

Delegation of Responsibilities Log

Investigator Name:	Protocol:	Site Number:
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List staff to whom the Principal Investigator (PI) has delegated significant study-related duties.

Name	Responsibilities*	Initials	Signature	Start Date	End Date	PI Initials/Date

By initialing above, I, the PI, declare that during the conduct of the above study, I have delegated the following study-related activities:

*Responsibilities Legend		
1. Administer Consent 2. Screen Subjects 3. Obtain Medical History 4. Perform Physical Exam 5. Determine Eligibility	6. Randomize Subjects 7. Dispense Study Drug 8. Drug Accountability 9. Assess Adverse Events 10. Complete Source Documents	11. Complete Study Forms 12. Provide Discharge Instructions 13. Make Follow-up Phone Calls 14. Query Management 15.

Signature of Principal Investigator: _____ Date: _____