1.0 POLICY

Testing and/or monitoring as part of any clinical research project or clinical trial is under the medical supervision/oversight of the principal investigator at **ALL** times. All clinical research projects and clinical trials contain a level of risk. This risk **MUST** be assessed and managed at each stage of a study by the principal investigator to ensure the safety, rights and well-being of research participants and research staff personnel and the integrity and successful completion of the study. Only trained research personnel **MUST** work with research participants within the Clinical Investigation Unit (CIU) located within the W.J. Henderson Centre for Patient-Oriented Research (WJHCPOR). All users of the CIU are required to undergo hands-on training prior to using the area within the WJHCPOR. For clinical trials involving the use of cytotoxic drugs, additional training is required for users of the CIU.

2.0 PURPOSE

To standardize the training required when research participants are undergoing testing and/or monitoring as part of any clinical research project or clinical trial in the CIU located within the WJHCPOR.

3.0 RESPONSIBILITY

Users are responsible for:

- Completing the WJHCPOR "General Orientation" course and participating in hands-on training. For users using the cardiac monitors and/or infusion pumps, additional courses and hands-on training required.

- Operating and maintaining all CIU equipment in accordance with manufacturer’s instructions for safe usage and professional best practice procedures.

- Reporting any damage to the CIU equipment to the designated Kingston General Health Research Institute (KGHRI) staff member **immediately** so equipment repairs can be made.
• Wearing appropriate personal protective equipment in the CIU when working with research participants. See “Personal Protective Equipment” SOP.

• Disposing all regular, biohazardous, sharps and drug waste in the appropriate bins/containers in the CIU. See “Disposal of Biohazardous and Sharps Waste” SOP.

• Ensuring the safety of other users of the CIU. Incidents (i.e. spills, accidents, exposure) are reported immediately. See “Accidental Occupational Exposure and Reporting Workplace Incidents” SOP and “Spill Control Procedures” SOP.

• Familiarizing themselves with all the emergency codes while conducting research within the CIU. See “Emergency Procedures” SOP and “Calling Codes” SOP.

• Familiarizing themselves with the “Safe Handling of Cytotoxic Drugs and Bodily Fluids” SOP when using cytotoxic drugs.

• Ensuring proper use of spot monitors, ECG machines, cardiac monitors, infusion pumps, otoscopes and ophthalmoscopes, and height and weight scales in the CIU. See “Spot Monitors” SOP, “ECG Machines” SOP, “Cardiac Monitor” SOP, “Infusion Pump” SOP, “Otoscopes and Ophthalmoscopes” SOP, and “Use of Height and Weight Scales” SOP.

• Wiping down all CIU equipment and furniture surfaces with Oxivir®/Accel® INTERVention wipes provided after each research participant.

• Ensuring that they have in place with their direct supervisor a buddy system, a check-in procedure, and an effective means of communication when working alone in the CIU. See “Working Alone Safely” SOP.

KGHRI is responsible for:

• Ensuring all CIU equipment is in good working condition and labelled with appropriate contact information for maintenance and repair.

• Providing users with access to research treatment areas in the CIU through an online booking system: 3 beds, 4 recliners (one chair is bariatric), and a procedure room.
  o Each bed area is equipped with a procedure stretcher, Philips® cardiac monitor (NBP, pulse, SpO₂, ECG), Alaris® infusion pump, digital timer, stool, over bed table, oxygen, and suction.
  o Each chair area is equipped with a reclining chair with side table, Alaris® infusion pump and stool.
  o The procedure room is equipped with a surgical stretcher, Philips® cardiac monitor (NBP, pulse, SpO₂, ECG), Alaris® infusion pump, digital timer, otoscope and ophthalmoscope, surgical/procedure light, oxygen, and suction.
4.0 PROCEDURE

➢ When users are accessing CIU, whether for daytime and/or overnight stays of research participants, at least two users (research nurse or clinician and one other research team member (preferred) OR two research team members who meet qualifications), possessing the following minimum qualifications, MUST be present at all times in the CIU in order to monitor research participants’ safety. If the risk assessment is high for a possible adverse event, more users present in the CIU is recommended:

- One user must be (a) certified in advanced cardiovascular life support (ACLS), (b) able to activate a KHSC emergency response plan (i.e. CODE 99), and (c) competent in basic first aid.

- A second user must be (a) certified in basic life support (BLS), and (b) able to activate a KHSC emergency response plan (i.e. CODE 99).

➢ Users MUST bring all required equipment and supplies (i.e. saline, drug, tourniquet, syringes, IV needles, gauze, tape, tubing, adapters and connectors, procedure kits, diagnostic kits) needed to carryout the clinical research project or clinical trial. KGHRI only provides the CIU equipment to users for usage and limited supplies (i.e. disposable gloves, disposable masks for research participants and users, ECG electrodes and paper, razors, gauze, alcohol wipes, bandages, paediatric adhesive wraps for cardiac monitors, disposable speculas for otoscopes, Oxivir®/Accel® INTERVention wipes, Oxivir® and Sporicidal bottles for clean-up, chemotherapy spill kits and Surface Safe for cytotoxic clean-up, thermometer probes for spot monitors).

➢ When using the procedure room in the CIU, users MUST only carry out the approved procedures listed in Appendix A. If a procedure is not listed, please contact the
designated KGHRI member. For additional procedures to be added to Appendix A, formal approval from KHSC’s Director of Health Sciences Research and KHSC’s Infection Control Department is required.

- The principal investigator (clinician) **MUST** be accessible (located in KHSC-KGH site) and readily available at all times when a research participant is undergoing testing and/or monitoring as part of a clinical research project or clinical trial in the CIU within the WJHCPOR. If the principal investigator is not available, arrangements must be made in advance by the principal investigator for a co-investigator (clinician only) to be made available as the delegate for oversight.

- All CIU equipment and furniture **MUST** remain in the CIU and should not be moved to other areas within the WJHCPOR.

- When using cytotoxic drugs or addressing spills related to cytotoxic drugs, users **MUST** post the appropriate cytotoxic signs. See “Safe Handling of Cytotoxic Drugs and Bodily Fluids” SOP.

### 5.0 SOP HISTORY

<table>
<thead>
<tr>
<th>SOP Number</th>
<th>Date Issued</th>
<th>Summary of Revisions</th>
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<tbody>
<tr>
<td>SOP-UCIU-01</td>
<td>01-APR-2018</td>
<td>Original version.</td>
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| SOP-UCIU-02    | 01-MAY-2019   | Bi-annual review of SOP completed. SOP header section updated. SOP version number updated. SOP effective date updated. Removed “Contacts” section from SOP. Updated section number for “SOP History”. Under Section 1.0, under paragraph 1, additional sentence added to the end of the paragraph related to cytotoxic drug use in the Clinical Investigation Unit. Under Section 3.0, under “Users Responsibilities”, under bullet 4, added quotations around “Personal Protective Equipment” SOP. Under Section 3.0, under “Users Responsibilities”, under bullet 5, added quotations around “Disposal of Biohazardous and Sharps Waste” SOP. Under Section 3.0, under “Users Responsibilities”, under bullet 6, added quotations around “Accidental Occupational Exposure and Reporting Workplace Incidents” SOP and “Spill Control Procedures” SOP. Under Section 3.0, under “Users Responsibilities”, under bullet 7, added quotations around “Emergency Procedures” SOP and “Calling Codes” SOP. Under Section 3.0, under “Users Responsibilities”, added a new bullet (bullet 8) following existing bullet 7 related to using cytotoxic drugs. Under Section 3.0, under “Users Responsibilities”, under bullet 9, added “ECG machines”. Under Section 3.0, under “Users Responsibilities”, under bullet 9, added “ECG