

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*	6. Control Investigational Product (Storage/Receipt/Accountability)	11. Other:
2. Determine Subject Eligibility	7. Medical History / Vital Signs	12. Other:
3. Evaluate Adverse Events	8. Data Entry, Regulatory Documentation, and other Non-Clinical Activities	13. Other:
4. Evaluate Response / Clinical Endpoints	9. Other:	14. Other:
5. Decision to Administer Investigational Product / Dose Modifications	10. Other:	15. 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.