**FDA Site Inspection Guide**

1. **Upon notification from FDA that an inspection will be initiated:**
2. Obtain the following information:

* Starting date and expected duration
* FDA Inspector name and contact information
* Investigator and research study that will be inspected
* Reason for the inspection (most will be “routine”)
* Requests for specific personnel or specific documents.

1. Promptly notify the Principal Investigator (PI)/Research Coordinator, Sponsor and Emory’s Office of Research Integrity and Compliance (ORIC) of the inspection. Notify ORIC **immediately** if:
   1. The reason for the inspection is “directed” (i.e., for cause), or
   2. An FDA Inspector arrives at your site unannounced.
2. **Before the site inspection:**
3. **Notify the study team members, IRB, and your Department Chair of the inspection. In addition, as appropriate, notify other persons who may be involved, including, but not limited to: Medical Records, Investigational Drug Service.**
4. Talk with representatives from the IRB and ORIC. ORIC encourages you to:
   1. Arrange a discussion with the PI and ORIC to review the FDA inspection process
   2. Request that ORIC conduct a pre-inspection review of your study documents.
5. Prepare a list of all clinical trials for which the PI has been responsible; include title, start and stop date. If the list would be excessive, it may be permissible to limit it to those trials that were open throughout the duration of the study (ies) under inspection. (The FDA requires that you provide this list to the Inspector when asked.)
6. Prepare an organizational chart showing reporting structure for PI and research team. FDA inspectors often request this which may be 2 separate charts.
7. **Identify and locate, if necessary, any records that the FDA is likely to audit, including**:

* **Regulatory documents, including FDFs**
* **Enrollment/screening logs**
* **Delegation of Authority logs**
* **ALL versions of Informed Consent Documents**
* Case Report Forms (print copies of any electronic case report form) and all supporting source documentation, e.g.:

|  |  |
| --- | --- |
| AE Reports | **Device /Drug Accountability Logs** |
| Clinic or hospital chart | Laboratory, radiology reports, EKGs, etc. |
| Consultation reports | Subject diaries |

1. **Review study records in order to:**

* Identify any weaknesses or gaps (e. g., source documents not included in the research record, incomplete or out of date delegation log, etc.)
* Correct items that that can be corrected using appropriate correction methods. Never use white-out, and date any changes or corrections with the current date (i.e., the date the change or correction was actually made).
* Identify any items noted during prior audits or monitoring visits and ensure that those items have been appropriately addressed.
* Develop and implement a written corrective and preventive action (CAPA) plan to address identified problems. See Corrective and Preventive Action Worksheet [available here](http://www.ctac.emory.edu/clinical_trial_resources/capa_worksheet.docx). Be prepared to provide a copy of the plan to the FDA Inspector.

1. **Identify and have copies available of all IRB correspondence (e.g., approvals, continuing reviews, current consent, etc.). These documents should be readily available for review by the FDA Inspector.**
2. Track and document activities; an FDA Site Inspection Checklist is [available here](http://www.or.emory.edu/research-compliance/FDA-regulated-studies/FDA%20Inspections.html).
3. Designate a person to oversee the inspection. This person, usually the research coordinator, should be knowledgeable about the study activities and records, and be able to coordinate with the study PI and other study personnel both prior to and during the course of the inspection.
4. Reserve meeting room(s) with convenient access for the duration of the inspection. The Inspector generally will not want the person coordinating the investigation in the room while s/he works, but this person should be readily available to the Inspector at all times. The room in which the Inspector will be located should not contain any other study or medical records, other than the study records that the Inspector has requested.
5. Prior to inspection, if the Inspector requests documents to be available, ask the Inspector to confirm in writing (e.g., email) the exact documents that the Inspector wishes to review. Gather the documents requested for review. Make sure that all requested documents are available for inspection at the time the Inspector first arrives. If some of the documents are not immediately available (i.e., offsite storage), get them as soon as possible. Maintain an itemized list with the status of any missing documents.

**III. Actions to be taken during an FDA inspection:**

1. **Remember:**  Clinical investigators (PIs) are required to permit the FDA to inspect and copy any records pertaining to the investigation, including PHI.
2. **Arrival of FDA Inspector:** Escort the Inspector to the appropriate meeting room. The PI should be available when the Inspector first arrives. Make the Inspector aware if the PI cannot be available and arrange for a later time. The Inspector will present his/her credentials to the PI to verify that they are in order. Ask the Inspector to see his/her credentials if he/she does not present them. The Inspector will then present a Notice of Inspection (Form FDA 482) to the PI authorizing the inspection; its presentation officially begins the inspection. The FDA Inspector will explain the intended purpose and scope of the inspection. The FDA Inspector will then ask the PI for the list of the PI’s studies (item II-3) and will request the PI to summarize and discuss the study identified for inspection The FDA Inspector may also ask the PI to summarize his/her responsibilities with respect to the study. In preparation, the PI should have reviewed the study, and the Form 1572 or Investigator Agreement that he/she signed at the beginning of the study.
3. **The Inspection**: Standard procedure is for the Inspector to request files for review, starting with the “general” study materials including the regulatory documents, then all signed informed consent forms, followed by a sampling of specific subject records. Study finances and personnel records are not included in the standard inspection.

During the inspection, the person coordinating the inspection should oversee all FDA requests and take notes to be written up at the end of each day of the inspection. (See IV-1, inspection summary report, for a list of topics to be included.) If there have been unresolved issues during the day, ask your contact from ORIC to be present at the interim (evening/daily) briefing. At the end of each day of the inspection, the person coordinating the inspection should send a summary of the day’s activities to the PI, sponsor, ORIC contact, and others as appropriate.

**NOTE:** The Principal Investigator should set aside some time each day to talk with the Inspector. The Principal Investigator should plan on being available to the Inspector, either in person or by phone, in order to answer any questions that may arise.

**4. Inspection of Documents:** Only documents specifically requested by the Inspector should be provided for review. Subject records may need to be obtained from the hospital or clinic to supplement or corroborate the research records.

When documents are copied for Inspectors, make an extra copy for the study’s FDA inspection file. (It is very important to keep a copy of every record/document that is provided to the Inspector during the inspection.) Copies are provided without charge to the FDA. Except for training/qualification records, the FDA Inspectors ordinarily will not request to see personnel records, financial records, and records of internal audits (section 704(a) FDC Act). If these records are requested, call ORIC promptly.

**5. Answering the FDA Inspector’s Questions**: Listen to the question carefully. If you do not understand the question, ask the Inspector to explain. Answer the question that was asked in an honest and complete manner. If you do not know the answer to a question, do not be afraid to tell the Inspector; defer to others if you do not know the answer to a question. Stop when the question is fully answered and wait for the next question.

* + Be truthful.
  + Be concise
  + Answer only the question that is asked.
  + DO NOT speculate or guess.
  + DO NOT argue

**6.** If the FDA Inspector requests to take photographs or samples, call the ORIC.

**7. DO NOT** sign any affidavits provided to you by the Inspector. If the Inspector presents an affidavit for signature, tell the Inspector that you must consult with the University’s legal counsel before signing any affidavit and then immediately contact the Office of the General Counsel or the Office of Research Integrity and Compliance. Typically, Emory will not provide/sign affidavits.

**8. Exit Interview:** The FDA Investigator will usually hold an exit interview, or “close-out,” at the conclusion of the inspection. The person coordinating the inspection should notify the Principal Investigator, the ORIC representative and other individuals as appropriate of the time and place of the exit meeting for them to attend.

During this meeting, if serious deficiencies have been found during the inspection, an Inspectional Observations Form FDA 483 will be issued, which lists the deficiencies. If no deficiencies are found, or the Inspector has comments that he/she believes are not serious enough to warrant a Form FDA 483, no form will be issued.

**During the exit interview:**

* Seek to correct any errors in the findings.
* Include observations, comments, and commitments in the meeting notes.

**IV. Actions to be taken after an FDA inspection:**

1. **Inspection Summary Report:** A detailed report, summarizing the inspection should be written (by the PI or the person designated in II-8 & III-3) from the inspection escort notes immediately. The report should be kept with study critical documents & include:

* A summary of questions and discussions between Inspector and each employee
* List of all studies or facilities/departments viewed
* List of all records reviewed
* Copies of all documents duplicated for the Inspector
* Note of all samples taken, and receipt for samples
* Note of all commitments made (include completion dates if set with FDA)
* Comments of Inspector and/or escort related to inspection.

1. **Response to Form FDA 483**

Individuals as appropriate shall draft a response to Form FDA 483. The PI is responsible for response content and sending the written response, but all replies or correspondences should be reviewed with the Director of ORIC before sending.

The written response should include specifics:

* Address each particular observation or finding, point by point.
* Determine if a finding was an oversight/one-time occurrence or systemic, where a change of procedure is indicated.
* If you disagree with an observation: respond factually, providing clear and verifiable evidence.
* Delineate corrective and preventive action (CAPA): include justification of why the proposed response will remediate the issue and a realistic timeline for implementation.

The reply should be sent within 15 working days. Keep a copy of the final signed response in your office along with all attachments, and send a complete copy of the final signed response to ORIC. The Form FDA 483, PI response and CAPA plans should be submitted to the IRB as Reportable New Information.

**3.** **Notifications to Sponsors**

The Investigator should notify the sponsor of the inspected study of the issuance of a Form FDA 483 regarding the study site. The Investigator also should review his/her other clinical trial agreements and grant documents for any requirements regarding notification to other sponsors whenever inspection of an unrelated study results in issuance of a Form FDA 483.

1. **Inspector’s EIR (establishment inspection report):** The FDA Inspector will file an EIR within approximately 30 days. This report is subsequently available through Freedom of Information (FOI) after the conclusion of any follow-up by the FDA to Form FDA 483, Warning Letter, or other actions arising from the inspection.

A copy of the report may be requested from:

Food and Drug Administration

Division of Freedom of Information

Office of the Executive Secretariat, OC

5630 Fishers Lane, Room 1035

Rockville, MD 20857

Requests may also be sent via fax to: fax number (301) 827-9267 or submitted  
online: <http://www.accessdata.fda.gov/scripts/foi/FOIRequest/index.cfm>