藥品優良臨床試驗作業指引

（Guidance for Good Clinical Practice）

衛生福利部

中華民國 109 年 9 月

前言

為確保上市藥品之安全性及有效性，藥品登記須有實證及臨床試驗資料為依據。國際醫藥法規協合會（International Council for Harmonisation of Technical Requirements for Pharmaceuticals for Human Use, ICH）於1996年發布「E6 GOOD CLINICAL PRACTICE (GCP)」作為臨床試驗執行與管控之基準，提供藥品臨床試驗設計、執行、紀錄與報告等實務操作上的倫理與科學及品質標準，為世界各國所參採的國際規範。

因應實務發展所需不斷更新，ICH於2016年公布GCP第二版(ICH E6 R2)，其中包含一個綜合附錄，以鼓勵在臨床試驗設計，進行，監督，記錄和報告方面實施改進且更有效的方法，同時繼續確保對受試者的保護和試驗結果的可靠性。其目的在於強化臨床試驗之品質管控，以確保受試者的安全與試驗資料之可信度。

我國最初於八十五年公告「藥品優良臨床試驗規範(Good Clinical Practice: GCP)」，並於九十一年參考ICH E6 GOOD CLINICAL PRACTICE (GCP) ，再次修訂藥品優良臨床試驗規範。又於九十四年修訂「藥品優良臨床試驗準則」，規範臨床試驗設計、執行、紀錄與報告之倫理與科學品質，並確保受試者的權利、安全與福祉及臨床試驗數據的可信度，係國內臨床試驗之執行與管理之法規依據。前述準則係依據藥事法第42條所訂定，於一零九年修訂名稱為「藥品優良臨床試驗作業準則」，作為核發變更及展延藥物許可證之基準。

為建構與國際協和之藥品臨床試驗管理規範，參據 ICH 於2016年12月修訂之「INTEGRATED ADDENDUM TO ICH E6(R1): GUIDELINE FOR GOOD CLINICAL PRACTICE E6(R2)」訂定本指引，以作前述作業準則之補充說明。本指引係比照ICH E6 (R2) 的呈現方式進行編排，並採中英文並列，以使含義更清楚。

遵循本指引之標準可確保受試者的權利、安全與福祉，使臨床試驗執行與赫爾辛基宣言的原則相符，並確保臨床試驗數據的可信度，及有助提升臨床試驗執行之品質及效率，本指引未來將參考ICH E6最新文件之制訂而更新修訂，俾供試驗相關人員實務操作之參考。

目　錄

正文----------8

緒論----------8

第1章、名辭解釋----------10

第2章、基本原則----------28

第3章、人體試驗委員會\獨立倫理委員會----------30

3.1、責任----------31

3.2、組成、功能及運作----------34

3.3、作業程序----------35

3.4、紀錄----------38

第4章、試驗主持人----------38

4.1、試驗主持人的資格與認定----------38

4.2、適當的資源----------39

4.3、受試者的醫療照護----------41

4.4、與人體試驗委員會\獨立倫理委員會之聯繫----------42

4.5、試驗計畫書之遵從性----------43

4.6、試驗藥品----------46

4.7、隨機分配過程及盲性解碼----------46

4.8、試驗之受試者同意書----------55

4.9、紀錄和報告----------56

4.10、進度報告----------58

4.11、安全性通報----------59

4.12、試驗提早中止或暫時停止----------60

4.13、試驗主持人之結案報告----------61

第5章、試驗委託者----------62

5.0、品質管理----------62

5.1、品質保證及品質管制----------66

5.2、受託研究機構----------67

5.3、醫療專業人員----------68

5.4、試驗設計----------68

5.5、試驗管理，數據處理，紀錄保持----------69

5.6、試驗主持人之選擇----------74

5.7、責任分配----------75

5.8、受試者及試驗主持人之報償----------75

5.9、財務----------76

5.10、向主管機關通知\申請----------76

5.11、人體試驗委員會\獨立倫理委員會之審查確認----------77

5.12、試驗藥品的資訊----------78

5.13、試驗藥品之製造、包裝、標籤及編碼----------78

5.14、試驗藥品之供給及處理----------80

5.15、紀錄檢視----------82

5.16、安全性資料----------83

5.17、藥品不良反應報告----------83

5.18、監測----------84

5.19、稽核----------94

5.20、不遵從性----------96

5.21、提早終止或暫停試驗----------97

5.22、臨床試驗\研究報告----------97

5.23、多機構合作臨床試驗----------98

第6章、臨床試驗計畫書及其變更----------99

6.1、一般資訊----------99

6.2、背景資訊----------100

6.3、試驗目標及目的----------101

6.4、試驗設計----------101

6.5、受試者之納入及退出----------103

6.6、給藥及處置方式----------104

6.7、療效評估----------104

6.8、安全性評估----------104

6.9、統計方法----------105

6.10、原始數據\文件之直接檢視----------106

6.11、品質管制及品質保證----------106

6.12、倫理考量----------106

6.13、資料處理及紀錄保存----------106

6.14、財物及保險----------107

6.15、發表著作原則----------107

6.16、補充資料----------107

第7章、主持人手冊----------107

7.1、緒論----------107

7.2、通則----------110

7.3、主持人手冊之內容----------111

7.4、附錄一----------120

7.5、附錄二----------120

第8章、執行臨床試驗之必要文件----------121

8.1、緒論----------121

8.2、臨床試驗開始前----------123

8.3、臨床試驗執行期間----------123

8.4、在試驗完成或終止後----------123

第8章之附表----------124

正文

緒論 INTRODUCTION	
藥品優良臨床試驗作業(Good Clinical Practices, 下稱 GCP)係適用人類受試者參與之臨床試驗，其用於設計、執行、紀錄與報告之倫理與科學品質的國際標準。依循此標準可確保受試者的權利、安全與福祉，使臨床試驗執行與赫爾辛基宣言的原則相符，並確保臨床試驗數據的可信度。	Good Clinical Practice (GCP) is an international ethical and scientific quality standard for designing, conducting, recording and reporting trials that involve the participation of human subjects. Compliance with this standard provides public assurance that the rights, safety and well-being of trial subjects are protected, consistent with the principles that have their origin in the Declaration of Helsinki, and that the clinical trial data are credible.
ICH GCP 目的係提供歐盟 (EU)、日本及美國一致的標準，以促進該等區域之法規主管機關相互接受臨床試驗數據。	The objective of this ICH GCP Guideline is to provide a unified standard for the European Union (EU), Japan and the United States to facilitate the mutual acceptance of clinical data by the regulatory authorities in these jurisdictions.
本指引係參考歐盟、日本、美國、澳洲、加拿大、北歐地區國家及世界衛生組織 (WHO) 之現行 GCP 所制定。	The guideline was developed with consideration of the current good clinical practices of the European Union, Japan, and the United States, as well as those of Australia, Canada, the Nordic countries and the World Health Organization (WHO).
欲向主管機關提交之臨床試驗數據，應遵從本指引。	This guideline should be followed when generating clinical trial data that are intended to be submitted to regulatory authorities.

本指引所採納的原則，亦適用於其他對人類安全與福祉產生影響之臨床研究。	The principles established in this guideline may also be applied to other clinical investigations that may have an impact on the safety and well-being of human subjects.
附錄	**ADDENDUM**
自編撰 ICH GCP 指引以來，臨床試驗的規模、複雜度和成本隨之增加。科技和風險管理的演進，增進試驗效率的機會，亦聚焦相關程序之執行。建立 ICH E6 (R1)時，基本上是以紙本方式記錄臨床試驗，現今使用電子數據記錄及報告，促進其他執行方式之產生。例如，中央監測(系統遠端監測)能提供比以往更大的優勢。	Since the development of the ICH GCP Guideline, the scale, complexity, and cost of clinical trials have increased. Evolutions in technology and risk management processes offer new opportunities to increase efficiency and focus on relevant activities. When the original ICH E6(R1) text was prepared, clinical trials were performed in a largely paper-based process. Advances in use of electronic data recording and reporting facilitate implementation of other approaches. For example, centralized monitoring can now offer a greater advantage, to a broader range of trials than is suggested in the original text.
因此，本次修訂 ICH E6 (R2)係為促使應用改進且更有效率的方式進行臨床試驗之設計、執行、監督、紀錄及報告。同時，持續確保受試者保護和試驗結果的可靠性。有關旨在提高臨床試驗品質和效率為目的之電子紀錄及必要文件之標準，亦一併更新。	Therefore, this guideline has been amended to encourage implementation of improved and more efficient approaches to clinical trial design, conduct, oversight, recording and reporting while continuing to ensure human subject protection and reliability of trial results. Standards regarding electronic records and essential documents intended to

	increase clinical trial quality and efficiency have also been updated.
參照本指引時，應同時參考其他與臨床試驗相關的 ICH 指引（例如：E2A（臨床安全性數據管理）、E3（藥品臨床試驗報告）、E7（老年族群）、E8（臨床試驗一般性原則）、E9（統計指導原則）和 E11（小兒族群）。	This guideline should be read in conjunction with other ICH guidelines relevant to the conduct of clinical trials (e.g., E2A (clinical safety data management), E3 (clinical study reporting), E7 (geriatric populations), E8 (general considerations for clinical trials), E9 (statistical principles), and E11 (pediatric populations)).
本指引增訂的附錄為提供歐盟、日本、美國、加拿大和瑞士一致採納的標準，以促進該等法規主管機關相互接受臨床試驗數據。如果 E6 (R1)及 E6 (R2)附錄之內容間有任何衝突，應優先適用 E6 (R2)附錄。	This ICH GCP Guideline Integrated Addendum provides a unified standard for the European Union, Japan, the United States, Canada, and Switzerland to facilitate the mutual acceptance of data from clinical trials by the regulatory authorities in these jurisdictions. In the event of any conflict between the E6(R1) text and the E6(R2) addendum text, the E6(R2) addendum text should take priority.
第 1 章、名辭解釋 (GLOSSARY)	
1.1 藥品不良反應 在新藥或其新用法，特別是治療劑量可能尚未確立的未上市前臨床試驗中，所有因藥品產生之有害且未預期反應，無論在任何劑量下，皆視為藥品不良反應。對藥品的反應，指的是不良事件與藥品間至少有合理可能	1.1 Adverse Drug Reaction (ADR) In the pre-approval clinical experience with a new medicinal product or its new usages, particularly as the therapeutic dose(s) may not be established: all noxious and unintended responses to a medicinal product related to any dose should be

性的因果關係，如：無法排除其因果相關性。 關於已上市的藥品：在正常劑量下，用於預防、診斷或治療，或為改善生理功能，卻發生有害與未預期的反應。(參閱 ICH 臨床安全性數據管理指引：快速通報之定義及標準)	considered adverse drug reactions. The phrase responses to a medicinal product means that a causal relationship between a medicinal product and an adverse event is at least a reasonable possibility, i.e. the relationship cannot be ruled out. Regarding marketed medicinal products: a response to a drug which is noxious and unintended and which occurs at doses normally used in man for prophylaxis, diagnosis, or therapy of diseases or for modification of physiological function (see the ICH Guideline for Clinical Safety Data Management: Definitions and Standards for Expedited Reporting).
1.2 不良事件 受試者使用藥品後的任何不良情況，其不一定與該治療有因果關係。因此不良事件可為使用藥品 (試驗藥品) 所產生的任何不良與未預期徵候 (包括檢驗異常)、症狀、或疾病，無論其是否與藥品 (試驗藥品) 有關。(參閱 ICH 臨床安全性數據管理指引：快速通報之定義及標準)	1.2 Adverse Event (AE) Any untoward medical occurrence in a patient or clinical investigation subject administered a pharmaceutical product and which does not necessarily have a causal relationship with this treatment. An adverse event (AE) can therefore be any unfavourable and unintended sign (including an abnormal laboratory finding), symptom, or disease temporally associated with the use of a medicinal (investigational) product, whether or not related to the medicinal (investigational) product (see the ICH Guideline for Clinical Safety Data

	Management: Definitions and Standards for Expedited Reporting).
1.3 變更（對於臨床試驗計畫書） 參閱試驗計畫書變更。	1.3Amendment (to the protocol) See Protocol Amendment.
1.4 相關法規要求 任何有關執行藥品臨床試驗之法律與行政命令。	1.4 Applicable Regulatory Requirement(s) Any law(s) and regulation(s) addressing the conduct of clinical trials of investigational products.
1.5 同意證明（關於人體試驗委員會\獨立倫理委員會） 臨床試驗計畫經人體試驗委員會\獨立倫理委員會審查通過，可在人體試驗委員會\獨立倫理委員會、醫療機構、GCP 與相關法規要求下進行。	1.5Approval (in relation to Institutional Review Boards) The affirmative decision of the IRB that the clinical trial has been reviewed and may be conducted at the institution site within the constraints set forth by the IRB, the institution, Good Clinical Practice (GCP), and the applicable regulatory requirements.
1.6 稽核 有系統且獨立地檢視臨床試驗相關活動與文件，以決定臨床試驗相關活動的進行、數據紀錄、分析與報告是否均依照試驗計畫書、試驗委託者的標準作業程序、GCP 與相關法規的要求。	1.6 Audit A systematic and independent examination of trial related activities and documents to determine whether the evaluated trial related activities were conducted, and the data were recorded, analyzed and accurately reported according to the protocol, sponsor's standard operating procedures (SOPs), Good Clinical Practice (GCP), and the applicable regulatory requirement(s).
1.7 稽核證書 稽核員確認已執行稽核的證明。	1.7 Audit Certificate A declaration of confirmation by the auditor

	that an audit has taken place.
1.8 稽核報告 試驗委託者委託之稽核員所寫的稽核結果書面報告。	1.8Audit Report A written evaluation by the sponsor's auditor of the results of the audit.
1.9 稽核路徑 可重建事件發生過程的文件。	1.9 Audit Trail Documentation that allows reconstruction of the course of events.
1.10 盲性/遮蔽 讓參與試驗的一方或多方不知道治療分配的步驟。通常單盲是指受試者不知道治療藥物為何，雙盲是指受試者、試驗主持人、監測者與在某些情況下，數據分析者亦不清楚治療分配為何。	1.10Blinding/Masking A procedure in which one or more parties to the trial are kept unaware of the treatment assignment(s). Single-blinding usually refers to the subject(s) being unaware, and double-blinding usually refers to the subject(s), investigator(s), monitor, and, in some cases, data analyst(s) being unaware of the treatment assignment(s).
1.11 個案報告表 記錄試驗計畫書中要求的資訊，將每位受試者的情形以印刷、光學或電子文件的方式報告給試驗委託者。	1.11 Case Report Form (CRF) A printed, optical, or electronic document designed to record all of the protocol required information to be reported to the sponsor on each trial subject.
1.12 臨床試驗/研究 任何在人身上執行的研究，用來發現或證明試驗藥品在臨床、藥理與\或其他藥效學作用；與\或確認試驗藥品的不良反應；與\或探討試驗藥品的吸收、分佈、代謝、與排 泄，以確認其安全性與\或療效。臨床試驗與臨床研究為同義字。	1.12 Clinical Trial/Study Any investigation in human subjects intended to discover or verify the clinical, pharmacological and/or other pharmacodynamic effects of an investigational product(s), and/or to identify any adverse reactions to an investigational product(s), and/or to study absorption,

	distribution, metabolism, and excretion of an investigational product(s) with the object of ascertaining its safety and/or efficacy. The terms clinical trial and clinical study are synonymous.
1.13 臨床試驗/研究報告 於人身上的治療、預防或診斷製劑之臨床試驗的書面記載。其中有關臨床與統計的敘述、呈現與分析，已整合成一份完整報告書。(參閱 ICH 指引「藥品臨床試驗報告之格式及內容」)	1.13 Clinical Trial/Study Report A written description of a trial/study of any therapeutic, prophylactic, or diagnostic agent conducted in human subjects, in which the clinical and statistical description, presentations, and analyses are fully integrated into a single report (see the ICH Guideline for Structure and Content of Clinical Study Reports).
1.14 對照組（藥品） 臨床試驗中做為參考比較的藥品為試驗藥品、已上市藥品(即主動控制)或安慰劑。	1.14 Comparator (Product) An investigational or marketed product (i.e., active control), or placebo, used as a reference in a clinical trial.
1.15 遵從性（與試驗相關） 遵從所有與試驗相關、GCP 與相關法規要求。	1.15 Compliance (in relation to trials) Adherence to all the trial-related requirements, Good Clinical Practice (GCP) requirements, and the applicable regulatory requirements.
1.16 保密 避免將試驗委託者的機密資料或受試者的身分洩露給未經授權的人員。	1.16 Confidentiality Prevention of disclosure, to other than authorized individuals, of a sponsor's proprietary information or of a subject's identity.
1.17 契約	1.17 Contract

參與的雙方或多方人員，簽署書面並載明日期的協定，包括工作內容與義務甚至財務事項的安排。試驗計畫書可作為契約的基礎。	A written, dated, and signed agreement between two or more involved parties that sets out any arrangements on delegation and distribution of tasks and obligations and, if appropriate, on financial matters. The protocol may serve as the basis of a contract.
1.18 協調委員會 試驗委託者可成立委員會，以協調多機構臨床試驗的執行。	1.18 Coordinating Committee A committee that a sponsor may organize to coordinate the conduct of a multicenter trial.
1.19 協調試驗主持人 多機構合作臨床試驗的試驗主持人之一，主要負責協調多機構臨床試驗中不同試驗機構之試驗主持人。	1.19 Coordinating Investigator An investigator assigned the responsibility for the coordination of investigators at different centres participating in a multicentre trial.
1.20 受託研究機構 和試驗委託者簽約的個人或機構 (商業、學術、或其他)，執行試驗委託者部份或更多與試驗相關的任務與職責。	1.20 Contract Research Organization (CRO) A person or an organization (commercial, academic, or other) contracted by the sponsor to perform one or more of a sponsor's trial-related duties and functions.
1.21 直接檢視 為評估臨床試驗而准予檢閱、分析、證明與再造重要的紀錄與報告。任何直接可檢視的團體 (例如：國內與國外主管機關、試驗委託者與稽核員)，應在相關法規要求的約束內採取合理的預防措施，來維持受試者身分與試驗委託者專利資料的機密性。	1.21Direct Access Permission to examine, analyze, verify, and reproduce any records and reports that are important to evaluation of a clinical trial. Any party (e.g., domestic and foreign regulatory authorities, sponsor's monitors and auditors) with direct access should take all reasonable precautions within the

	constraints of the applicable regulatory requirement(s) to maintain the confidentiality of subjects' identities and sponsor's proprietary information.
1.22 建檔 所有文件有關描述或記錄試驗的方法、執行與\或結果、影響試驗的因素與所採取的行動 (可用任何形式，不限於書面、電子與光學紀錄；掃瞄，X-光與心電圖)。	1.22 Documentation All records, in any form (including, but not limited to, written, electronic, magnetic, and optical records, and scans, x-rays, and electrocardiograms) that describe or record the methods, conduct, and/or results of a trial, the factors affecting a trial, and the actions taken.
1.23 必要資料 可用來評估試驗的執行與數據品質的資料（參閱 ICH E6(R2) 第 8 章執行臨床試驗的必要資料）。	1.23 Essential Documents Documents which individually and collectively permit evaluation of the conduct of a study and the quality of the data produced (see 8. Essential Documents for the Conduct of a Clinical Trial).
1.24 藥品優良臨床試驗作業（GCP） 臨床試驗設計、執行、監測、稽核、紀錄、分析、報告之標準，可確保數據與所報告的結果均為可信與正確，受試者的權利、完整性、與身份機密均被保護。	1.24 Good Clinical Practice (GCP) A standard for the design, conduct, performance, monitoring, auditing, recording, analyses, and reporting of clinical trials that provides assurance that the data and reported results are credible and accurate, and that the rights, integrity, and confidentiality of trial subjects are protected.
1.25 獨立數據監測委員會 (數據與安全性監測小組、監測委員會、數據監	1.25 Independent Data-Monitoring Committee (IDMC) (Data and Safety

測委員會）試驗委託者設立的獨立數據監測委員會用來定期評估試驗進度、安全性數據與重要的療效指標，並建議試驗委託者是否繼續、修正或停止試驗。	Monitoring Board, Monitoring Committee, Data Monitoring Committee) An independent data-monitoring committee that may be established by the sponsor to assess at intervals the progress of a clinical trial, the safety data, and the critical efficacy endpoints, and to recommend to the sponsor whether to continue, modify, or stop a trial.
1.26 公平見證人 為非試驗相關人員，且不受參與該試驗之相關人員的不當影響，假若受試者或受試者法定代理人不識字，其會參與受試者同意書簽署過程並閱讀受試者同意書與其他提供給受試者的書面資料。	1.26 Impartial Witness A person, who is independent of the trial, who cannot be unfairly influenced by people involved with the trial, who attends the informed consent process if the subject or the subject's legally acceptable representative cannot read, and who reads the informed consent form and any other written information supplied to the subject.
1.27 獨立倫理委員會 由具醫學\科學背景之專業人員與非醫學\非科學背景之會員組成的獨立團體 (審查小組或委員會、機構的、區域的、國家的或超國家的)，其責任為保護受試者的權利、安全與福祉。審查試驗計畫書、包括試驗主持人的資格、設備、與要給受試者簽署受試者同意書之相關文件，並核准\提出贊同意見。儘管獨立倫理委員會的法律狀態、組成、運作與法規要求，每個國家可能不同，但應能讓獨立倫	1.27 Independent Ethics Committee (IEC) An independent body (a review board or a committee, institutional, regional, national, or supranational), constituted of medical professionals and non-medical members, whose responsibility it is to ensure the protection of the rights, safety and well-being of human subjects involved in a trial and to provide public assurance of that protection, by, among other things, reviewing and approving / providing favourable opinion on, the trial protocol, the

理委員會依照本指引所描述藥品優良臨床試驗作業運作。 由具醫學專業及非醫學專業人員所組成之獨立團體 (一個審查小組或委員會，不論是機構的、區域的、國家的或跨國的) ，其職責為確保參與試驗之受試者，其權利、安全與福祉受到保護，並藉由包括對試驗計畫書、試驗主持人、試驗機構之適當性及用於取得與記錄受試者告知後同意之方法與文件進行審查及核准，向大眾確保前揭保護之落實。 有關獨立倫理委員會之法律地位、組成、功能、運作方式及法律要求，各國可能有所不同，但應允許獨立倫理委員會在符合本指引內容下採取行動。	suitability of the investigator(s), facilities, and the methods and material to be used in obtaining and documenting informed consent of the trial subjects. The legal status, composition, function, operations and regulatory requirements pertaining to Independent Ethics Committees may differ among countries, but should allow the Independent Ethics Committee to act in agreement with GCP as described in this guideline.
1.28 受試者同意書 在告知受試者並讓其了解將參與之臨床試驗的相關訊息，與決定是否參與試驗的所有情況後，其自願確認他或她願意參加試驗的過程。受試者同意書應使用書面格式，並經簽署及載明日期。	1.28 Informed Consent A process by which a subject voluntarily confirms his or her willingness to participate in a particular trial, after having been informed of all aspects of the trial that are relevant to the subject's decision to participate. Informed consent is documented by means of a written, signed and dated informed consent form.
1.29 查核 主管機關正式檢閱其認為與臨床試	1.29 Inspection The act by a regulatory authority(ies) of

驗相關的檔案、設備、紀錄、與其他可能在試驗機構、試驗委託者與\或受託研究機構之資源，或其他主管機關認為與臨床試驗相關之資源。	conducting an official review of documents, facilities, records, and any other resources that are deemed by the authority(ies) to be related to the clinical trial and that may be located at the site of the trial, at the sponsor's and/or contract research organization's (CRO's) facilities, or at other establishments deemed appropriate by the regulatory authority(ies).
1.30 醫療機構 任何執行臨床試驗的公立或私立機構包括醫學或牙醫設施。	1.30 Institution (medical) Any public or private entity or agency or medical or dental facility where clinical trials are conducted.
1.31 人體試驗委員會 由具醫學、科學及非科學背景之成員所組成的獨立團體，其職責在於對試驗計畫書與其變更，以及取得與記錄受試者告知後同意之方法與文件進行審查、核准及持續審查，以確保受試者之權利、安全與福祉受到保護。	1.31 Institutional Review Board (IRB) An independent body constituted of medical, scientific, and non-scientific members, whose responsibility is to ensure the protection of the rights, safety and well-being of human subjects involved in a trial by, among other things, reviewing, approving, and providing continuing review of trial protocol and amendments and of the methods and material to be used in obtaining and documenting informed consent of the trial subjects.
1.32 臨床試驗/研究期中報告 執行臨床試驗期間，所進行的分析結果與評估報告。	1.32 Interim Clinical Trial/Study Report A report of intermediate results and their evaluation based on analyses performed

	during the course of a trial.
1.33 試驗藥品 臨床試驗中用來試驗之藥品或當做參考之活性成分製劑或安慰劑，包括已上市藥品使用於與其核准劑型不同的用途或裝配(配方或包裝)或使用於尚未核准的適應症或用於獲得有關核准用途的進一步資料。	1.33 Investigational Product A pharmaceutical form of an active ingredient or placebo being tested or used as a reference in a clinical trial, including a product with a marketing authorization when used or assembled (formulated or packaged) in a way different from the approved form, or when used for an unapproved indication, or when used to gain further information about an approved use.
1.34 試驗主持人 在試驗機構執行臨床試驗的負責人。若試驗機構中以團隊的方式執行試驗，則該團隊的負責人為試驗主持人，亦可稱為總主持人。亦可參閱協同試驗主持人。	1.34 Investigator A person responsible for the conduct of the clinical trial at a trial site. If a trial is conducted by a team of individuals at a trial site, the investigator is the responsible leader of the team and may be called the principal investigator. See also Subinvestigator.
1.35 試驗主持人\機構 指受相關法規要求的試驗主持人與\或醫療機構。	1.35 Investigator/Institution An expression meaning "the investigator and/or institution, where required by the applicable regulatory requirements".
1.36 主持人手冊 有關用於人身上的相關研究之試驗藥品之臨床與非臨床數據的編輯物。（參閱第7章「主持人手冊」）。	1.36 Investigator's Brochure A compilation of the clinical and nonclinical data on the investigational product(s) which is relevant to the study of the investigational product(s) in human subjects (see 7. Investigator's Brochure).

1.37 法定代理人 法律授權下可代替受試者同意參與臨床試驗的個人、法人的或其他的團體。	1.37 Legally Acceptable Representative An individual or juridical or other body authorized under applicable law to consent, on behalf of a prospective subject, to the subject's participation in the clinical trial.
1.38 監測 監督臨床試驗進度與確保臨床試驗有依照臨床試驗計畫書、標準作業程序、GCP 與相關法令規定之行為。	1.38 Monitoring The act of overseeing the progress of a clinical trial, and of ensuring that it is conducted, recorded, and reported in accordance with the protocol, Standard Operating Procedures (SOPs), Good Clinical Practice (GCP), and the applicable regulatory requirement(s).
1.39 監測報告 在每次依照試驗委託者所訂定的標準作業程序，訪視試驗機構與\或溝通其他與試驗相關的事情後，試驗監測者提供給試驗委託者的書面報告。	1.39 Monitoring Report A written report from the monitor to the sponsor after each site visit and/or other trial-related communication according to the sponsor's SOPs.
1.40 多機構臨床試驗 同一份試驗計畫書，由多個試驗機構與多位試驗主持人共同執行的臨床試驗。	1.40 Multicentre Trial A clinical trial conducted according to a single protocol but at more than one site, and therefore, carried out by more than one investigator.
1.41 非臨床試驗 不在人類身上執行的生物醫學研究。	1.41 Nonclinical Study Biomedical studies not performed on human subjects.
1.42 意見（與獨立倫理委員會相關） 獨立倫理委員會所提出的決議與\或	1.42 Opinion (in relation to Independent Ethics Committee)

建議。	The judgement and/or the advice provided by an Independent Ethics Committee (IEC).
1.43 原始醫療紀錄 參閱原始文件。	1.43 Original Medical Record See Source Documents.
1.44 試驗計畫書 描述臨床試驗的目的、設計、方法、統計考量、與編制的文件。通常試驗計畫書亦提供試驗的相關背景與理論，也可能由其他參考資料提供。在 ICH GCP 中，試驗計畫書此一名詞包含試驗計畫書變更。	1.44 Protocol A document that describes the objective(s), design, methodology, statistical considerations, and organization of a trial. The protocol usually also gives the background and rationale for the trial, but these could be provided in other protocol referenced documents. Throughout the ICH GCP Guideline the term protocol refers to protocol and protocol amendments.
1.45 試驗計畫書變更 有關試驗計畫書變更或正式聲明的書面文件。	1.45 Protocol Amendment A written description of a change(s) to or formal clarification of a protocol.
1.46 品質保證 為確保臨床試驗執行與試驗數據的產生、紀錄、報告均符合 GCP 與相關法規要求所建立的計畫性和系統性活動。	1.46 Quality Assurance (QA) All those planned and systematic actions that are established to ensure that the trial is performed and the data are generated, documented (recorded), and reported in compliance with Good Clinical Practice (GCP) and the applicable regulatory requirement(s).
1.47 品質管制 在品質保證系統內，用來證明試驗相關活動品質均已符合要求的操作技術與活動。	1.47 Quality Control (QC) The operational techniques and activities undertaken within the quality assurance system to verify that the requirements for

	quality of the trial-related activities have been fulfilled.
1.48 隨機分配 用機率來分派受試者接受治療藥品或對照藥品治療以減少偏差的過程。	1.48 Randomization The process of assigning trial subjects to treatment or control groups using an element of chance to determine the assignments in order to reduce bias.
1.49 主管機關 有管理權利的單位。在本指引中，主管機關包含審查臨床數據與執行查核 (參閱 1.29) 的主管機關。	1.49 Regulatory Authorities Bodies having the power to regulate. In the ICH GCP guideline the expression Regulatory Authorities includes the authorities that review submitted clinical data and those that conduct inspections (see 1.29). These bodies are sometimes referred to as competent authorities.
1.50 嚴重不良事件 服用試驗藥品任何劑量所發生之不幸事件：包括死亡、危及生命、導致病人住院或延長住院時間、造成永久性殘疾、 先天性畸形。(參閱 ICH 臨床安全性數據管理指引：快速通報之定義及標準)	1.50 Serious Adverse Event (SAE) or Serious Adverse Drug Reaction (Serious ADR) Any untoward medical occurrence that at any dose: - results in death, - is life-threatening, - requires inpatient hospitalization or prolongation of existing hospitalization, - results in persistent or significant disability/incapacity, or - is a congenital anomaly/birth defect (see the ICH Guideline for Clinical Safety

	Data Management: Definitions and Standards for Expedited Reporting).
1.51 原始數據 臨床發現、觀察、或其他相關重建與評估的原始紀錄與經確認的副本資料。原始數據包含在原始文件 (原始紀錄或經確認無誤的副本)中。	1.51 Source Data All information in original records and certified copies of original records of clinical findings, observations, or other activities in a clinical trial necessary for the reconstruction and evaluation of the trial. Source data are contained in source documents (original records or certified copies).
1.52 原始文件 最初的文件、數據與紀錄 (例如：醫院病歷、臨床與辦公室紀錄、實驗室筆記、備忘錄、受試者日記或評估明細表、藥局處方紀錄、自動化機器所記錄的數據、經證明無誤與完整的副本或謄本、縮影單片、攝影底片、微膠片或核磁媒介、X 光 片、患者檔案、保留在藥局、實驗室與參與臨床試驗之醫療技術部門的紀錄)。	1.52 Source Documents Original documents, data, and records (e.g., hospital records, clinical and office charts, laboratory notes, memoranda, subjects' diaries or evaluation checklists, pharmacy dispensing records, recorded data from automated instruments, copies or transcriptions certified after verification as being accurate copies, microfiches, photographic negatives, microfilm or magnetic media, x-rays, subject files, and records kept at the pharmacy, at the laboratories and at medico-technical departments involved in the clinical trial).
1.53 試驗委託者 負責臨床試驗的啟動、管理與\或財務的個人、公司、機構或組織。	1.53 Sponsor An individual, company, institution, or organization which takes responsibility for the initiation, management, and/or

	financing of a clinical trial.
1.54 試驗委託者 - 試驗主持人 單獨或與其他人共同開始與執行臨床試驗的個人。在其直接指示下，試驗藥品可供應、調劑或給受試者使用。試驗委託者-試驗主持人並不包括任何非單獨個體 (例如：不包括企業或政府機構)。其必須同時負起試驗委託者和試驗主持人的責任。	1.54 Sponsor-Investigator An individual who both initiates and conducts, alone or with others, a clinical trial, and under whose immediate direction the investigational product is administered to, dispensed to, or used by a subject. The term does not include any person other than an individual (e.g., it does not include a corporation or an agency). The obligations of a sponsor-investigator include both those of a sponsor and those of an investigator.
1.55 **標準作業程序** 為使某特定功能有一致性表現之詳細書面說明。	1.55 **Standard Operating Procedures (SOPs)** Detailed, written instructions to achieve uniformity of the performance of a specific function.
1.56 **協同試驗主持人** 醫療機構受試驗主持人指派與監督去執行試驗相關重要步驟與做試驗相關重大決策之個人 (例如：專員、住院醫師、學術研究員)。亦請參閱試驗主持人。	1.56 **Subinvestigator** Any individual member of the clinical trial team designated and supervised by the investigator at a trial site to perform critical trial-related procedures and/or to make important trial-related decisions (e.g., associates, residents, research fellows). See also Investigator.
1.57 **受試者/試驗受試者** 參加臨床試驗而接受試驗藥品或對照藥品的個人。	1.57 **Subject/Trial Subject** An individual who participates in a clinical trial, either as a recipient of the investigational product(s) or as a control.

1.58 **受試者身份代碼** 試驗主持人指定給每位受試者的獨特辨識碼，其可用來保護受試者的身份。當試驗主持人要報告不良事件與\或其他試驗相關的數據時，可用於代替名字。	1.58 **Subject Identification Code** A unique identifier assigned by the investigator to each trial subject to protect the subject's identity and used in lieu of the subject's name when the investigator reports adverse events and/or other trial related data.
1.59 試驗**地點** 實際執行與試驗相關活動之地點。	1.59 **Trial Site** The location(s) where trial-related activities are actually conducted.
1.60 **未預期藥品不良反應** 本質或嚴重程度不同於現有藥品資訊（例如：未上市試驗藥品之主持人手冊或已上市藥品之仿單/藥品特性摘要）之藥品不良反應（參閱 ICH 臨床安全性數據管理指引：快速通報之定義及標準）。	1.60 **Unexpected Adverse Drug Reaction** An adverse reaction, the nature or severity of which is not consistent with the applicable product information (e.g., Investigator's Brochure for an unapproved investigational product or package insert/summary of product characteristics for an approved product) (see the ICH Guideline for Clinical Safety Data Management: Definitions and Standards for Expedited Reporting).
1.61 易受傷害受試者 可能會因為受參與試驗之預期利益，或拒絕參加可能會遭階級制度中資深人員報復之不當影響而被迫自願參加臨床試驗的受試者。例如：醫療階級團體架構中的會員，例如：醫學系、藥學系、牙醫系與護理系學生、附屬醫院與實驗室人員、製藥界的員	1.61**Vulnerable Subjects** Individuals whose willingness to volunteer in a clinical trial may be unduly influenced by the expectation, whether justified or not, of benefits associated with participation, or of a retaliatory response from senior members of a hierarchy in case of refusal to participate. Examples are members of a

工、軍人、遭拘留的犯人。其他易受傷害的受試者包括絕症患者、安置在護理之家的人、失業或貧窮人家、發生危急情況的人、弱勢人種、無家可歸者、遊牧民族、難民、少數民族與自己無法給予同意的人。	group with a hierarchical structure, such as medical, pharmacy, dental, and nursing students, subordinate hospital and laboratory personnel, employees of the pharmaceutical industry, members of the armed forces, and persons kept in detention. Other vulnerable subjects include patients with incurable diseases, persons in nursing homes, unemployed or impoverished persons, patients in emergency situations, ethnic minority groups, homeless persons, nomads, refugees, minors, and those incapable of giving consent.
1.62 **受試者的福祉** 參與臨床試驗之受試者其身體與心理之健全。	1.62 **Well-being (of the trial subjects)** The physical and mental integrity of the subjects participating in a clinical trial.
附錄	**ADDENDUM**
1.63 **經認證的副本** 係指經認證 (即已加註日期之簽名或係經認證程序) 的原始紀錄副本 (不論所使用的紀錄媒介為何) ，並具備與原始紀錄相同的資訊，包括前後文、內容及架構。	1.63**Certified Copy** A copy (irrespective of the type of media used) of the original record that has been verified (i.e., by a dated signature or by generation through a validated process) to have the same information, including data that describe the context, content, and structure, as the original.
1.64 **監測計畫** 係指描述臨床試驗監測之策略、方法、責任及要求的文件。	1.64 **Monitoring Plan** A document that describes the strategy, methods, responsibilities, and requirements

	for monitoring the trial.
1.65 **電腦系統的驗證** 係指就電腦化系統的特定要求進行建置和記錄的過程，從系統設計到停用或轉換新系統間都能持續落實。驗證方法應基於風險評估，考量系統的預期用途及系統可能影響受試者保護及試驗結果可信度的潛在風險。	1.65**Validation of Computerized Systems** A process of establishing and documenting that the specified requirements of a computerized system can be consistently fulfilled from design until decommissioning of the system or transition to a new system. The approach to validation should be based on a risk assessment that takes into consideration the intended use of the system and the potential of the system to affect human subject protection and reliability of trial results.
第 2 章、基本原則 (THE PRINCIPLES)	
2.1 臨床試驗之執行應符合赫爾辛基宣言的倫理原則，並與 GCP 及相關法規要求一致。	2.1Clinical trials should be conducted in accordance with the ethical principles that have their origin in the Declaration of Helsinki, and that are consistent with GCP and the applicable regulatory requirement(s).
2.2 在試驗開始前，應權衡對個別之受試者和整體社會所造成可預期的危險、不便與預期效益。只有在預期效益超過風險時，才應開始並持續此試驗。	2.2 Before a trial is initiated, foreseeable risks and inconveniences should be weighed against the anticipated benefit for the individual trial subject and society. A trial should be initiated and continued only if the anticipated benefits justify the risks.
2.3 受試者之權利、安全及福祉是最重要之考量，並應優先於科學及社會之效益。	2.3 The rights, safety, and well-being of the trial subjects are the most important considerations and should prevail over

	interests of science and society.
2.4 目前已知有關試驗藥品之非臨床及臨床資料，應能適當地支持所提出的臨床試驗。	2.4 The available nonclinical and clinical information on an investigational product should be adequate to support the proposed clinical trial.
2.5 臨床試驗應有科學根據，臨床試驗計畫書應清楚及詳盡的描述。	2.5 Clinical trials should be scientifically sound, and described in a clear, detailed protocol.
2.6 試驗應依照經主管機關或人體試驗委員會\獨立倫理委員會核准\贊同意見之試驗計畫書執行。	2.6 A trial should be conducted in compliance with the protocol that has received prior institutional review board (IRB)/independent ethics committee (IEC) approval/favourable opinion.
2.7 給予受試者之醫療照顧及為醫療決策為合格醫師或牙醫師的責任。	2.7 The medical care given to, and medical decisions made on behalf of, subjects should always be the responsibility of a qualified physician or, when appropriate, of a qualified dentist.
2.8 每一位參與試驗執行之人員，應有符合工作資格之教育、訓練及經驗。	2.8 Each individual involved in conducting a trial should be qualified by education, training, and experience to perform his or her respective task(s).
2.9 受試者參與試驗前，應獲得其自願給予之受試者同意書。	2.9 Freely given informed consent should be obtained from every subject prior to clinical trial participation.
2.10 所有臨床試驗資料應予記錄、處理及貯存，以供確實報告、呈現及確認。	2.10 All clinical trial information should be recorded, handled, and stored in a way that

附錄 此原則適用本指引中所指之紀錄，不論其所使用之媒介為何。	allows its accurate reporting, interpretation and verification. **ADDENDUM** This principle applies to all records referenced in this guideline, irrespective of the type of media used.
2.11 應保護可辨認受試者身分之紀錄的機密性，符合相關法規對隱私及機密之規定。	2.11 The confidentiality of records that could identify subjects should be protected, respecting the privacy and confidentiality rules in accordance with the applicable regulatory requirement(s).
2.12 試驗藥品的製造、處理及貯存應符合GMP。試驗藥品的使用應遵從已核准之試驗計畫書。	2.12 Investigational products should be manufactured, handled, and stored in accordance with applicable good manufacturing practice (GMP). They should be used in accordance with the approved protocol.
2.13 試驗應採用所有能確保其品質的規範及程序。 **附錄** 這些系統應著重於確保受試者保護及試驗結果可信度之面向。	2.13 Systems with procedures that assure the quality of every aspect of the trial should be implemented. **ADDENDUM** Aspects of the trial that are essential to ensure human subject protection and reliability of trial results should be the focus of such systems.
第 3 章、人體試驗委員會\獨立倫理委員會(INSTITUTIONAL REVIEW	

BOARD/INDEPENDENT ETHICS COMMITTEE (IRB/IEC))	
3.1 責任	**3.1 Responsibilities**
3.1.1 人體試驗委員會\獨立倫理委員會應確保受試者的權利，安全以及福祉受到保護。對可能包括易受傷害的受試者之試驗應特別留意。	3.1.1 An IRB/IEC should safeguard the rights, safety, and well-being of all trial subjects. Special attention should be paid to trials that may include vulnerable subjects.
3.1.2 人體試驗委員會\獨立倫理委員會須獲得下列文件： 臨床試驗計畫書\修正版本、受試者同意書與修正版本、受試者招募程序(例如：廣告) 、提供給受試者的書面資料、主持人手冊、現有安全性資料、受試者的報酬與補償說明、試驗主持人最新學歷或其他可證明其資格的資料、以及其他人體試驗委員會\獨立倫理委員會 認為需要檢附的資料。 人體試驗委員會\獨立倫理委員會應在合理時間內完成臨床試驗的審查，對該試驗提出書面意見，同時明確註明試驗名稱、所審查資料及下列結果之日期： · 核准\贊同意見 · 核准前需做的修正意見 · 不准\反對意見 · 終止或暫停先前核准\贊同意見	3.1.2 The IRB/IEC should obtain the following documents: trial protocol(s)/amendment(s), written informed consent form(s) and consent form updates that the investigator proposes for use in the trial, subject recruitment procedures (e.g. advertisements), written information to be provided to subjects, Investigator's Brochure (IB), available safety information, information about payments and compensation available to subjects, the investigator's current curriculum vitae and/or other documentation evidencing qualifications, and any other documents that the IRB/IEC may need to fulfil its responsibilities. The IRB/IEC should review a proposed clinical trial within a reasonable time and document its views in writing, clearly identifying the trial, the documents reviewed and the dates for the following:

	- approval/favourable opinion; - modifications required prior to its approval/favourable opinion; - disapproval / negative opinion; and - termination/suspension of any prior approval/favourable opinion.
3.1.3 人體試驗委員會\獨立倫理委員會應審查試驗主持人的資格、學經歷及其他相關資料。	3.1.3 The IRB/IEC should consider the qualifications of the investigator for the proposed trial, as documented by a current curriculum vitae and/or by any other relevant documentation the IRB/IEC requests.
3.1.4 人體試驗委員會\獨立倫理委員會應根據受試者所承受之風險定期評估進行中的臨床試驗，至少每年一次。	3.1.4 The IRB/IEC should conduct continuing review of each ongoing trial at intervals appropriate to the degree of risk to human subjects, but at least once per year.
3.1.5 人體試驗委員會\獨立倫理委員會倘判斷額外資料有助於保護受試者之權利、安全以及福祉，得要求本指引 4.8.10 規定列舉外之資料。	3.1.5 The IRB/IEC may request more information than is outlined in paragraph 4.8.10 be given to subjects when, in the judgement of the IRB/IEC, the additional information would add meaningfully to the protection of the rights, safety and/or well-being of the subjects.
3.1.6 當受試者由法定代理人同意進行非治療性試驗時(參閱 4.8.12、4.8.14)，	3.1.6 When a non-therapeutic trial is to be carried out with the consent of the subject's legally

人體試驗委員會\獨立倫理委員會需確定試驗計畫書及其他文件資料充分提及相關之倫理考量，並且符合相關法規要求。	acceptable representative (see 4.8.12, 4.8.14), the IRB/IEC should determine that the proposed protocol and/or other document(s) adequately addresses relevant ethical concerns and meets applicable regulatory requirements for such trials.
3.1.7 若試驗計畫書載明不能預先獲得受試者或其法定代理人同意（參閱4.8.15），人體試驗委員會\獨立倫理委員會應確定該試驗計畫書及其他文件資料充分提及相關之倫理考量，並且符合相關法規要求（例如：緊急狀態時）。	3.1.7 Where the protocol indicates that prior consent of the trial subject or the subject's legally acceptable representative is not possible (see 4.8.15), the IRB/IEC should determine that the proposed protocol and/or other document(s) adequately addresses relevant ethical concerns and meets applicable regulatory requirements for such trials (i.e. in emergency situations).
3.1.8 人體試驗委員會\獨立倫理委員會需審查有關受試者可獲得之報酬及付款方式，以確保無強迫性或不當影響受試者的問題。受試者的報酬應按比例分配，而不是參與試驗完成後才取得。	3.1.8 The IRB/IEC should review both the amount and method of payment to subjects to assure that neither presents problems of coercion or undue influence on the trial subjects. Payments to a subject should be prorated and not wholly contingent on completion of the trial by the subject.
3.1.9 人體試驗委員會\獨立倫理委員會應確保有關受試者獲得報酬的資料，包括付款方式、金額及付款進度，記錄於受試者同意書及其他給與受試者	3.1.9 The IRB/IEC should ensure that information regarding payment to subjects, including the methods, amounts, and schedule of payment to trial subjects, is set

之書面資料。報酬按比例分配付款的方式應詳細說明。	forth in the written informed consent form and any other written information to be provided to subjects. The way payment will be prorated should be specified.
3.2 組成、功能及運作	**3.2 Composition, Functions and Operations**
3.2.1 人體試驗委員會\獨立倫理委員會應由合理人數組成，其成員應具備審查及評估試驗之科學、醫學層面及倫理之資格與經驗。建議人體試驗委員會\獨立倫理委員會組成人員應包含： (一)至少五位成員 (二)至少一位專業為非科學背景人士 (三)至少一位醫療機構\試驗機構外人士 人體試驗委員會\獨立倫理委員會成員中唯有非試驗主持人與試驗委託者身分者能夠參與表決或提出試驗相關事宜之意見。 人體試驗委員會\獨立倫理委員會應保留成員及其資格之名單。	3.2.1 The IRB/IEC should consist of a reasonable number of members, who collectively have the qualifications and experience to review and evaluate the science, medical aspects, and ethics of the proposed trial. It is recommended that the IRB/IEC should include: (a) At least five members. (b) At least one member whose primary area of interest is in a nonscientific area. (c) At least one member who is independent of the institution/trial site. Only those IRB/IEC members who are independent of the investigator and the sponsor of the trial should vote/provide opinion on a trial-related matter. A list of IRB/IEC members and their qualifications should be maintained.
3.2.2 人體試驗委員會\獨立倫理委員會應依照書面作業程序執行其功能，並且保留活動的書面紀錄與開會的會議	3.2.2 The IRB/IEC should perform its functions according to written operating procedures, should maintain written records of its

紀錄。人體試驗委員會\獨立倫理委員會應遵從 GCP 及其他相關法規要求。	activities and minutes of its meetings, and should comply with GCP and with the applicable regulatory requirement(s).
3.2.3 人體試驗委員會\獨立倫理委員會應有法定人數(如書面作業程序裡規定的人數)出席時宣佈其所做的決議。	3.2.3 An IRB/IEC should make its decisions at announced meetings at which at least a quorum, as stipulated in its written operating procedures, is present.
3.2.4 唯有參與人體試驗委員會\獨立倫理委員會之審查及討論的成員，才能表決或提出意見或建議。	3.2.4 Only members who participate in the IRB/IEC review and discussion should vote/provide their opinion and/or advise.
3.2.5 試驗主持人可以提供任何有關試驗的資料，但不應參與人體試驗委員會\獨立倫理委員會的審議、表決、提出意見或建議。	3.2.5 The investigator may provide information on any aspect of the trial, but should not participate in the deliberations of the IRB/IEC or in the vote/opinion of the IRB/IEC.
3.2.6 人體試驗委員會\獨立倫理委員會可以邀請非成員的專家給予特定專業上的協助。	3.2.6 An IRB/IEC may invite nonmembers with expertise in special areas for assistance.
3.3 作業程序 人體試驗委員會\獨立倫理委員應建立並遵從其書面作業程序，包括：	**3.3 Procedures** The IRB/IEC should establish, document in writing, and follow its procedures, which should include:
3.3.1 決定其組成(成員的姓名與資格)及建立權責。	3.3.1 Determining its composition (names and qualifications of the members) and the

	authority under which it is established.
3.3.2 排定開會時間表，通知成員開會及召開會議。	3.3.2 Scheduling, notifying its members of, and conducting its meetings.
3.3.3 執行試驗的開始與後續審查。	3.3.3 Conducting initial and continuing review of trials.
3.3.4 決定後續審查之適當頻率。	3.3.4 Determining the frequency of continuing review, as appropriate.
3.3.5 依據相關法規要求，對獲得人體試驗委員會\獨立倫理委員會核准\贊同意見之進行中試驗所做的次要變更計畫書，提供加速審查及書面意見。	3.3.5 Providing, according to the applicable regulatory requirements, expedited review and approval/favourable opinion of minor change(s) in ongoing trials that have the approval/favourable opinion of the IRB/IEC.
3.3.6 明訂人體試驗委員會\獨立倫理委員會給予核准\贊同意見前，受試者不得加入試驗。	3.3.6 Specifying that no subject should be admitted to a trial before the IRB/IEC issues its written approval/favourable opinion of the trial.
3.3.7 明訂在人體試驗委員會\獨立倫理委員會核准\贊同意見前，未取得人體試驗委員會\獨立倫理委員會會核准\贊同意見前，不應偏離或變更試驗計畫書的執行，惟在排除對受試者立即的傷害或僅為行政方面的改變 (例如：	3.3.7 Specifying that no deviations from, or changes of, the protocol should be initiated without prior written IRB/IEC approval/favourable opinion of an appropriate amendment, except when necessary to eliminate immediate hazards to

監測者的改變、電話號碼的改變)。(參閱 4.5.2 ）。	the subjects or when the change(s) involves only logistical or administrative aspects of the trial (e.g., change of monitor(s), telephone number(s)) (see 4.5.2).
3.3.8 若有下列情形發生時，試驗主持人應立刻向人體試驗委員會\獨立倫理委員會報告： (一)為排除對受試者立即的傷害而偏離或變更試驗計畫書的執行（參閱 3.3.7、4.5.2、4.5.4）。 (二)增加受試者風險與\或嚴重影響試驗執行的變更。(參閱 4.10.2)。 (三)所有嚴重且未預期之藥品不良反應。 (四)影響受試者安全或試驗進行的新資料。	3.3.8 Specifying that the investigator should promptly report to the IRB/IEC: (a) Deviations from, or changes of, the protocol to eliminate immediate hazards to the trial subjects (see 3.3.7, 4.5.2, 4.5.4). (b) Changes increasing the risk to subjects and/or affecting significantly the conduct of the trial (see 4.10.2). (c) All adverse drug reactions (ADRs) that are both serious and unexpected. (d) New information that may affect adversely the safety of the subjects or the conduct of the trial.
3.3.9 確保人體試驗委員會\獨立倫理委員會即時書面通知試驗主持人\機構有關： (一)試驗相關之決定/意見。 (二)決定/意見之理由。 (三)決定/意見之申覆程序。	3.3.9 Ensuring that the IRB/IEC promptly notify in writing the investigator/institution concerning: (a) Its trial-related decisions/opinions. (b) The reasons for its decisions/opinions. (c) Procedures for appeal of its decisions/opinions.

3.4 紀錄 人體試驗委員會\獨立倫理委員會應保留所有相關資料(例如：書面程序，成員名單，成員的職業\聯繫名單，送審文件，會議紀錄及信件)至臨床試驗案結束後至少三年，且可應主管機關要求隨時調閱。 試驗主持人、試驗委託者或主管機關得向人體試驗委員會\獨立倫理委員會要求提供書面程序資料及成員名單。	**3.4 Records** The IRB/IEC should retain all relevant records (e.g., written procedures, membership lists, lists of occupations/affiliations of members, submitted documents, minutes of meetings, and correspondence) for a period of at least 3 years after completion of the trial and make them available upon request from the regulatory authority(ies). The IRB/IEC may be asked by investigators, sponsors or regulatory authorities to provide its written procedures and membership lists.
第 4 章、試驗主持人(INVESTIGATOR)	
4.1 試驗主持人之資格與認定	**4.1 Investigator's Qualifications and Agreements**
4.1.1 試驗主持人合格與否應藉由教育、訓練課程、和具備適當執行臨床試驗的經驗來判定。除了需符合所有主管機關規定的資格和能力，並且需提供試驗委託者、人體試驗委員會\獨立倫理委員會和主管機關最新的學經歷資料或其他相關文件，以證明其符合試驗主持人的資格。	4.1.1 The investigator(s) should be qualified by education, training, and experience to assume responsibility for the proper conduct of the trial, should meet all the qualifications specified by the applicable regulatory requirement(s), and should provide evidence of such qualifications through up-to-date curriculum vitae and/or other relevant documentation requested by the sponsor, the IRB/IEC, and/or the regulatory authority(ies).

4.1.2 試驗主持人應完全熟悉試驗藥品在試驗計畫書、最新主持人手冊、藥品資訊及其他由試驗委託者提供的藥品資訊中描述的使用方法。	4.1.2 The investigator should be thoroughly familiar with the appropriate use of the investigational product(s), as described in the protocol, in the current Investigator's Brochure, in the product information and in other information sources provided by the sponsor.
4.1.3 試驗主持人應明瞭並遵從 GCP 和相關主管機關的法規要求。	4.1.3 The investigator should be aware of, and should comply with, GCP and the applicable regulatory requirements.
4.1.4 試驗主持人\機構應接受試驗委託者的監測與稽核，以及相關主關機關之查核。	4.1.4 The investigator/institution should permit monitoring and auditing by the sponsor, and inspection by the appropriate regulatory authority(ies).
4.1.5 試驗主持人應保留一份經其授權與臨床試驗相關重要職務之合格人員名單。	4.1.5 The investigator should maintain a list of appropriately qualified persons to whom the investigator has delegated significant trial-related duties.
4.2 適當的資源	**4.2 Adequate Resources**
4.2.1 試驗主持人應能(例如，依據回溯性資料)證明其能在協議的時間內募集到足夠的受試者。	4.2.1 The investigator should be able to demonstrate (e.g., based on retrospective data) a potential for recruiting the required number of suitable subjects within the agreed recruitment period.

4.2.2 試驗主持人在協議的試驗期間內，應有充分的時間適當執行和完成試驗。	4.2.2 The investigator should have sufficient time to properly conduct and complete the trial within the agreed trial period.
4.2.3 試驗主持人在試驗的預期時間內，應有充分的合格 試驗相關人員及設施以適當並安全的執行試驗。	4.2.3 The investigator should have available an adequate number of qualified staff and adequate facilities for the foreseen duration of the trial to conduct the trial properly and safely.
4.2.4 試驗主持人應確保所有協助臨床試驗的試驗相關人員對試驗計畫書及試驗藥品有充分的了解，以及其於臨床試驗中相關的責任和工作。	4.2.4 The investigator should ensure that all persons assisting with the trial are adequately informed about the protocol, the investigational product(s), and their trial-related duties and functions.
附錄	**ADDENDUM**
4.2.5 試驗主持人對授權於試驗中心執行與試驗相關責任及功能之任何人或任何一方，具有監督之責。	4.2.5 The investigator is responsible for supervising any individual or party to whom the investigator delegates trial-related duties and functions conducted at the trial site.
4.2.6 若試驗主持人\機構自他人或他方取得執行與試驗相關職責及功能之服務，試驗主持人及試驗機構應確保他人或他方具備執行該責任及功能之資格，並應採取一定措施，以確保與	4.2.6 If the investigator/institution retains the services of any individual or party to perform trial-related duties and functions, the investigator/institution should ensure this individual or party is qualified to

試驗相關責任及功能之履行及數據產生之完整性。	perform those trial-related duties and functions and should implement procedures to ensure the integrity of the trial-related duties and functions performed and any data generated.
4.3 受試者的醫療照護	**4.3 Medical Care of Trial Subjects**
4.3.1 合格的醫生身為試驗主持人或試驗協同主持人，應負責所有臨床試驗相關的醫療決定。	4.3.1 A qualified physician (or dentist, when appropriate), who is an investigator or a sub-investigator for the trial, should be responsible for all trial-related medical (or dental) decisions.
4.3.2 在受試者參加試驗與後續追蹤期間，試驗主持人\機構應確保對受試者任何與試驗相關的不良反應，包括具臨床意義之檢查數據等，提供充分的醫療照護。當試驗主持人察覺試驗期間受試者有疾病需要醫療照護時，必須告知受試者。	4.3.2 During and following a subject's participation in a trial, the investigator/institution should ensure that adequate medical care is provided to a subject for any adverse events, including clinically significant laboratory values, related to the trial. The investigator/institution should inform a subject when medical care is needed for intercurrent illness(es) of which the investigator becomes aware.
4.3.3 若受試者有主要照護醫師且經受試者同意，試驗主持人宜告知其主要照護醫師該受試者參與臨床試驗。	4.3.3 It is recommended that the investigator inform the subject's primary physician about the subject's participation in the trial if the subject has a primary physician and if

	the subject agrees to the primary physician being informed.
4.3.4 受試者得不附理由隨時退出退出臨床試驗。 試驗主持人應在完全尊重受試者之權利及意願之條件下，盡力確認其退出試驗之原因。	4.3.4 Although a subject is not obliged to give his/her reason(s) for withdrawing prematurely from a trial, the investigator should make a reasonable effort to ascertain the reason(s), while fully respecting the subject's rights.
4.4 與人體試驗委員會\獨立倫理委員會之聯繫	**4.4 Communication with IRB/IEC**
4.4.1 試驗開始前，試驗主持人\機構應獲得人體試驗委員會\獨立倫理委員會對試驗計畫書、受試者同意書及其更新版本、受試者招募程序(例如，廣告)，及任何其他給予受試者的書面資料之載明日期之書面同意。	4.4.1 Before initiating a trial, the investigator/institution should have written and dated approval/favourable opinion from the IRB/IEC for the trial protocol, written informed consent form, consent form updates, subject recruitment procedures (e.g., advertisements), and any other written information to be provided to subjects.
4.4.2 試驗主持人\機構提供主持人手冊的最新版本給人體試驗委員會\獨立倫理委員會，為書面申請核准的程序之一。如果主持人手冊在臨床試驗期間更新，試驗主持人\機構應主動提供更新的主持人手冊給人體試驗委員會\獨立倫理委員會。	4.4.2 As part of the investigator's/institution's written application to the IRB/IEC, the investigator/institution should provide the IRB/IEC with a current copy of the Investigator's Brochure. If the Investigator's Brochure is updated during the trial, the investigator/institution should supply a copy of the updated Investigator's Brochure

	to the IRB/IEC.
4.4.3 試驗期間試驗主持人\機構應提供所有相關文件資料以供人體試驗委員檢閱。	4.4.3 During the trial the investigator/institution should provide to the IRB/IEC all documents subject to review.
4.5 遵從試驗計畫書	**4.5 Compliance with Protocol**
4.5.1 試驗主持人\機構應遵從經試驗委託者、主管機關，及人體試驗委員會\獨立倫理委員會同意的試驗計畫書執行臨床試驗。 試驗主持人\機構與試驗委託者 應共同簽署試驗計畫書或另簽契約，以確認雙方的同意。	4.5.1 The investigator/institution should conduct the trial in compliance with the protocol agreed to by the sponsor and, if required, by the regulatory authority(ies) and which was given approval/favourable opinion by the IRB/IEC. The investigator/institution and the sponsor should sign the protocol, or an alternative contract, to confirm agreement.
4.5.2 試驗主持人在未取得試驗委託者同意及人體試驗委員會\獨立倫理委員會核准前，不應偏離或變更試驗計畫書的執行，但為及時避免受試者遭受傷害或僅為行政事務之改變者，不受此限。 (例如：監測者的改變、電話號碼的改變)。	4.5.2 The investigator should not implement any deviation from, or changes of the protocol without agreement by the sponsor and prior review and documented approval/favourable opinion from the IRB/IEC of an amendment, except where necessary to eliminate an immediate hazard(s) to trial subjects, or when the change(s) involves only logistical or administrative aspects of the trial (e.g., change in monitor(s), change of telephone number(s)).
4.5.3	4.5.3

試驗主持人或經其指定的試驗相關人員，應紀錄並解釋執行試驗計畫書的任何偏差。	The investigator, or person designated by the investigator, should document and explain any deviation from the approved protocol.
4.5.4 如為排除對受試者立即的傷害，試驗主持人可不經人體試驗委員會\獨立倫理委員會的批准\贊同而偏離或變更試驗計畫書。但試驗主持人需盡快將偏離或變更及其原因，或建議的試驗計畫書修正案檢送與： 一、人體試驗委員會\獨立倫理委員會審查及批准\贊同的意見。 二、試驗委託者同意 三、主管機關。	4.5.4 The investigator may implement a deviation from, or a change of, the protocol to eliminate an immediate hazard(s) to trial subjects without prior IRB/IEC approval/favourable opinion. As soon as possible, the implemented deviation or change, the reasons for it, and, if appropriate, the proposed protocol amendment(s) should be submitted: (a) to the IRB/IEC for review and approval/favourable opinion, (b) to the sponsor for agreement and, if required, (c) to the regulatory authority(ies).
4.6 試驗藥品	**4.6 Investigational Product(s)**
4.6.1 試驗主持人\機構須負責試驗機構中試驗藥品的點收與使用紀錄。	4.6.1 Responsibility for investigational product(s) accountability at the trial site(s) rests with the investigator/institution.
4.6.2 試驗主持人\機構應\可指派專責藥師或是在試驗主持人\機構監督下的適當人選負責部份或全部試驗機構中試驗藥品的點收與使用紀錄。	4.6.2 Where allowed/required, the investigator/institution may/should assign some or all of the investigator's/institution's duties for investigational product(s)

	accountability at the trial site(s) to an appropriate pharmacist or another appropriate individual who is under the supervision of the investigator/institution.
4.6.3 試驗主持人\機構及\被指定的專責藥師或其他的適當人選，應保留試驗藥品運送至臨床試驗機構及其存貨的紀錄，以及每一個受試者使用試驗藥品、未使用藥品歸還試驗委託者或另外處置的紀錄。這些紀錄應包括日期、數量、批序號、有效日期，及試驗藥品和受試者的代碼。試驗主持人應保留文件紀錄，說明其提供受試者的劑量和試驗計畫書規定相符，且使用的試驗藥品數量和由試驗委託者收到的數量相吻合。	4.6.3 The investigator/institution and/or a pharmacist or other appropriate individual, who is designated by the investigator/institution, should maintain records of the product's delivery to the trial site, the inventory at the site, the use by each subject, and the return to the sponsor or alternative disposition of unused product(s). These records should include dates, quantities, batch/serial numbers, expiration dates (if applicable), and the unique code numbers assigned to the investigational product(s) and trial subjects. Investigators should maintain records that document adequately that the subjects were provided the doses specified by the protocol and reconcile all investigational product(s) received from the sponsor.
4.6.4 試驗藥品應依試驗委託者要求之方式儲存（參閱 5.13.2、5.14.3），並應符合相關法規要求。	4.6.4 The investigational product(s) should be stored as specified by the sponsor (see 5.13.2 and 5.14.3) and in accordance with applicable regulatory requirement(s).
4.6.5	4.6.5

試驗主持人應確保試驗藥品僅得使用於經核准之臨床試驗計畫。	The investigator should ensure that the investigational product(s) are used only in accordance with the approved protocol.
4.6.6 試驗主持人或由試驗主持人\機構指定的人員，應向每一位受試者解釋如何正確的使用試驗藥品，並應於臨床試驗中每隔一段適當時間，檢查受試者是否遵守說明。	4.6.6 The investigator, or a person designated by the investigator/institution, should explain the correct use of the investigational product(s) to each subject and should check, at intervals appropriate for the trial, that each subject is following the instructions properly.
4.7 隨機分配過程及盲性解碼 試驗主持人應遵從臨床試驗的隨機分配程序，如可解碼，應確保依據試驗計畫書規定解碼。如果臨床試驗採盲性設計，而試驗藥品有任何提早解碼的情況(例如，意外的解碼，嚴重不良事件的解碼)，試驗主持人應即時對試驗委託者解釋，並作書面紀錄。	**4.7 Randomization Procedures and Unblinding** The investigator should follow the trial's randomization procedures, if any, and should ensure that the code is broken only in accordance with the protocol. If the trial is blinded, the investigator should promptly document and explain to the sponsor any premature unblinding (e.g., accidental unblinding, unblinding due to a serious adverse event) of the investigational product(s).
4.8 受試者同意書	**4.8 Informed Consent of Trial Subjects**
4.8.1 試驗主持人應遵從相關法規要求，並依 GCP 及赫爾辛基宣言的倫理原則，取得並記錄受試者同意書。臨床試驗開始之前，試驗主持人應得到人體試	4.8.1 In obtaining and documenting informed consent, the investigator should comply with the applicable regulatory requirement(s), and should adhere to GCP

驗委員會\獨立倫理委員會對受試者同意書和提供給受試者的任何其他書面資料的書面核准。	and to the ethical principles that have their origin in the Declaration of Helsinki. Prior to the beginning of the trial, the investigator should have the IRB/IEC's written approval/favourable opinion of the written informed consent form and any other written information to be provided to subjects.
4.8.2 當重要新資訊可能影響受試者的同意時，應修訂受試者同意書及給受試者的任何其他書面資料。修訂後的受試者同意書及給受試者的任何其他書面資料應先得到人體試驗委員會\獨立倫理委員會的核准。如果新資訊可能影響受試者繼續參與臨床試驗的意願，應即時告知受試者或其法定代理人。此資訊的傳遞應留下書面紀錄。	4.8.2 The written informed consent form and any other written information to be provided to subjects should be revised whenever important new information becomes available that may be relevant to the subject's consent. Any revised written informed consent form, and written information should receive the IRB/IEC's approval/favourable opinion in advance of use. The subject or the subject's legally acceptable representative should be informed in a timely manner if new information becomes available that may be relevant to the subject's willingness to continue participation in the trial. The communication of this information should be documented.
4.8.3 試驗主持人或試驗相關人員不應強迫或不適當地影響受試者參與或繼	4.8.3 Neither the investigator, nor the trial staff, should coerce or unduly influence a subject

續參與臨床試驗的意願。	to participate or to continue to participate in a trial.
4.8.4 有關臨床試驗計畫的口頭及書面資料，包括受試者同意書，都不應含有任何會造成受試者或其法定代理人放棄其法定權利，或免除試驗主持人\機構、 試驗委託者或其代理商疏忽責任的語句。	4.8.4 None of the oral and written information concerning the trial, including the written informed consent form, should contain any language that causes the subject or the subject's legally acceptable representative to waive or to appear to waive any legal rights, or that releases or appears to release the investigator, the institution, the sponsor, or their agents from liability for negligence.
4.8.5 試驗主持人，或由試驗主持人指定的人員，應完全告知受試者或受試者無行為能力完成同意時，告知法定代理人所有與臨床試驗相關包括人體試驗委員會\獨立倫理委員會批准的書面意見。	4.8.5 The investigator, or a person designated by the investigator, should fully inform the subject or, if the subject is unable to provide informed consent, the subject's legally acceptable representative, of all pertinent aspects of the trial including the written information and the approval/favourable opinion by the IRB/IEC.
4.8.6 有關試驗計畫的口頭及書面資料，包括受試者同意書，皆應使用口語化的、非技術性的語言，且為受試者或其法定代理人（或公正見證人）可以理解的。	4.8.6 The language used in the oral and written information about the trial, including the written informed consent form, should be as non-technical as practical and should be understandable to the subject or the subject's legally acceptable representative and the impartial witness, where applicable.

4.8.7 在取得受試者同意書前，試驗主持人或由試驗主持人指定的人員，應給予受試者或其法定代理人充分時間和機會，以詢問臨床試驗的細節並決定是否參與試驗。關於臨床試驗計畫的所有問題，都應給予受試者或其法定代理人滿意的回答。	4.8.7 Before informed consent may be obtained, the investigator, or a person designated by the investigator, should provide the subject or the subject's legally acceptable representative ample time and opportunity to inquire about details of the trial and to decide whether or not to participate in the trial. All questions about the trial should be answered to the satisfaction of the subject or the subject's legally acceptable representative.
4.8.8 參加臨床試驗之前，受試者或其法定代理人應親自簽署受試者同意書並載明日期，和受試者或其法定代理人討論的試驗相關人員也應簽名。	4.8.8 Prior to a subject's participation in the trial, the written informed consent form should be signed and personally dated by the subject or by the subject's legally acceptable representative, and by the person who conducted the informed consent discussion.
4.8.9 若受試者或其法定代理人無法閱讀，公平見證人在整個受試者同意書討論期間應在場。當已經朗讀並解釋受試者同意書和提供給受試者的任何其他書面資料給受試者或其法定代理人，且受試者或其法定代理人已口頭應允參與試驗，若能力所及，應親自簽署受試者同意書並載明日期，公平見證人亦應簽署受試者同意書並	4.8.9 If a subject is unable to read or if a legally acceptable representative is unable to read, an impartial witness should be present during the entire informed consent discussion. After the written informed consent form and any other written information to be provided to subjects, is read and explained to the subject or the subject's legally acceptable representative,

載明日期。經由簽署受試者同意書，公平見證人證明受試者同意書和提供給受試者的任何其他書面資料之內容，已確切地解釋予受試者或其法定代理人並為其了解，且其同意全出於其自由意願。	and after the subject or the subject's legally acceptable representative has orally consented to the subject's participation in the trial and, if capable of doing so, has signed and personally dated the informed consent form, the witness should sign and personally date the consent form. By signing the consent form, the witness attests that the information in the consent form and any other written information was accurately explained to, and apparently understood by, the subject or the subject's legally acceptable representative, and that informed consent was freely given by the subject or the subject's legally acceptable representative.
4.8.10 提供受試者同意之討論過程、受試者同意書和任何其他書面資料，均應含以下內容： (一) 臨床試驗為一種研究。 (二) 試驗的目的 (三) 試驗治療及每個治療之隨機分配機率。 (四) 治療之程序，包含所有侵入性行為。 (五) 受試者的責任。 (六) 臨床試驗中尚在試驗的部分。 (七) 對受試者或對胚胎、嬰兒或哺乳	4.8.10 Both the informed consent discussion and the written informed consent form and any other written information to be provided to subjects should include explanations of the following: (a) That the trial involves research. (b) The purpose of the trial. (c) The trial treatment(s) and the probability for random assignment to each treatment. (d) The trial procedures to be followed, including all invasive procedures.

中幼兒的可預期的危險或不便處。 (八) 可合理預期的臨床利益。如無預期的臨床利益，應告知受試者。 (九) 其他治療方式或療程，及其可能的重要好處及風險。 (十) 試驗相關損害發生時，受試者可得到的補償及\或治療。 (十一) 如有預期可按比例獲得的酬勞，需告知參與臨床試驗的受試者。 (十二) 如有預期支付的費用，需告知參與臨床試驗的受試者。 (十三) 受試者為自願性參與試驗，可不同意參與試驗或隨時退出試驗，而不受到處罰或損及其應得之利益。 (十四) 經由簽署受試者同意書，受試者即同意其原始醫療紀錄可直接受監測者、稽核者、人體試驗委員會\獨立倫理委員會及主管機關檢閱，以確保臨床試驗過程及數據符合相關法律及法規要求，且不違反受試者身分之機密性。 (十五) 辨認受試者身分之紀錄應保密，且在相關法律及法規要求下將不公開。如果發表試驗結果，受試者的身分仍將保密。	(e) The subject's responsibilities. (f) Those aspects of the trial that are experimental. (g) The reasonably foreseeable risks or inconveniences to the subject and, when applicable, to an embryo, fetus, or nursing infant. (h) The reasonably expected benefits. When there is no intended clinical benefit to the subject, the subject should be made aware of this. (i) The alternative procedure(s) or course(s) of treatment that may be available to the subject, and their important potential benefits and risks. (j) The compensation and/or treatment available to the subject in the event of trial-related injury. (k) The anticipated prorated payment, if any, to the subject for participating in the trial. (l) The anticipated expenses, if any, to the subject for participating in the trial. (m) That the subject's participation in the trial is voluntary and that the subject may refuse to participate or withdraw from the trial, at any time, without penalty or loss of benefits to which the subject is otherwise entitled.

(十六) 如果新資訊可能影響受試者繼續參與臨床試驗的意願，受試者或其法定代理人會被即時告知。 (十七) 進一步獲知有關試驗之資訊和受試者權利的聯絡人，及與試驗相關損害發生時的聯絡人。 (十八) 受試者終止參與試驗之可預期的情況或理由。 (十九) 受試者預計參與臨床試驗的時間。 (二十) 大約的受試者人數。	(n) That the monitor(s), the auditor(s), the IRB/IEC, and the regulatory authority(ies) will be granted direct access to the subject's original medical records for verification of clinical trial procedures and/or data, without violating the confidentiality of the subject, to the extent permitted by the applicable laws and regulations and that, by signing a written informed consent form, the subject or the subject's legally acceptable representative is authorizing such access. (o) That records identifying the subject will be kept confidential and, to the extent permitted by the applicable laws and/or regulations, will not be made publicly available. If the results of the trial are published, the subject's identity will remain confidential. (p) That the subject or the subject's legally acceptable representative will be informed in a timely manner if information becomes available that may be relevant to the subject's willingness to continue participation in the trial. (q) The person(s) to contact for further information regarding the trial and the

	rights of trial subjects, and whom to contact in the event of trial-related injury. (r) The foreseeable circumstances and/or reasons under which the subject's participation in the trial may be terminated. (s) The expected duration of the subject's participation in the trial. (t) The approximate number of subjects involved in the trial.
4.8.11 參加臨床試驗執行前，受試者或其法定代理人應收到一份已簽署及載明日期的受試者同意書及其他提供給受試者的書面資料的副本。若同意書或其他文件有修正，受試者參加臨床試驗期間，受試者或其法定代理人應收到已簽署及載明日期的受試者同意書及其他提供給受試者的書面資料之更新副本和任何修正案的副本。	4.8.11 Prior to participation in the trial, the subject or the subject's legally acceptable representative should receive a copy of the signed and dated written informed consent form and any other written information provided to the subjects. During a subject's participation in the trial, the subject or the subject's legally acceptable representative should receive a copy of the signed and dated consent form updates and a copy of any amendments to the written information provided to subjects.
4.8.12 當一個臨床試驗(以治療為目的或非以治療為目的)必須徵得受試者之法定代理人的同意，才能將受試者納入臨床試驗中時(例如：年幼者或，受	4.8.12 When a clinical trial (therapeutic or non-therapeutic) includes subjects who can only be enrolled in the trial with the consent of the subject's legally acceptable

試者患有嚴重的失智症)，受試者也應以其可理解的方式被告知參加此臨床試驗。如果情況許可，受試者也應同意此受試者同意書，親自簽署並載明日期。	representative (e.g., minors, or patients with severe dementia), the subject should be informed about the trial to the extent compatible with the subject's understanding and, if capable, the subject should sign and personally date the written informed consent.
4.8.13 除 4.8.14 所列舉之情形外，一個非以治療為目的的臨床試驗(例如，一個對受試者沒有可預見直接利益的臨床試驗)，應選擇本人同意且親自簽署並載明日期於受試者同意書之受試者來執行。	4.8.13 Except as described in 4.8.14, a non-therapeutic trial (i.e. a trial in which there is no anticipated direct clinical benefit to the subject), should be conducted in subjects who personally give consent and who sign and date the written informed consent form.
4.8.14 若符合以下情況，法定代理人可代理受試者同意加入非以治療為目的之臨床試驗： (一) 無法經由收納有能力簽署受試者同意書之受試者而達成試驗目標的臨床試驗。 (二) 臨床試驗對受試者之可預期危險很低。 (三) 對受試者福祉的負面影響很小。 (四) 法律沒有禁止。 (五) 人體試驗委員會\獨立倫理委員會很清楚的核准 / 贊同納入此類受試者，且包括在其書面同意函內。	4.8.14 Non-therapeutic trials may be conducted in subjects with consent of a legally acceptable representative provided the following conditions are fulfilled: (a) The objectives of the trial can not be met by means of a trial in subjects who can give informed consent personally. (b) The foreseeable risks to the subjects are low. (c) The negative impact on the subject's well-being is minimized and low. (d) The trial is not prohibited by law. (e) The approval/favourable opinion of the

此類臨床試驗，除非有正當的例外情形，應選擇該試驗藥品意圖治療之疾病或症狀之病人來進行。對於此類試驗之受試者應特別嚴密監測，若受試者有過度不適情形，即應退出臨床試驗。	IRB/IEC is expressly sought on the inclusion of such subjects, and the written approval/ favourable opinion covers this aspect. Such trials, unless an exception is justified, should be conducted in patients having a disease or condition for which the investigational product is intended. Subjects in these trials should be particularly closely monitored and should be withdrawn if they appear to be unduly distressed.
4.8.15 若緊急情況下無法預先取得受試者同意，應取得其法定代理人的同意。當無法預先取得受試者的同意且其法定代理人不在場時，為維護受試者的權利、安全、與福祉，且確保其符合相關法規的規定，必須在試驗計畫書中或其他文件說明緊急事件處理方法，並得到人體試驗委員會\獨立倫理委員會的書面核准\贊同。此臨床試驗相關訊息需盡快告知受試者或其法定代理人，並徵得繼續參與臨床試驗的同意和其他相關事宜的同意（參閱 4.8.10）。	4.8.15 In emergency situations, when prior consent of the subject is not possible, the consent of the subject's legally acceptable representative, if present, should be requested. When prior consent of the subject is not possible, and the subject's legally acceptable representative is not available, enrolment of the subject should require measures described in the protocol and/or elsewhere, with documented approval/favourable opinion by the IRB/IEC, to protect the rights, safety and well-being of the subject and to ensure compliance with applicable regulatory requirements. The subject or the subject's legally acceptable representative should be informed about the trial as soon as possible

	and consent to continue and other consent as appropriate (see 4.8.10) should be requested.
4.9 紀錄及報告	**4.9 Records and Reports**
附錄 4.9.0 試驗主持人\機構應保存適當且正確的原始文件及試驗紀錄，包括每個試驗中心所有受試者所進行的相關觀察。原始數據應具可溯源性、清晰易讀性、即時性、原始性、精確性及完整性。原始數據的修正應具可追蹤性，不應覆蓋原始的記載，必要時應予以說明（例如：經由稽核路徑）。	**ADDENDUM** 4.9.0 The investigator/institution should maintain adequate and accurate source documents and trial records that include all pertinent observations on each of the site's trial subjects. Source data should be attributable, legible, contemporaneous, original, accurate, and complete. Changes to source data should be traceable, should not obscure the original entry, and should be explained if necessary (e.g., via an audit trail).
4.9.1 試驗主持人應確保個案報告表和所有需要向試驗委託者報告中資料的精確度、完整性、易讀性和時間性。	4.9.1 The investigator should ensure the accuracy, completeness, legibility, and timeliness of the data reported to the sponsor in the CRFs and in all required reports.
4.9.2 從原始資料中擷取至個案報告表中的資料，應與原始資料一致，否則應解釋其中的差異。	4.9.2 Data reported on the CRF, that are derived from source documents, should be consistent with the source documents or the discrepancies should be explained.
4.9.3 對個案報告表的任何變更或修正，應	4.9.3 Any change or correction to a CRF should

記錄其修正的日期、修改者姓名縮寫、必要時應記錄更正原因，且不應覆蓋原先的紀錄 (即應該維持稽核路徑)；以上適用於書面資料和電子資料的更改或修正(參閱 5.18.4(n))。試驗委託者應提供適當有關資料修改的規範，讓試驗主持人和試驗主持人指定的人員可以依循。試驗委託者應擬定書面程序，以確保試驗委託者代表對個案報告表的更改或修正是必要的，並得到試驗主持人同意。試驗主持人應保留變更和修正的紀錄。	be dated, initialed, and explained (if necessary) and should not obscure the original entry (i.e. an audit trail should be maintained); this applies to both written and electronic changes or corrections (see 5.18.4 (n)). Sponsors should provide guidance to investigators and/or the investigators' designated representatives on making such corrections. Sponsors should have written procedures to assure that changes or corrections in CRFs made by sponsor's designated representatives are documented, are necessary, and are endorsed by the investigator. The investigator should retain records of the changes and corrections.
4.9.4 試驗主持人\機構應符合相關法規要求妥善保管所有執行臨床試驗之必要文件(參閱第 8 章)。試驗主持人\機構應設法防止這些書面資料遭受意外的破壞或提早銷毀。	4.9.4 The investigator/institution should maintain the trial documents as specified in Essential Documents for the Conduct of a Clinical Trial (see 8.) and as required by the applicable regulatory requirement(s). The investigator/institution should take measures to prevent accidental or premature destruction of these documents.
4.9.5 臨床試驗必要文件應保存至最後一個 ICH 會員國上市核准 後兩年，且無任何會員國有待定或預期的上市	4.9.5 Essential documents should be retained until at least 2 years after the last approval of a marketing application in an ICH region

核准；或是試驗研發正式終止後至少兩年。但如相關法規要求或試驗委託者同意下，這些文件應保存更長期間。試驗委託者有責任通知試驗主持人\機構何時不須再保留這些重要文件（參閱 5.5.12）。	and until there are no pending or contemplated marketing applications in an ICH region or at least 2 years have elapsed since the formal discontinuation of clinical development of the investigational product. These documents should be retained for a longer period however if required by the applicable regulatory requirements or by an agreement with the sponsor. It is the responsibility of the sponsor to inform the investigator/institution as to when these documents no longer need to be retained (see 5.5.12).
4.9.6 臨床試驗之財務事項，應載明於試驗委託者和試驗主持人\機構之簽署契約中。	4.9.6 The financial aspects of the trial should be documented in an agreement between the sponsor and the investigator/institution.
4.9.7 試驗主持人\機構應依監測者、稽核者、人體試驗委員會\獨立倫理委員會或主管機關之要求，提供其要求所有與試驗相關之紀錄。	4.9.7 Upon request of the monitor, auditor, IRB/IEC, or regulatory authority, the investigator/institution should make available for direct access all requested trial-related records.
4.10 進度報告	**4.10 Progress Reports**
4.10.1 試驗主持人每年應將臨床試驗進度報告提交人體試驗委員會\獨立倫理委員會，若人體試驗委員會\獨立倫理委員會認為有必要，得視情況要求更	4.10.1 The investigator should submit written summaries of the trial status to the IRB/IEC annually, or more frequently, if requested by the IRB/IEC.

頻繁的報告。	
4.10.2 當試驗機構有重大影響臨床試驗執行或增加受試者風險的改變發生時，試驗主持人應即時向試驗委託者、人體試驗 委員會\獨立倫理委員會、及主管機關提出書面報告。（參閱 3.3.8）。	4.10.2 The investigator should promptly provide written reports to the sponsor, the IRB/IEC (see 3.3.8) and, where applicable, the institution on any changes significantly affecting the conduct of the trial, and/or increasing the risk to subjects.
4.11 安全性通報	**4.11 Safety Reporting**
4.11.1 除試驗計畫書或其他文件（例如：主持人手冊）中載明無須立即通報之嚴重不良事件外，所有嚴重不良事件均應立即向試驗委託者報告，並於其後續立即提供詳細之書面報告。立即通報及後續報告應以受試者的試驗代碼代表，而非受試者的姓名、身分證字號、或地址。試驗主持人應遵從相關法規要求，向主管機關及人體試驗委員會\獨立倫理委員通報嚴重且未預期之藥品不良反應。	4.11.1 All serious adverse events (SAEs) should be reported immediately to the sponsor except for those SAEs that the protocol or other document (e.g., Investigator's Brochure) identifies as not needing immediate reporting. The immediate reports should be followed promptly by detailed, written reports. The immediate and follow-up reports should identify subjects by unique code numbers assigned to the trial subjects rather than by the subjects' names, personal identification numbers, and/or addresses. The investigator should also comply with the applicable regulatory requirement(s) related to the reporting of unexpected serious adverse drug reactions to the regulatory authority(ies) and the IRB/IEC.
4.11.2	4.11.2

試驗計畫書中定義為嚴重的安全性評估之不良事件和/或異常實驗室檢查值，應依據試驗計畫書規定的時間內向試驗委託者報告。	Adverse events and/or laboratory abnormalities identified in the protocol as critical to safety evaluations should be reported to the sponsor according to the reporting requirements and within the time periods specified by the sponsor in the protocol.
4.11.3 有關通報之死亡病例，試驗主持人應提供試驗委託者和人體試驗委員會\獨立倫理委員會要求的任何額外資訊 (例如：驗屍報告和最終的醫療紀錄)。	4.11.3 For reported deaths, the investigator should supply the sponsor and the IRB/IEC with any additional requested information (e.g., autopsy reports and terminal medical reports).
4.12 試驗提早中止或暫時停止 若試驗因任何原因提早中止或暫時停止，試驗主持人\機構應即時通知受試者，並確保受試者有適當的治療及追蹤。且如相關法規要求，應通知主管機關。此外：	**4.12 Premature Termination or Suspension of a Trial** If the trial is prematurely terminated or suspended for any reason, the investigator/institution should promptly inform the trial subjects, should assure appropriate therapy and follow-up for the subjects, and, where required by the applicable regulatory requirement(s), should inform the regulatory authority(ies). In addition:
4.12.1 若試驗主持人終止或暫時停止試驗前未先獲得試驗委託者的同意，如相關法規要求，試驗主持人應通知其機構，且試驗主持人\機構應即時通知試	4.12.1 If the investigator terminates or suspends a trial without prior agreement of the sponsor, the investigator should inform the institution where applicable, and the

驗委託者及人體試驗委員會\獨立倫理委員會，並提供其終止或暫時停止之詳細書面解釋。	investigator/institution should promptly inform the sponsor and the IRB/IEC, and should provide the sponsor and the IRB/IEC a detailed written explanation of the termination or suspension.
4.12.2 若試驗委託者終止或暫時停止試驗（參閱 5.21），如相關法規要求，試驗主持人應通知其機構，且試驗主持人\機構應即時通知人體試驗委員會\獨立倫理委員會，並提供其終止或暫時停止之詳細書面解釋。	4.12.2 If the sponsor terminates or suspends a trial (see 5.21), the investigator should promptly inform the institution where applicable and the investigator/institution should promptly inform the IRB/IEC and provide the IRB/IEC a detailed written explanation of the termination or suspension.
4.12.3 若人體試驗委員會\獨立倫理委員會終止或暫時停止其核准\贊同之試驗，試驗主持人應通知其機構，且試驗主持人\機構應即時通知試驗委託者，並提供驗委託者其終止或暫時停止之詳細書面解釋。（參閱 3.1.2、3.3.9）。	4.12.3 If the IRB/IEC terminates or suspends its approval/favourable opinion of a trial (see 3.1.2 and 3.3.9), the investigator should inform the institution where applicable and the investigator/institution should promptly notify the sponsor and provide the sponsor with a detailed written explanation of the termination or suspension.
4.13 試驗主持人之結案報告 試驗完成時，如相關法規要求，試驗主持人應通知其機構；且試驗主持人\機構應提供人體試驗委員會\獨立倫理委員會試驗結果之摘要，及提供主管機關所要求的報告。	**4.13 Final Report(s) by Investigator** Upon completion of the trial, the investigator, where applicable, should inform the institution; the investigator/institution should provide the IRB/IEC with a summary of the trial's outcome, and the regulatory authority(ies)

	with any reports required.
第 5 章、試驗委託者(SPONSOR)	
附錄	**ADDENDUM**
5.0 品質管理 試驗委託者應在試驗過程中所有階段執行品質管理系統。 試驗委託者應注重確保受試者保護及試驗結果可信度所必須的試驗活動。品質管理包括設計有效的臨床試驗計畫及數據收集與處理之工具及程序，以及收集對決策至關重要之資訊。 用於確保及控制試驗品質的方法，應與試驗的固有風險及所收集資訊的重要性相均衡。試驗委託者應確保試驗各面向具有可行性，並應避免非必要的複雜性、程序及數據收集。試驗計畫書、個案報告表及其他執行文件應清晰、簡潔、一致。 品質管理系統應採用如下述，以風險為基礎之方法。	**5.0 Quality Management** The sponsor should implement a system to manage quality throughout all stages of the trial process. Sponsors should focus on trial activities essential to ensuring human subject protection and the reliability of trial results. Quality management includes the design of efficient clinical trial protocols and tools and procedures for data collection and processing, as well as the collection of information that is essential to decision making. The methods used to assure and control the quality of the trial should be proportionate to the risks inherent in the trial and the importance of the information collected. The sponsor should ensure that all aspects of the trial are operationally feasible and should avoid unnecessary complexity, procedures, and data collection. Protocols, case report forms, and other operational

	documents should be clear, concise, and consistent. The quality management system should use a risk-based approach as described below.
5.0.1 關鍵流程及數據之辨識 擬定試驗計畫書時，試驗委託者應辨識出對受試者保護及試驗結果可信度的關鍵流程及數據。	5.0.1 Critical Process and Data Identification During protocol development, the sponsor should identify those processes and data that are critical to ensure human subject protection and the reliability of trial results.
5.0.2 風險確認 試驗委託者應對關鍵的試驗流程及數據確認其風險。系統方面（例如：標準操作程序、系統電腦化、人力編制）及臨床試驗方面（例如：試驗設	5.0.2 Risk Identification The sponsor should identify risks to critical trial processes and data. Risks should be considered at both the system level (e.g., standard operating procedures,

計、數據收集、受試者同意程序）之風險皆應納入考量。	computerized systems, personnel) and clinical trial level (e.g., trial design, data collection, informed consent process)
5.0.3 風險評估 試驗委託者應比對現有的風險管控措施，針對已確認之風險進行評估，並考量下列因素： (一)發生錯誤的可能性。 (二)此種錯誤可被偵測出來的程度。 (三)此種錯誤對受試者保護及試驗結果可信度之影響。	5.0.3 Risk Evaluation The sponsor should evaluate the identified risks, against existing risk controls by considering: (a) The likelihood of errors occurring. (b) The extent to which such errors would be detectable. (c) The impact of such errors on human subject protection and reliability of trial results.
5.0.4 風險管制 試驗委託者應決定降低哪些風險或接受哪些風險。用於降低風險至可接受範圍之方式，應與風險的重要性成比例。降低風險的活動可納入試驗設計及執行、監測計畫、締約者間角色及職責之協議、遵守標準作業程序之系統性安全措施，及過程與程序方面之培訓。 應預先建立品質容忍的限度，將醫學與統計變異性，以及試驗統計的設計納入考量，以確認影響受試者安全或試驗結果可信度的系統性問題。發現有偏離預定的品質容忍限度時，應進	5.0.4 Risk Control The sponsor should decide which risks to reduce and/or which risks to accept. The approach used to reduce risk to an acceptable level should be proportionate to the significance of the risk. Risk reduction activities may be incorporated in protocol design and implementation, monitoring plans, agreements between parties defining roles and responsibilities, systematic safeguards to ensure adherence to standard operating procedures, and training in processes and procedures. Predefined quality tolerance limits should

行評估以決定是否需採取行動。	be established, taking into consideration the medical and statistical characteristics of the variables as well as the statistical design of the trial, to identify systematic issues that can impact subject safety or reliability of trial results. Detection of deviations from the predefined quality tolerance limits should trigger an evaluation to determine if action is needed.
5.0.5 風險溝通 試驗委託者應記錄品質管理之活動。試驗委託者應與參與其中或受此類活動影響之人員，就品質管理活動進行溝通，以促進臨床試驗執行期間之風險審查及持續改進。	5.0.5 Risk Communication The sponsor should document quality management activities. The sponsor should communicate quality management activities to those who are involved in or affected by such activities, to facilitate risk review and continual improvement during clinical trial execution.
5.0.6 風險審查 試驗委託者應定期審查風險管控措施，將新興知識及經驗納入考量後，評估其所實施之品質管理活動是否仍具有效及相關性。	5.0.6 Risk Review The sponsor should periodically review risk control measures to ascertain whether the implemented quality management activities remain effective and relevant, taking into account emerging knowledge and experience.
5.0.7 風險報告 試驗委託者應在臨床試驗報告中，描	5.0.7 Risk Reporting The sponsor should describe the quality

述試驗中所實施之品質管理方法，並總結重要偏離預定品質容忍限度之情形及所採取之補救措施（參閱 ICH E3 9.6「數據之品質保證」）。	management approach implemented in the trial and summarize important deviations from the predefined quality tolerance limits and remedial actions taken in the clinical study report (ICH E3, Section 9.6 Data Quality Assurance).
5.1 品質保證及品質管制	**5.1 Quality Assurance and Quality Control**
5.1.1 試驗委託者應依照書面標準作業程序實施及維護品質保證及品質管制系統，以確保試驗執行及數據的產生，紀錄，及報告均遵從試驗計畫書、GCP 及相關法規要求。	5.1.1 The sponsor is responsible for implementing and maintaining quality assurance and quality control systems with written SOPs to ensure that trials are conducted and data are generated, documented (recorded), and reported in compliance with the protocol, GCP, and the applicable regulatory requirement(s).
5.1.2 試驗委託者應負責確認所有參與試驗相關單位的同意，確保所有試驗相關場所、原始資料/文件及報告，可由試驗委託者直接進行監測和稽核，並可接受國內外主管機關查核。（參閱 1.21）。	5.1.2 The sponsor is responsible for securing agreement from all involved parties to ensure direct access (see 1.21) to all trial related sites, source data/documents, and reports for the purpose of monitoring and auditing by the sponsor, and inspection by domestic and foreign regulatory authorities.
5.1.3 數據處理的每一步驟應採取品質管制，以確保所有數據之可信度及其處理的正確性。	5.1.3 Quality control should be applied to each stage of data handling to ensure that all data are reliable and have been processed

	correctly.
5.1.4 試驗委託者與試驗主持人\機構和\或任何其他參與此臨床試驗之人員所訂之協議應以書面紀錄，作為試驗計畫書之一部分或為獨立之協議。	5.1.4 Agreements, made by the sponsor with the investigator/institution and any other parties involved with the clinical trial, should be in writing, as part of the protocol or in a separate agreement.
5.2 受託研究機構	**5.2 Contract Research Organization (CRO)**
5.2.1 試驗委託者可移轉部份或全部與試驗相關的責任與功能予受託研究機構，但關於維護試驗數據的品質與完整性之最終責任仍在試驗委託者。受託研究機構應執行試驗品質保證與品質管制。	5.2.1 A sponsor may transfer any or all of the sponsor's trial-related duties and functions to a CRO, but the ultimate responsibility for the quality and integrity of the trial data always resides with the sponsor. The CRO should implement quality assurance and quality control.
5.2.2 試驗委託者應以書面委託方式，將與試驗相關的責任與功能委託受託研究機構辦理。 **附錄** 試驗委託者應對其受託執行與試驗相關的責任與功能進行監督，包括受託研究機構再委託第三方履行與試驗相關之責任及功能。	5.2.2 Any trial-related duty and function that is transferred to and assumed by a CRO should be specified in writing. **ADDENDUM** The sponsor should ensure oversight of any trial-related duties and functions carried out on its behalf, including trial-related duties and functions that are subcontracted to another party by the sponsor's contracted CRO(s).
5.2.3	5.2.3

未移轉給受託研究機構的試驗責任與功能，仍屬於試驗委託者。	Any trial-related duties and functions not specifically transferred to and assumed by a CRO are retained by the sponsor.
5.2.4 本指引有關試驗委託者的規章，亦適用於承擔試驗委託者有關試驗責任與功能的受託研究機構。	5.2.4 All references to a sponsor in this guideline also apply to a CRO to the extent that a CRO has assumed the trial related duties and functions of a sponsor.
5.3 醫療專業 試驗委託者應任用合適合格，並能對試驗相關醫療問題提供意見的醫療人員。若有必要，亦可指派外部顧問擔任上述工作。	**5.3 Medical Expertise** The sponsor should designate appropriately qualified medical personnel who will be readily available to advise on trial related medical questions or problems. If necessary, outside consultant(s) may be appointed for this purpose.
5.4 試驗設計	**5.4 Trial Design**
5.4.1 於所有試驗階段期間，試驗委託者應採用合適且合格之人員（例如：生物統計學家，臨床藥理人員及醫師）從事試驗計畫書與個案報告及規畫分析，和分析及準備期中與最後臨床試驗報告。	5.4.1 The sponsor should utilize qualified individuals (e.g. biostatisticians, clinical pharmacologists, and physicians) as appropriate, throughout all stages of the trial process, from designing the protocol and CRFs and planning the analyses to analyzing and preparing interim and final clinical trial reports.
5.4.2 其他相關的基準：試驗計畫書及其變更（參閱第 6 章）、ICH「藥品臨床試驗報告之格式及內容」及其他與試	5.4.2 For further guidance: Clinical Trial Protocol and Protocol Amendment(s) (see 6.), the ICH Guideline for Structure and Content of

驗設計、試驗計畫書及執行相關之 ICH 指導文件。	Clinical Study Reports, and other appropriate ICH guidance on trial design, protocol and conduct.
5.5 試驗管理、數據處理及紀錄保存	**5.5 Trial Management, Data Handling, and Record Keeping**
5.5.1 試驗委託者應任用合適合格之人員，監督所有試驗 的執行，處理與驗證試驗數據，進行統計分析，及準備試驗報告。	5.5.1 The sponsor should utilize appropriately qualified individuals to supervise the overall conduct of the trial, to handle the data, to verify the data, to conduct the statistical analyses, and to prepare the trial reports.
5.5.2 試驗委託者得設置獨立數據監測委員會，以評估臨床試驗之進展，包括定期評估安全性數據及重要療效指標，及建議試驗委託者是否繼續、修正或終止試驗。獨立數據監測委員會應建立書面標準作業程序，並保存所有會議之書面紀錄。	5.5.2 The sponsor may consider establishing an independent data-monitoring committee (IDMC) to assess the progress of a clinical trial, including the safety data and the critical efficacy endpoints at intervals, and to recommend to the sponsor whether to continue, modify, or stop a trial. The IDMC should have written operating procedures and maintain written records of all its meetings.
5.5.3 當試驗使用電子資料處理系統或遠端電子資料處理系統時，試驗委託者應： (一)確保並記錄電子資料處理系統符合試驗委託者對資料完整性、精	5.5.3 When using electronic trial data handling and/or remote electronic trial data systems, the sponsor should: (a) Ensure and document that the electronic data processing system(s) conforms to

確度、可信度及一致性之要求(例如：資料確效) 。 **附錄** 試驗委託者對於此類系統之確效方法應以風險評估為基礎，考慮系統的預期用途及系統對受試者保護與試驗結果可信度之潛在影響。 (二)維護上述系統之標準作業程序。 **附錄** 標準作業程序應涵蓋系統設置，安裝及使用。標準作業程序應描述系統確效及功能測試、數據收集和處理、系統維護、系統安全措施、變更控制、數據備份、還原、應變計畫和停用。試驗委託者、試驗主持人及其他涉及使用系統者之職責應明確，並應向使用者提供使用訓練。 (三)確保系統對資料更正的設計為資料更正留有紀錄且不將原輸入資料刪除(如 : 保存稽核路徑、資料路徑與修正路徑) 。 (四)應有安全程序以防止未經授權者使用系統或數據。 (五)保存授權修正試驗數據之人員名單 (參閱 4.1.5、4.9.3) 。 (六)保留適當的資料備份。 (七)確保盲性設計 (例如: 在資料輸入及處理時仍保留其盲性 設計) 。	the sponsor's established requirements for completeness, accuracy, reliability, and consistent intended performance (i.e. validation). **ADDENDUM** The sponsor should base their approach to validation of such systems on a risk assessment that takes into consideration the intended use of the system and the potential of the system to affect human subject protection and reliability of trial results. (b) Maintains SOPs for using these systems. **ADDENDUM** The SOPs should cover system setup, installation, and use. The SOPs should describe system validation and functionality testing, data collection and handling, system maintenance, system security measures, change control, data backup, recovery, contingency planning, and decommissioning. The responsibilities of the sponsor, investigator, and other parties with respect to the use of these computerized systems should be clear, and the users should be provided with training in their use. (c) Ensure that the systems are designed to

附錄 (八) 確保數據的完整性，包括對數據的描述背景、內容及結構。其對電腦化系統進行變更時尤為重要，例如軟體升級或資料遷移時。	permit data changes in such a way that the data changes are documented and that there is no deletion of entered data (i.e. maintain an audit trail, data trail, edit trail). (d) Maintain a security system that prevents unauthorized access to the data. (e) Maintain a list of the individuals who are authorized to make data changes (see 4.1.5 and 4.9.3). (f) Maintain adequate backup of the data. (g) Safeguard the blinding, if any (e.g. maintain the blinding during data entry and processing). **ADDENDUM** (h) Ensure the integrity of the data including any data that describe the context, content, and structure. This is particularly important when making changes to the computerized systems, such as software upgrades or migration of data.
5.5.4 若資料在處理過程中經過轉換，原始的觀察資料應能與轉換後資料進行比較。	5.5.4 If data are transformed during processing, it should always be possible to compare the original data and observations with the processed data.
5.5.5 試驗委託者應建立清楚之身分代碼，	5.5.5 The sponsor should use an unambiguous

以確認每位受試者之試驗數據（參閱本指引 1.58）。	subject identification code (see 1.58) that allows identification of all the data reported for each subject.
5.5.6 試驗委託者或其他數據所有者，應保存所有試驗委託者與試驗相關之特定必要文件(參閱第 8 章「執行臨床試驗之必要文件」)。	5.5.6 The sponsor, or other owners of the data, should retain all of the sponsor specific essential documents pertaining to the trial (see 8. Essential Documents for the Conduct of a Clinical Trial).
5.5.7 試驗委託者應按核准其藥品的國家或欲申請核准其藥品國家相關的法規要求，保存試驗委託者應負責的必要文件。	5.5.7 The sponsor should retain all sponsor-specific essential documents in conformance with the applicable regulatory requirement(s) of the country(ies) where the product is approved, and/or where the sponsor intends to apply for approval(s).
5.5.8 若試驗委託者停止試驗藥品之臨床發展（即對所有適應症、使用途徑或劑型），試驗委託者應保存其所有應負責之必要文件至試驗正式停止後至少 2 年或依照相關法規要求保存之。	5.5.8 If the sponsor discontinues the clinical development of an investigational product (i.e. for any or all indications, routes of administration, or dosage forms), the sponsor should maintain all sponsor-specific essential documents for at least 2 years after formal discontinuation or in conformance with the applicable regulatory requirement(s).
5.5.9 若試驗委託者終止試驗藥品之臨床發展__，試驗委託者應通知所有試驗	5.5.9 If the sponsor discontinues the clinical development of an investigational product,

主持人\機構，及所有主管機關。	the sponsor should notify all the trial investigators/institutions and all the regulatory authorities.
5.5.10 任何試驗資料所有權之移轉，應依相關法規要求通知主管機關。	5.5.10 Any transfer of ownership of the data should be reported to the appropriate authority(ies), as required by the applicable regulatory requirement(s).
5.5.11 試驗委託者應負責之必要文件，應保存至本指引適用地區內最後申請上市核准後至少二年，且本指引適用地區內已無待定或預期的上市核准；或試驗研發正式終止後至少兩年。若相關法規要求或試驗委託者認為必要時，上述文件應延長保存期間。	5.5.11 The sponsor specific essential documents should be retained until at least 2 years after the last approval of a marketing application in an ICH region and until there are no pending or contemplated marketing applications in an ICH region or at least 2 years have elapsed since the formal discontinuation of clinical development of the investigational product. These documents should be retained for a longer period however if required by the applicable regulatory requirement(s) or if needed by the sponsor.
5.5.12 試驗委託者應以書面方式通知試驗主持人\機構紀錄保存的必要性。當試驗相關紀錄無須繼續保存者，試驗委託者應書面通知試驗主持人\機構。	5.5.12 The sponsor should inform the investigator(s)/institution(s) in writing of the need for record retention and should notify the investigator(s)/institution(s) in writing when the trial related records are no longer needed.

5.6 試驗主持人之甄選	**5.6 Investigator Selection**
5.6.1 試驗委託者應負責甄選試驗主持人。每一試驗主持人應具備合格之訓練及經驗，且應有適當之資源(參閱 4.1, 4.2) ，以正確的執行其負責的試驗。如果多機構合作臨床試驗組成協調委員會或選擇協調試驗主持人，其組成及選擇應為試驗委託者之責任。	5.6.1 The sponsor is responsible for selecting the investigator(s)/institution(s). Each investigator should be qualified by training and experience and should have adequate resources (see 4.1, 4.2) to properly conduct the trial for which the investigator is selected. If organization of a coordinating committee and/or selection of coordinating investigator(s) are to be utilized in multicentre trials, their organization and/or selection are the sponsor's responsibility.
5.6.2 試驗委託者在與試驗主持人\機構達成執行試驗之協議前，應提供試驗主持人\機構試驗計畫書及最新主持人手冊，並應給予試驗主持人\機構充分時間，檢閱試驗計畫書及試相關資訊。	5.6.2 Before entering an agreement with an investigator/institution to conduct a trial, the sponsor should provide the investigator(s)/institution(s) with the protocol and an up-to-date Investigator's Brochure, and should provide sufficient time for the investigator/institution to review the protocol and the information provided.
5.6.3 試驗委託者應取得試驗主持人\機構對下列事項之同意： (一)執行試驗時，遵從 GCP、相關法規要求 (參閱 4.1.3) ，試驗委託者及人體試驗委員會\獨立倫理	5.6.3 The sponsor should obtain the investigator's/institution's agreement: (a) to conduct the trial in compliance with GCP, with the applicable regulatory requirement(s) (see 4.1.3), and with the

委員會已核准\贊同之試驗計畫書（參閱 4.5.1）。 (二)遵從數據紀錄\報告的程序。 (三)接受監測，稽核及查核（參閱 4.1.4）。 (四)保存試驗主持人\機構應建檔之必要文件（參閱第 8 章）至試驗委託者告知試驗主持人\機構文件已不必再保存時（參閱 4.9.4、5.5.12）。 試驗委託者及試驗主持人\機構應在試驗計畫書或其他文件上簽名，確認雙方達成協議。	protocol agreed to by the sponsor and given approval/favourable opinion by the IRB/IEC (see 4.5.1); (b) to comply with procedures for data recording/reporting; (c) to permit monitoring, auditing and inspection (see 4.1.4) and (d) to retain the trial related essential documents until the sponsor informs the investigator/institution these documents are no longer needed (see 4.9.4 and 5.5.12). The sponsor and the investigator/institution should sign the protocol, or an alternative document, to confirm this agreement.
5.7 責任及功能的分配 開始試驗之前，試驗委託者應定義，建立，及分配所有試驗相關之責任及功能。	**5.7 Allocation of Responsibilities** Prior to initiating a trial, the sponsor should define, establish, and allocate all trial related duties and functions.
5.8 受試者及試驗主持人之報償	**5.8 Compensation to Subjects and Investigators**
5.8.1 若相關法規要求，試驗委託者應提供受試者保險，或應負責（法律或財物上）試驗主持人\機構源自試驗而來之賠償要求。惟因試驗主持人\機構之醫療疏失所致者，不在此限。	5.8.1 If required by the applicable regulatory requirement(s), the sponsor should provide insurance or should indemnify (legal and financial coverage) the investigator/the institution against claims arising from the trial, except for claims that arise from malpractice and/or negligence.

5.8.2 試驗委託者之政策及程序上應遵從相關法規要求，載明與試驗相關之傷害發生時治療受試者之費用。	5.8.2 The sponsor's policies and procedures should address the costs of treatment of trial subjects in the event of trial-related injuries in accordance with the applicable regulatory requirement(s).
5.8.3 當受試者獲得補償時，補償的方式及作法應符合相關法規的要求。	5.8.3 When trial subjects receive compensation, the method and manner of compensation should comply with applicable regulatory requirement(s).
5.9 財務 試驗委託者與試驗主持人\機構間有關試驗財務方面的協議應以文件證明。	**5.9 Financing** The financial aspects of the trial should be documented in an agreement between the sponsor and the investigator/institution.
5.10 向主管機關通知/申請 臨床試驗開始前，試驗委託者（或試驗委託者及試驗主持人，依法規要求）應將所有申請資料送至主管機關審查、接受，或核准開始試驗（依相關法規要求）。任何通報或申請應載明日期，且有足夠資訊以確認試驗計畫書。	**5.10 Notification/Submission to Regulatory Authority(ies)** Before initiating the clinical trial(s), the sponsor (or the sponsor and the investigator, if required by the applicable regulatory requirement(s)) should submit any required application(s) to the appropriate authority(ies) for review, acceptance, and/or permission (as required by the applicable regulatory requirement(s)) to begin the trial(s). Any notification/submission should be dated and contain sufficient information to identify the protocol.

5.11 人體試驗委員會\獨立倫理委員會之審查確認	**5.11 Confirmation of Review by IRB/IEC**
5.11.1 試驗委託者應自試驗主持人\機構取得下列資料： (一)試驗主持人\機構之人體試驗委員會\獨立倫理委員會的名稱及地址。 (二)人體試驗委員會\獨立倫理委員會是依據藥品優良試驗規範及相關法律與法規而組成及運作的聲明。 (三)人體試驗委員會\獨立倫理委員會核准\贊同的意見。若試驗委託者要求，須提供一份最新版的試驗計畫書、受試者同意書、其他提供受試者之書面資料，受試者招募程序，提供受試者的報酬與補償的文件，及人體試驗委員會\獨立倫理委員會可能要求之文件。	5.11.1 The sponsor should obtain from the investigator/institution: (a) The name and address of the investigator's/institution's IRB/IEC. (b) A statement obtained from the IRB/IEC that it is organized and operates according to GCP and the applicable laws and regulations. (c) Documented IRB/IEC approval/favourable opinion and, if requested by the sponsor, a current copy of protocol, written informed consent form(s) and any other written information to be provided to subjects, subject recruiting procedures, and documents related to payments and compensation available to the subjects, and any other documents that the IRB/IEC may have requested.
5.11.2 如人體試驗委員會\獨立倫理委員會對試驗任何方面的變更做出核准/贊同意見的情形下，如試驗計畫書，受試者同意書及其他提供受試者的書面資料或其他程序的修正，試驗委託者應自試驗主持人\機構處取得一份	5.11.2 If the IRB/IEC conditions its approval/favourable opinion upon change(s) in any aspect of the trial, such as modification(s) of the protocol, written informed consent form and any other written information to be provided to

修正後之副本及人體試驗委員會\獨立倫理委員會核准/贊同之日期。	subjects, and/or other procedures, the sponsor should obtain from the investigator/institution a copy of the modification(s) made and the date approval/favourable opinion was given by the IRB/IEC.
5.11.3 試驗委託者應自試驗主持人\機構取得任何人體試驗委員會\獨立倫理委員會重新核准\評估之文件及其日期，及撤回或暫停核准/贊同之文件及其日期。	5.11.3 The sponsor should obtain from the investigator/institution documentation and dates of any IRB/IEC reapprovals/re-evaluations with favourable opinion, and of any withdrawals or suspensions of approval/favourable opinion.
5.12 試驗藥品的資訊	**5.12 Information on Investigational Product(s)**
5.12.1 在籌劃試驗時，試驗委託者應確保有充分的非臨床和\或臨床研究之安全性及有效性資料，以支持試驗族群在試驗期間內接受其給藥途徑及劑量。	5.12.1 When planning trials, the sponsor should ensure that sufficient safety and efficacy data from nonclinical studies and/or clinical trials are available to support human exposure by the route, at the dosages, for the duration, and in the trial population to be studied.
5.12.2 當有重大新資訊時，試驗委託者應立即更新主持人手冊（參閱第 7 章「主持人手冊」）。	5.12.2 The sponsor should update the Investigator's Brochure as significant new information becomes available (see 7. Investigator's Brochure).
5.13 試驗藥品之製造、包裝、標示及	**5.13 Manufacturing, Packaging,**

編碼	**Labelling, and Coding Investigational Product(s)**
5.13.1 試驗委託者應確保試驗藥品（包括活性對照藥品及安慰劑）其特性合於該藥品的發展階段，其製造符合藥品優良製造規範，其代碼及標籤能保護盲性設計。標籤應符合相關法規規定。	5.13.1 The sponsor should ensure that the investigational product(s) (including active comparator(s) and placebo, if applicable) is characterized as appropriate to the stage of development of the product(s), is manufactured in accordance with any applicable GMP, and is coded and labelled in a manner that protects the blinding, if applicable. In addition, the labelling should comply with applicable regulatory requirement(s).
5.13.2 試驗委託者應決定試驗藥品之儲存溫度、儲存條件（例如：避光）、儲存時間、溶液配製程序及藥品注射器材。試驗委託者應通知所有相關人員（例如：監測者、試驗主持人、藥師、儲存管理人員）上述儲存方式。	5.13.2 The sponsor should determine, for the investigational product(s), acceptable storage temperatures, storage conditions (e.g. protection from light), storage times, reconstitution fluids and procedures, and devices for product infusion, if any. The sponsor should inform all involved parties (e.g. monitors, investigators, pharmacists, storage managers) of these determinations.
5.13.3 試驗藥品之包裝應能在運送及儲存期間預防污染及變質。	5.13.3 The investigational product(s) should be packaged to prevent contamination and unacceptable deterioration during transport and storage.

5.13.4 在盲性試驗中，試驗藥品的代碼系統應能在緊急情況時迅速辨別所使用藥品，而不會破壞盲性設計的功能。	5.13.4 In blinded trials, the coding system for the investigational product(s) should include a mechanism that permits rapid identification of the product(s) in case of a medical emergency, but does not permit undetectable breaks of the blinding.
5.13.5(202) 在臨床發展過程中，試驗藥品或對照藥品之配方有重大改變者，應於新配方用於臨床試驗前，完成評估是否會明顯改變藥品藥動學特性的研究(如: 安定性，溶離率，生體可用率) 。	5.13.5 If significant formulation changes are made in the investigational or comparator product(s) during the course of clinical development, the results of any additional studies of the formulated product(s) (e.g. stability, dissolution rate, bioavailability) needed to assess whether these changes would significantly alter the pharmacokinetic profile of the product should be available prior to the use of the new formulation in clinical trials.
5.14 試驗藥品之供給及處理	**5.14 Supplying and Handling Investigational Product(s)**
5.14.1 試驗委託者負責提供試驗藥品給試驗主持人\機構。	5.14.1 The sponsor is responsible for supplying the investigator(s)/institution(s) with the investigational product(s).
5.14.2 試驗委託者應在得到所有需要的文件(如人體試驗委員會\獨立倫理委員會及主管機關之核准/贊同意見) 後，	5.14.2 The sponsor should not supply an investigator/institution with the investigational product(s) until the sponsor

方可提供試驗藥品給試驗主持人\機構。	obtains all required documentation (e.g. approval/favourable opinion from IRB/IEC and regulatory authority(ies)).
5.14.3 試驗委託者應確保書面程序包含試驗主持人\機構應遵從之試驗藥品處理與保存的說明及其後續文件。程序應載明適當及安全地接收、處理、貯存、發藥、自受試者處取回餘藥、將餘藥歸還試驗委託者（或由試驗委託者授權且符合相關法規要求之處置方式）等事項。	5.14.3 The sponsor should ensure that written procedures include instructions that the investigator/institution should follow for the handling and storage of investigational product(s) for the trial and documentation thereof. The procedures should address adequate and safe receipt, handling, storage, dispensing, retrieval of unused product from subjects, and return of unused investigational product(s) to the sponsor (or alternative disposition if authorized by the sponsor and in compliance with the applicable regulatory requirement(s)).
5.14.4 試驗委託者應： (一)確保試驗藥品即時交付予試驗主持人。 (二)保留運送、接收、配置、回收及銷毀試驗藥品之文件紀（參閱第 8 章「執行臨床試驗之必要文件」)。 (三)維持試驗藥品的回收及其紀錄回收之系統(回收不良藥品，試驗結束後收回，收回過期藥品）。 (四)維持餘藥配置及其配置證明文件之系統。	5.14.4 The sponsor should: (a) Ensure timely delivery of investigational product(s) to the investigator(s). (b) Maintain records that document shipment, receipt, disposition, return, and destruction of the investigational product(s) (see 8. Essential Documents for the Conduct of a Clinical Trial). (c) Maintain a system for retrieving investigational products and documenting this retrieval (e.g. for

	deficient product recall, reclaim after trial completion, expired product reclaim). (d) Maintain a system for the disposition of unused investigational product(s) and for the documentation of this disposition.
5.14.5 試驗委託者應： (一)採取措施以確保試驗藥品在使用期間之穩定性。 (二)保留足夠的試驗藥品樣品，當需要時，以便再詳細確認其特性，並保存批次樣品分析及特性之紀錄。如為取得延長藥品貯存時間之許可，樣品應保留至安定性試驗數據分析完成或依相關法規要求，前述二者要求較長之期間。	5.14.5 The sponsor should: (a) Take steps to ensure that the investigational product(s) are stable over the period of use. (b) Maintain sufficient quantities of the investigational product(s) used in the trials to reconfirm specifications, should this become necessary, and maintain records of batch sample analyses and characteristics. To the extent stability permits, samples should be retained either until the analyses of the trial data are complete or as required by the applicable regulatory requirement(s), whichever represents the longer retention period.
5.15 紀錄檢視	**5.15 Record Access**
5.15.1 試驗委託者應確保試驗計畫書或其他書面協議中，載明試驗主持人\機構對試驗相關之監測、稽核、人體試驗	5.15.1 The sponsor should ensure that it is specified in the protocol or other written agreement that the

委員會\獨立倫理委員會審查及主管機關查核，可直接檢視原始數據/文件。	investigator(s)/institution(s) provide direct access to source data/documents for trial-related monitoring, audits, IRB/IEC review, and regulatory inspection.
5.15.2 試驗委託者應確認與試驗相關之監測、稽核、人體試驗委員會\獨立倫理委員會審查及主管機關查核時，每一位受試者均已書面同意，可直接檢視其個人的原始醫療紀錄。	5.15.2 The sponsor should verify that each subject has consented, in writing, to direct access to his/her original medical records for trial-related monitoring, audit, IRB/IEC review, and regulatory inspection.
5.16 安全性資料	**5.16 Safety Information**
5.16.1 試驗委託者應持續進行試驗藥品的安全性評估。	5.16.1 The sponsor is responsible for the ongoing safety evaluation of the investigational product(s).
5.16.2 若發現可能危害受試者安全、影響試驗執行或影響人體試驗委員會\獨立倫理委員會同意試驗繼續進行時，試驗委託者應立刻通知相關試驗主持人\機構及主管機關。	5.16.2 The sponsor should promptly notify all concerned investigator(s)/institution(s) and the regulatory authority(ies) of findings that could affect adversely the safety of subjects, impact the conduct of the trial, or alter the IRB/IEC's approval/favourable opinion to continue the trial.
5.17 藥品不良反應報告	**5.17 Adverse Drug Reaction Reporting**
5.17.1 對所有嚴重且未預期之藥品不良反應，試驗委託者應加速通報相關試驗主持人\機構、人體試驗委員會\獨立倫理委員會及主管機關。	5.17.1 The sponsor should expedite the reporting to all concerned investigator(s)/institutions(s), to the IRB(s)/IEC(s), where required, and to the

	regulatory authority(ies) of all adverse drug reactions (ADRs) that are both serious and unexpected.
5.17.2 加速通報之報告應符合相關法規要求及 ICH 臨床安全性數據管理指引：快速通報之定義及標準。	5.17.2 Such expedited reports should comply with the applicable regulatory requirement(s) and with the ICH Guideline for Clinical Safety Data Management: Definitions and Standards for Expedited Reporting.
5.17.3 試驗委託者應依相關法規要求，向主管機關提出最新安全性及期間報告。	5.17.3 The sponsor should submit to the regulatory authority(ies) all safety updates and periodic reports, as required by applicable regulatory requirement(s).
5.18 監測	**5.18 Monitoring**
5.18.1 目的 監測試驗之目的係為確認： (一)受試者之權利及福祉受到保護。 (二)所報告的試驗數據準確、完整且可自原始資料中查證。 (三)試驗之執行符合經核准之試驗計畫書及其變更版本、GCP 及相關法規要求。	5.18.1 Purpose The purposes of trial monitoring are to verify that: (a) The rights and well-being of human subjects are protected. (b) The reported trial data are accurate, complete, and verifiable from source documents. (c) The conduct of the trial is in compliance with the currently approved protocol/amendment(s), with GCP, and with the applicable regulatory requirement(s).

5.18.2 監測者之選擇及其資格 (一)監測者應由試驗委託者指派。 (二)監測者應經適當訓練，且應有足以適當監測試驗之科學及/或臨床知識。監測者之資格應有文件證明。 (三)監測者應清楚了解試驗藥品、試驗計畫書、受試者同意書及提供給受試者之書面資料、試驗委託者之標準作業程序、GCP 及相關法規要求。	5.18.2 Selection and Qualifications of Monitors (a) Monitors should be appointed by the sponsor. (b) Monitors should be appropriately trained, and should have the scientific and/or clinical knowledge needed to monitor the trial adequately. A monitor's qualifications should be documented. (c) Monitors should be thoroughly familiar with the investigational product(s), the protocol, written informed consent form and any other written information to be provided to subjects, the sponsor's SOPs, GCP, and the applicable regulatory requirement(s).
5.18.3 監測的範圍與性質 試驗委託者應確保試驗在適當的監測下執行。試驗委託者應決定適當的監測範圍及性質。監測範圍及性質之決定，應考量試驗之目標、目的、設計、複雜性、盲性、規模及療效指標。原則上，在試驗開始前、試驗期間及試驗後，均須有實地監測；但在例外情況下，試驗委託者得採用中央監測(系統遠端監測)，加上試驗主持人之訓練及會議，及延伸性的書面規範，	5.18.3 Extent and Nature of Monitoring The sponsor should ensure that the trials are adequately monitored. The sponsor should determine the appropriate extent and nature of monitoring. The determination of the extent and nature of monitoring should be based on considerations such as the objective, purpose, design, complexity, blinding, size, and endpoints of the trial. In general there is a need for on-site monitoring, before,

以確保試驗計畫符合 GCP 執行。統計方法的抽樣可作為選擇驗證數據的方法之一。 **附錄** 試驗委託者應開發一種具系統性、優先性且以風險為基礎的方法來監測臨床試驗。本節所描述有關監測範圍及性質之彈性，旨在允許可促進監測有效性及效率的不同方法。試驗委託者得選擇實地監測、實地和中央監測(系統遠端監測)合併使用或在合理的情況下採取中央監測(系統遠端監測)。試驗委託者應記錄其所選擇監測策略之理由(例如：在監測計畫中)。實地監測是在執行臨床試驗的地點進行。中央監測(系統遠端監測)是由具有適當資格及訓練之人員(例如：資料管理者、生物統計 學家)，即時地對累積資料進行遠端評估。中央監測(系統遠端監測)過程提供額外的監控功能，可補充及減少實地監測之範圍及/或頻率，並協助區別可靠的資料及潛在的不可靠資料。 經中央監測(系統遠端監測)的累積資料進行審查可能包括統計分析在內，可用於： (一)識別遺漏的數據、不一致的數據、異常數據、非預期的變異性欠缺及計畫偏離。	during, and after the trial; however in exceptional circumstances the sponsor may determine that central monitoring in conjunction with procedures such as investigators' training and meetings, and extensive written guidance can assure appropriate conduct of the trial in accordance with GCP. Statistically controlled sampling may be an acceptable method for selecting the data to be verified. **ADDENDUM** The sponsor should develop a systematic, prioritized, risk-based approach to monitoring clinical trials. The flexibility in the extent and nature of monitoring described in this section is intended to permit varied approaches that improve the effectiveness and efficiency of monitoring. The sponsor may choose on-site monitoring, a combination of on-site and centralized monitoring, or, where justified, centralized monitoring. The sponsor should document the rationale for the chosen monitoring strategy (e.g., in the monitoring plan). On-site monitoring is performed at the sites at which the clinical trial is being conducted. Centralized monitoring is a remote evaluation of accumulating data,

(二)檢視數據趨勢，例如在試驗中心內或各試驗中心間的資料之範圍、一致性及變異性。 (三)評估一個試驗中心或各試驗中心的數據收集及報告中的系統性或重大錯誤；或潛在的數據操縱或數據完整性問題。 (四)分析各試驗中心之特性及性能指標。 (五)選擇實地監測之地點及/或過程。	performed in a timely manner, supported by appropriately qualified and trained persons (e.g., data managers, biostatisticians). Centralized monitoring processes provide additional monitoring capabilities that can complement and reduce the extent and/or frequency of on-site monitoring and help distinguish between reliable data and potentially unreliable data. Review, that may include statistical analyses, of accumulating data from centralized monitoring can be used to: (a) identify missing data, inconsistent data, data outliers, unexpected lack of variability and protocol deviations. (b) examine data trends such as the range, consistency, and variability of data within and across sites. (c) evaluate for systematic or significant errors in data collection and reporting at a site or across sites; or potential data manipulation or data integrity problems. (d) analyze site characteristics and performance metrics. (e) select sites and/or processes for targeted on-site monitoring.
5.18.4 監測者之職責	5.18.4 Monitor's Responsibilities

監測者應根據試驗委託者之要求，確保試驗依下列與試驗及試驗中心相關且必要之措施，以確保試驗正確的執行及記錄： (一)擔任試驗委託者及試驗主持人間之主要溝通聯繫者。 (二)確認試驗主持人具備適當資格及資源(參閱 4.1、4.2、5.6)，並在試驗過程中仍維持其適當性；同時試驗相關人員與設備包括實驗室與儀器，亦可適當地、安全地及正確地執行試驗，並且在試驗過程仍維持其適當性。 (三)確認試驗藥品： 1. 儲存時間及條件皆可接受，試驗過程中有充足的試驗藥品可供給。 2. 試驗藥品僅提供符合資格之受試者，且使用劑量符合試驗計畫書規定。 3. 提供受試者正確的使用、處理、儲藏、歸還試驗用藥品 之必要說明。。 4. 在試驗中心所點收、使用、歸還之試驗藥品皆有管制及適當地記錄。 5. 試驗中心未使用試驗藥品的處理，應符合相關法規且符合試驗委託者授權的步驟。	The monitor(s) in accordance with the sponsor's requirements should ensure that the trial is conducted and documented properly by carrying out the following activities when relevant and necessary to the trial and the trial site: (a) Acting as the main line of communication between the sponsor and the investigator. (b) Verifying that the investigator has adequate qualifications and resources (see 4.1, 4.2, 5.6) and remain adequate throughout the trial period, that facilities, including laboratories, equipment, and staff, are adequate to safely and properly conduct the trial and remain adequate throughout the trial period. (c) Verifying, for the investigational product(s): (i) That storage times and conditions are acceptable, and that supplies are sufficient throughout the trial. (ii) That the investigational product(s) are supplied only to subjects who are eligible to receive it and at the protocol specified dose(s). (iii) That subjects are provided with necessary instruction on properly

(四)確認試驗主持人遵從經審查核准的試驗計畫書及其變更版本。 (五)確認受試者在參與試驗前皆已簽署受試者同意書。 (六)確保試驗主持人收到最新版的主持人手冊、及執行試驗所需的資料與試驗材料，以適當的執行試驗並符合相關法規。。 (七)確認試驗主持人及試驗相關人員已被充份告知試驗計畫之相關事項。 (八)確認試驗主持人與試驗相關人員依照試驗計畫書及試驗委託者與試驗主持人\機構的書面協議來執行其被指定的職務且未將職務指派給未授權人員。 (九)確認試驗主持人僅收納符合資格的受試者。 (十)報告受試者之收案速度。 (十一) 確認原始文件及其他試驗紀錄正確、完整、持續更新且完善地保存。 (十二) 確認試驗主持人提供所有必要之報告、通報資料、申請書及送審資料，且這些文件皆正確、完整、即時、清晰易讀、載明日期並可識別該試驗。 (十三) 核對個案報告表登錄、原始文件及其他試驗相關紀錄之正確	using, handling, storing, and returning the investigational product(s). (iv) That the receipt, use, and return of the investigational product(s) at the trial sites are controlled and documented adequately. (v) That the disposition of unused investigational product(s) at the trial sites complies with applicable regulatory requirement(s) and is in accordance with the sponsor. (d) Verifying that the investigator follows the approved protocol and all approved amendment(s), if any. (e) Verifying that written informed consent was obtained before each subject's participation in the trial. (f) Ensuring that the investigator receives the current Investigator's Brochure, all documents, and all trial supplies needed to conduct the trial properly and to comply with the applicable regulatory requirement(s). (g) Ensuring that the investigator and the investigator's trial staff are adequately informed about the trial. (h) Verifying that the investigator and the investigator's trial staff are performing

性與完整性。監測者應特別確認： 1. 試驗計畫書所需之數據，已正確地登錄於個案報告表中，且與原始文件一致。 2. 每位受試者所接受之任何治療劑量及/或治療方式之變更，均適當地記錄。 3. 不良事件、併用藥品及併發症，均依試驗計畫書要求登錄於個案報告表。 4. 受試者未回診、未執行之檢驗及檢查，均清楚登錄於個案報告表。 5. 所有退出試驗之受試者，均已登錄於個案報告表中，並載明原因。 (十四) 告知試驗主持人個案報告表登錄上之錯誤、遺漏或不清楚之處。監測者應確保試驗主持人適當予以更正、新增或刪除並載明日期、說明原因(若有必要)及簽署姓名，或由授權之試驗相關人員代替簽署。簽署授權名單應建檔。 (十五) 確認所有不良事件均已依GCP、試驗計畫書、人體試驗委員會\獨立倫理委員、試驗委託者及相關法規要求之時程內通報。 (十六) 確認試驗主持人保存試驗之必要文件。(參閱第 8 章「執行臨床試驗之必要文件」)	the specified trial functions, in accordance with the protocol and any other written agreement between the sponsor and the investigator/institution, and have not delegated these functions to unauthorized individuals. (i) Verifying that the investigator is enrolling only eligible subjects. (j) Reporting the subject recruitment rate. (k) Verifying that source documents and other trial records are accurate, complete, kept up-to-date and maintained. (l) Verifying that the investigator provides all the required reports, notifications, applications, and submissions, and that these documents are accurate, complete, timely, legible, dated, and identify the trial. (m) Checking the accuracy and completeness of the CRF entries, sourcedocuments and other trial-related records against each other. The monitor specifically should verify that: (i) The data required by the protocol are reported accurately on the CRFs and are consistent with the source documents. (ii) Any dose and/or therapy

(十七) 與試驗主持人溝通不符合試驗計畫書、標準作業程序、GCP 及相關法規要求之偏離情形，並採取適當措施，避免偏離情形再次發生。	modifications are well documented for each of the trial subjects. (iii) Adverse events, concomitant medications and intercurrent illnesses are reported in accordance with the protocol on the CRFs. (iv) Visits that the subjects fail to make, tests that are not conducted, and examinations that are not performed are clearly reported as such on the CRFs. (v) All withdrawals and dropouts of enrolled subjects from the trial are reported and explained on the CRFs. (n) Informing the investigator of any CRF entry error, omission, or illegibility.The monitor should ensure that appropriate corrections, additions, or deletions are made, dated, explained (if necessary), and initialed by the investigator or by a member of the investigator's trial staff who is authorized to initial CRF changes for the investigator. This authorization should be documented. (o) Determining whether all adverse events (AEs) are appropriately reported within the time periods required by GCP, the protocol, the IRB/IEC, the sponsor, and the applicable regulatory

	requirement(s). (p) Determining whether the investigator is maintaining the essential documents (see 8. Essential Documents for the Conduct of a Clinical Trial). (q) Communicating deviations from the protocol, SOPs, GCP, and the applicable regulatory requirements to the investigator and taking appropriate action designed to prevent recurrence of the detected deviations.
5.18.5 監測程序 監測者應遵從試驗委託者建立之書面標準作業程序，及試驗委託者為監測特定試驗所建立之特定程序。	5.18.5 Monitoring Procedures The monitor(s) should follow the sponsor's established written SOPs as well as those procedures that are specified by the sponsor for monitoring a specific trial.
5.18.6 監測報告 (一)監測者應在每一次試驗中心之訪視或試驗相關之溝通後，提供一份書面報告予試驗委託者。 (二)報告應含日期、試驗中心、監測者姓名及試驗主持人或其他聯絡人之姓名。 (三)報告中應摘要描述監測者檢閱之內容，及重大發現/事實、偏離及缺失、結論、採取或將採取之措施及/或為確保遵從性所建議之措施。	5.18.6 Monitoring Report (a) The monitor should submit a written report to the sponsor after each trial site visit or trial-related communication. (b) Reports should include the date, site, name of the monitor, and name of the investigator or other individual(s) contacted. (c) Reports should include a summary of what the monitor reviewed and the monitor's statements concerning the

(四)由試驗委託者指定之代表，記錄檢閱及追蹤監測報告。 **附錄** (五)實地或中央監測(系統遠端監測)的報告應及時提供給試驗委託者（包括適當的管理及負責試驗和監督試驗的工作人員），以供檢閱及追蹤。監測結果應詳細記錄，以確認監測計畫的遵從性。中央監測(系統遠端監測)的報告應定期，並與實地監測區隔。	significant findings/facts, deviations and deficiencies, conclusions, actions taken or to be taken and/or actions recommended to secure compliance. (d) The review and follow-up of the monitoring report with the sponsor should be documented by the sponsor's designated representative. **ADDENDUM** (e) Reports of on-site and/or centralized monitoring should be provided to the sponsor (including appropriate management and staff responsible for trial and site oversight) in a timely manner for review and follow up. Results of monitoring activities should be documented in sufficient detail to allow verification of compliance with the monitoring plan. Reporting of centralized monitoring activities should be regular and may be independent from site visits.
附錄 5.18.7 監測計畫 試驗委託者應針對特定受試者保護及資料完整性的風險考量，制定監測計畫。監測計畫應描述監測策略、所有各方參與監測人員的職責、各種監	**ADDENDUM** 5.18.7 Monitoring Plan The sponsor should develop a monitoring plan that is tailored to the specific human subject protection and data integrity risks of the trial. The plan should describe the

測方法及使用的理由。該計畫應強調監測的關鍵數據及過程，並特別注意非常規性臨床實務及需額外訓練之面向。監測計畫亦應參考相關規定及程序。	monitoring strategy, the monitoring responsibilities of all the parties involved, the various monitoring methods to be used, and the rationale for their use. The plan should also emphasize the monitoring of critical data and processes. Particular attention should be given to those aspects that are not routine clinical practice and that require additional training. The monitoring plan should reference the applicable policies and procedures.
5.19 稽核 當試驗委託者為執行品質保證措施而進行稽核時，應考慮下列事項：	**5.19 Audit** If or when sponsors perform audits, as part of implementing quality assurance, they should consider:
5.19.1 目的 試驗委託者之稽核為獨立且不在例行監測或品質管制功能內，稽核之目的在於評估試驗之執行並確保其遵從試驗計畫書、標準作業程序、GCP及相關法規要求。	5.19.1 Purpose The purpose of a sponsor's audit, which is independent of and separate from routine monitoring or quality control functions, should be to evaluate trial conduct and compliance with the protocol, SOPs, GCP, and the applicable regulatory requirements.
5.19.2 稽核者之選任及其資格 (一)試驗委託者應指派臨床試驗/或數據收集系統外之人員進行稽核。 (二)試驗委託者應確保稽核者所受訓練及經驗，足以適當執行稽核。稽	5.19.2 Selection and Qualification of Auditors (a) The sponsor should appoint individuals, who are independent of the clinical trials/systems, to conduct audits. (b) The sponsor should ensure that the

核者之資格證明應予以記錄。	auditors are qualified by training and experience to conduct audits properly. An auditor's qualifications should be documented.
5.19.3 稽核程序 (一)試驗委託者應確保臨床試驗/系統之稽核係依試驗委託者之書面程序執行，包括應稽核之項目、如何稽核、稽核頻率、稽核報告之格式及內容。 (二)試驗委託者之稽核計畫及程序之訂定，應著重於該試驗之重要性、受試者人數、試驗之類型及複雜性、受試者所承受之風險程度及其他所發現之問題。 (三)稽核者之觀察及發現應予以記錄。 (四)為維護稽核功能之獨立性及其價值，主管機關不應定期要求提供稽核報告。但當有證據顯示發生嚴重不遵從 GCP 之情形或在訴訟程序中，主管機關得視情況要求檢視稽核報告。 (五)當相關法律或命令要求時，試驗委託者應提供稽核憑證。	5.19.3 Auditing Procedures (a) The sponsor should ensure that the auditing of clinical trials/systems is conducted in accordance with the sponsor's written procedures on what to audit, how to audit, the frequency of audits, and the form and content of audit reports. (b) The sponsor's audit plan and procedures for a trial audit should be guided by the importance of the trial to submissions to regulatory authorities, the number of subjects in the trial, the type and complexity of the trial, the level of risks to the trial subjects, and any identified problem(s). (c) The observations and findings of the auditor(s) should be documented. (d) To preserve the independence and value of the audit function, the regulatory authority(ies) should not routinely request the audit reports. Regulatory authority(ies) may seek access to an audit report on a case by case basis

	when evidence of serious GCP non-compliance exists, or in the course of legal proceedings. (e) When required by applicable law or regulation, the sponsor should provide an audit certificate.
5.20 不遵從性	**5.20 Noncompliance**
5.20.1 試驗委託者對試驗主持人\機構或試驗委託者之試驗相關人員不遵從試驗計畫書，標準作業程序、GCP，和\或相關法規要求時，應採取迅速的措施以確保其遵從性。 **附錄** 若發現不遵從性將顯著影響或可能影響到受試者保護或試驗結果可信度，試驗委託者應進行根本原因分析，並實施適當的矯正及預防措施。	5.20.1 Noncompliance with the protocol, SOPs, GCP, and/or applicable regulatory requirement(s) by an investigator/institution, or by member(s) of the sponsor's staff should lead to prompt action by the sponsor to secure compliance. **ADDENDUM** If noncompliance that significantly affects or has the potential to significantly affect human subject protection or reliability of trial results is discovered, the sponsor should perform a root cause analysis and implement appropriate corrective and preventive actions.
5.20.2 若監測或稽核發現試驗主持人\機構有嚴重或持續不遵從之情事，試驗委託者應終止此試驗主持人\機構參與試驗。當試驗主持人\機構因不遵從而被終止其參與試驗，試驗委託者應立即通知主管機關。	5.20.2 If the monitoring and/or auditing identifies serious and/or persistent noncompliance on the part of an investigator/institution, the sponsor should terminate the investigator's/institution's participation in the trial. When an investigator's/institution's

	participation is terminated because of noncompliance, the sponsor should notify promptly the regulatory authority(ies).
5.21 提早終止或暫停試驗 若試驗提早終止或暫停，試驗委託者應立即通知試驗主持人\機構及主管機關，並說明其理由。試驗委託者或試驗主持人\機構亦應依相關法規要求，立即通知人體試驗委員會\獨立倫理委員會及說明其理由。	**5.21 Premature Termination or Suspension of a Trial** If a trial is prematurely terminated or suspended, the sponsor should promptly inform the investigators/institutions, and the regulatory authority(ies) of the termination or suspension and the reason(s) for the termination or suspension. The IRB/IEC should also be informed promptly and provided the reason(s) for the termination or suspension by the sponsor or by the investigator/institution, as specified by the applicable regulatory requirement(s).
5.22 臨床試驗/研究報告 試驗完成或提早終止時，試驗委託者應確保臨床試驗報告依相關法規要求提供給主管機關。試驗委託者應確保供查驗登記用的臨床試驗報告符合 ICH 對臨床試驗報告格式與內容的相關指引。	**5.22 Clinical Trial/Study Reports** Whether the trial is completed or prematurely terminated, the sponsor should ensure that the clinical trial reports are prepared and provided to the regulatory agency(ies) as required by the applicable regulatory requirement(s). The sponsor should also ensure that the clinical trial reports in marketing applications meet the standards of the ICH Guideline for Structure and Content of Clinical Study Reports. (NOTE: The ICH Guideline for Structure and Content of Clinical Study

	Reports specifies that abbreviated study reports may be acceptable in certain cases.)
5.23 多機構合作臨床試驗 對多機構合作臨床試驗，試驗委託者應確保下列規定：	**5.23 Multicentre Trials** For multicentre trials, the sponsor should ensure that:
5.23.1 所有的試驗主持人皆須嚴格遵從經試驗委託者所同意之試驗計畫書；或經主管機關及人體試驗委員會\獨立倫理委員會所核准之試驗計畫書。	5.23.1 All investigators conduct the trial in strict compliance with the protocol agreed to by the sponsor and, if required, by the regulatory authority(ies), and given approval/favourable opinion by the IRB/IEC.
5.23.2 個案報告表之設計用以獲得多機構合作臨床試驗機構的所需數據。對於收集額外數據的試驗主持人，亦應提供能獲得額外數據的補充個案報告表。	5.23.2 The CRFs are designed to capture the required data at all multicentre trial sites. For those investigators who are collecting additional data, supplemental CRFs should also be provided that are designed to capture the additional data.
5.23.3 在試驗開始前，協調試驗主持人及其他參與之試驗主持人的責任應以書面記錄。	5.23.3 The responsibilities of coordinating investigator(s) and the other participating investigators are documented prior to the start of the trial.
5.23.4 所有試驗主持人均被告知應遵守試驗計畫書，遵從一致的標準評估臨床及實驗室結果，和填寫個案報告表。	5.23.4 All investigators are given instructions on following the protocol, on complying with a uniform set of standards for the assessment of clinical and laboratory findings, and on

	completing the CRFs.
5.23.5 加強試驗主持人之間的溝通。	5.23.5 Communication between investigators is facilitated.
第 6 章、臨床試驗計畫書及其變更 試驗計畫書之內容一般應包括下列議題。若個別試驗地點之相關資訊，可以增頁加以闡述，或於約定文件內加以描述。以下所列之部分資訊，可能包含在試驗計畫書之參考文件中，如主持人手冊。	**6. CLINICAL TRIAL PROTOCOL AND PROTOCOL AMENDMENT(S)** The contents of a trial protocol should generally include the following topics. However, site specific information may be provided on separate protocol page(s), or addressed in a separate agreement, and some of the information listed below may be contained in other protocol referenced documents, such as an Investigator's Brochure.
6.1 一般資訊	**6.1 General Information**
6.1.1 試驗計畫書之名稱、編號及日期。試驗計畫書有任何變更，必須有修正編號及日期。	6.1.1 Protocol title, protocol identifying number, and date. Any amendment(s) should also bear the amendment number(s) and date(s).
6.1.2 試驗委託者及監測者（若監測者非試驗委託者時）之姓名及地址。	6.1.2 Name and address of the sponsor and monitor (if other than the sponsor).
6.1.3 被授權為試驗委託者簽署試驗計畫書及其變更之人員的姓名及職稱。	6.1.3 Name and title of the person(s) authorized to sign the protocol and the protocol amendment(s) for the sponsor.
6.1.4 試驗委託者之醫療專業人員（或情形	6.1.4 Name, title, address, and telephone

適當時為牙醫師）之姓名、職稱、地址及電話號碼。	number(s) of the sponsor's medical expert (or dentist when appropriate) for the trial.
6.1.5 試驗主持人的姓名、職稱，與試驗中心之地址及電話號碼。	6.1.5 Name and title of the investigator(s) who is (are) responsible for conducting the trial, and the address and telephone number(s) of the trial site(s).
6.1.6 若有試驗主持人以外之合格醫師（或情形適當時為牙醫師），負責所有與試驗中心有關之醫學上（或牙科學上）決定，其姓名、職稱、住址、電話號碼。	6.1.6 Name, title, address, and telephone number(s) of the qualified physician (or dentist, if applicable), who is responsible for all trial-site related medical (or dental) decisions (if other than investigator).
6.1.7 參與試驗之臨床實驗室及其他醫療及/或技術部門及/或其他機構之名稱及地址。	6.1.7 Name(s) and address(es) of the clinical laboratory(ies) and other medical and/or technical department(s) and/or institutions involved in the trial.
6.2 背景資訊	**6.2 Background Information**
6.2.1 試驗藥品之名稱及描述。	6.2.1 Name and description of the investigational product(s).
6.2.2 相關具有潛在性臨床意義之非臨床研究，和相關試驗之結果摘要。	6.2.2 A summary of findings from nonclinical studies that potentially have clinical significance and from clinical trials that are relevant to the trial.
6.2.3 任何已知及潛在之受試者風險及效	6.2.3 Summary of the known and potential risks

益之摘要。	and benefits, if any, to human subjects.
6.2.4 對給藥途徑、劑量、療程及治療期間之描述及其理由。	6.2.4 Description of and justification for the route of administration, dosage, dosage regimen, and treatment period(s).
6.2.5 試驗之執行將依循試驗計畫書，並遵從 GCP 及相關法規要求。	6.2.5 A statement that the trial will be conducted in compliance with the protocol, GCP and the applicable regulatory requirement(s).
6.2.6 受試族群之敘述。	6.2.6 Description of the population to be studied.
6.2.7 可提供試驗背景資訊及試驗相關之文獻及數據。	6.2.7 References to literature and data that are relevant to the trial, and that provide background for the trial.
6.3 試驗目標及目的 對試驗之目標及試驗目的之詳細描述。	**6.3 Trial Objectives and Purpose** A detailed description of the objectives and the purpose of the trial.
6.4 試驗設計 臨床試驗之科學完整性及試驗數據之可信度，高度仰賴試驗之設計。有關試驗設計之描述應包括：	**6.4 Trial Design** The scientific integrity of the trial and the credibility of the data from the trial depend substantially on the trial design. A description of the trial design, should include:
6.4.1 對於試驗中將測量之主要療效指標與次要療效指標(若有)之具體描述。	6.4.1 A specific statement of the primary endpoints and the secondary endpoints, if any, to be measured during the trial.
6.4.2	6.4.2

對於將進行之試驗類型/設計之描述（例如：雙盲、安慰劑與對照分組、平行設計）及規劃試驗設計、步驟及階段之圖表。	A description of the type/design of trial to be conducted (e.g. double-blind, placebo-controlled, parallel design) and a schematic diagram of trial design, procedures and stages.
6.4.3 對減低/避免試驗偏見策略之描述，包括： (一)隨機分配。 (二)盲性設計。	6.4.3 A description of the measures taken to minimize/avoid bias, including: (a) Randomization. (b) Blinding.
6.4.4 對試驗中治療方式及試驗藥品劑量與療程的描述。包括試驗藥品劑型、包裝及標示之描述。	6.4.4 A description of the trial treatment(s) and the dosage and dosage regimen of the investigational product(s). Also include a description of the dosage form, packaging, and labelling of the investigational product(s).
6.4.5 預期受試者參與試驗期間，以及所有試驗階段之順序與時程，包括試驗後續追蹤（若有）。	6.4.5 The expected duration of subject participation, and a description of the sequence and duration of all trial periods, including follow-up, if any.
6.4.6 對個別受試者就部分或全部試驗予以停止或終止之條件之描述。	6.4.6 A description of the "stopping rules" or "discontinuation criteria" for individual subjects, parts of trial and entire trial.
6.4.7 試驗藥品之數量管理程序，包括安慰劑及對照藥品（若有）。	6.4.7 Accountability procedures for the investigational product(s), including the

	placebo(s) and comparator(s), if any.
6.4.8 試驗治療隨機分配碼之維持及解碼程序。	6.4.8 Maintenance of trial treatment randomization codes and procedures for breaking codes.
6.4.9 任何必須直接記錄在個案報告表中的資料（即不曾手寫或 經電子記錄之資料）及何種資料將被視為原始資料。	6.4.9 The identification of any data to be recorded directly on the CRFs (i.e. no prior written or electronic record of data), and to be considered to be source data.
6.5 受試者的納入及退出	**6.5 Selection and Withdrawal of Subjects**
6.5.1 受試者納入條件。	6.5.1 Subject inclusion criteria.
6.5.2 受試者排除條件。	6.5.2 Subject exclusion criteria.
6.5.3 受試者退出試驗條件（亦即：終止試驗藥品之治療/試驗治療）及程序中，明定： (一)何時及如何使受試者退出試驗/試驗藥品治療。 (二)退出的試驗受試者，其數據收集種類及時間點。 (三)退出試驗受試者是否及如何被替補。 (四)退出試驗藥品治療/試驗治療之受試者其後續追蹤。	6.5.3 Subject withdrawal criteria (i.e. terminating investigational product treatment/trial treatment) and procedures specifying: (a) When and how to withdraw subjects from the trial/ investigational product treatment. (b) The type and timing of the data to be collected for withdrawn subjects. (c) Whether and how subjects are to be replaced. (d) The follow-up for subjects withdrawn from investigational product treatment/trial treatment.

6.6 給藥及處置方式	**6.6 Treatment of Subjects**
6.6.1 對所給予之治療的描述，包括所有藥品名稱、劑量、給藥期程、給藥途徑/模式，以及試驗的治療期間之描述，包括對每個試驗藥品治療//試驗治療組的受試者之後續追蹤期間。	6.6.1 The treatment(s) to be administered, including the name(s) of all the product(s), the dose(s), the dosing schedule(s), the route/mode(s) of administration, and the treatment period(s), including the follow-up period(s) for subjects for each investigational product treatment/trial treatment group/arm of the trial.
6.6.2 試驗前及/或試驗期間准許及禁止使用之藥品/治療。	6.6.2 Medication(s)/treatment(s) permitted (including rescue medication) and not permitted before and/or during the trial.
6.6.3 監測受試者遵從性的程序。	6.6.3 Procedures for monitoring subject compliance
6.7 療效評估	**6.7 Assessment of Efficacy**
6.7.1 明列療效參數。	6.7.1 Specification of the efficacy parameters.
6.7.2 評估、記錄及分析療效參數之方法及時間點。	6.7.2 Methods and timing for assessing, recording, and analysing of efficacy parameters.
6.8 安全性評估	**6.8 Assessment of Safety**
6.8.1 明列安全性參數。	6.8.1 Specification of safety parameters.
6.8.2 評估、記錄及分析安全性參數之方法	6.8.2 The methods and timing for assessing,

及時間。	recording, and analysing safety parameters.
6.8.3 不良事件及併發疾病之報告與紀錄之產出程序。	6.8.3 Procedures for eliciting reports of and for recording and reporting adverse event and intercurrent illnesses.
6.8.4 受試者於發生不良事件後之追蹤方式及期間。	6.8.4 The type and duration of the follow-up of subjects after adverse events.
6.9 統計方法	**6.9 Statistics**
6.9.1 對試驗採用的統計方法之描述，包括任何規劃的期中分析時間點。	6.9.1 A description of the statistical methods to be employed, including timing of any planned interim analysis(ses).
6.9.2 試驗預計納入的人數。於多中心臨床試驗時，應明定每一試驗中心欲納入之受試者人數。提供受試者人數 (樣本數) 的判定依據，包含對應 (計算) 之試驗檢定力及臨床上理由。	6.9.2 The number of subjects planned to be enrolled. In multicentre trials, the numbers of enrolled subjects projected for each trial site should be specified. Reason for choice of sample size, including reflections on (or calculations of) the power of the trial and clinical justification.
6.9.3 決定統計檢定的顯著水準。	6.9.3 The level of significance to be used.
6.9.4 終止試驗的條件。	6.9.4 Criteria for the termination of the trial.
6.9.5 用於計算缺失、未採用及虛假數據之程序。	6.9.5 Procedure for accounting for missing, unused, and spurious data.

6.9.6 違反原訂統計方法的報告程序（任何違反原訂統計方法之情況須在試驗計畫書及/或最終報告中酌情予以描述並說明理由）。	6.9.6 Procedures for reporting any deviation(s) from the original statistical plan (any deviation(s) from the original statistical plan should be described and justified in protocol and/or in the final report, as appropriate).
6.9.7 將受試者納入分析的選擇（例如：所有隨機分配之受試者、所有曾給予試驗藥品之受試者、所有符合納入標準之受試者、所有可評估之受試者）。	6.9.7 The selection of subjects to be included in the analyses (e.g. all randomized subjects, all dosed subjects, all eligible subjects, evaluable subjects).
6.10 原始數據/文件之直接檢視 試驗委託者應確保試驗計畫書或其他書面協議內，列舉試驗主持人\機構對於試驗相關之監測、稽核，人體試驗委員會\獨立倫理委員會檢閱，及主管機關的查核時乃應給予其直接檢視原始數據\文件之權利。	**6.10 Direct Access to Source Data/Documents** The sponsor should ensure that it is specified in the protocol or other written agreement that the investigator(s)/institution(s) will permit trial-related monitoring, audits, IRB/IEC review, and regulatory inspection(s), providing direct access to source data/documents.
6.11 品質管制及品質保證	**6.11 Quality Control and Quality Assurance**
6.12 倫理考量 與試驗相關之倫理考量的敘述。	**6.12 Ethics** Description of ethical considerations relating to the trial.
6.13 數據處理及紀錄保存	**6.13 Data Handling and Record Keeping**

6.14 財務及保險 若未另於協議書中載明時，財務及保險事項。	**6.14 Financing and Insurance** Financing and insurance if not addressed in a separate agreement.
6.15 發表著作原則 若未另於協議書中載明時，臨床試驗之發表原則。	**6.15 Publication Policy** Publication policy, if not addressed in a separate agreement.
6.16 補充資料 （註：因試驗計畫書與臨床試驗/研究報告緊密相關，進一步相關資訊可參閱 ICH 藥品臨床試驗報告之格式及內容指引）	**6.16 Supplements** (NOTE: Since the protocol and the clinical trial/study report are closely related, further relevant information can be found in the ICH Guideline for Structure and Content of Clinical Study Reports.)
第 7 章、主持人手冊 (INVESTIGATOR'S BROCHURE)	
7.1 緒論 主持人手冊係將試驗藥品有關之臨床及非臨床試驗之資料加以編纂成冊，其目的在於提供試驗主持人及參與臨床試驗人員充分之資訊，使其能深入瞭解臨床試驗之設計原理及執行方法，例如：臨床試驗計畫書中之劑量、給藥頻率/間隔、給藥投予途徑及病人安全監測之方法。藉由這些資料，亦可使試驗主持人對於受試者在臨床試驗中發生任何狀況時，皆能予以適當處置。故主持人手冊之編纂應以簡單、明瞭、平衡、客觀為原則，才能使試驗主持人及相關人員能了解及客觀評估所將執行臨床試驗之危險/效益的適當性。為達成上述目	**7.1 Introduction** The Investigator's Brochure (IB) is a compilation of the clinical and nonclinical data on the investigational product(s) that are relevant to the study of the product(s) in human subjects. Its purpose is to provide the investigators and others involved in the trial with the information to facilitate their understanding of the rationale for, and their compliance with, many key features of the protocol, such as the dose, dose frequency/interval, methods of administration: and safety monitoring procedures. The IB also provides insight to support the clinical management of the study subjects during the course of the

標，主持人手冊之編纂應有專業醫師參與，但主持人手冊的內容仍應由提供其內資料之專家，再予以確認。 本指引將明列出主持人手冊中至少應包含的資訊，並提出編排上的建議，且所列資料之形式及涵蓋範圍會因在不同臨床試驗階段而有不同。若該研究用藥品已經上市且其藥理學性質已廣為醫療人員所知，則主持人手冊不一定需要有詳細的資訊，產品資訊手冊或仿單如果足以提供最新及詳細有關研究用藥品各方面之資訊時，在主管機關認可下，其可作為替代資訊。如一已上市藥品為申請新適應症所執行之臨床試驗，則應著重於此藥品與新療效相關之資訊。試驗委託者至少每年應重新審視主持人手冊一次，並視需要予以修訂；且修訂之頻率應視藥品研發階段及新藥品資訊產生之情形與以調整。根據 GCP 規定，若有非常重要之新增藥品資訊，在主持人手冊未修改前，應先告知試驗主持人、人體試驗委員會\獨立倫理委員會及主管機關。 一般而言，試驗委託者應負責提供最新版本之主持人手冊給試驗主持人，而試驗主持人則應負責提供人體試驗委員會\獨立倫理委員會最新版本之主持人手冊。若臨床試驗之試驗主	clinical trial. The information should be presented in a concise, simple, objective, balanced, and non-promotional form that enables a clinician or potential investigator, to understand it and make his/her own unbiased risk-benefit assessment of the appropriateness of the proposed trial. For this reason, a medically qualified person should generally participate in the editing of an IB, but the contents of the IB should be approved by the disciplines that generated the described data. This guideline delineates the minimum information that should be included in an IB and provides suggestions for its layout. It is expected that the type and extent of information available will vary with the stage of development of the investigational product. If the investigational product is marketed and its pharmacology is widely understood by medical practitioners, an extensive IB may not be necessary. Where permitted by regulatory authorities, a basic product information brochure, package leaflet, or labelling may be an appropriate alternative, provided that it includes current, comprehensive, and detailed information on all aspects of the investigational product that might be of importance to the

持人本身即為試驗委託者，則試驗委託者-試驗主持人應認知製造廠商能否提供適當之資料以為主持人手冊，試驗委託者-試驗主持人必須提供充分之資訊給臨床試驗執行團隊，若無法提供一般正式之主持人手冊，則在試驗計畫書內之背景資料，要作深入介紹，至少須包括本指引所規定之各項即時資訊。	investigator. If a marketed product is being studied for a new use (i.e., a new indication), an IB specific to that new use should be prepared. The IB should be reviewed at least annually and revised as necessary in compliance with a sponsor's written procedures. More frequent revision may be appropriate depending on the stage of development and the generation of relevant new information. However, in accordance with Good Clinical Practice, relevant new information may be so important that it should be communicated to the investigators, and possibly to the Institutional Review Boards (IRBs)/Independent Ethics Committees (IECs) and/or regulatory authorities before it is included in a revised IB. Generally, the sponsor is responsible for ensuring that an up-to-date IB is made available to the investigator(s) and the investigators are responsible for providing the up-to-date IB to the responsible IRBs/IECs. In the case of an investigator sponsored trial, the sponsor-investigator should determine whether a brochure is available from the commercial manufacturer. If the investigational product is provided by the sponsor-investigator,

	then he or she should provide the necessary information to the trial personnel. In cases where preparation of a formal IB is impractical, the sponsor-investigator should provide, as a substitute, an expanded background information section in the trial protocol that contains the minimum current information described in this guideline.
7.2 通則 主持人手冊應包含：	**7.2 General Considerations** The IB should include:
7.2.1 首頁 應包括試驗委託者名稱，研究用藥品名稱（包括：研究代碼、化學名、學名、商品名）、出版日期及版次，以及舊版之版本別及出版日期。範例可參考附錄 1。	7.2.1 Title Page This should provide the sponsor's name, the identity of each investigational product (i.e., research number, chemical or approved generic name, and trade name(s) where legally permissible and desired by the sponsor), and the release date. It is also suggested that an edition number, and a reference to the number and date of the edition it supersedes, be provided. An example is given in Appendix 1.
7.2.2 保密聲明 試驗委託者可於主持人手冊中聲明此手冊為其公司機密文件，不應公開於臨床試驗團隊、人體試驗委員會\獨立倫理委員會以外之人士。	7.2.2 Confidentiality Statement The sponsor may wish to include a statement instructing the investigator/recipients to treat the IB as a confidential document for the sole information and use of the investigator's

	team and the IRB/IEC.
7.3 主持人手冊之內容 主持人手冊應包括下列各章節，並應於適當處引用參考文獻：	**7.3 Contents of the Investigator's Brochure** The IB should contain the following sections, each with literature references where appropriate:
7.3.1 目錄 可參考範例附錄二。	7.3.1 Table of Contents An example of the Table of Contents is given in Appendix 2
7.3.2 摘要 簡述在該臨床試驗階段，研究用藥品之物理化學性質、藥劑、藥理、毒理、藥動、藥品代謝及臨床之重要資訊，通常不超過兩頁。	7.3.2 Summary A brief summary (preferably not exceeding two pages) should be given, highlighting the significant physical, chemical, pharmaceutical, pharmacological, toxicological, pharmacokinetic, metabolic, and clinical information available that is relevant to the stage of clinical development of the investigational product.
7.3.3 簡介 提供試驗藥品之化學(學名及商品)名稱、主要成分、藥理學分類及其藥理特色、藥品研究發展之理論基礎及預期之適應症。最後，應提及臨床試驗中評估研究用藥之方法。	7.3.3 Introduction A brief introductory statement should be provided that contains the chemical name (and generic and trade name(s) when approved) of the investigational product(s), all active ingredients, the investigational product(s) pharmacological class and its expected position within this class (e.g.

	advantages), the rationale for performing research with the investigational product(s), and the anticipated prophylactic, therapeutic, or diagnostic indication(s). Finally, the introductory statement should provide the general approach to be followed in evaluating the investigational product.
7.3.4 物理、化學、藥劑性質及配方描述研究用藥品之化學式及結構式，並摘要其物理、化學和藥劑學特性、配方(包括賦形劑)、藥品貯存及調劑之資訊。若藥品在化學結構上與其他已知藥品有相近似之處，亦應提及。	7.3.4 Physical, Chemical, and Pharmaceutical Properties and Formulation A description should be provided of the investigational product substance(s) (including the chemical and/or structural formula(e)), and a brief summary should be given of the relevant physical, chemical, and pharmaceutical properties. To permit appropriate safety measures to be taken in the course of the trial, a description of the formulation(s) to be used, including excipients, should be provided and justified if clinically relevant. Instructions for the storage and handling of the dosage form(s) should also be given. Any structural similarities to other known compounds should be mentioned.
7.3.5 非臨床試驗 緒論： 所有相關之非臨床藥理、毒理、藥動	7.3.5 Nonclinical Studies Introduction: The results of all relevant nonclinical

及藥品代謝試驗應摘要於此，此摘要應包含試驗方法及試驗結果，並討論這些結果與擬進行之臨床試驗療效之關係及其可能產生之副作用。這些資訊通常包括： • 試驗動物種類 • 每組試驗動物之數目及性別 • 劑量單位（如：公克/公斤(mg/kg)） • 給藥間隔 • 投藥途徑 • 給藥期間 • 藥品於體內之分布 • 試驗後續追蹤期間 • 試驗結果，包括下列事項： – 藥理作用及毒理作用之特徵 – 藥理作用及毒理作用之強度 – 達到藥理作用所需時間 – 藥效之可逆性 – 藥效之時間長短 – 劑量與反應之關係 若可能，上述資料應用圖表以利資料之清楚呈現。 後續章節應討論這些研究最重要的發現，之包括：觀察作用的劑量反應、與人類之相關性，以及須在人體進行之試驗。若情形適當，在相同種類動物中，比較其藥效與未達毒性作用劑量之關係（亦即：治療指數應予以討論）。此資訊與建議給予人類劑量之	pharmacology, toxicology, pharmacokinetic, and investigational product metabolism studies should be provided in summary form. This summary should address the methodology used, the results, and a discussion of the relevance of the findings to the investigated therapeutic and the possible unfavourable and unintended effects in humans. The information provided may include the following, as appropriate, if known/available: • Species tested • Number and sex of animals in each group • Unit dose (e.g., milligram/kilogram (mg/kg)) • Dose interval • Route of administration • Duration of dosing • Information on systemic distribution • Duration of post-exposure follow-up • Results, including the following aspects: – Nature and frequency of pharmacological or toxic effects – Severity or intensity of pharmacological or toxic effects – Time to onset of effects – Reversibility of effects – Duration of effects

關係性應予以敘述。只要有可能，應以藥品在血液或組織之濃度而非以 mg/kg 來當作換算基礎。 (一)非臨床藥理 應包含敘述試驗藥品及其重要代謝物在動物之藥理作用之摘要。此摘要應整合所有非臨床藥理試驗結果 (例如：療效模型、受體結合試驗、受體專一性試驗) 及安全性評估 (例如：評估除預期治療效果之外的藥理作用的特殊研究) 。 (二)藥品在動物之藥動學及代謝 應納入敘述試驗藥品在各種動物之藥動、代謝及分布之摘要。對其發現之討論應著重於試驗藥品及其代謝物之吸收、局部或全身之生體可用率，以及它們與動物物種的藥理及毒理作用之關係。 (三)毒理學 應提供在不同動物物種所進行的毒性試驗所獲得之毒理作用發現之摘要，並在適當時依照下列標題與以敘述： – 單一劑量毒性試驗 – 重覆劑量毒性試驗 – 致癌性試驗 – 特殊試驗 (例如：刺激性試驗及敏感性試驗) – 生殖毒性試驗	– Dose response Tabular format/listings should be used whenever possible to enhance the clarity of the presentation. The following sections should discuss the most important findings from the studies, including the dose response of observed effects, the relevance to humans, and any aspects to be studied in humans. If applicable, the effective and nontoxic dose findings in the same animal species should be compared (i.e., the therapeutic index should be discussed). The relevance of this information to the proposed human dosing should be addressed. Whenever possible, comparisons should be made in terms of blood/tissue levels rather than on a mg/kg basis. (a) Nonclinical Pharmacology A summary of the pharmacological aspects of the investigational product and, where appropriate, its significant metabolites studied in animals, should be included. Such a summary should incorporate studies that assess potential therapeutic activity (e.g. efficacy models, receptor binding, and specificity) as well as those that assess safety (e.g., special studies to assess

– 基因毒性試驗（致突變性試驗）	pharmacological actions other than the intended therapeutic effect(s)). (b) Pharmacokinetics and Product Metabolism in Animals A summary of the pharmacokinetics and biological transformation and disposition of the investigational product in all species studied should be given. The discussion of the findings should address the absorption and the local and systemic bioavailability of the investigational product and its metabolites, and their relationship to the pharmacological and toxicological findings in animal species. (c) Toxicology A summary of the toxicological effects found in relevant studies conducted in different animal species should be described under the following headings where appropriate: − Single dose − Repeated dose − Carcinogenicity − Special studies (e.g. irritancy and sensitisation) − Reproductive toxicity − Genotoxicity (mutagenicity)
7.3.6 在人體之作用	7.3.6 Effects in Humans

簡介： 主持人手冊應指出並探討所有已知在人體的使用經驗，包含藥動學、藥品代謝、藥效學、劑量與反應之關係、安全性、療效及任何其他的藥理作用。通常亦應檢附已完成之每一臨床試驗之摘要。除臨床試驗外，若試驗藥品有其他的上市經驗，這些資料亦應包括在內。 (一)藥品在人體之藥動學及代謝 試驗藥品在人體之藥動學資訊應列於摘要中，一般包括下列各項： –藥動學 (包括代謝、吸收、血漿蛋白結合率、分布、排除) –生體可用率 (絕對或相對) –特殊病患(性別、年齡、器官功能受損者) –交互作用 (與藥品或與食物之交互作用) –其他之藥動資料(如 : 由臨床試驗資料整合之群體藥動研究) (二)安全性及療效 主持人手冊應提供試驗藥品 (包括其代謝物) 之安全性、藥效、療效及劑量與反應之關係臨床資料，且對上述資料應予以適當之討論。若已有許多臨床試驗執行完成，則應整合各試驗所獲得之安全性及療效之資料，以利資料之清楚呈現。各臨床試驗所獲得	Introduction: A thorough discussion of the known effects of the investigational product(s) in humans should be provided, including information on pharmacokinetics, metabolism, pharmacodynamics, dose response, safety, efficacy, and other pharmacological activities. Where possible, a summary of each completed clinical trial should be provided. Information should also be provided regarding results of any use of the investigational product(s) other than from in clinical trials, such as from experience during marketing. (a) Pharmacokinetics and Product Metabolism in Humans – A summary of information on the pharmacokinetics of the investigational product(s) should be presented, including the following, if available: – Pharmacokinetics (including metabolism, as appropriate, and absorption, plasma protein binding, distribution, and elimination). – Bioavailability of the investigational product (absolute, where possible, and/or relative) using a reference dosage form.

之不良反應資料宜以圖表呈現，若在各適應症或次族群中發現其不良反應有型式或發生頻率之差異時，亦應加以討論。 主持人手冊應由試驗藥品以往臨床試驗之經驗或由其他相關產品之使用經驗，預期研究用藥品可能發生之不良反應，並提出注意事項或指出有何特別監測受試者安全之方法。 (三)上市經驗 主持人手冊應指出試驗藥品曾於其他那些國家上市或核准，對在這些國家上市之情形應以摘要型式表達，（例如：劑型、劑量、投予途徑及不良藥品反應）。主持人手冊亦應指出在那些國家曾申請上市但未獲核准或曾核准但從市面上撤回。	− Population subgroups (e.g., gender, age, and impaired organ function). − Interactions (e.g., product-product interactions and effects of food). − Other pharmacokinetic data (e.g., results of population studies performed within clinical trial(s). (b) Safety and Efficacy A summary of information should be provided about the investigational product's/products' (including metabolites, where appropriate) safety, pharmacodynamics, efficacy, and dose response that were obtained from preceding trials in humans (healthy volunteers and/or patients). The implications of this information should be discussed. In cases where a number of clinical trials have been completed, the use of summaries of safety and efficacy across multiple trials by indications in subgroups may provide a clear presentation of the data. Tabular summaries of adverse drug reactions for all the clinical trials (including those for all the studied indications) would be useful. Important differences in adverse drug reaction patterns/incidences across indications or subgroups should be

	discussed. The IB should provide a description of the possible risks and adverse drug reactions to be anticipated on the basis of prior experiences with the product under investigation and with related products. A description should also be provided of the precautions or special monitoring to be done as part of the investigational use of the product(s). (c) Marketing Experience The IB should identify countries where the investigational product has been marketed or approved. Any significant information arising from the marketed use should be summarised (e.g., formulations, dosages, routes of administration, and adverse product reactions). The IB should also identify all the countries where the investigational product did not receive approval/registration for marketing or was withdrawn from marketing/registration.
7.3.7 提供試驗主持人之數據及指引摘要 此一章節應提供非臨床及臨床數據之綜合討論，並應盡可能總結不同來源、關於試驗藥品不同方面之資訊。	7.3.7 Summary of Data and Guidance for the Investigator This section should provide an overall discussion of the nonclinical and clinical

藉此，試驗主持人可獲得最充分的、對可得數據之解讀，並評估資訊對未來臨床試驗之影響。 適當時，與試驗藥品相關的藥品之文獻報告應予討論。此可幫助試驗主持人預測不良反應之產生或臨床試驗中可能發生之問題。	data, and should summarise the information from various sources on different aspects of the investigational product(s), wherever possible. In this way, the investigator can be provided with the most informative interpretation of the available data and with an assessment of the implications of the information for future clinical trials. Where appropriate, the published reports on related products should be discussed. This could help the investigator to anticipate adverse drug reactions or other problems in clinical trials.
本章節之主要目的在於使試驗主持人清楚了解臨床試驗進行時，可能產生之風險和不良反應，以及執行臨床試驗時所需之特別檢驗、觀察及注意事項。為達上述目的，試驗藥品之物理、化學、藥劑、藥理及毒理性質，及已知臨床試驗之資料必須提供予試驗主持人。對於如何辨識及治療因藥品劑量過高而造成受試者產生毒性作用或藥品之不良反應，亦應依先前臨床試驗之經驗及藥品之藥理作用整理出一套依據規範，以供試驗主持人參考。	The overall aim of this section is to provide the investigator with a clear understanding of the possible risks and adverse reactions, and of the specific tests, observations, and precautions that may be needed for a clinical trial. This understanding should be based on the available physical, chemical, pharmaceutical, pharmacological, toxicological, and clinical information on the investigational product(s). Guidance should also be provided to the clinical investigator on the recognition and treatment of possible overdose and adverse drug reactions that is based on previous human experience and on the pharmacology of the investigational product.

7.4 附錄一 首頁（範例） 試驗委託者名稱： 藥品名稱： 研究代碼： 名稱：化學名、學名（若已核准）、商品名（若法律上許可，且委託者欲使用） 主持人手冊 版本別： 出版日期： 前版版本別： 日期：	7.4 APPENDIX 1: TITLE PAGE (Example) SPONSOR'S NAME Product: Research Number: Name(s): Chemical, Generic (if approved),Trade Name(s) (if legally permissible and desired by the sponsor) INVESTIGATOR'S BROCHURE Edition Number: Release Date: Replaces Previous Edition Number: Date:
7.5 附錄二 主持人手冊目錄（範例） - 保密聲明（若有需要） - 簽名頁（若有需要） 1 目錄 2 摘要 3 緒論 4 物理、化學、藥劑性質及配方 5 非臨床試驗 5.1 非臨床藥理 5.2 藥品在動物之藥動及代謝 5.3 毒理學 6 在人體之作用 6.1 藥品在人體之藥動及代謝 6.2 安全及療效 6.3 上市經驗	7.5 APPENDIX 2: TABLE OF CONTENTS OF INVESTIGATOR'S BROCHURE (Example) - Confidentiality Statement (optional) - Signature Page (optional) 1 Table of Contents. 2 Summary 3 Introduction 4 Physical, Chemical, and Pharmaceutical Properties and Formulation 5 Nonclinical Studies 5.1 Nonclinical Pharmacology 5.2 Pharmacokinetics and Product Metabolism in Animals 5.3 Toxicology

7 提供試驗主持人之數據及指引之摘要 參考資料： 1. 文獻 2. 報告 (參考資料應置於每一章節之後) 附錄 (若有需要)	6 Effects in Humans 6.1 Pharmacokinetics and Product Metabolism in Humans 6.2 Safety and Efficacy 6.3 Marketing Experience. 7 Summary of Data and Guidance for the Investigator NB: References on 1. Publications 2. Reports These references should be found at the end of each chapter Appendices (if any)
第 8 章、執行臨床試驗之必要文件(ESSENTIAL DOCUMENTS FOR THE CONDUCT OF A CLINICAL TRIAL)	
8.1 緒論 所有用以個別及合併評估臨床試驗執行與試驗數據品質好壞的文件均為必要文件。這些文件的目的在於證明試驗主持人、試驗委託者、和監測者均遵從 GCP 及所有相關法規的要求。 必要文件亦具有其他重要目的。在試驗主持人\機構及試驗委託者處適時將必要文件存檔整理，對於試驗主持	**8.1 Introduction** Essential Documents are those documents which individually and collectively permit evaluation of the conduct of a trial and the quality of the data produced. These documents serve to demonstrate the compliance of the investigator, sponsor and monitor with the standards of Good Clinical Practice and with all applicable regulatory requirements. Essential Documents also serve a number of other important purposes. Filing essential documents at the investigator/institution

人、試 驗委託者和監測者在試驗的成功管理上提供相當大的幫助。這些文件通常也受試驗委託者的獨立稽核及主管機關的查核，做為確認試驗執行的效力和試驗數據收集完整之部分程序。 下列為根據試驗階段分為三部分之最低必要文件要求表。(1)臨床試驗開始前，(2)臨床試驗執行期間，(3)試驗完成或中止後。每一項文件的目的及是否由試驗主持人\機構，試驗委託者或雙方建檔均有描述。如果能迅速確認個別要素，亦可將多項文件合併。	and sponsor sites in a timely manner can greatly assist in the successful management of a trial by the investigator, sponsor and monitor. These documents are also the ones which are usually audited by the sponsor's independent audit function and inspected by the regulatory authority(ies) as part of the process to confirm the validity of the trial conduct and the integrity of data collected. Trial master files should be established at the beginning of the trial, both at the investigator/institution's site and at the sponsor's office. A final close-out of a trial can only be done when the monitor has reviewed both investigator/institution and sponsor files and confirmed that all necessary documents are in the appropriate files.
附錄 試驗委託者及試驗主持人\機構應留存一份紀錄，載明其各自的必要文件，包括原始文件之存放地點。試驗期間及歸檔（不論所使用的媒介為何）所使用之儲存系統，應提供文件識別、版本歷史、搜尋及檢索。 基於特定試驗文件之重要性及相關性，在有正當理由時，臨床試驗之必要文件應予適當增補或減少（在試驗開始前調整）。 試驗委託者應確保試驗主持人對試驗委託者報告之個案報告表數據，能進行控管及持續使用。試驗委託者不	**ADDENDUM** The sponsor and investigator/institution should maintain a record of the location(s) of their respective essential documents including source documents. The storage system used during the trial and for archiving (irrespective of the type of media used) should provide for document identification, version history, search, and retrieval. Essential documents for the trial should be supplemented or may be reduced where justified (in advance of trial initiation) based on the importance and relevance of the specific documents to the trial. The sponsor should ensure that the investigator has control of and continuous access to the CRF data reported to the sponsor. The sponsor should not have

應對這些數據享有排他的控制權。 當使用副本代替正本 (例如：原始文件、個案報告表)時，副本應符合「經認證副本」之要求。 在試驗開始之前、試驗執行期間及完成試驗後，試驗主持人\機構應能管控其所製作之所有必要文件及紀錄。	exclusive control of those data. When a copy is used to replace an original document (e.g., source documents, CRF), the copy should fulfill the requirements for certified copies. The investigator/institution should have control of all essential documents and records generated by the investigator/institution before, during, and after the trial.
8.2 臨床試驗開始前 在此計畫階段應備齊以下文件並應在試驗正式開始前建檔：(如附表)	**8.2 Before the Clinical Phase of the Trial Commences** During this planning stage the following documents should be generated and should be on file before the trial formally starts.
8.3 臨床試驗執行期間 除須具備上述文件外，在試驗執行期間，下列文件也應增加到檔案中，以證明所有新的相關資訊均已在可取得時被記錄下來。(如附表)	**8.3 During the Clinical Conduct of the Trial** In addition to having on file the above documents, the following should be added to the files during the trial as evidence that all new relevant information is documented as it becomes available
8.4 在試驗完成或終止後 在試驗完成或終止後，8.2、8.3 所列之所有文件應與下列文件一併歸檔。(如附表)	**8.4 After Completion or Termination of the Trial** After completion or termination of the trial, all of the documents identified in Sections 8.2 and 8.3 should be in the file together with the following.