

Individual Patient IND Process Flow Guidelines from CHOP IND/IDE Support Office

Purpose: This process flow document outlines the steps necessary to prepare and submit an Individual Patient Expanded Access IND to the FDA

Background: When seeking expanded access to an investigational medical product, it is critical that the patient and his/her licensed physician consider all possible risks. Investigational medical products have not yet been approved or cleared by FDA and FDA has not found these products to be safe and effective for their specific use. Furthermore, the investigational medical product may, or may not, be effective in the treatment of the condition, and use of the product may cause unexpected serious side effects.

What is Expanded Access? Sometimes called “compassionate use”, expanded access is a potential pathway for a patient with [a serious or immediately life-threatening disease or condition](#) to gain access to an [investigational medical product](#) (drug, biologic, or medical device) for treatment outside of clinical trials when no comparable or satisfactory alternative therapy options are available.

Roles and Responsibilities

- 1. Patient**
Consults with licensed physician to explore and decide about alternative options.
- 2. Licensed Physician (Sponsor-Investigator)**
Agrees to oversee the patient's treatment and works with industry (e.g., medical product developer), files paperwork with FDA and IRB (for many expanded access request types) and is responsible for patient care and reporting. In this case, the CHOP physician is the sponsor-investigator of the IND.
- 3. Investigational Product Manufacturer**
Willing to provide the investigational medical product to the CHOP physician. The company either: 1) Sponsors the expanded access IND, allowing the FDA to cross-reference their own IND (for drugs and biologics) or IDE (medical devices) on behalf of the expanded access CHOP [sponsor-investigator](#) through the use of a [letter of authorization](#); or 2) Provides the necessary investigational product information for the CHOP physician, as sponsor-investigator, to submit their own expanded access request to the FDA.
- 4. [Institutional Review Board \(IRB\)](#)**
Reviews expanded access protocol and consent to ensure that the patient is informed about the nature of the treatment.
- 5. FDA**
Reviews the expanded access request and determines if the treatment may proceed.

Best Practice: when sending initial emails to FDA, IRB, or IND/IDE Support include all of the following on these communications, irboffice@chop.edu, INDIDE@chop.edu, InvestigationalPharmacy@chop.edu , durkanj@chop.edu (Contracts)



Emergency Use Individual Patient IND (21 CFR 312.310)

Upon considering an individual patient for treatment under Emergency Use IND, the patient must meet all of the criteria for consideration of treatment under expanded access;

- Patient has a serious or immediately life-threatening disease or condition.
- There is no comparable or satisfactory alternative therapy to diagnose, monitor, or treat the disease or condition.
- Patient enrollment in a clinical trial is not possible.
- Potential patient benefit justifies the potential risks of treatment.
- Providing the investigational medical product will not interfere with investigational trials that could support a medical product’s development or marketing approval for the treatment indication.

Additionally, the manufacturer or developer/supplier of the medical product must agree to provide the product for the proposed use. (Note: As a requirement of the [21st Century Cures Act](#), a company developing investigational drugs shall make its policy regarding evaluating and responding to request for expanded access public and readily available).

The first three steps below can occur in parallel or in very close sequential order.

☒	Step /Action	Resource / Reference – Descriptions and Further Information
☐	<p>1. Contact drug/biologic/device manufacturer</p> <p>Secure agreement to provide product</p> <p>Request Letter of Authorization (LOA)</p>	<p>Check website or contact company to secure agreement of the company to provide the investigational product. If they have their own process for submission or evaluation of requests, follow that process. Obtain an estimated timeframe for when the company can provide delivery of the investigational product.</p> <p>If the company requires the CHOP clinician to obtain authorization from the FDA and apply for an IND for Emergency Use, request a Letter of Authorization (LOA) from the medical product developer to treat the patient.</p> <ul style="list-style-type: none"> • The LOA is typically from the regulatory affairs official of the industry (company). FDA may be able to help identify the contact. • If a LOA is not available, submit sufficient information with the FDA Form 3926 (or 1571) for FDA to assure the product’s quality. <p>See also FDA Letter of Authorization template.</p>

☒	Step /Action	Resource / Reference – Descriptions and Further Information
☐	2. Contact CHOP IRB	<p>When there is sufficient time, the investigator should contact the IRB as soon as possible to determine whether or not the IRB can issue concurrence or convene and approve the emergency use. The IRB Chair or Co-Chair typically determines whether there is sufficient time for IRB review, or not. When there is insufficient time, the investigator may exercise the Emergency Exemption from prospective IRB review and must follow the procedures outlined in IRB SOP 802.</p> <p>Follow up discussion with any decisions by email to document the decision and include INDIDE@chop.edu as a recipient so the office is aware of the project. (Note: for Individual Patient INDs for cancer treatments submitted through Project Facilitate, FDA decisions are frequently completed in a matter of hours.)</p> <p>If after discussing the situation with the IRB Chair, there is sufficient time for preparation, submission and review by the IRB and FDA go to the top of Page 4 and follow the Individual Patient Non-Emergency process flow.</p>
☐	3. Contact FDA Request FDA Authorization for Individual Patient Emergency Use	<p>Prepare information for discussion with or submission to the FDA. The reviewer at the FDA will request these details when contact is made with the FDA. Draft a Brief Clinical History of the patient and Treatment Plan using the IRB Protocol/Treatment Plan Template for Single Patient Treatment IND (expanded access) Contact the appropriate FDA review division or organization by telephone (or other rapid means of communication). Contact the IND/IDE Support Office</p>
☐	4. Contact Investigational Drug Service (IDS)	<p>Inform or request assistance from the Investigational Drug Service on logistics for obtaining the product by emailing InvestigationalPharmacy@chop.edu For assistance outside of IDS hours (Monday – Friday 8:00 am to 4:30 pm, excluding CHOP holidays), contact the on-call IDS Pharmacist via Epic Secure Chat (PHL Pharm Investigational).</p> <p>Provide the following as soon as possible to the IDS:</p> <ul style="list-style-type: none"> • Patient information, including planned treatment setting(s) • Treatment Plan or protocol with relevant dosing details • Investigator’s Brochure, or package insert for FDA approved product • Pharmacy Manual (if provided by manufacturer) <p>Safety Data Sheet (required for unapproved products for hazardous drug evaluation)</p>
☐	5. Contact Contracting	<p>If the manufacturer requests a contract, email Contracts (durkanj@chop.edu) to help execute the contract before drug delivery</p>
☐	6. Obtain Informed Consent	<p>Using the CHOP IRB Informed Consent Template for Single Patient Treatment IND or IDE (expanded access) develop a consent for this patient.</p> <ul style="list-style-type: none"> • Use a written consent form. • Obtain Informed Consent from patient or their legally authorized representative per 21 CFR Part 50. • Scan completed signed and dated consent into Epic • Provide a copy of the Informed Consent Form to the patient <p><i>Note: Informed Consent may be obtained prior to requesting FDA emergency use authorization.</i></p>
☐	7. If authorized by FDA, begin treatment	<p>Authorization of the emergency use may be given by an FDA official by telephone (or other means of rapid communication) or email. The investigational drug, biologic, or device may be shipped and treatment of the patient may begin immediately upon FDA authorization that treatment may proceed.</p>

☒	Step /Action	Resource / Reference – Descriptions and Further Information
<input type="checkbox"/>	8. Notify IRB*	Within 5 business days of treatment initiation, notify the IRB . See IRB SOP 802 .
<input type="checkbox"/>	9. Submit Form FDA 3926** within 15 business days of FDA emergency use authorization	Within 15 business days of FDA emergency use authorization, submit Form FDA 3926 (along with the LOA) to FDA via NextGen Portal. For other submission options, contact FDA . IND/IDE Support Office can assist with NextGen submissions to the FDA Instructions for filling out Form FDA 3926 are available online.
<input type="checkbox"/>	10. File Follow-up Report(s)	Submit Form FDA 3926 to FDA electronically. For other submission options, contact FDA .
<input type="checkbox"/>	11. Treatment complete	Once the treatment is completed notify IDS, submit a final report to the IRB and FDA and withdraw the IND
<input type="checkbox"/>	12. Training Requirements	If treatment or follow up will continue past 12 months, and the sponsor-investigator is a CHOP physician then a 1 hour Single Patient IND/IDE Sponsor-Investigator training is required per CHOP policy. Please contact INDIDE@chop.edu to schedule this one time training. If training was previously completed it is not required again. Policy: IND and IDE Sponsorship Requirement & Responsibilities

**In an emergency, where there is not sufficient time to secure IRB review prior to beginning treatment, the emergency use of the investigational drug must be reported to the IRB within 5 working days, as required under 21 CFR 56.104(c).*

***Physicians will still be able to use FDA Forms 1571 “Investigational New Drug Application (IND)” and Form 1572 “Statement of Investigator” for single patient expanded access submissions; however, Form 3926 is developed specifically for these requests and is easier to complete.*

Reference: <https://www.fda.gov/news-events/expanded-access/expanded-access-how-submit-request-forms#Physician>


Individual Patient IND/IDE (Non-Emergency Use) ([21 CFR 312.310](#))

Upon considering an individual patient for treatment under Non-Emergency Use IND, the patient must meet all of the criteria for consideration of treatment under expanded access;

- Patient has a serious or immediately life-threatening disease or condition.
- There is no comparable or satisfactory alternative therapy to diagnose, monitor, or treat the disease or condition.
- Patient enrollment in a clinical trial is not possible.
- Potential patient benefit justifies the potential risks of treatment.
- Providing the investigational medical product will not interfere with investigational trials that could support a medical product’s development or marketing approval for the treatment indication.

Additionally, the manufacturer or developer/supplier of the medical product must agree to provide the product for the proposed use. (Note: As a requirement of the [21st Century Cures Act](#), a company developing investigational drugs shall make its policy regarding evaluating and responding to request for expanded access public and readily available).

The first three steps below can occur in parallel or in very close sequential order.

☒	Step /Action	Resource / Reference – Descriptions and Further Information
☐	<p>1. Contact drug manufacturer</p> <p>Secure agreement to provide product</p> <p>Request Letter of Authorization (LOA)</p>	<p>Check website or contact company to secure agreement of the company to provide the investigational product. If they have their own process for submission or evaluation of requests, follow that process. Obtain an estimated timeframe for when the company can provide delivery of the investigational product.</p> <p>If the company requires the CHOP clinician to obtain authorization from the FDA and apply for an IND for Emergency Use, request a Letter of Authorization (LOA) from the medical product developer to treat the patient.</p> <ul style="list-style-type: none"> • The LOA is typically from the regulatory affairs official of the industry (company). FDA may be able to help identify the contact. • If a LOA is not available, submit sufficient information with the FDA Form 3926 (or 1571) for FDA to assure the product’s quality. <p>See also FDA Letter of Authorization template.</p>
☐	<p>2. Prepare FDA Submission</p> <p><i>(Optionally, have reviewed by IND/IDE Support Office)</i></p> <p>Request FDA Authorization for Individual Patient IND Use</p>	<p>Prepare a Brief Clinical History of the patient and Treatment Plan using the IRB Protocol/Treatment Plan Template for Single Patient Treatment IND</p> <p>Prepare Form FDA Form FDA 3926</p> <p>Prepare ICF using the CHOP IRB Informed Consent Template for Single Patient Treatment IND or IDE</p> <p>Collect IB and LOA from Manufacturer</p> <p>Prepare Cover Letter for the Submission using the IND/IDE Support Template. Include in the cover letter the desired date for initiation of treatment.</p> <p> IND_IDE-069.docx</p>

☒	Step /Action	Resource / Reference – Descriptions and Further Information
☐	3. Submit to FDA to Request Authorization for Individual Patient IND	<p>Once all documents are prepared Submit to FDA</p> <ul style="list-style-type: none"> • Table of Contents • Cover Letter • Form FDA 3926 • Treatment Plan (Protocol) • LOA • IB • References <p>The IND/IDE Support Office can assist with submission of these documents to the FDA via the NextGen Portal for CDER Products or by email for CBER Products.</p>
☐	4. Contact Investigational Drug Service (IDS)	<p>Inform or request assistance from the Investigational Drug Service on logistics for obtaining the product by emailing InvestigationalPharmacy@chop.edu</p> <p>Submit SIFTER Section 1.04 (Drug Information) and provide the following as soon as possible to the IDS:</p> <ul style="list-style-type: none"> • Patient information, including planned treatment setting(s) • Treatment Plan or protocol with relevant dosing details • Investigator’s Brochure, or package insert for FDA approved product • Pharmacy Manual (if provided by manufacturer) <p>Safety Data Sheet (required for unapproved products for hazardous drug evaluation)</p>
☐	5. Contact Contracting	<p>If the manufacturer requests a contract, email Contracts (durkanj@chop.edu) to help execute the contract before drug delivery</p>
☐	6. Respond to any FDA Questions or Comments	<p>If there are any questions or comments address these in a timely manner with the FDA. Contact the IND/IDE Support Office for assistance with responses. The FDA has 30 days to review the IND and provide a decision.</p>
☐	7. FDA Treatment May Proceed	<p>After the 30 day review period has elapsed or the FDA issues a Treatment May Proceed Letter, the treatment of the patient may commence once IRB approval has been obtained and appropriate informed consent completed and documented.</p>
☐	8. Prepare eIRB and Submit	<p>Using the eIRB System prepare the IRB Application. Include the FDA IND Acknowledgement and/or May Proceed Letter in the IRB Application. This may be submitted for review in advance of the FDA authorization for treatment but may have stipulations which need to be addressed prior to initiation of treatment of the patient</p>
☐	9. Obtain Informed Consent	<p>Using the CHOP IRB Approved Consent</p> <ul style="list-style-type: none"> • Use a written consent form approved by the IRB • Obtain Informed Consent from patient or their legally authorized representative per 21 CFR Part 50. • Scan completed signed and dated consent into Epic. • Provide a copy of the Informed Consent Form to the patient. <p><i>Note: Informed Consent may be obtained prior to requesting FDA emergency use authorization.</i></p>
☐	10. Treat Patient	<p>According to the Treatment Plan. If there is need to change the Treatment Plan, file an amendment with the FDA and IRB to modify the Treatment Plan before initiating the change.</p>
☐	11. File Follow-up Report(s)	<p>If the patient is treated in an ongoing manner for repeated dosing according to the treatment plan for a year or more, Annual Reports must be submitted to the FDA and Continuing Reviews submitted to the IRB. Adverse events must be submitted to the FDA using Form FDA 3926 and if applicable Form FDA 3500A</p>

☒	Step /Action	Resource / Reference – Descriptions and Further Information
☐	12. Treatment Complete	Once the treatment is completed, Notify IDS, submit a final report to the IRB and FDA and withdraw the IND
☐	13. Training Requirements	<p>If treatment or follow up will continue past 12 months, and the sponsor-investigator is a CHOP physician then a 1 hour Single Patient IND/IDE Sponsor-Investigator training is required per CHOP policy. Please contact INDIDE@chop.edu to schedule this one time training. If training was previously completed it is not required again.</p> <p>Policy: IND and IDE Sponsorship Requirement & Responsibilities</p>

Reference: <https://www.fda.gov/news-events/expanded-access/expanded-access-how-submit-request-forms#Physician>

References



IRB Process Flow for Individual Patient Emergency and Non-Emergency Use
<https://www.research.chop.edu/services/emergency-use>

Investigator Responsibilities When Exercising the Emergency Exemption



Links for FDA sIND Submission Documents and Information

FDA Links

[Expanded Access – How to Submit a Request \(Forms\)](#) [Content Current as of 11/9/2022] (accessed 4/18/2023)

[For Physicians: How To Request Single Patient Expanded Access \(Compassionate Use”\)](#) [Content Current as of 3/26/2020] (accessed 4/18/2023)

[Expanded Access – Information for Physicians](#) [Content Current as of 11/7/2022] (accessed 4/18/2023)

[Form FDA 3926](#) (version 7/2022) (accessed 4/18/2023)

[Form FDA 3926 Instructions](#) (version 11/2020) (accessed 4/18/2023)

[Expanded Access to Investigational Drugs for Treatment Use—Questions and Answers](#) [Content Current as of 11/1/2022] (accessed 4/18/2023)

[Expanded Access Categories for Drugs \(Including Biologics\)](#) [Content Current as of 1/4/2018] (accessed 4/18/2023)

[An Overview of FDA’s Expanded Access Program with a Focus on Individual Patient Expanded Access – Series of Educational Webinars](#) [Content Current as of 7/18/18] (accessed 4/18/2023)

CHOP Links

[Protocol/Treatment Plan Template for Single Patient Treatment IND \(expanded access\)](#) version 3/14/2022 (accessed 4/18/2023)

[IRB Protocol Templates](#) - Link to IRB approved template sIND Treatment Plan

[Consent Template for Single Patient Treatment IND or IDE \(expanded access\)](#) version 12/6/2019 (accessed 4/18/2023)

[Link to IRB approved template ICF:](#)
Choose: ICF for single patient IND or IDE

[Policy: IND and IDE Sponsorship Requirement & Responsibilities](#)

External Links

[Expanded Requirements for Expanded Access: The 21st Century Cures Act Places New Requirements on Manufacturers and Distributors](#)

