

**Monitoring Plan**  
**CIT-06 Islet After Kidney**


*NIAID & NIDDK/NIH*

**Monitoring Plan Approval:**

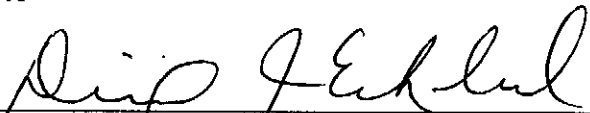
This Monitoring Plan has been read and approved by:

  
\_\_\_\_\_  
Thomas Eggerman, Project Officer  
NIDDK


Date: 1/8/14

  
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Neal Green, Project Manager  
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Date: 1/8/14

  
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Dixie Ecklund, Associate Director  
University of Iowa DCC

Date: 1/9/14

  
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William Clarke, Principal Investigator  
University of Iowa DCC

Date: 1/13/14

## CIT-06 Protocol Monitoring Plan

### CLINICAL ISLET TRANSPLANTATION PROTOCOL CIT-06

#### Islet Transplantation in Type 1 Diabetic Kidney Allograft Recipients Efficacy of Islet after Kidney Transplantation

The DCC will conduct Good Clinical Practice (GCP) monitoring at all active sites according to the following plan:

- **Intent # 1 - To ensure that all subjects are being consented appropriately**
  - The DCC will review 100% of the informed consents (screening and transplant) to ensure that subjects are consented in accordance to GCP standards and prior to study related procedures being performed.
  - The DCC will confirm that the informed consent documents used are approved by the local IRB/ethics committee.
- **Intent # 2 - To ensure that all subjects meet protocol inclusion and exclusion criteria**
  - The DCC will monitor the inclusion and exclusion criteria for 100% of the transplanted subjects.
  - Each inclusion and exclusion criterion must be addressed in the supporting source documents
  - The DCC will determine if protocol specific procedures are being performed within allowed time frames, and that documentation is complete, accurate, and verifiable.
- **Intent # 3 - To ensure that the subjects are followed and retained per the protocol's requirements**
  - At each site, the DCC will monitor all subjects transplanted in CIT-06 to completion of all study visits.
  - The DCC will also monitor all subjects for 100% of all source documents including review of medical records for reported and unreported SAEs and data listings of all available data (all eCRFs) at that monitoring visit that has not been previously monitored.
  - The DCC will monitor all islet transplantation records (excluding the Manufacturing Production Batch Record) for the same 100% of subjects.
- **Timing of CIT monitoring visits**
  - In the event that new sites are added to participate in CIT-06, the NIH and the DCC will conduct site initiation visits prior to the sites being activated and beginning enrollment into the trial.
    - DCC will communicate with the NIH, study coordinators, and principal investigators to schedule the site initiation visits.
  - The first interim monitoring visit will be conducted approximately six weeks after the first subject (Phase 2 or Phase 3) is transplanted at each site. Subsequent interim monitoring visits will be conducted annually or after 4 additional subjects have been transplanted in either the Phase 2 or Phase 3 protocol at the site.
    - The DCC will communicate directly with the study coordinators and the principal investigators to schedule the Interim Monitoring Visits.

**Note: The DCC may schedule additional or fewer visits or specific monitoring assignments as needed over the course of the study based on site enrollment, site issues, etc. The DCC may recommend that additional or fewer visits be conducted as well. The Monitoring Plan may be modified at the request of the DCC to meet the needs of the study.**