

ALTERNATIVE SITE MODEL

WHAT IS A HEALTH CARE PROVIDER SITE?

AN ADDITIONAL RESEARCH LOCATION WHERE A PATIENT IS ALREADY **RECEIVING CARE**

WHAT PROBLEMS DOES THIS MODEL AIM TO SOLVE IN TRIALS?



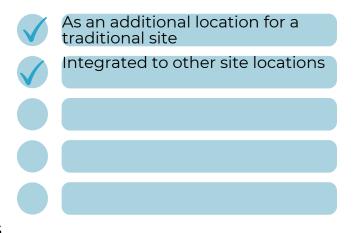
Patient

...recruitment ...retention ...accessibility ...decrease burden

Access

...to rare disease patients ...to diverse patients ...to underserved/represented ...to geographic reach for sites

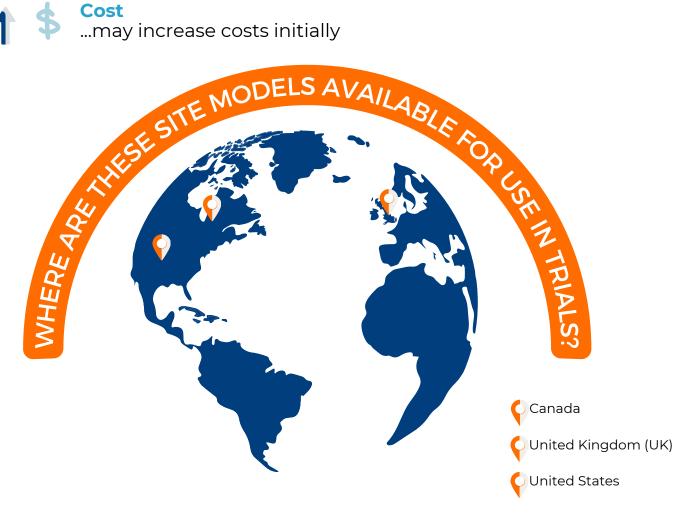






Cost

...may increase costs initially



SPE

ONSIDERATIONS/LIMITATIONS CIAL C



restricted way

INVESTIGATIONAL PRODUCT PREPARATION

Confirm HCP location has ability to properly store, refrigerate, and destroy IP in a safe and



INVESTIGATIONAL PRODUCT ADMINISTRATION

IP is limited to Standard of Care (SOC) medications:

- Ensure proper drug accountability procedures
 PCP location needs to fit needs of IP administration



PRIVACY

Assume licensed medical practice has appropriate measures to manage patient records and privacy



PI OVERSIGHT

- Recommend PI oversight is documented in a formal oversight plan
- Ensure a clear RACI is agreed upon between sponsor and site team, including consent, screening and eligibility assessments, enrollment, and trial assessment processes
- Ensure trial-required documentation standards are met



BIOSPECIMEN COLLECTION



TRIAL SPECIFIC ASSESSMENTS

Trial specific assessments will be limited to physician's standard of care practice



Lab processing may require protocol knowledge and training:

- Limit to standard of care (SOC) biospecimen collection
- OR executed by service provider (eg phlebotomist) with protocol specific training
- Alignment with local lab ranges may be required



MEDICAL WASTE MANAGEMENT

Assume primary care provider with an established practice has proper medical waste management services



ACCESS

- Minimal considerations
- Assume water, electricity, and technology needs will be met in an established practice