DF/HCC
DANA-FARBER / HARVARD CANCER CENTER

External Site Delegation of Authority Log

For use by External (non-DF/HCC) institutions participating on DF/HCC Investigator-Sponsored, Multi-Center Trials Only

Site Principal Investigator: _____ Protocol #: _____

DF/HCC Sponsor-Investigator: _____ Site Name: _____

PRINT NAME	CREDENTIALS	AUTHORIZED TASKS	SIGNATURE	INITIALS	START DATE	END DATE	PI INITIALS	APPROVAL DATE

1. Obtain Informed Consent*
2. Determine Subject Eligibility
3. Evaluate Adverse Events
4. Evaluate Response / Clinical Endpoints
5. Decision to Administer Investigational Product / Dose Modifications
6. Control Investigational Product (Storage/Receipt/Accountability)
7. Medical History / Vital Signs
8. Data Entry, Regulatory Documentation, and other Non-Clinical Activities
9. Other: _____
10. Other: _____
11. Other: _____
12. Other: _____

*** Per DF/HCC policy, only physician members of the study team may obtain informed consent on DF/HCC-sponsored, interventional drug, biologic, or device research.**