

SOP DISTRIBUTION RECORD*

NEW/REVISED SOP (Version Number)	EFFECTIVE DATE (DD/MMM/YY)	COMMUNICATED TO USERS (Attach supporting documentation) (DD/MMM/YY)	COMMUNICATED BY (Name)	TRAINING COMPLETED (if applicable) (DD/MMM/YY)

* This record can also be used by users (i.e. Principal Investigators) of the WJHCPOR to track the distribution/communication and training of all new and/or revised SOPs. Electronic supporting documentation/audit trail should also be attached to this form, if applicable.