DEPARTMENT OF HEALTH AND HUMAN SERVICES
PUBLIC HEALTH SERVICE
FOOD AND DRUG ADMINISTRATION

DISTRICT OFFICE ADDRESS AND PHONE NUMBER 50 W. Jackson, Suite 1500 Chicago, IL 60661 (312)353-5862	DATE(S) OF INSPECTION 12/16-30/02 FEI NUMBER
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT IS ISSUED TO: Carl R. Lang, M.D., Clinical Investigator	
FIRM NAME Carl R. Lang, M.D., Greater Northwest Medical Group	STREET ADDRESS 1051 W. Rand Road
CITY, STATE AND ZIP CODE Arlington Heights, IL 60004	TYPE OF ESTABLISHMENT INSPECTED Clinical Investigator

DURING AN INSPECTION OF YOUR FIRM WE OBSERVED:

Randomized, Open-Label, Multicenter Trial of the Safety and Effectiveness of Oral Telithromycin (Ketek) and Amoxicillin/Clavulanic Acid (Augmentin) in Outpatients With Respiratory Tract Infections in Usual Care Settings, HMR3647A/3014

1. The protocol excludes the enrollment of subjects with a hypersensitivity to beta-lactam or macrolide classes of antibiotics. Medical records document that the following subjects who were enrolled in the study had reported allergies to these classes of antibiotics: 001, 036, 039, 041, 046, 077, 086, 122, 127, 178, 200, 213, 216, 232, and 240.

2. There was no documentation of the performance of urine pregnancy tests in the medical records for Subjects 35, 46, 70, 75, 113, 116, 125, 159, and 160. The protocol required that women of childbearing potential have a urine pregnancy test at Visit 1 before taking any study medication.

3. The Visit 1 source record for Subject 70 documents that the patient is nursing. The subject was randomized and dispensed study drug at this visit. The protocol excluded subjects who were pregnant or breast-feeding.

4. Clinical laboratory tests (ALT, AST, total bilirubin, and alkaline phosphatase) were required at Visits 1 and 2. For approximately 28 subjects at Visit 1 and 12 subjects at Visit 2, no laboratory results were obtained for ALT, AST, and bilirubin because the laboratory samples were shipped incorrectly and specimens were not within the stability period established by the testing laboratory or because the incorrect specimen was collected.

5. Inconsistencies exist between memos signed by the clinical investigator and other study records:

a) A Memo-To-File, signed by the clinical investigator on 4/12/02, states that per the protocol, all women of childbearing potential (WOCBP) must be screened for pregnancy prior to enrolling them in the study; this did not happen for all subjects who were WOCBP. A second undated memo signed by the clinical investigator states that all females enrolled of child bearing potential were screened for pregnancy.

b) The Memo-To-File, signed by the clinical investigator on 4/12/02, states that there is no source documentation indicating that a pregnancy test was performed for those subjects who were screened prior to enrollment; therefore, there is no way to determine who was screened for pregnancy and who was not. However, pregnancy test results were documented in the medical records for Subjects 30, 38, 39, 127, 200, 216, and 240.

c) A memo including a flowsheet of pregnancy test results was created by the clinical investigator after patients completed the study. The log documents negative test results for Subjects 35, 46, 70, 75, 113, 116, 125, 159, and 160; however, there is no source documentation to support this data.

d) A Memo-To-File signed by the clinical investigator on 4/8/02 states that study subjects did not receive copies of their informed consent forms, and that all subjects would be sent a copy of their signed and dated informed consent form. A second undated memo signed by the clinical investigator states that patients read, understood, signed, and dated the informed consent. A copy was given to the patient and the patient was then randomized to the study.

SEE REVERSE OF THIS PAGE	EMPLOYEE(S) SIGNATURE Lisa Hayka	EMPLOYEE(S) NAME AND TITLE (Print or Type) Todd M Shankowitz, CSO Lisa Hayka, CSO	DATE ISSUED 12/30/02

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DEPARTMENT OF HEALTH AND HUMAN SERVICES
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DISTRICT OFFICE ADDRESS AND PHONE NUMBER	DATE(S) OF INSPECTION
50 W. Jackson, Suite 1500 Chicago, IL 60661 (312)353-5863	12/16-30/02
	FEI NUMBER
NAME AND TITLE OF INDIVIDUAL TO WHOM REPORT IS ISSUED	
TO: Carl R. Lang, M.D., Clinical Investigator	
FIRM NAME	STREET ADDRESS
Carl R. Lang, M.D., Greater Northwest Medical Group	1051 W. Rand Road
CITY, STATE AND ZIP CODE	TYPE OF ESTABLISHMENT INSPECTED
Arlington Heights, IL 60004	Clinical Investigator

6. New antibiotic therapy prescribed to treat the primary infection was not documented on case report forms as follows:
a) Source records document that Patient 120 was prescribed Levoquin prior to Visit 2.
b) Source records document that Patient 159 was dispensed Levoquin prior to Visit 2.

7. Adverse event case report forms were not completed for the following subjects/events:
a) Subject 35- rash, itching, and shortness of breath
b) Subject 30- urinary tract infection
c) Subject 116- depression and mood changes

8. A primary diagnosis of sinusitis, bronchitis, or community acquired pneumonia was not documented in the Visit 1 medical record for Subject 135.

9. A progress note for Subject 35 states hold Augmentin due to adverse event. The case report form for Visit 2 documents that the study medication was completed. There is no documentation to explain this discrepancy.

10. The informed consent document contains a signature line for the subject to sign and date with instructions that this information is to be completed by the subject. The clinical investigator filled in the date for Subjects 129, 157, and 182.

11. The consent form was not signed and dated by the clinical investigator on the same day that the form was signed and dated by the subject for Subjects 001, 004, 046, 128, 156, 168, and 169. The protocol required that the subject's consent must be confirmed at the time of consent by the personally dated signature of the person conducting the informed consent discussions.

12. There were no Subject Information and Consent Form Addendums for Subjects 006, 071, 073, and 084. The Addendum covered the procedure of an additional blood draw for those patients whose samples could not be read by the laboratory.

13. The clinical investigator conducted the consent process for the study coordinator who was enrolled as a subject in this study. The study coordinator is an employee of the medical group of which the clinical investigator is a partner. The Declaration of Helsinki, which was included in the study protocol, states that for subjects in a dependent relationship to the investigator, consent should be obtained by a physician who is not engaged in the investigation and who is completely independent of this official relationship.

14. The dates of the first and last doses of study medication were not included in patient medical charts for Visit 2 and were recorded only in case report forms. The case report forms were not completed at the same time patients were interviewed.

15. The study treatment to which subjects were randomized was not documented in the source medical records for Subjects 105, 116, 135, 159, 160, 213, 200, 236, and 240.

SEE REVERSE OF THIS PAGE	EMPLOYEE(S) SIGNATURE	EMPLOYEE(S) NAME AND TITLE (Print or Type)	DATE ISSUED
	Lisa Hauka	Ted M Stankewicz, CSO Lisa Hauka, CSO	12/20/02 12/30/02

INSPECTIONAL OBSERVATIONS

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16. For Subject 081, a Memo-to-File stated that the patient received Ketek. This was not supported by the source record or the Drug Accountability Log which both document the patient received Augmentin.

17. The Augmentin treatment duration is not documented in patient records. The protocol stated that patients randomized to amoxicillin/clavulanic acid will receive \$75/125 mg twice daily for 7 to 10 days (treatment duration to be specified by the investigator).

18. The Drug Accountability Log supplied by the sponsor was not used. The log at the site does not include concurrent documentation of investigational drug dispensing.

19. The TREAT Randomization Log was not completed to include a record of all early discontinuations and reasons.

20. There is no documentation of IRB approval to enroll greater than 50 subjects at the site. The site enrolled 251 subjects. The protocol approved by the IRB states that the recommended number of subjects per center is 4 to 50.

SEE REVERSE OF THIS PAGE	EMPLOYEE(S) SIGNATURE Lisa Hayka	EMPLOYEE(S) NAME AND TITLE (Print or Type) Tad M Stankewicz, CSO Lisa Hayka, CSO	DATE ISSUED 12/30/02 12/30/02

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