

UnityPoint Health – Des Moines

Institutional Review Board

To move through this document, please keep document “locked” and use “Tab” key.
For pediatric oncology studies, please return the signed form to Katy Juhl at Katy.Juhl@unitypoint.org
For all other studies, please return the signed form to Joan Pruisner at Joan.Pruisner@unitypoint.org.

Utilization of Pharmacy for Clinical Investigations

In addition to requiring Institutional Review Board (IRB) approval for a clinical investigation to be conducted at UnityPoint Health—Des Moines, utilization of pharmacy services must be approved in advance by the service line director.

Note: In the event the protocol has changes that significantly affect the conduct of the study, the department managers may re-evaluate the utilization of their department’s services for this protocol.

Protocol Title:

Principal Investigator:

Telephone:

Study to be conducted at: IMMC ILH Blank Other site (describe)

Date of planned study initiation:

Expected enrollment for your site:

Expected duration of study:

Outpatient or Inpatient study: Inpatient Outpatient

Time of day patients are expected to be enrolled (eg. 24 hours a day, day-shift only)

Pharmacy Department

If you are unable to answer any of the following questions, please provide a contact name/number for the study sponsor or contract research organization so the pharmacy department can contact them for more information.

Contact Name:

Company:

Telephone Number:

E-mail:

1.	Will pharmacy randomize?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2.	What medications need dispensed?		
3.	What dosage form are the medications (IV, PO, SC, etc)?		
4.	Is there a time limit on drug preparation?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5.	If there is a time limit on drug preparation, what is the time limit?		
6.	How often is drug dispensed for each participant?		
7.	What is the length of treatment for each participant?		
8.	What time of the day will most participants be enrolled?		
9.	If enrollment begins as inpatient, is there a possibility of transferring to home health?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10.	Will pharmacy participate in monitoring visits?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

- The utilization of pharmacy services for this protocol is approved (see below for any restrictions or concerns)
- The utilization of pharmacy services for this protocol is not feasible (see below for explanation)

Restrictions or concerns:

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Executive Director of Pharmacy	Date