

Clinical Drug Trials

INFORMATION to be provided to the Ethics Committee of Medical University Innsbruck (MUI)

- boxes show **information to be provided** to the EC
 information **not usually required** for ethics committee application

<input type="checkbox"/>	1	General
<input type="checkbox"/>	1.1	Receipt of confirmation of EudraCT number
<input type="checkbox"/>	1.2	Covering letter
<input type="checkbox"/>	1.3	Application form - EudraCT
<input checked="" type="checkbox"/>	1.4	List of Competent Authorities within the Community to which the application has been submitted and details of decisions
<input type="checkbox"/>	1.5	Copy of ethics committee opinion in the MS concerned when available
<input type="checkbox"/>	1.6	Copy/summary of any scientific advice
<input type="checkbox"/>	1.7	If the applicant is not the sponsor, a letter of authorisation enabling the applicant to act on behalf of the sponsor
	2	Subject related
<input type="checkbox"/>	2.1	Informed consent form
<input type="checkbox"/>	2.2	Subject information leaflet
<input type="checkbox"/>	2.3	Arrangements for recruitment of subjects (e.g. during hospital stay, via G.P., advertisement etc)
	3	Protocol related
<input type="checkbox"/>	3.1	Clinical trial protocol with all current amendments
<input type="checkbox"/>	3.1A	Amendments (if separate)
<input type="checkbox"/>	3.1B	CRF (Case Report Form)
<input type="checkbox"/>	3.2	Summary of the protocol in the national language (= Section 7 of the EC application form)
<input type="checkbox"/>	3.3	Peer review of trial when available
<input type="checkbox"/>	3.4	Ethical assessment made by the principal/coordinating investigator, if not given in the application form or protocol
	4	IMP related
<input type="checkbox"/>	4.1	Investigator's brochure
<input checked="" type="checkbox"/>	4.2	Investigational Medicinal Product Dossier (IMPD)
<input checked="" type="checkbox"/>	4.3	Simplified IMPD for known products (see table 1)
<input checked="" type="checkbox"/>	4.4	Summary of Product Characteristics (SmPC) (for products with marketing authorisation in the Community)
<input checked="" type="checkbox"/>	4.5	Outline of all active trials with the same IMP
<input checked="" type="checkbox"/>	4.6	If IMP manufactured in E.U. and if no marketing authorisation in EU:
<input checked="" type="checkbox"/>	4.6.1	Copy of the manufacturing authorisation referred to in Art. 13.1. of the Directive stating the scope of this authorisation
<input checked="" type="checkbox"/>	4.7	If IMP not manufactured in E.U. and if no marketing authorisation in EU:
<input checked="" type="checkbox"/>	4.7.1	Certification of the QP that the manufacturing site works in compliance with GMP at least equivalent to EU GMP, or that each production batch has undergone all
<input checked="" type="checkbox"/>	4.7.2	Certification of GMP status of active biological substance
<input checked="" type="checkbox"/>	4.7.3	Copy of the importers manufacturing authorisation referred to in Art. 13.1. of the Directive stating the scope of this authorisation
<input checked="" type="checkbox"/>	4.8	Certificate of analysis for test product in exceptional cases:
<input checked="" type="checkbox"/>	4.8.1	Where impurities are not justified by the specification or when unexpected impurities (not covered by specification) are detected
<input type="checkbox"/>	4.9	Viral safety studies when applicable.
<input checked="" type="checkbox"/>	4.10	Applicable authorisations to cover trials or products with special characteristics (if available) e.g. GMOs, radiopharmaceuticals
<input checked="" type="checkbox"/>	4.11	TSE Certificate when applicable
<input checked="" type="checkbox"/>	4.12	Examples of the label in the national language
	5	Facilities & staff related
<input type="checkbox"/>	5.1	Facilities for the trial
<input type="checkbox"/>	5.2	CV of the coordinating investigator in the MS concerned (for multicenter trials)
<input type="checkbox"/>	5.3	CV of each investigator responsible for the conduct of a trial in a site in the MS concerned (principal investigator)
<input type="checkbox"/>	5.4	Information about supporting staff
	6	Finance related
<input type="checkbox"/>	6.1	Provision for indemnity or compensation in the event of injury or death attributable to the clinical trial
<input type="checkbox"/>	6.2	Any insurance or indemnity to cover the liability of the sponsor or investigator
<input type="checkbox"/>	6.3	Compensation to investigators
<input type="checkbox"/>	6.4	Compensation to subjects
<input type="checkbox"/>	6.5	Agreement between the sponsor and the trial site (" Sponsoringvertrag " – inquiries: Fr. Innerhuber/LKI – F:++43-512-504-22040)
<input type="checkbox"/>	6.5a	Compensation to trial sites
<input checked="" type="checkbox"/>	6.6	Agreement between the investigators and the trial sites
<input type="checkbox"/>	6.7	Certificate of agreement between sponsor and investigator when not in the protocol
	7	Any other material provided
<input type="checkbox"/>	7.1	Miscellaneous (including additional correspondence)