Section 9. Study Product Considerations for Non-Pharmacy Staff

This section provides information and instructions for non-pharmacy staff related to the request, transport, and delivery of MTN-013/IPM 026 study product to study participants. Record keeping requirements for non-pharmacy staff also are provided. Associated instructions for pharmacy staff are provided in the MTN-013/IPM 026 Pharmacy Policy and Procedure Manual, which will be made available to each study site Pharmacist of Record (PoR) by the MTN Protocol Pharmacist. Please also refer to related information in Sections 4 and 6 of this manual.

9.1 Vaginal Ring (VR) Use Instructions

At the Enrollment visit, participants will receive instructions on study VR insertion and use. The participant will self-insert (or by clinician, if necessary), the study VR. The study VR will remain in place for approximately 28 days.

Detailed instructions for VR insertion are listed in Figure 9-1 below. A listing of frequently asked VR insertion questions, and answers to these questions, is provided in Section Appendix 9-1.

Figure 9-1
VR Insertion Instructions for MTN-013/IPM 026

HOW DO I USE THE VAGINAL RING?

TO INSERT THE RING INTO YOUR VAGINA:

1. Wash and dry your hands.
2. Remove the ring from its package.
3. Choose the position that is most comfortable for you. For example, lying down or standing with one leg up. (See Diagrams 1a and 1b, respectively).
4. Use your thumb and index finger (pointer finger) to press the sides of the ring together. You may find it easier to insert the ring if you twist it into a figure-of-eight shape. (See Diagram 2)

5. Use your other hand and hold open the folds of skin around your vagina. (See Diagram 3)

6. Place the tip of the ring in the vaginal opening and then use your index finger to push the folded ring gently into your vagina. Push it up towards your lower back as far as you can. (See Diagram 4)
If the ring feels uncomfortable, you probably did not push it into your vagina far enough. Use your index finger to push the ring as far as you can into your vagina (See Diagram 5). There is no danger of the ring being pushed too far up in the vagina or getting lost.

![Diagram 5](image)

The ring should now be in your upper vagina (See Diagram 6).

![Diagram 6](image)

7. Wash your hands when you are done.

**TO REMOVE THE VAGINAL RING:**

1. Wash and dry your hands.
2. Choose the position that is most comfortable for you (See Diagrams 1a and 1b).
3. Put a finger into your vagina and hook it through the ring. (See Diagram 7)

![Diagram 7](image)

4. Gently pull downwards and forwards to remove the ring.
5. Once removed, the ring should be rinsed with clean warm water and patted dry with a paper towel.
6. Place the used ring in the re-sealable plastic bag provided by the clinic staff.
7. Wash your hands.
IMPORTANT INFORMATION

- If possible, you should try not to remove the ring for the entire 28 day period of the Vaginal Ring regimen. If the ring accidentally comes out of your vagina before your next clinic visit, e.g., during menses, rinse it with warm water and put it back in your vagina immediately.
- If you have any problems putting the ring back in your vagina, call or come to the clinic.

9.2 Dispensing Vaginal Rings

Refer to Section 4 and 6 of this manual for further procedures for participant randomization, initial ordering and dispensation of vaginal rings for enrolled participants.

Upon receipt of a completed and signed MTN-013/IPM 026 Prescription, or a completed and signed MTN-013/IPM 026 Vaginal Ring Request Slip, pharmacy staff will dispense one vaginal ring per instructions in the MTN-013/IPM 026 Pharmacy Policy and Procedure Manual. One vaginal ring will be dispensed in a pouch. The clinic staff must also provide the participant with a re-sealable bag for storage if the used ring needs to be returned to the clinic.

- Vaginal rings will be dispensed from the pharmacy to authorized clinic staff who will then deliver the study product to the participant.

Each study site pharmacy must designate its dispensing method in MTN-013/IPM 026 standard operating procedures (SOPs) for dispensing the vaginal ring and, if necessary, product re-supply during follow-up. The SOP (Chain of Custody) should be developed with input from both pharmacy and clinic staff.

9.2.1 Dispensing of Study Product from Pharmacy to Clinic Staff

Pharmacy will dispense the vaginal ring to clinic staff who will then deliver the ring to participants. The prescriptions and Vaginal Ring Request Slips can be delivered to the pharmacy by clinic staff or a runner. Upon receipt of a completed and signed prescription or Vaginal Ring Request Slip, the PoR will prepare one vaginal ring. The ring may be prepared based on either original documents or faxed (scanned) copies, but the ring will not be released to clinic staff until the original prescription or request slip is received by the site pharmacy.

The MTN-013/IPM 026 Record of Receipt of Participant-Specific Vaginal Rings (see Section Appendix 9-3) must be used to document dispensing of rings to clinic staff. Pharmacy staff will complete the top section (site name, site number, clinic name) and the first four columns on the Record of Receipt. When receiving the ring from the pharmacy, clinic staff will verify the PTIDs, confirm the ring received for each PTID, and complete the remaining three columns on the Record of Receipt for each PTID. Comments may be recorded in the designated column and, if additional space is needed, on the back of the record. All Records of Receipt will be retained in the pharmacy. Clinic staff are responsible for controlling access to the rings dispensed into their custody and ensuring that the rings are delivered to the participants for whom they were dispensed. Clinic staff also must document delivery of the rings to designated participants in the participants’ study charts. Delivery may be documented in chart notes, on visit checklists, or on other source documents designated for this purpose by clinic staff. In the event that a ring dispensed for a participant is not delivered to the
participant, clinic staff will document this in the participant’s study chart and return the ring to the pharmacy as soon as the participant’s visit is completed.

9.3  Return of Study VR

Clinic staff will provide participants with re-sealable plastic bags or other suitable containers in which to store their VR in case the VR is expelled spontaneously or is taken out by the participant and they are unable to re-insert it. Participants should be advised to rinse the ring with warm water and dry prior to placing it in the re-sealable plastic bag. Clinic staff should not return used rings to the pharmacy.

9.3.1  Used VR Supplies

Once the initial ring is inserted it should remain in place for 28 days. If the ring has been expelled in such a way that it is no longer useable (e.g., fell in the toilet, etc.), the participant should be instructed to notify the clinic immediately and a new ring will be dispensed. The used ring should be returned to the clinic. The participant should be instructed by the clinic to place the used ring in the re-sealable plastic bag that they received when the ring was inserted. If this bag is no longer available, participants should be encouraged to obtain a suitable substitute and return the ring to the clinic. If the ring is intentionally removed by the participant for more than a few hours, the ring should be rinsed with clean water, dried with a clean (paper) towel and reinserted if possible. If the ring will not be reinserted it should be rinsed with clean water, dried with a clean (paper) towel and stored in the re-sealable plastic bag provided by the clinic. The ring should be rinsed with clean water prior to reinsertion by either the participant or the study clinician.

In the event that a participant is temporarily or permanently discontinued from study product use, every effort should be made to collect the used VR within five working days. The participant should be asked to report to the study clinic in order for the study clinician to remove the ring.

NO USED RINGS SHOULD BE RETURNED TO THE PHARMACY. Return of the used ring to the clinic should be documented as determined by the site clinic.

9.4  Vaginal Ring Request Slip

The MTN-013/IPM 026 Vaginal Ring Request Slip is a two-part no carbon required (NCR) document that will be provided to the clinic staff by SCHARP (see Section Appendix 9-2 for illustration). This slip will be used to request replacement VR or to inform the pharmacy if product needs to be held (permanently or temporarily) or resumed.

Complete the Vaginal Ring Request Slip as follows:

- Record the clinic name.
- Record the PTID assigned to the participant in the boxes provided.
- Mark the box for RESUPPLY, HOLD, RESUME or PERMANENT DISCONTINUATION, to indicate the action to be taken by the study pharmacy.
When resuming product, a new prescription for the VR will need to be completed and sent to the pharmacy along with the Vaginal Ring Request Slip. Study product will not be dispensed from the pharmacy unless/until another slip marked RESUME is subsequently completed and received in the pharmacy, along with the new prescription.

- The clinic staff name, signature, and signature date must be completed by a clinic staff member authorized to order product supplies for participants during follow-up. DAIDS does not require that an authorized prescriber sign and date the Vaginal Ring Request Slips; however site-specific pharmacy regulations may be more stringent than DAIDS requirements. All sites must comply with local requirements.

- Double-check the accuracy of all entries and then separate the two parts of the completed Vaginal Ring Request Slip. Retain the yellow copy in the participants’ study charts. Deliver the white original to the study pharmacy in the same manner that original prescriptions are delivered to the pharmacy. Both the original and clinic copy of the slip may be hole-punched.

9.5 **Product-Related Scenarios**

For illustrative purposes, a number of product-related scenarios are provided in Section Appendix 9-1.
SCENARIO 1

A ring is dispensed to a participant and after one week of use, she finds that the ring is uncomfortable, and calls the clinic to ask for advice.

What do you tell her?

- If the participant calls to complain that she feels discomfort from the ring in her vagina, first advise the participant to wash her hands and try to gently push the ring higher up into the vagina.
- Check placement of the ring during the next scheduled pelvic examination or schedule an interim visit to check placement.

OR

- If the ring has been expelled from the vagina, advise her to wash her hands and, using bottled water or other clean water, rinse and gently reinsert the ring into the vagina.
- Explain to her it is not unusual for this to occur and give some examples of cases (Refer to FDA article examples - straining on bowel movement).
- If repositioning the ring does not improve her discomfort, advise her to follow up in clinic for evaluation.

SCENARIO 2

A participant calls the clinic between visits to say that her partner tells her that he can feel the ring during sexual intercourse. What steps should you take?

Possible Answer:

- Remind participant to refrain from such practices that they are supposed to be abstinent during the trial.
- Ensure that the participant has inserted the ring in the correct position. If the ring has moved down the vaginal canal, advise the participant to wash her hands and try to gently push the ring higher up into the vagina.
- Inquire whether she has removed the ring and document periods where the VR was not used.

SCENARIO 3

After the participant speaks to the clinic, she decides that she will try to reposition the VR and resume use. After one week of resuming use, her partner complains that the ring is bothersome during intercourse, and she calls the clinic to say that she is going to remove the ring and leave it out. What should you do?

Possible Answer:

- Remind participant to refrain from such practices that they are supposed to be abstinent during the trial.
- If the participant insists on voluntarily stopping use of the VR, follow modified procedures for product use completion as specified in the protocol.
- Encourage her not to remove the ring herself, but to come in to have the VR removed by a clinician. At the visit, prepare the ring for Network Laboratory analyses.
• If she insists on removing the VR prior to coming into the clinic, advise her to do the following:
  o Store the VR in a bag
  o Return the VR to the clinic as soon as possible
  o [Participant should not discard the VR]
• Document via a chart note the participant’s decision to stop using study product. Attempt to keep participant in study follow-up as scheduled until the Day 52//Termination visit. Follow modified procedures for completion of product use as specified in the protocol.
• Document conversation in the participant chart notes.
• Document return of the VR for accountability and dispose of VR if VR was returned by participant.

SCENARIO 4

On her Day 21 visit, a study participant reports that she removed the VR for a duration of one week due to use of tampons for her menses. She did not think that it was possible to use both the tampon and the VR at the same time. After cessation of her menses, she resumed VR use and followed instruction for reinsertion. What do you do?

Possible Answer:
  • Advise the participant that tampon use during the trial is prohibited and the VR should not be removed at any time, unless she is experiencing discomfort or pain.
  • Document VR removal (duration, date, etc.) on the Ring Adherence case report form.

SCENARIO 5

A participant contacts the clinic between visits to report vaginal itching. Upon further probing, you discover that she removed the ring, washed it with detergent, and re-inserted it for hygienic purposes. What do you do?

Possible Answer:
  • Ask the participant if she is experiencing any other symptoms that might indicate infection or pathology. Schedule an in-clinic pelvic exam for follow-up if indicated.
  • Remind the participant not to remove the VR, and to only use clean water, and to rinse it in the event of ring expulsion.

SCENARIO 6

A participant contacts the clinic and states the ring has fallen out and she refuses to rinse and reinsert it. She wants to come to the clinic to receive a new ring.

Possible Answer:
  • Advise the participant to return to the clinic as soon as possible to receive a new VR and advise her to bring back the used VR.
  • Complete an MTN-013/IPM 026 Vaginal Ring Request Slip and obtain a new VR from the pharmacy.
  • Document return of the VR for accountability and dispose of VR.
### MTN-013/IPM 026 VAGINAL RING REQUEST SLIP

<table>
<thead>
<tr>
<th>Clinic Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Participant ID:</th>
<th>Randomization Envelope Number:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Clinic Staff Instructions:** Mark whether this is a study vaginal ring re-supply, hold, resume, or permanent discontinuation request. Deliver the original white copy (labeled “Pharmacy”) to the pharmacy. File the yellow copy (labeled “Clinic”) in the participant’s study notebook.

- **RE-SUPPLY**
  - Reason: ______________
  - Pharmacy: Dispense one vaginal ring.

- **HOLD**
  - Reason: ______________
  - Pharmacy: Do not dispense further vaginal rings to the participant until another MTN-013/IPM 026 Vaginal Ring Request Slip marked “RESUME” is received.

- **RESUME**
  - Pharmacy: Dispense one vaginal ring.

- **PERMANENT DISCONTINUATION**
  - Reason: ______________
  - Pharmacy: Do not dispense any further vaginal rings to the participant.

**Clinic Staff Name (please print):** ________________

**Clinic Staff Signature:** ________________

**Date:**

<table>
<thead>
<tr>
<th>dd</th>
<th>MMM</th>
<th>yy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### MTN-013/IPM 026 Record of Receipt of Vaginal Ring

**Instructions:** Complete one row each time ring is dispensed to non-pharmacy staff for delivery to a study participant. All entries must be made in dark ink. Corrections may be made by drawing a single line through incorrect entries, entering correct information, and initialing and dating the correction.

<table>
<thead>
<tr>
<th>PHARMACY STAFF</th>
<th>CLINIC STAFF</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date Dispensed by Pharmacy dd-MMM-yy</td>
<td>PTID</td>
</tr>
<tr>
<td>Pharmacist Initials</td>
<td>Date and Time Received in Clinic dd-MMM-yy, 00:00 AM/PM</td>
</tr>
<tr>
<td>Pharmacy</td>
<td>Clinic</td>
</tr>
<tr>
<td>Pharmacist</td>
<td></td>
</tr>
<tr>
<td>Initials</td>
<td></td>
</tr>
<tr>
<td>Comments</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Site Name:</th>
<th>Clinic Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Site Number:</td>
<td></td>
</tr>
</tbody>
</table>

---

MTN-013/IPM 026 SSP Manual Final Version 1.0 02 September 2011
Section 9  Page 9-10