Pharmacy") to pharmacy. File yellow copy (labeled "Clinic") in participant's study notebook.

Pharmacy: Each participant will receive nine gel applicators.

- Dispense 1 gel applicator at Visit 3.
- Dispense 2 applicators at Visit 7: 1 applicator for direct observed dosing in the clinic and 1 applicator for as-needed home dosing by the participant.
- The remaining quantity of applicators (6 applicators) will be dispensed once daily for the remainder of the direct observed dosing study product administration Visits 8-13.

CRS Name:	Silom Community Clinic CRS	CRS Number:	31681
Location:	12th Floor Ratchanakarin Building, Hospital for Tropical Diseases, Ratchawithi Road, Bangkok		
Affiliate Institute:	Bamrasnaradura Infectious Diseases Institute (BIDI)		
Location:	38 Moo 4 Tambon Taladkwan, Tivanon Road, Muang Nonthaburi		

Study Product: Dapivirine gel 0.05% or HEC placebo gel 0.05%

Storage Condition: 15-30°C

Study Product Dispensing Information		At SCC CRS Pharmacy	
Participant ID:			
Visit Date:		Visit Code:	
Number of gel applicator dispensed:		Study product temperature at dispensing (°C) :	
RPh initial/Time:			
Runner initial/Time:			
Receiving of Study Product at BIDI		<input type="checkbox"/> the study product arrives in good condition <input type="checkbox"/> the study product is unqualified to be used	
Number of gel applicator received:		Study product temperature at arrival (°C) :	
RN initial/Time:			

Instruction for receiving nurse: please stop the data logger and return to SCC CRS pharmacy for downloading temperature record during study product transportation. In case of the study product delivered is unqualified to be used please call SCC CRS pharmacy at 02-354-6818 immediately.

Attach downloading temperature record here:

Temperature Data Logger # _____ RPh initial/Date: _____



MTN-026 Prescription

- *When completing the prescription, place the cardboard flap under the copy (clinic prescription)*
- Double check the accuracy of all entries
- Errors may be corrected in blue or black ink by putting a line through and initialing
- Retain the yellow copy for the participant study notebook in the clinic
- Deliver white copy to pharmacy



MTN-026 Prescription

- The pharmacist will review the prescription.
- If an error is noted, the white and yellow copies must be individually corrected by an authorized prescriber with identical information on both copies (correction, initials, date).
- If no problems are noted, the pharmacist will dispense the study gel.

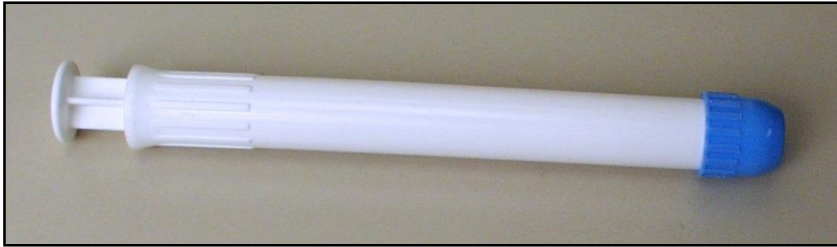
Study Product Supply – Study Gel

- One pre-filled applicator contains either:
 - 2.5 grams (2.5 mL) of **Dapivirine 0.05% gel** (1.25 mg of dapivirine)
 - 2.5 grams (2.5 mL) of **Universal HEC placebo gel**

- Store at controlled room temperature, 77° F (25° C). Excursion between 59-86° F (15° C to 30° C) are permitted.*

**Participants should be counseled on proper storage of the take home dose.*

Study Product Supply – Study Gel



MTN-026 Study Gel Label

PoR will indicate

MTN-026 PTID: _____ Date: _____

Contents: 1 applicator of 2.5 g of 0.05% dapivirine gel or placebo gel. Use only as directed. For rectal administration only. Caution: New Drug – Limited by United States law to investigational use. For Clinical Trial Use Only. Keep out of reach of children and pets. Store at 77°F (25°C) with allowable excursions between 59°-86°F (15°-30°C).

Manufactured by DPT Laboratories, Ltd.
San Antonio, TX USA



Study Gel Bag Label

- **The dispensing pharmacist puts study product applicator(s) into a clear re-sealable plastic package (one for each applicator) then puts MTN-026 Site-Specific Labels indicates PTID, dispensing date and study product instruction in accordance with the Thai FDA regulation on the packages.**

Study Gel Bag Label

MTN-026

ใช้สำหรับการวิจัยทางคลินิกเท่านั้น

หลอดสอดยาตาพิวิรีนชนิดเจล 0.05 % หรือ เจลอเนกประสงค์แบบไม่ออกฤทธิ์

วิธีใช้ : ใช้สำหรับสอดทางทวารหนักครั้งละ 1 หลอด

เลขที่ผู้เข้าร่วมการวิจัย :

แพทย์ผู้จ่ายยา :

วันที่จ่ายยา :

วันหมดอายุ :

คลินิกชุมชนสีลม ชั้น 12 โรงพยาบาลเวชศาสตร์เขตร้อน ถนนราชวิถี กรุงเทพฯ โทร.026646290-4

ใช้ทางทวารหนักเท่านั้น

เก็บรักษาที่อุณหภูมิ 15-30 องศาเซลเซียสและเก็บให้พ้นจากมือเด็ก

ผู้สนับสนุนทุนวิจัย : สถาบันภูมิแพ้และโรคติดเชื้อแห่งชาติ (NIAID) สหรัฐอเมริกา, สถาบันสุขภาพเด็กแห่งชาติและพัฒนามนุษย์ ยูนิส เคนเนดี ซีไรเวอร์,

สถาบันสุขภาพจิตแห่งชาติ (NIMH) สหรัฐอเมริกา และสถาบันสุขภาพแห่งชาติ (NIH) สหรัฐอเมริกา

Study Gel Bag Label

MTN-026

For Clinical Trial Use Only

Dapivirine Gel (0.05%) or Universal Placebo Gel

Instruction : Insert 1 applicator rectally

PTID :

Study physician :

Dispensing date :


Expiry date :

Silom Community Clinic @TropMed 12 Floor Hospital for Tropical Medicine Rajwithi Rd. BKK Tel.026646290-4

For Rectal Use Only

Storage at 15-30 degrees Celsius and keep out of reach of children

Sponsors : US National Institute of Allergy and Infectious Diseases, US Eunice Kennedy Shriver National Institute of Child Health and Human Development, US National Institute of Mental Health and US National Institutes of Health, United State of America



Chain Of Custody

- The study product must be tracked with documentation, from the pharmacy to the participant, all steps in between and the return documented in the clinic.
- Study product may be prepared by the pharmacist based on either original documents or faxed copies, but will not be released to the clinic staff until the original prescription is received.
- Upon receipt of a completed and signed prescription, the PoR will dispense study gel per the Study Visit Schedule.

Chain Of Custody

- Study Product is dispensed by pharmacy staff to:
 - Clinic staff who will:
 - Insert the gel into the participant's rectum or
 - Provide the gel to another clinic staff member for him/her to insert it into the participant's rectum
 - Provide the gel to the participant for self insertion (DOD or as-needed home use).
 - Runner who delivers the gel to clinic staff

- Depends on pharmacy site-specific Chain of Custody SOP
- Chain of Custody from pharmacy staff to clinic staff/runner is documented on the **Record of Receipt of Site-Specific Study Gel** at time of dispensation
 - This record is stored in the pharmacy



Chain of Custody

Clinic Staff Responsibilities

- Control access to the study product in their custody.
- Clinic staff must document delivery of the study product to designated participants in the participants' study charts (chart notes, visit checklists, or on other source documents designated for this purpose by clinic staff).



Chain of Custody

Clinic Staff Responsibilities

- If study product dispensed for a participant is not provided to the participant, clinic staff must document this in the participant's study chart and return remaining product (unused) to the pharmacy.



Study Gel Request Slip

- A supply of 200 Study Gel Request Slips is provided to the clinic staff.
- A supply of Request Slips needed at BIDI and SCC
- A Request Slip is a 2 part no carbon required (NCR) paper document. The top white is the original (pharmacy) and the bottom is yellow (clinic).

MTN-026 STUDY GEL REQUEST SLIP

Instructions: Once slip is completed, deliver white original (labeled "Pharmacy") to the pharmacy. File yellow copy (labeled "Clinic") in the participant's study notebook.

Participant ID

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Visit #: _____

RE-SUPPLY → **Pharmacy: Dispense**

Check One:

2 gel applicators at Visit 7. One applicator for direct observed dosing in clinic and one applicator for as-needed home dosing.

1 gel applicator for clinic direct observed dosing at Visits 8-13 or other.*

* If additional applicator is requested provide explanation in comments below.

Clinic Staff Comments:

Clinic Staff Name (*please print*): _____

Clinic Staff Signature: _____

Date:

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dd *MMM* *yy*



Study Gel Request Slip – RE-SUPPLY

□ Visit 7

- 2 pre-filled applicators – one for DOD at that clinic visit and one for as-needed at home use.

□ Visits 8-13

- 1 pre-filled applicator for DOD at specified clinic visit.
- 1 pre-filled applicator for ‘other’ reason
 - As-needed home dose was lost, stolen, damaged, etc
 - Study product complaint for as-needed home dose or clinic dose (product remained unused).
 - Use IoR discretion and document.
- NOTE – if the participant uses the one as-needed home dose of gel, another dose will not be provided if this action is requested by the participant.

Visit 13 – Occurs at BIDI

- The pharmacist labelled study product is placed in an ambient temperature controlled container with temperature monitoring device during transportation.
- The runner receives study product from SCC CRS pharmacy and deliver to the study staff at BIDI. The MTN-026 Record of Receipt of Site-Specific Study Gel should be completed upon receiving the study product. This record should be retained in the pharmacy.
- Once the study product arrives, the RN at BIDI should confirm to PoR or Associate Pharmacist that the study product has arrived in a good condition and delivered to designated participant immediately.



Study Gel Request Slip Completion

- This slip can be completed by any authorized clinic staff
- The MTN-026 study gel request slip can be used to request another gel applicator in case of home dose was lost, stolen, damaged or the study product complaint is noted (but not if already used).



Study Gel Request Slip Completion

- This slip can be completed by any authorized clinic staff
- **Insert cardboard flap behind the clinic copy**
- Double check the accuracy of all entries
- Errors may be corrected in blue or black ink by putting a line through and initialing
- Retain the yellow copy for the participant study notebook in the clinic
- Deliver white copy to pharmacy
- Once the white and yellow copies are separated errors must be corrected on each sheet separately



Study Gel Management Slip

- Other actions related to study product
 - Permanent discontinuation
 - Participant decline
 - Product use period completed

- A supply of 25 Study Gel Management Slips is provided to the clinic staff.

- A Management Slip is a 2 part no carbon required (NCR) paper document. The top white is the original (pharmacy) and the bottom is yellow (clinic).

MTN-026 STUDY GEL MANAGEMENT SLIP

Instructions: Mark the box that corresponds to the appropriate pharmacy action being requested. Once slip is completed, deliver white original (labeled "Pharmacy") to the pharmacy. File yellow copy (labeled "Clinic") in the participant's study notebook.

Participant ID

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PERMANENT DISCONTINUATION → Reason: _____

Pharmacy: Do not dispense any further MTN-026 study gel to this participant.

PARTICIPANT DECLINE → Pharmacy: Do not dispense – participant is refusing study gel.

PRODUCT USE PERIOD COMPLETED → Pharmacy: Do not dispense any further MTN-026 study gel to this participant.

Clinic Staff Name (*please print*): _____

Clinic Staff Signature: _____

Date:

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dd *MMM* *yy*



Study Gel Management Slip

□ **PERMANENT DISCONTINUATION**

- If study clinician determines that a participant should permanently stop gel use, then the box for “PERMANENT DISCONTINUATION” is marked
- Indicate reason for permanent discontinuation
- Future management and request slips will no longer be completed at the participant’s remaining study visits

Study Gel Management Slip

□ **PARTICIPANT DECLINE**

- If a participant decides that she does not want to use the gel, then the box for “PARTICIPANT DECLINE” is marked
- In the event that a participants declines gel use, then the PSRT should be notified.



Study Gel Management Slip

- **PRODUCT USE PERIOD COMPLETED**
 - Used by clinic staff to communicate to the pharmacy when the participant has completed or withdrawn from the study



Study Gel Management Slip

- **At minimum**, the Management Slip should be used for:
 - One scheduled Product Use Period Completed
 - After completing Visit 13/Last Study Product Administration Visit



Retrieval of Unused Study Gel

- Protocol Section 6.7 and SSP Section 6.9
- Study participants should be instructed to return the unused study gel applicator by Visit 14.
- The collected applicator is returned to the pharmacy as soon as possible
- Document all efforts to retrieve study gel
 - Study gel retrieval may occur by the participant returning the gel to study staff or attempts should be made by study staff to contact the participant to retrieve gel
- The need for retrieval is expected to be rare
 - Only one gel applicator for as-need at home use.

Retrieval of Unused Study Gel

- Study gel must be retrieved within 24 hours when it is permanently discontinued.
 - If not retrieved within 24 hours, then the **MTN-026 PSRT must be notified**.
- If not previously returned (at or by Visit 14: 24 hours PK Visit), it is expected that participants will returned unused gel at **Visit 16/Final Clinic Visit**.
- If not returned by Visit 16/Final Clinic Visit, site staff will make efforts to have the unused study gel returned **within 7 days**.
 - If not returned within 7 days, then the **MTN-026 PSRT must be notified**.
- All attempts to retrieve study product should be documented.




Unused Study Gel Return

- ONLY unused study gel should be returned to the pharmacy
 - Any unused dose including the take home dose
 - NO USED GEL APPLICATORS should be returned to the pharmacy

- Unused gel is returned to the pharmacy by:
 - Clinic staff member or runner
 - Depends on pharmacy site-specific Chain of Custody SOP

- Documented on **Record of Return of Site-Specific Study Gel**
 - This record is stored in the pharmacy



Chain Of Custody

- If returning unused gel because damaged or contaminated, record the details on the record
- The pharmacy will document and quarantine any returned unused gel



Study Gel Complaints

- Study product problem may be noted by pharmacy, clinic, and/or participant.
 - May concern dosage form (gel), applicator (barrel, piston, cap, plunger), packaging (overwrap), or other aspect.
- Clinic staff will make thorough record of clinic staff or participant complaint.
- Clinic staff member will email complaint to site PoR
 - PTID, Date of observed issue, date issue was reported, date gel was dispensed, did adverse event occur, nature of issue, picture (if possible and applicable), any other necessary details



Study Gel Complaints

- Pharmacy staff will email all study product complaints to MTN LOC Pharmacy.
- If the complaint is concerning an unused gel applicator, then the unused gel applicator should be held in quarantine in the pharmacy
- If the complaint is concerning a used gel applicator, then the clinic staff should process the used study product per standard operating procedures for used study products (if applicable)



Other Items Supplied to Clinic

- 400 male condoms (for Visit 6)
- 200 – 4mL sachets of lubricant for applicator insertion
- 20 – 4oz tubes of lubricant for procedures
- An order does not need to be submitted



Contact Information

- If you have any questions, please do not hesitate to contact us:

Cindy Jacobson
(412) 641-8913
cjacobson@upmc.edu

Lindsay Kramzer
(412) 641-3865
fergusonlm@upmc.edu

Questions?

Thank you!