EDA-GCP Public Inspection Report (PIR) of Clinical Trial Site

Part 1	General information
Clinical medical research site details	
CT site information	
Name of CT site	Al-Manial Specialized Hospital, Cairo University
Address of inspected CT site	Cairo University Hospitals (Al-Manial Specialized University Hospital), Cairo, Egypt
Inspection details	
Dates of inspection	01 February 2023
Type of inspection	Trigger Inspection
Introduction	
General information about the sponsor and CT site	The inspected site is Al-Manial Specialized University Hospital, Cairo University Hospitals, conducting clinical studies for the sponsor (EVA PHARMA, Veterinary Serum & Vaccine Research Institute (VSVRI), the Supreme Council of University Hospitals, and Ministry of Higher Education and Scientific Research) Principal Investigator: Dr. Amal Sayed Hassan. CRO: DATACLin. This was a trigger inspection to verify that all corrective and preventive actions obtained from inspections carried out on 20/2/2022, 10/4/2022, and 24–25/8/2022 were implemented and that the site was in compliance with relevant GCP and national regulatory requirements.
Brief report on inspection activities undertaken	
Scope and limitations	
Areas inspected	· Informed Consent Process · Investigational Medicinal Product (IMP) management · Pharmacy / IMP storage area · Source documents and Case Report Forms (CRFs) · Archiving and documentation system · Quality management system
Out of scope	None specified. Inspection scope covered: Master File, Review of trial participants data, and Management of the Investigational Medicinal Product(s).
Inspected Clinical medical research	The follow-up inspection focused on the following study: Safety and Immunogenicity Study of EgyVax Vaccine Candidate for Prophylaxis of SARS-CoV-2 Infection (COVID-19) **Trial ID:** SPHINEX22122020 **Phase:** I

	EDA approval 3 Feb. 2022
Type of IMP	Vaccine Candidate &Placebo
Part 2	
1. Facilities and equipment system	
1.1.Facilities and Trial Conduct	- Site facilities confirmed adequate: designated reception/waiting area, examination, consultation, counselling, and procedure rooms all available and operational. -The infection control deficiency identified in previous inspections was fully addressed. An infection control system was established at the site, ensuring that all participants and study personnel wore masks throughout all study-related activities. All sterilizers at the site were refilled, maintained, and confirmed to be fully operational. - Emergency trolley with emergency medications confirmed available at the procedure area and verified by the inspection team - Designated disposal container available with 24-hour checking frequency; waste disposal procedure reviewed, documented, and followed. - Calibration Labels and certificates obtained for all trial equipment; and certificates were filed in the site master file. - Dedicated pharmacy/IMP storage room established; appropriate vaccine storage conditions maintained in compliance with protocol and GCP requirements
1.2.Computerized system	Randomization systems were in use and confirmed to be functioning correctly.
2. Pharmaceutical Quality System	
2.1.Quality Management System	-The site had a quality assurance system described in SOPs in place. The study was conducted according to the monitoring plan. All study personnel were GCP trained and certificates were found at the site. -All corrective and preventive actions from previous inspections (20/2/2022, 10/4/2022, and 24–25/8/2022) were verified, confirmed to be implemented, and verified to be in compliance with relevant GCP and national regulatory requirements. -The site master file was checked and confirmed to contain all required essential documents including: Signed informed consent forms, eCRFs, IMP Disposition Form, IMP Return Form, Protocol Deviations log, Delegation log, and Subject vaccination notification call form.
2.2.SOPs and Documentation	-SOPs governing all clinical trial activities were maintained, implemented, and confirmed to be in full compliance with GCP requirements. -SOPs for the handling and transportation of the Investigational Medicinal Product (IMP) from EVA Pharma were obtained, reviewed, and made available at the

	clinical trial site. The relevant SOPs were retrieved from the manufacturing site, filed in the site master file, and confirmed to be accessible to all relevant site staff.
2.3. Deviation Management	-Deviations were handled per available SOP and documented appropriately in the Protocol Deviations log. -All protocol deviations identified during the study were reported in patient notes and the protocol deviation log in compliance with GCP requirements.
2.4. CAPA System	-All corrective and preventive actions (CAPAs) from previous inspections were verified as fully implemented and compliant with relevant GCP and national regulatory requirements. -A comprehensive response addressing all previous observations was prepared and submitted within predefined timeline. The response included a full account of the corrective actions taken, preventive measures implemented, and a confirmed time schedule for all corrections.
3. Ethics and Subject Protection	
3.1.Informed Consent Process	-Dr. Amal Sayed Hassan and delegated Sub-Investigators confirmed and documented the recruitment process for all participants enrolled from Al-Manial Specialized University Hospital, ensuring full compliance with the approved protocol and GCP requirements. -The approved informed consent forms (Version No.:6 dated 21 Jan. 2021) were used throughout the study and were confirmed to be the IRB-approved versions. -All informed consents were signed by participants prior to the performance of any study-related procedures, in full compliance with GCP guidelines. -The procedure for obtaining informed consent from participants was verified to be fully in line with the requirements of GCP guidelines.
3.2.Ethics Committee Approval	Ethics Committee / IRB Approval Date: 25/1/2022 EDA Approval Date: 3/2/2022
3.3. Subject Safety	-The SOP for Serious Adverse Event (SAE) reporting was confirmed to be available at the site, reviewed by all relevant staff, and implemented in full compliance with GCP requirements. -One SAE was reported Which was Resolved. Causality: Unrelated to IMP as assessed by investigator. SAE was reported to the sponsor within the protocol-specified timeline and to Bio Inn-EDA
4. Personnel and Training	
4.1.Training and qualifications	-Curriculum Vitae of the Principal Investigator, Sub-Investigators, Nurses, and Site Coordinators were confirmed to be available at the site, up to date, and filed appropriately in the site master file. -GCP training records and workloads for all staff who took part in the conduct of the clinical trial were verified and confirmed complete. Training sheets and

	agendas for all training sessions were reviewed and retained in the site master file. -The Delegation of Responsibility Log was confirmed to be available, accurately completed, signed by the Principal Investigator, and reflective of the actual roles and responsibilities assigned to each study team member. -The absence of a registered pharmacist responsible for dispensing the investigational products was identified and corrected. A registered and qualified pharmacist was assigned to the clinical trial site and confirmed responsible for all dispensing activities in compliance with GCP requirements. -A delegated pharmacist was officially appointed, documented in the Delegation of Responsibility Log, and confirmed to be responsible for all activities related to receiving, handling, and dispensing the IMP from the sponsor.
5. Investigational Product (IMP) Management	
5.1.IMP handling	-Shipping records detailing the quantity and batch numbers of all investigational products were confirmed to be available, accurate, and filed appropriately at the site. -The IMP Disposition Form, IMP Return Form, and Accountability Form were confirmed to be available, accurately completed, and filed at the site. All IMP accountability records were reviewed and verified to be complete and consistent. -The Data Logger of the Cold Chain was confirmed to be available and functional. GMP Certificates for both the Placebo and the Drug were reviewed, confirmed valid, and filed in the site master file. -Temperature data logger printouts confirmed compliance with required IMP storage conditions, and this documentation was filed and retained as part of the site records. -The absence of a spillage procedure was identified and fully addressed. A formal spillage procedure was developed, approved, and implemented at the site. The study team was trained on the procedure and training records were documented and filed.
6. Clinical Trial Conduct	
6.1.Protocol Compliance	Approved Protocol (Version No.:6 dated 21 Jan. 2021), was implemented and confirmed to be in use at the site. After verification of implementation of all corrective and preventive actions, the clinical trial site was in control to ensure that the clinical trial (protocol number SPHINX22122020) was conducted in compliance with GCP as prescribed in the ICH Guide to GCP.
6.2. Source Data and CRFs	-The source data were confirmed to be legible, well organized, and maintained in compliance with ALCOA principles throughout the study. - Corrections and overwriting found in patient notes which were not initialed were

	identified and corrected. -Requests for lab tests were not found in all subject files. All missing lab test request forms were retrieved, completed, and filed in the respective subject files in compliance with GCP requirements. -The security of participant records was reviewed and corrected. Participant records were safely kept in a metal cupboard and were secured against unauthorized access. Confidentiality of all records was maintained and confirmed during the inspection.
6.3. Delegation of Duties	-The Delegation of Responsibility Log was confirmed to be available, accurately completed, signed by the Principal Investigator, and reflective of the actual roles and responsibilities assigned to each study team member. -A delegated pharmacist was officially appointed and documented in the Delegation of Responsibility Log, confirmed to be responsible for all IMP-related activities at the site. -A registered and qualified pharmacist was assigned to the clinical trial site and confirmed responsible for all dispensing activities related to the investigational products, in full compliance with GCP requirements.
7. Laboratory and Bioanalytical Activities (if applicable	
External lab was used and accredited. The laboratory was confirmed to be accredited and functioning in compliance with applicable standards. SOPs for the handling and transportation of blood samples from the clinical trial site to were obtained, reviewed, and made available at the clinical trial site. The relevant SOPs were retrieved from the designated laboratory, filed at the site, and confirmed to be accessible to all relevant site staff.	
8. Safety Reporting (SAE)	
SOP for Serious Adverse Event (SAE) reporting was confirmed to be available at the site and implemented in full compliance with GCP requirements. All SAEs were reported to the sponsor within the protocol-specified timeline. SAE reporting to the Bio Inn-EDA was within the specified time. No further SAE reporting deficiencies were identified.	
Part 3	**Inspection outcome**
Based on the reviewed documentation, inspected facilities, and verification of all corrective and preventive actions implemented following previous inspections: After the trigger inspection conducted on the clinical trial site (Al-Manial Specialized University Hospital), dated on 01/02/2023, the inspectorate was satisfied that the Principal Investigator at the clinical trial site was in control to ensure that the clinical trial, protocol number (SPHINX22122020), was conducted in compliance with GCP as prescribed in the ICH Guide to GCP.	

-External laboratory was designated for analysis of participants withdrawn samples. SOPs for laboratory samples handling, transportation, and waste disposal were obtained from lab Quality Assurance and retained at the site and submitted to EDA as requested by the inspection team.
- VBGs were withdrawn from all participants instead of ABGs as per protocol – this was identified as protocol deviation, acknowledged, and submitted as an amendment to EDA.

8. Safety Reporting (SAE)

-SOPs for SAE reporting were available at the site.
-No new SAEs were reported up to the follow-up inspection period.
-The inspectorate was satisfied that safety monitoring procedures were in place and that the Principal Investigator maintained appropriate oversight of participant safety throughout the trial.
-Reporting timelines and documentation requirements were followed.
-No gaps in SAE documentation or safety reporting were identified during the follow-up inspection. All safety monitoring procedures were confirmed in place.

Part 3	Inspection outcome

Based on the reviewed documentation, inspected facilities, and observations identified duringThe follow-up GCP inspection conducted at Al-Manial Specialized University Hospital on 10 April 2022 confirmed that the Principal Investigator was in control to ensure that the clinical trial (Protocol SPHINX22122020) was conducted in compliance with GCP as prescribed in the ICH Guide to GCP. The majority of corrective actions from the previous inspection (20/02/2022) were verified implemented
All identified deficiencies were communicated to the site. Corrective and Preventive Actions were implemented as follows:
The site was recommended to continue ensuring all outstanding items are fully resolved, particularly: lab-related SOPs submitted to EDA; VBG/ABG deviation amendment finalised; all protocol deviations reported; spillage procedures maintained and staff trained; and delegation log kept accurate and consistent with actual access permissions.

Part 4	List of national Laws and GCP Guidelines referenced in the inspection report

1. Law of Regulating Clinical Medical Research no.214/2020.
2. Prime Minister's Decree No. 927 of 2022 On Promulgating the Executive Regulation of Law on Regulating Clinical Medical Research Promulgated by Law No. 214 of 2020
3. EDA Chairman Decree No.111 for 2022.
4. Guideline for Good Regulatory Oversight of Clinical Trials by Egyptian Drug Authority "EDREX.GL.Bioinn.006".
5. Guideline for Good Clinical Practice ICH E6R3.
6. Declaration of Helsinki
7. WHO Handbook for Good Clinical Research Practice (GCP) -Guidance for Implementation

Abbreviation	
AE	Adverse Event
ALCOA	Attributable, Legible, Contemporaneous, Original, Accurate

CAPA	Corrective and Preventive Action
CRF	Case Report Form
CRC	Clinical research Center
CT	Clinical Trial
EDA	Egyptian Drug Authority
GCP	Good Clinical Practice
IB	Investigator Brochure
ICF	Informed Consent Form
ICH	International conference of Harmonization
IMP	Investigational Medicinal Product
IRB/IEC	Institutional Review Board / Ethics Committee
MOH	Ministry of Health
PI:	Principal Investigator
PIR	Public Inspection Report
SAE	Serious Adverse Event
SOP	Standard Operating Procedure
WHO	World Health Organization

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