**ANNEXURE. 6: Form II**

**CONTENTS OF THE PROPOSED PROTOCOL FOR CONDUCTING CLINICAL TRIALS**

*Kindly submit 10 (3 in case of Thesis) Hard copies of proforma and consent forms in English & Hindi to the Member Secretary, Institutional Ethics Committee (Human Studies), IGMC Shimla*

*A soft copy is to be sent to email id of institutional Ethics committee:*[*iec.igmc.sml@gmail.com*](mailto:iec.igmc.sml@gmail.com)*.*

1. **Title Page**
   1. Full title of the clinical study.
   2. Protocol/Study number, and protocol version number with date
   3. The IND name/number of the investigational drug
   4. Compete name and address of the Sponsor and contract research organization if any
   5. List of the Investigators who are conducting the study, their respective institutional affiliations and site locations.
   6. Email ID:
   7. Contact no:
   8. Name (s) of clinical laboratories and other departments and /or facilities participating in the study.
2. **Table of Contents**

A complete Table of Contents including a list of all Appendices.

1. Background and Introduction
   1. Preclinical experience
   2. Clinical experience

Previous clinical work with the new drug should be reviewed here and a description of how the current protocol extends existing date should be provided. If this is an entirely new indication, how this drug was considered for this should be discussed. Relevant information regarding pharmacological, toxicological and other biological properties of the drug/biologic/medical device, and previous efficacy and safety experience should be described.

1. **Study Rationale**

This section should describe a brief summary of the background information relevant to the study design and protocol methodology. The reason for performing this study in the particular included by the protocol should be provided.

1. **Study Objective** (s) (primary as well as secondary) and their logical relations to the study design.
2. **Study Design**
   1. Overview of the study Design: Including a description of the type study (i.e. double- blind, multi center, placebo controlled, etc.), a detail of the specific treatment groups and number of study Subject in each group and investigative site, Subject number assignment, and the type, sequence and duration of study periods.
   2. Flow chart of the study
   3. A brief description of the methods and procedures to be used during the study.
   4. Discussion of Study design: This discussion details the rationale for the design chosen for this study.

**5. Study Population**: the number of Subjects required to be enrolled in the study at the Investigative site and by all sites along with a brief description of the nature of the Subject population required is also mentioned.

**6. Subject Eligibility:**

1. Inclusion Criteria
2. Exclusion Criteria.
   1. **Study Assessments**: plan procedures and methods to be described in detail.
   2. **Study Conduct**: stating the types of study activities that would be included in this section would be: medical history, type of physical examination, blood or urine testing electrocardiogram (ECG), diagnostic testing such as pulmonary function tests, symptom measurement, dispensation and retrieval of medication, Subject cohort assignment, adverse event review etc.

Each visit should be described separately as visit I, Visit 2, etc.

Discontinued Subjects: Describes the circumstances for subject withdrawal, dropouts, or other reasons for discontinuation of subjects. State how drop outs would be managed if they would be replaced.

Describe the method of handling of protocol waivers, if any. The person(s) who approves all such waivers should be identified and the criteria used for specific waivers should be provided.

Describe how protocol violations will be treated, including conditions where the study will be terminated for non-compliance with the protocol.

1. **Study treatment**
   * 1. Dosing schedule (dose, frequency, and duration of the experimental treatment) Describe the administration of placebos and/or dummy medications if they are part of the treatment plan. If applicable, concomitant drugs(s), their doses, frequency and duration of concomitant should be stated.
     2. Study drug supplies and administration: A statement about who is going to provide the study medication and that the investigational drug formulation has been manufactured following all regulations, details of the product stability, storage requirement and dispensing requirement should be provided.
     3. Dose modification for study drug toxicity: rules for changing the dose or stopping the study drug should be provided.
     4. Possible drug interactions
     5. Concomitant therapy: the drugs that are permitted during the study and conditions under which they may be used are detailed here. Describe the drugs that a subject is not allowed to use during parts of or the entire study. If any washout period for prohibited medication are needed prior to enrolment, these should be described here.
     6. Blinding procedures: A detailed description of the blinding procedure if the study employs a blind on the investigator and / or the subject.
     7. Unblinding procedures: If the study is blinded, the circumstances in which unblinding may be done and the mechanism to be used for unblinding should be given.
2. Adverse Events Description of expected adverse events should be given.
3. Ethical Considerations: Give the Summary of:

Risk/benefit assessment:

1. Ethics Committee review and communications
2. Informed consent process
3. Statement of subject confidentially including ownership of date coding procedures.
4. Study Monitoring and Supervision: a description of study monitoring policies and procedures should be provided along with the proposed frequency of site monitoring visits, and who is expected to perform monitoring.

Case Record (CRF) completion requirements, including who gets which copies of the forms and any specifics required in filling out the forms CRF corrections requirements, including who is authorized to make corrections on the CRF and how queries about study data are handled and how errors, if any, are to be corrected should be stated.

Investigator study files, including what needs to be stored following study completion should be described.

1. Investigational Product Management
2. Give Investigational product description and packaging (stating all ingredients and the formulations of the investigational drug and any placebos used in the study)
3. The precise dosing required during the study
4. Method of assigning treatments to subjects and the Subject identification code numbering system.
5. Method of assigning treatments to subjects and the subject identification code numbering system.
6. Storage conditions for study substances
7. Investigational product accountability: Describe instructions for the receipt, storage, dispensation, and return of the investigational products to ensure a complete accounting of all investigational products received, dispensed, and returned /destroyed.
8. Describe policy and procedure for handling unused investigational products.
9. Data Analysis:

Provide details of the statistical approach to be followed including sample size, how the sample was determined, including assumptions made in making this determination, efficacy endpoints (primary as well as secondary) and safety endpoints.

1. Statistical analysis: Give complete details of how the results will be analyzed and reported along with the description of statistical tests to be used to analyze the primary and secondary endpoints defined above. Describe the level of significance, statistical tests to be used and the methods used for missing data: method of evaluation of data for treatment failures, non- compliance, and Subject withdrawals: rationale and conditions for any interim analysis if planned.
2. Describe statistical considerations for Pharmacokinetic (PK) analysis, if applicable

Undertaking by the investigators

Appendices: Provide a study synopsis, copies of the informed consent documents (patients information sheet, informed consent form etc.): CRF and other data collection forms; a summary of relevant pre-clinical safety information and any other documents in the clinical protocol.