Title: Adverse Events (AE) and Serious Adverse event Reports: Review and Management

SOP Code: SOP12/v1

Effective Date: 20/02/2025

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1. **Purpose:** The purpose of this Standard Operating Procedure (SOP) is to describe the procedures to be followed for the review and assessment of initial and follow-up reports of onsite and offsite adverse events (AE) including serious adverse events (SAE) and adverse drug reports (ADR) reported to the YEC-3 for any study approved by the Yenepoya Ethics Committee (YEC-3). The purpose of this SOP is also to describe the functioning of the SAE subcommittee.

2. **Scope:** This SOP applies to all YEC-3 activities related to the review of onsite/offsite AE/SAE/ADR reports submitted to the YEC-3 and to the functioning of the SAE subcommittee.

3. **Definitions:**

   3.1. **Adverse Event:** "An AE is any untoward medical occurrence in a patient or clinical investigation subject administered a pharmaceutical product and that does not necessarily have a causal relationship with this treatment. An AE can therefore be any unfavourable and unintended sign (including an abnormal laboratory finding), symptom, or disease temporally associated with the use of a medicinal (investigational) product, whether or not related to the medicinal (investigational) product."[1]

   3.2. **Adverse Drug Report:** "In the pre-approval clinical experience with a new medicinal product or its new usages, particularly as the therapeutic dose(s) may not be established: all noxious and unintended responses to a medicinal product related to any dose should be considered adverse drug reactions. The phrase "response to a medicinal product" means that a causal relationship between a medicinal product and an adverse event is at least a reasonable possibility, i.e., the relationship cannot be ruled out.

   Regarding marketed medicinal products: a response to a drug which is noxious and unintended and which occurs at doses normally used in man for prophylaxis, diagnosis, or therapy of diseases or for modification of physiological function."[2]

   3.3. **Serious Adverse Event or Serious Adverse Drug Reaction:** "An AE or ADR that is associated with death, inpatient hospitalization (in case the study was being conducted on out-patients), prolongation of hospitalization (in case the study was being conducted on in-patients), persistent or significant disability or incapacity, a congenital anomaly or birth defect, or is otherwise life threatening."[3]

   3.4. **SAE Subcommittee:** "Institutions could have subcommittees such as the SAE subcommittee or expedited review committee. These should be part of the main committee and comprise Chairperson/ Member-Secretary and one to two appropriate designated members of the main EC as defined in the SOPs. These subcommittees can report to the concerned main EC."

4. **Responsibilities:**

   4.1. **YEC-3 Chairperson will:**

[1] ICH GCP-Guidelines https://ich.org/page/efficacy-guidelines Accessed on 17 February 2025 at 1000 hours
[2] ICH GCP-Guidelines https://ich.org/page/efficacy-guidelines Accessed on 17 February 2025 at 1005 hours
[3] ICH GCP-Guidelines https://ich.org/page/efficacy-guidelines Accessed on 17 February 2025 at 1010 hours

4.1.1. Nominate members for the SAE subcommittee

4.1.2. Oversee the functioning of the SAE subcommittee

4.2. **YEC-3 Member-Secretary will:**

4.2.1. Communicate the nomination of the SAE subcommittee members to the Registrar, Yenepoya deemed to be University

4.2.2. Communicate the notification of the SAE subcommittee to the Chairperson and the concerned members

4.2.3. Provide logistic and administrative support to the SAE subcommittee to facilitate its smooth functioning

4.2.4. Table the minutes and reports of the SAE subcommittee in the YEC-3 meetings

4.2.5. Prepare the communication letters related to the adverse event reports.

4.2.6. Communicate with the YEC-3 members, regulatory authorities and investigators in a timely manner.

4.3. **Registrar, Yenepoya deemed to be University will:**

4.3.1. Notify the constitution of the SAE subcommittee

4.4. **YEC-3 SAE subcommittee Chairperson will:**

4.4.1. Ensure that all AEs/ADRs/SAEs are reviewed and necessary action taken in a timely manner.

4.4.2. Ensure that the quorum for the meeting is met.

4.4.3. Be responsible for conducting meetings, and lead all discussions and deliberations pertinent to the review of adverse event reports including:

4.4.3.1. Review of AE/SAE/ADR reports submitted to the SAE subcommittee

4.4.3.2. Determining the relatedness of SAE to the research

4.4.3.3. Determining quantum and type of assistance/compensation required for research participants as per the licencing authorities

4.4.3.4. Reviewing measures taken for SAEs

4.4.4. Nominate another SAE subcommittee member as acting Chairperson, if he/she anticipates being absent on the meeting day. The acting Chairperson will have all the powers of the Chairperson of the SAE subcommittee for that meeting.

4.4.5. Approve the minutes of the SAE subcommittee meeting

4.5. **YEC-3 SAE subcommittee Executive-Secretary will:**

4.5.1. Assign subcommittee members for review of AE/SAE reports

4.5.2. Prepare and circulate the agenda for the SAE subcommittee meeting

4.5.3. Schedule, organize and conduct the SAE subcommittee meetings.

4.5.4. Prepare and circulate the minutes of the meetings after due approval

4.5.5. Communicate the decisions of the SAE subcommittee in the YEC-3 meeting.

4.5.6. Ensure adherence of the SAE subcommittee functioning to the SOPs.

4.6. **YEC-3 SAE subcommittee member(s) will:**

4.6.1. Attend the meetings regularly and inform absence in writing

4.6.2. Review and assess the AEs/SAEs assigned to him/her

4.7. **YEC-3 layperson will**

4.7.1. In addition to what is described in 4.6, check the compensation provided to the participants in case of SAEs

4.8. **YEC-3 Secretariat will:**

4.8.1. Receive communications from the PI regarding onsite/offsite AEs/SAEs/Dear Investigator Letter (DIL) and inform the SAE subcommittee Chairperson

4.8.2. Provide support to the Chairperson/Executive-Secretary of the SAE subcommittee in the conduct of its meetings, preparation of agenda and minutes

4.8.3. Communicate with the concerned authorities and maintain files of subcommittee.

5. **Detailed instructions:**

5.1. **Formation of SAE subcommittee:**

5.1.1. The members of the SAE subcommittee will be suggested by the YEC-3 members and approved by the Chairperson of YEC-3

5.1.2. The Registrar, Yenepoya (deemed to be University) will notify the subcommittee.

5.2. **Composition of SAE subcommittee**:

5.2.1. The SAE subcommittee will be composed of at least 4 and a maximum of 10 members from within the YEC-3.

5.2.2. The Subcommittee will be multidisciplinary and multi-sectoral in composition.

5.2.3. The committee will consist of members who collectively have the qualifications and experience to review and evaluate the scientific, medical and ethical aspects of adverse event reports involving human participants.

5.3. **Members of the SAE subcommittee:** the SAE subcommittee will consist of

5.3.1. Chairperson

5.3.2. Executive-Secretary

5.3.3. At least one member with postgraduate qualification (preferably in the discipline of Medicine or Pharmacology or any other relevant clinical specialty).

5.3.4. The Member-Secretary shall be an ex-officio member of the SAE subcommittee.

5.3.5. The SAE subcommittee may invite legal experts of YEC-3 to provide opinion on the legal implication of adverse events.

5.3.6. The subcommittee may invite IC to provide opinion on the scientific or bureaucratic aspects of the event.

5.4. **Quorum for the SAE subcommittee meetings:** A quorum will consist of at least 3 members as follows:

5.4.1. Chairperson/Acting Chairperson of the SAE subcommittee

5.4.2. Executive-Secretary and

5.4.3. One member (preferably pharmacologist)

5.5. **Tenure and terms of reference of the SAE subcommittee members:**

5.5.1. The tenure of the SAE subcommittee will be for a continuous period from the date of appointment until the end of the tenure of the existing YEC-3 committee/SAE subcommittee members.

5.5.2. The SAE subcommittee may be reconstituted each time the YEC-3 is reconstituted, or if the existing subcommittee members have changed.

5.5.3. A YEC-3 member will be eligible to be appointed for the new tenure of the SAE subcommittee consecutively for two terms.

5.5.4. A member is expected to attend the regular and extraordinary meetings and contribute responsibly to the review and decision making on SAE related reports.

5.5.5. When an SAE subcommittee member is unable to attend the meeting, he/she will inform the Executive Secretary in writing or by email.

5.5.6. An SAE subcommittee member may resign from membership by submitting a letter of resignation to the Executive Secretary of the SAE subcommittee. The member may or may not assign reasons for resignation.

5.5.7. A member may be liable to be disqualified from the subcommittee if the member fails to attend 3 consecutive SAE meetings without prior intimation in writing.

5.5.8. Chairperson of the subcommittee will inform Chairperson YEC-3, in writing, if a member has not attended 3 consecutive meetings of the SAE subcommittee.

5.5.9. The Chairperson, YEC-3 will take up the issue of disqualification for discussion at the YEC-3 meeting and allow the concerned SAE subcommittee member to state his reasons for unauthorized absence.

5.6. **Schedule of the SAE subcommittee meetings**

5.6.1. Ordinary meetings of the subcommittee will be conducted at least once a month.

5.6.2. In the event of a report of SAE, the subcommittee will convene an extraordinary meeting within two calendar days of receiving the report at the YEC-3 office and may conduct such meetings as many times as necessary.

5.7. **Timelines for submission of online SAE reports:**

5.7.1. Initial SAE report will be submitted by the Principal Investigator (PI) within 24 hours of occurrence as per the format specified in Ann01/SOP12/v1.

5.7.2. Due analysis report (follow up report) will be submitted by the PI and (or) sponsor within 14 calendar days in the format specified in Ann02/SOP12/v1.

5.7.3. The opinion of YEC-3 with regard to causality and compensation will be communicated to the Drugs Controller General of India, Central Drugs Standard Control Organization, Ministry of Health and Family Welfare, Government of India within 30 calendar days of the occurrence of the SAE.

5.7.4. The follow up reports of all onsite SAEs till the events are resolved will be submitted by the PI as and when required.

5.8. **Onsite SAE reporting:**

5.8.1. **Receipt of onsite SAE related reports by the YEC-3:**

5.8.1.1. The YEC-3 Secretariat will receive, sign and date the report

5.8.1.2. The Secretariat will inform the reports to the YEC-3 SAE subcommittee Executive-Secretary on the same day of receiving the report

5.8.1.3. The YEC-3 SAE subcommittee Executive-Secretary will verify the completeness of the report and adherence to timelines

5.8.1.4. If the report is received beyond the specified time, it will be considered as a protocol violation and action will be taken as described in SOP11/v1.

Review of onsite SAE Reports:

5.8.1.5. The Executive-Secretary will review the SAE-related reports. Alternatively, the Executive-Secretary will assign a reviewer from within the subcommittee to review the report and present in the meeting.

5.8.1.6. Executive-Secretary, in collaboration with Member-Secretary, YEC-3, will review the seriousness and urgency of the SAE and decide to call an extraordinary meeting of the SAE subcommittee within 3 calendar days or consider the matter for the subsequent SAE subcommittee meeting.

5.8.1.7. Reviewers will take into consideration the possibility of research- related causality, quantum of harm caused, quantum of compensation, immediate and ancillary care provided to the participant, and the need for change in protocol/informed consent documents to safeguard the participants.

5.8.1.8. Even before the SAE subcommittee meets to discuss and deliberate on the SAE report, the Executive-Secretary can write to the PI seeking further clarification. The report and the clarification(s) can be tabled together for discussion in the SAE subcommittee meeting.

5.8.2. **SAE subcommittee meeting (for onsite SAE reporting):**

5.8.2.1. Chairperson will confirm the quorum

5.8.2.2. The Executive-Secretary/reviewing member will present the findings to the SAE subcommittee in the meeting

5.8.2.3. Members will discuss the findings of the SAE reports and clarifications (if any), with a special focus on relatedness to the clinical trial, medical management and financial compensation to the research participants.

5.8.2.4. The subcommittee will discuss compensation issues based on the current applicable formulae and guidelines from the regulatory authority,[4] including formula for calculating the amount of compensation in case of study-related death[5,6] and study-related injury other than death[7].

5.8.2.5. The subcommittee may refer the report to YEC-3 for review if necessary.

5.8.2.6. The subcommittee may recommend calling an emergency YEC-3 meeting to decide on the financial compensation issues, if deemed necessary, within 3 calendar days of the decision.

5.8.2.7. If necessary, the subcommittee may seek the opinion of an IC to establish relatedness and medical management as per SOP04/v1.

5.8.2.8. The Executive-Secretary will prepare the minutes within 3 calendar days of the meeting.

5.8.3. **YEC-3 emergency meeting (for onsite SAE reporting):**

5.8.3.1. If the Executive-Secretary concurs, an emergency YEC-3 meeting may be scheduled within 3 calendar days from the subcommittee meeting

5.8.3.2. The Executive-Secretary will present the findings of the SAE subcommittee, for YEC-3 members to deliberate and decide on the relatedness, medical management and financial compensation

5.8.4. **YEC-3 Scheduled Meeting (for onsite SAE reporting):**

5.8.4.1. The Executive-Secretary will present the findings in the YEC-3 meeting to inform the members on the relatedness, medical management and financial compensation

5.8.4.2. Minutes of the SAE subcommittee/emergency YEC-3 meeting will be read, discussed and approved in the YEC-3 meeting.

5.8.4.3. Minutes will be circulated to the YEC-3 members as per SOP08/v1.

5.8.5. **YEC-3/SAE Subcommittee decision-making (for onsite SAE reporting):**

[4] http://cdsco.nic.in/writereaddata/GSR%2053(E)%20dated%2030.01.2013.pdf
[5] http://www.iscr.org/pdf/Gazaate_notification.PDF dated 12th December 2014,
[6] http://www.cdsco.nic.in/writereaddata/formula2013SAE.pdf
[7] http://www.cdsco.nic.in/writereaddata/uploaded_for_website.htm

5.8.5.1. The following should be considered during the decision making

5.8.5.1.1. The outcome of the SAE

5.8.5.1.2. The possible relatedness to the intervention

5.8.5.1.3. The number of participants and bystanders affected

5.8.5.1.4. The immediate and ancillary medical care provided

5.8.5.1.5. Compensation

5.8.5.1.6. Need for change in the protocol/informed consent process/participant information sheet

5.8.5.1.7. Need for change in the research team/training

5.8.5.1.8. Need for withholding the investigational drug

5.8.5.1.9. Need for suspending/terminating the study

5.8.5.1.10. Need for site monitoring

5.8.5.1.11. Adherence to timelines of SAE reporting and protocol deviations/violations, if any

5.8.5.1.12. Need for more clarification

5.8.6. **Type of Actions Taken by YEC-3/SAE subcommittee on Review of SAE Report:** Following detailed review of the SAE reports and related documents, the SAE subcommittee can suggest one of the following actions:

5.8.6.1. No further action required: Note the information about the SAE in records for future reference

5.8.6.2. Request further follow-up information and/or additional details

5.8.6.3. Recommend further action

5.8.6.3.1. Ask for periodic follow-up till SAE is resolved

5.8.6.3.2. Provide recommendations regarding/raise queries related to compensation for study-related injury/death.

5.8.7. **Type of possible actions taken by YEC-3 following full review:**

5.8.7.1. YEC-3 may take one or more of the following actions on review of the onsite SAE report:

5.8.7.1.1. Suggest changes, amendments in protocol, participant information sheet/informed consent document/ investigator brochure/any other study-related documents.

5.8.7.1.2. Suspend the study until additional information is available.

5.8.7.1.3. Suspend the study till review is completed (safety monitoring of ongoing patients to be continued).

5.8.7.1.4. Suspend study until YEC-3 requested amendments are carried out.

5.8.7.1.5. Suspend enrollment of new participants.

5.8.7.1.6. Suspend certain activities under the protocol.

5.8.7.1.7. Direct the PI to inform participants enrolled in the study about AEs and if required obtain re-consent for continuation in the trial.

5.8.7.1.8. Direct the PI to inform participants enrolled in the study about the AE and request them to undertake additional visits, procedures, investigations, etc as prescribed in the amendment.

5.8.7.1.9. Inform the Yenepoya deemed to be University authorities if the PI is not cooperating with YEC-3.

5.8.7.1.10. Any other appropriate action

5.8.7.2. The decision shall be recorded in the minutes of the YEC-3 meeting.

5.8.7.3. YEC-3 decisions requiring immediate action, from the PI, will be conveyed to the PI through email within 24 hours. Such a communication will be documented by the YEC-3 Member-Secretary in the study file.

5.8.7.4. A letter to the PI informing about the YEC-3 recommendations will be sent within 5 calendar days of the YEC-3 meeting having taken place.

5.8.8. **YEC-3 communications and archiving (for onsite SAE reporting):**

5.8.8.1. The YEC-3 Member-Secretary will draft a letter to the concerned PI and inform him/ her about the YEC-3 decision. This letter will be signed and dated by the Member-Secretary/Chairperson and will be sent to PI within 7 calendar days from the date of SAE subcommittee meeting.

5.8.8.2. If there is a need for more clarification, Member-Secretary will request the PI to reply to the query letter on SAE report within 7 calendar days.

5.8.8.3. The opinion regarding relatedness, medical management and compensation for research-related injury will be communicated to the central licensing authority (DCGI) within 30 calendar days of the occurrence of the SAE in case of regulatory CT.

5.8.8.4. The YEC-3 will confirm the nature of action taken by the PI/Sponsor regarding the management of the AEs as per the existing guidelines, including ancillary care, emergency care and compensation paid.

5.8.8.5. YEC-3 Secretariat will file a copy of the letters in the study file

5.9. **Reporting of the offsite AE/ADR/SAE (DIL):**

5.9.1. **Receipt of offsite AE/ADR/SAE & related reports to YEC-3:**

5.9.1.1. The investigator will submit the offsite AE/ADR/SAE reports (also known as Dear Investigator Letter - DIL) occurring at other sites in the

form of soft /hard copies along with a covering letter mentioning the total number of reports and its details as per the format: (Ann01/SOP12/v1) with details of each SAE separately and its relatedness to the IP.

5.9.1.2. The PI must submit the offsite AE/ADR/SAE reports within 3 days after receipt of the same from the Sponsor.

5.9.2. **Review of the offsite AE/ADR/SAE (DIL):**

5.9.2.1. The offsite AE/ADR/SAE (DIL) will be reviewed by the YEC-3 SAE subcommittee Executive-Secretary/Member and tabled for the subsequent SAE subcommittee meeting.

5.9.2.2. Reviewers will take into consideration the need for change in protocol/ IC documents to safeguard the participants in view of the AE/ADR/SAE.

5.9.3. **SAE subcommittee meeting (for offsite AE/ADR/SAE):**

5.9.3.1. offsite AE/ADR/SAE (DIL) will be discussed with regard to the outcome and relatedness to the investigational product and the possible impact on the participants

5.9.3.2. Minutes will be tabled for discussion in the subsequent YEC-3 meeting.

5.9.3.3. **YEC-3 Meeting (for offsite AE/ADR/SAE - DIL):**

Minutes of the subcommittee will be read out and discussed

5.9.3.4. **Decision making (for offsite AE/ADR/SAE - DIL):** The agenda and minutes of the meeting will include decisions based on the information on SAEs at other sites.

5.9.3.5. **Communication and Filing (for offsite AE/ADR/SAE):**

5.9.3.5.1. The Secretariat will sign one copy of the covering letter that is submitted by the PI to acknowledge the receipt of the DIL report.

5.9.3.5.2. After discussion and deliberation in the meeting, the Secretariat will file a copy of the reports and communications in the study file.

6. References:

6.1. New Drugs and Clinical Trials Rules, 2019 of Drugs and Cosmetics Act, 1940

6.2. ICMR's National Ethical Guidelines for Biomedical and Health Research Involving Human Participants, 2017

6.3. Indian GCP guidelines, 2001

6.4. SOP04/v1 - Independent Consultant

6.5. SOP 7A/v1 - Initial Full Review of Research Study Protocols

6.6. SOP 08/v1 - Agenda, Meeting Procedures and Recording of Minutes

6.7. SOP 10/v1 - Continuing Review of Study Protocols

7. Annexures

7.1. Ann01/SOP12/v1: Adverse Events/Serious Adverse Event (SAE) Reporting form

7.2. Ann01/SOP12/v1: Serious Adverse Event (SAE) Reporting form (Clinical Trials)

Annexure 1: Ann01/SOP12/v1

Adverse Events/Serious Adverse Event Reporting

Adverse Event/Serious Adverse Event Reporting Form

Yenepoya Ethics Committee-3 (YEC-3)

EC Ref. No. *(For office use)*

Title of study: .....

.....

.....

Principal Investigator (Name, Designation and Affiliation): .....

.....

.....

1. Participant details :

Initials and ID	Age at the time of event	Gender	
.....	.....	Male ☐ Female ☐	Weight: ..... (Kgs)
.....	.....		Height: ..... (cms)

1. Suspected SAE diagnosis:.....
2. Date of onset of SAE: dd mm yy

Date of reporting SAE: dd mm yy

Describe the event [1]:

.....

.....

.....

.....

.....

.....

3. Details of suspected intervention causing SAE [2]

.....

.....

.....

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.....

4. Report type: Initial ☐ Follow-up ☐ Final ☐
   If Follow-up report, state date of Initial report dd mm yy

5. Have any similar SAE occurred previously in this study? If yes, please provide details. Yes ☐ No ☐

.....

.....

.....

.....

[1] *Duration, setting, site, signs, symptoms, severity, criteria for regarding the event serious*
[2] *Refers to research intervention including basic, applied and operational research or clinical research, except for investigational new drugs. If it is an academic clinical trial, mention name, indications, dosage, form and strength of the drug(s)*

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6. In case of a multi-centric study, have any of the other study sites reported similar SAEs ?

(Please list number of cases with details if available)

.....

.....

7. Tick whichever is applicable for the SAE: (Kindly note that this refers to the Intervention being evaluated and NOT disease process)

A. Expected event ☐ Unexpected event ☐

B.

Hospitalization	☐	Increased Hospital Stay	☐	Death	☐	Congenital anomaly/birth defect	☐
Persistent or significant disability/incapacity	☐	Event requiring intervention (surgical or medical) to prevent SAE	☐	Event which poses threat to life	☐	Others	☐

.....

In case of death, state probable cause of death.....

C. No permanent/significant functional/cosmetic impairment ☐

Permanent/significant functional/cosmetic impairment ☐

Not Applicable ☐

8. Describe the medical management provided for adverse reaction (if any) to the research participant. (Include information on who paid, how much was paid and to whom).

.....

.....

9. Provide details of compensation provided / to be provided to participants (Include information on who pays, how much, and to whom).....

.....

10. Outcome of SAE

Fatal	☐	Recovered	☐
Continuing	☐	Unknown	☐
Recovering	☐	Other *(specify)*	☐

.....

11. Provide any other relevant information that can facilitate assessment of the case such as medical history

.....

.....

.....

12. Provide details about PI's final assessment of SAE relatedness to research.

.....

.....

.....

Signature of PI: ..... dd mm yy

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Annexure 2: Ann02/SOP12/v1

Serious Adverse Event Reporting form (Clinical Trials)

Serious Adverse Event Reporting Form (Clinical trials)

Yenepoya Ethics Committee-3 (YEC-3)

EC Ref. No. *(For office use)*

Title of study: .....

.....

.....

Principal Investigator (Name, Designation and Affiliation): .....

.....

.....

1. Participant details :

Initials and Case No./ Subject ID ....

Age at the time of event .....

Gender
Male ☐
Female ☐

Weight: ..... (Kgs)
Height: ..... (cms)

2. Report type: Initial ☐ Follow-up ☐ Final ☐

If Follow-up report, state date of Initial report dd mm yy

What was the assessment of relatedness to the trial in the initial report?

By PI – Related ☐ Unrelated ☐
By Sponsor – Related ☐ Unrelated ☐
By EC – Related ☐ Unrelated ☐

3. Describe the event and specify suspected SAE diagnosis:.....

.....

.....

4. Date of onset of SAE: dd mm yy Date of reporting: dd mm yy

5. Onset lag time after administration of intervention: .....

Location of SAE (Clinic/Ward/Home/Other) .....

6. Details of suspected study drug/device/investigational procedure causing SAE:

I. Suspect study drug (include generic name) device/intervention: .....

.....

II. Indication(s) for which suspect study drug was prescribed or tested: .....

.....

III. Route(s) of administration, daily dose and regimen, dosage form and strength : .....

.....

IV. Therapy start date: dd mm yy Stop date: dd mm yy

7. Was study intervention discontinued due to event? Yes ☐ No ☐

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8. Did the reaction decline after stopping or reducing the dosage of the study drug / procedure? Yes ☐ No ☐

   If yes, provide details about the reduced dose.....

9. Did the reaction reappear after reintroducing the study drug / procedure? Yes ☐ No ☐ NA ☐

   If yes, provide details about the dose.....

10. Concomitant drugs history and lab investigations:

    I. Concomitant drug (s) and date of administration: dd mm yy

    .....

    .....

    II. Relevant test/laboratory data with dates: dd mm yy

    .....

    .....

    III. Patient relevant history including pre-existing medical conditions (e.g. allergies, race, pregnancy, smoking, alcohol use, hepatic/ renal dysfunction etc).....

    .....

    .....

11. Have any similar SAE occurred previously in this study? If yes, please provide details. Yes ☐ No ☐

    .....

    .....

12. Seriousness of the SAE:

Death	☐	Congenitial anomaly	☐
Life threatening	☐	Required intervention to prevent	
Hospitalization-initial or prolonged	☐	permanent impairment / damage	☐
Disability	☐	Others *(specify)*	☐

    .....

13. Describe the medical management provided for adverse reaction (if any) to the research participant. (Include information on who paid, how much was paid and to whom).

    .....

    .....

14. Outcome of SAE:

Fatal	☐	Recovered	☐
Continuing	☐	Unknown	☐
Recovering	☐	Other *(specify)*	☐

    .....

15. Was the research participant continued on the trial? Yes ☐ No ☐ NA ☐

16. Provide details about PI's final assessment of SAE relatedness to trial.

    .....

    .....

17. Has this information been communicated to sponsor/CRO/regulatory agencies? Yes ☐ No ☐

    Provide details if communicated (including date)

18. Does this report require any alteration in trial protocol? Yes ☐ No ☐

19. Provide details of compensation provided / to be provided the participants (Include information on who pays, how much, and to whom).....

    .....

    Signature of PI: ..... dd mm yy

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8. **Glossary:**

AE: Adverse Event

ADR: Adverse Drug Reaction

CDSCO: Central Drugs Standard and Control Organisation

DCGI: Drugs Controller General of India

DIL: Dear Investigator Letter

DSMB: Data Safety Monitoring Board

GCP: Good Clinical Practice

ICF: Informed Consent Form

ICH-GCP: International Committee for Harmonization - Good Clinical Practice

ICMR: Indian Council of Medical Research

PI: Principal Investigator

PIS: Participant Information Sheet

Protocol: Protocol refers to a set of documents that contain the detailed components of the proposed study

Protocol Deviation: Any research-related activity by the researchers that is different from that mentioned in the approved protocol that may or may not result in increased risk to participants

Protocol Violation: Any research-related activity by the researchers that is different from that mentioned in the approved protocol that may or may not result in increased risk to participants

Regulatory Clinical Trial (RCT) aka Sponsored Clinical Trial: A interventional study that is prospectively conducted on human participants in a randomized, double-blind design

SAE: Serious Adverse Event