**An FDA Audit Guide:**

**From Notification through Close-out.**

This guide includes general information pertaining to FDA Inspections. It provides guidance on how to prepare for an inspection, what to expect while the FDA Inspector is on site, and how to address/respond to any observations sited by the FDA Inspector.

The FDA’s [Bioresearch Monitoring Program (BIMO)](https://www.fda.gov/downloads/ICECI/EnforcementActions/BioresearchMonitoring/ucm133773.pdf)

* Goals
  + To ensure the protection of Human Participants
  + To ensure the accuracy and reliability of data submitted to the FDA
  + To ensure adherence to the FDA regulations
* Types of audits
  + Pre-approval
  + Post-approval
  + Surveillance
  + For cause – directed

Rationale for Site Selection

* Sponsor submitted PMA
* High enrollment
* Reporting ratios of AEs or deviations per subject is significantly higher or lower than other sites
* Gaps in IRB approvals
* Previous suspension or termination of your site by the sponsor or IRB
* Previous inspection history
* Subject population is not consistent with given disease/condition for the locale in practice
* Complaint from a subject or site staff member

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| At Initial Notification | |  |
| **During the initial phone call with the FDA Inspector:** | Ask for the following:   1. Name of the Inspector and their contact information 2. Date and time the Inspector plans to arrive on site to begin the audit 3. How long the Inspector anticipates being on site 4. Type of audit (routine or for cause) 5. Study to be audited   Type of audit – Inspectors will know the answer to this question, but some may not be willing to discuss over the phone. If this is the case, include this point in your notification to HRPO and be sure to ask when the Inspector arrives on site.  Study to be audited – Inspectors may or may not be willing (or able) to disclose this information.  Important to note that a notice of intent to inspect is not an appointment to be scheduled with flexibility, but a courtesy notification to allow you time to prepare and collect required records and notify appropriate personnel.  The FDA is not required to provide advance notice. | **NOTES:** |
| **Immediately After the Initial Notification** | |  |
| **Inform the PI** | The PI should be the first person that you notify about the upcoming audit. The PI should block their schedule so that they are available to greet the Inspector upon arrival.  If this is not possible, the PI should make every effort to greet and meet with the Inspector as soon as possible afterwards. | **NOTES:** |
| **Notify HRPO** | Within 1 working day of the initial notification, you must notify both the HRPO Executive Director, Jeanne Velders and the Manager of Compliance, Abby Keeley, by email at [veldersj@wustl.edu and akeeley@wustl.edu](mailto:veldersj@wustl.edu;akeeley@wustl.edu).  Be prepared to provide the PI name, Study title and myIRB ID number, whether the audit is routine or for-cause and when the FDA Inspector plans to arrive to begin the audit. | **NOTES:** |
| **Other Required Notifications** | Notify the following entities in line with your Departmental/Division requirements and/or as required by the terms of any contracts/award terms:   1. Department/Division Heads 2. Your supervisor 3. The sponsor of the study 4. Funding entities 5. Research Monitors   The Human Research Quality Assurance Program here at Washington University will be notified of an upcoming audit by the HRPO Executive Director; however, you can reach out to this office separately as they can assist you in preparing for the audit by monitoring study records for priority issues.  You can contact the Manager of the Human Research Quality Assurance Program, Jessica Schnable, at 314-747-5525 or at HRQA@wustl.edu. | **NOTES:** |
| **Prior to the Inspector’s Arrival** | |  |
| **Reserve Workspace** | Identify and reserve a space for the Inspector to work for the duration of the audit. Plan for the Inspector to be onsite between 2-7 days unless otherwise noted during the initial notification.   1. The space should be as far away from the hustle and bustle as possible 2. The space should be empty in that it does not contain any research related documents – whether they pertain to the study under audit or not 3. Do not give the Inspector access to a photocopier. If copies are required, make copies for them and an exact copy for yourself. 4. You may provide the Inspector internet access, but not access to any electronic records systems 5. The space should have clear and visible signage stating, “FDA audit in progress – Quiet” | **NOTES:** |
| **Communicate With Staff** | In order to maintain confidentiality with other ongoing studies or study related activities all staff members who work in the vicinity of the audit should be given the following instructions regarding verbal communications in the office:   1. The date that the FDA Inspector will be on site 2. That all work related conversations are to take place in private offices, conference rooms, or huddle rooms with the doors CLOSED 3. Work is not to be discussed in hallways, break rooms, or even bathrooms for the duration of the time that the FDA Inspector is on site.   Members of the study team should be prepared for the audit by being informed that they may be interviewed by the FDA’s Inspector. The interview may cover:   * Their role at the University in general * The specific role they fill on the study team and how they were prepared/trained for this role * These individuals may need to provide copies of CVs and/or licenses. | **NOTES:** |
| **Staff Assignments** | Prior to the Inspector’s arrival, at least two staff members should be identified and assigned to the audit.   1. The first individual is typically the Sr. Coordinator/Project Manager overseeing the study. This individual will be the primary point person throughout the audit. This individual must be able to locate records and answer questions posed by the Inspector. This individual should have access to all applicable electronic records systems. The FDA inspector will not be able to access these systems independently. 2. The second individual needs to be someone other than the primary coordinator who can be available to take notes, make copies, and run errands. As the scribe, this person can write up a daily summary of audit activities that then can be provided to the PI, WU, and sponsor contacts.   While the FDA Inspector is here, they should not be left alone. | **NOTES:** |
| **Study Monitoring** | If the study’s Sponsor offers to send out a Quality Assurance/Site Monitor to assist with audit prep – accept the offer.  Otherwise, see below for links to Study Monitoring Checklists available on the Office of the Vice Chancellor for Research’s website.  Regulatory File Checklist   * [Industry sponsored trials](https://research.wustl.edu/regulatory-file-checklist/) * [Non-Industry sponsored trials](https://research.wustl.edu/regulatory-file-checklist/)   [Audit Prep Checklist for Self-Monitoring](https://research.wustl.edu/onsite-monitoring-visit-agenda-checklist/)  The inspector will likely ask for a list of all IND/IDE studies the PI is involved in (as the PI or sub-I).  Prepare the list of all subjects consented/enrolled and their current study status. Also summarize compassionate use subjects, if applicable. | **NOTES:** |
| **Upon the Inspector’s Arrival** | | |
| **Initial Meeting** | At the initial meeting the FDA Inspector is required to present their badge. The name and number of the Inspector may be recorded, but the badge cannot be photocopied.  The notice of inspection, Form 482, will be presented and must be signed either by the PI or their designee.  A copy of the notice of inspection should be obtained and forwarded on to the Executive Director of HRPO, Jeanne Velders, as well as the Manager of Compliance, Abby Keeley, by email at [veldersj@wustl.edu and akeeley@wustl.edu](mailto:veldersj@wustl.edu;akeeley@wustl.edu).  At this meeting the FDA Inspector will provide information pertaining to the purpose and general agenda of the audit. | **NOTES:** |
| **During the Audit – General “Do’s”** | 1) Do request a daily debriefing meeting with the Inspector. The PI should also attend these when possible. Provide your business card and a direct phone number where you can be reached at all times.  2) For all documents requested by the FDA Inspector, get the documents and bring the documents to the Inspector in their workspace.  Make two copies of every document requested. One copy for the Inspector and one copy for your study team as documentation of everything that was provided to the Inspector. Copies provided should be stamped “copy.” Minimize PHI.  3) Keep the HRPO and HRQA offices updated on the progress of the audit with a daily summary of audit activities and findings.  4) Do reach out to HRPO OR HRQA should you have ANY questions about providing documents requested by the Inspector. | **NOTES:** |
| **During the Audit – General “Do Not’s”** | 1) Do not disparage the sponsor or funder of the study, the institution, or other members of the study team.  2) Do not offer the Inspector food, drinks (even coffee or water), or lunch.  3) Do not offer to validate the Inspector’s parking costs.  4) Do not sign any documents or affidavits at the request of the FDA Inspector without first contacting the Human Research Protection Office.  5) Do not offer additional information to the FDA Inspector.  6) Do not discuss other studies with the FDA Inspector. | **NOTES:** |
| **How to Answer Questions** | 1) Be sure that you understand fully the question being asked. If you do not, ask the FDA Inspector for clarification or to restate it if you don’t understand.  2) Answer the question that is asked – AND ONLY THE QUESTION THAT IS ASKED.  Be clear, but be concise.  3) Be positive and confident. Do not be defensive or evasive.  4) Do not answer questions that you do not know how to answer. There is nothing wrong with telling the Inspector that you need to speak to the person filling that role, check your procedures, etc. and then get back with the answer.  5) Be okay with silence. There is no need to fill a “dome of silence” with talk about the study, processes, procedures, practices, etc unless you are answering a direct question. It is okay to sit in silence while the Inspector reviews documents. | **NOTES:** |
| **During the Audit – Records Request** | Remember – FDA Inspector’s only have the right to request access to the records associated with FDA regulated research.  If an Inspector asks for a listing of all of the PI’s open studies. Remember, you need only provide information pertaining to the PI’s open FDA regulated studies.  Inspectors do not have the right to ask for records related to the study’s finances or personnel records (outside of documentation of training).  If you have questions about providing requested information to the Inspector, contact HRPO or HRQA. | **NOTES:** |
| **End of the Audit** | | |
| **Close Out Visit** | At the conclusion of the audit, the FDA Inspector will hold a close out meeting. The PI, the staff members assigned to the audit, and representatives from both the HRPO and HRQA should attend.  Your Dept/Division may have additional requirements for who attends these meetings. For example, the Dept/Division Chief or other leadership members.  Notify both the HRPO and HRQA offices of the day/time/location of the close out meeting once established.  At this meeting the FDA Inspector will provide and discuss their observations. A Form 483 may be issued if there are observations that, in the opinion of the Inspector, are in violation of the FDA’s regulations/requirements.  Not all observations end up requiring a Form 483. Sometimes the Inspector will limit certain observations to discussion at the close out.  This meeting is an opportunity for the PI to discuss the observations and clarify any inaccuracies or misunderstandings.  No one at this meeting should be defensive or confrontational.  If there are no findings or observations the Inspector may choose not to hold a close out meeting. This doesn’t typically happen, but is a possibility. | **NOTES:** |
| **Form 483** | A Form 483 may be issued at the conclusion of an FDA audit when, in the judgment of the Inspector, there are conditions or practices that violate FDA regulations/requirements.  If a Form 483 is presented at the close out meeting, a copy needs to be provided to HRPO. A copy can be provided at the close out meeting or scanned and emailed to the Executive Director, Jeanne Velders, and the Manager of Compliance, Abby Keeley, following the meeting.  If any of the findings listed on the Form 483 constitute reportable events, per section X of the WU IRB policy document, submit the event via a REF in myIRB.  A response to the Form 483 must be drafted and should be provided to the HRPO and HRQA offices for comment prior to sending to the FDA.   1. Work on the response should begin immediately so that other Institutional Offices have the opportunity to comment on the draft and you have the opportunity to make any necessary revisions. 2. The response is due to the FDA no later than 15 calendar days from the day the Form 483 was issued.   The FDA will not give you an extension.   1. The response must address:    1. The root cause of the problem or issue    2. The corrective actions taken in response to the problem or issue    3. Any preventative actions implemented including the timeline and method of their implementation    4. All supporting documentation    5. Describe how the PI will be directly involved in the corrective action in detail and how increased oversight for prevention of this issue will be provided in the future. 2. When drafting a corrective action plan, be sure to address how the plan will be implemented. This includes how implementation of the plan will be documented. When drafting corrective and preventative action plans, it is important to remember that additional supporting documentation demonstrating their implementation can be requested by the FDA. 3. The draft response should not be provided to entities or individuals outside of the institution until it is finalized. This includes sponsors and funding entities. 4. A complete copy of the final response needs to be provided to HRPO. | **NOTES:** |
| **Warning Letter** | A warning letter is issued if the auditing FDA Center believes that a serious violation of FDA regulations/requirements may exist based on the information collected during and after the audit (including the response to the Form 483).  A response to a warning letter is required in the timeframe specified within the letter.  If you receive a warning letter you must contact the HRPO immediately.  Warning letters serve as a method of “prior notification” that enforcement actions may be taken if issues are not promptly corrected. | **NOTES:** |