Gold Coast University Hospital (GCUH) - Intensive Care

Local Services Offered:

Clinical trials site;Investigator Initiated Trials;Satellite Site;Trial Patient Recruitment;Treatment of patients;Completion of study documentation as per ICH GCP and contract Details: This PDF complements the information found in the CSV generated by this website with additional site information.

| Facility Details: | |
|---|---|
| Please provide your Facility Website. | www.goldcoast.health.qld.gov.au/hospitals-and-centres/gold-coast- |
| | university-hospital |
| What Department is your Trial Site? | Medicine |
| (Queensland Health HHS- See List of | |
| Services and Levels-Clinical Services | |
| Capability Framework) | |
| Is your Facility affiliated with a | Yes |
| government agency or part of a | |
| government funded health service? | |
| Is your facility/organisation a Life | No |
| Sciences Queensland (LSQ) Member? | |
| Do you have Affiliated Research Sites | Yes |
| or Satellite Sites/Clinics? A Satellite | |
| Site is a secondary location where the | |
| investigator sees clinical trial | |
| subjects. Usually this is the same | |
| investigator who sees subjects at the | |
| primary site location. | |
| Other facility details | Robina |
| Please provide other areas of expertise | Sepsis |
| for your Facility. | |
| Provide the list of Sub-Therapeutic | Critical Care |
| Areas for your Facility. | |
| Does your Clinical Trial site undertake | Yes |
| any patient recruitment? | |
| | |
| IRB/ERB/Ethics Committee: | |
| Does your Facility perform HREC | Yes |
| (IRB/ERB/Ethics) Committee | |
| submissions? | |
| Does your Facility have a dedicated | No |
| department or group to perform HREC | |
| (IRB/ERB/ETHICS) Committee | |
| submissions? | |
| | |

| Tymas of LIDEC (IDD/EDD/ETLIJCS) | |
|--|------------------------------------|
| Types of HREC (IRB/ERB/ETHICS) Committee that are used | Local;Central Acting as Local |
| What is the meeting frequency of your | Monthly, 2 per week with NMA |
| Local IRB/ERB/Ethics Committee? | iviolitily, 2 per week with twiviA |
| Local IND/END/Ethics Committee: | |
| Does your Facility have other review | No |
| boards that need to approve the study | |
| prior to HREC (IRB/ERB/Ethics) | |
| Committee submission? | |
| For example, scientific, radiation | |
| safety committees, or others. | |
| Does the HREC Committee require | Yes |
| payment prior to the release of final | |
| approval documents? | |
| | |
| Consent: | |
| Does your Facility have a written | Yes |
| SOP/Policy/Procedure for Informed | |
| Consent? | |
| Does your Facility have a written | Yes |
| SOP/Policy/Procedure for Minor | |
| Assent for paediatric populations? | |
| Does your Facility have a written | Yes |
| SOP/Policy/Procedure for Other | |
| vulnerable populations? | |
| Does your Facility have access to | Yes |
| translators and translation support for | |
| study conduct (e.g. consent, study- | |
| specific instruction)? | |
| | |
| Training: | |
| Does your Facility have a training | Yes |
| program for the research staff? | |
| Does your Facility training course | Yes |
| content include GCP? | |
| If your facility uses external program | IQVIA |
| course/s. Please provide the program | |
| course/s name. | ly. |
| Do you have a process or program in | Yes |
| place to retrain research staff when a | |
| protocol is amended? | |
| | |
| Facility And Equipment: | |
| Facility Capabilities: | N/ |
| Is your Facility capable of | Yes |
| administering infusions? | |

| Can your Facility support in- patient | Yes |
|--|--|
| admissions for research studies? | |
| Can your Facility support patient | Yes |
| visits on weekends? | |
| Does your Facility have the ability to | Yes |
| collect and store | |
| PK/PD specimens? | |
| Does your Facility have the ability to | Yes |
| collect PK/PD samples beyond normal | |
| business hours? | |
| Does your Facility typically allow the | Yes |
| collection of Pharmacogenomic (PGX) | |
| samples for research purposes? | |
| Is your Facility adequately staffed to | Yes |
| support studies with both blinded and | |
| unblinded Investigational Product? | |
| Does the Facility have storage space | Yes |
| for Study-Related materials (e.g. Lab | |
| Kits, Patient Materials, etc.)? | |
| | |
| Equipment: | |
| Does your Facility have the necessary | Yes |
| equipment to treat medical | |
| emergencies (for example crash/code | |
| cart)? | |
| Does your Facility have an SOP or | Yes |
| process that ensures routine calibration | |
| and maintenance of general | |
| equipment? Examples of general | |
| equipment include: scale, pulse | |
| oximeter, stadiometer, | |
| sphygmomanometer, etc.? | |
| Please list any additional equipment. | Interventional/Angio and Operating Suites |
| | |
| IT Capabilities: | |
| Does your Facility have computers that | Yes |
| are dedicated to | |
| research studies? | |
| What type of computer operating | Windows (Windows XP; Windows 7; Windows 10; etc) |
| system(s) does your institution use to | |
| support studies? | |
| What browser does your facility | Edge |
| use? | |
| Does the Facility have access to | Yes |
| local IT support? | |

| Does your Facility limit or prohibit | Yes, CRA have read-only access |
|--|---|
| access and use of external web-based | · |
| tools or sites for clinical research (E.g. | |
| web portals to submit documents to | |
| I - | |
| sponsors or CROs)? | |
| Please indicate all equipment that will | Phone;Copy Machines;Internet Access |
| be available to Monitors | |
| | |
| Labs: | |
| | Yes |
| Does your Facility use a local lab? | |
| Please provide the local lab details. | Pathology Queensland-Gold Coast |
| Does your Facility use a private lab | Yes |
| service? | |
| Please provide the private lab details. | SNP, QML |
| | |
| IP Storage Details: | |
| IP Recipient Name | Gold Coast University Hospital Pharmacy |
| Is the Investigational Product Storage | Yes |
| Room secured with | 1 65 |
| | |
| controlled access? | |
| Does the Investigational Product | Yes |
| Storage Room have Backup Power? | |
| Does your facility have a written | Yes |
| SOP/Policy/Procedure for the | |
| destruction of Investigational Product? | |
| destruction of investigational floudet! | |
| Dog the Facility have the stations | Yes |
| Does the Facility have the ability to | I es |
| handle radio-labelled Investigational | |
| Products? | |
| Does your Facility have the ability to | Yes |
| manage on-site or off- site destruction | |
| of controlled substances when | |
| appropriate? | |
| Do you provide your Satellite Site(s) | Yes |
| | 1 65 |
| with a dedicated inventory of | |
| Investigational Product? | |
| Does your Facility have a written | N/A |
| SOP/Policy/Procedure to ensure that | |
| Investigational Product is appropriately | |
| maintained during transportation to | |
| Satellite Site(s)? | |
| Satellite Site(s): | |
| Course Door-serter | |
| Source Documents: | |
| Does your Facility have patient record | Yes |
| archiving on-site? | |
| Provide Location name and address of | |
| any offsite archives. | Grace |
| | |

| What Electronic Data Capture (EDC) | Oracle Inform;Medidate Rave;Oracle Remote Data | |
|--|---|--|
| systems has your Facility used for | Capture (RDC); Auslab | |
| clinical trials? | | |
| Please provide other EDC Systems. | iMedidata; RedCap; IVRS/IWRS | |
| | | |
| Electronic Medical Records (EMR) /Electronic Health Records (EHR): | | |
| Do you have Electronic Health | Yes | |
| Records (EHR)/ Electronic | | |
| Medical Records (EMR)? | | |
| Please list any access | Cerner ieMR Solution in use at site; includes | |
| limitations/requirements for the | PowerTrials; monitors require login profile to access the | |
| Electronic Medical Records. | system. Onboarding of Clinical Informatics Specialist | |
| | (Research) from October 2019. | |