

Investigative Sites

NCRA maintains an investigator database to assist us in identifying clinical research sites for Sponsors that do not already have sites lined up for their studies. This is not a frequent occurrence for us as many times Sponsors have preferred sites. Occasionally however, they do ask us to identify sites for them. To that end, we ask that sites wishing to be included in our database follow the procedure below.

REGISTERING FOR NCRA's INVESTIGATOR DATABASE:

- 1) **Print the profile below.**
- 2) **Complete the profile.**
- 3) **Forward the hardcopy to us here at NCRA with supporting Investigator CVs.**

We ask you send a hard copy rather than an electronic version to prevent any potential problems with formatting losses. In addition, we do not accept electronic CVs. Upon receipt of your information, we will add your site to our database. When contract needs dictate, we search the database and call sites as needed.

Please mail completed profiles, CVs and any brochures you feel are relevant, to:

**Attention: Investigator Database Manager
NCRA
74 East Main Street
Norwich, NY 13815**

We suggest you update us with any significant changes annually.
Thank you for your interest in NCRA!

NCRA Investigative Site Profile

Site Name: _____

Site Address: _____

State: _____ Zip: _____

Site Telephone #: _____ Fax #: _____

Site Fax Number: _____

Site Website: _____

Main Contact Person's Name: _____

Contact Person's Title: _____

Contact Person's Telephone Number: _____

Contact Person's Email address: _____

(Please circle or explain replies as appropriate)

Has site previously participated in FDA approved research? YES NO

Has site or any of its Principal Investigators ever been audited? YES NO

Site ? _____ Investigator ? _____

If so, provide date(s) and results(s): _____

Principal Investigator(s) (List up to 3):

1) Name: _____

Board Certification(s) & Type: _____

CV included? _____

2) Name: _____

Board Certification(s) & Type: _____

CV included? _____

3) Name: _____

Board Certification(s) & Type: _____

CV included? _____

Name of Site IRB: _____

How often does your Site IRB meet? _____

(Weekly, Twice Monthly, Monthly, As needed, Other (please explain))

Is use of a central IRB permitted? YES NO

Has your IRB ever been audited? YES NO

If so, provide date(s) and results(s): _____

Is Site part of a Consortium?: YES NO

Name & Address: _____

Type of Site: (Circle or underline as appropriate)
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NCRA Investigative Site Profile (continued) Pg

Clinical Research Group	Private Hospital	SMO
Private Practice	VA Hospital	PMO
Multi-Specialty Clinic	University Hospital	
Women's Health Center	Student Health Center	

Therapeutic Areas: (Circle or underline as appropriate)

Adult Medicine	Dermatology	Internal Medicine	Podiatry
AIDS	Diabetes	Lipid Studies	Preventive Medicine
Alzheimer's	ENT	Men's Health	Psychiatry
Allergy	Endocrinology	Metabolism	Pulmonary
Anesthesiology	Esophagitis	Musculoskeletal	Radiological
Anti-Infectives	Family Practice	Neurology	Rehabilitative Medicine
Antibiotic Therapy	Gastroenterology	Nutrition	Renal
Arthritis	Genitourinary	OB/GYN	Respiratory
Asthma	GERD	Oncology	Rheumatology
Cardiovascular	Geriatric	Ophthalmology	Sleep Disorders
CNS	Hematology	Orthopedics	Surgery
Colitis	Hypertension	Osteoporosis	Ulcers
Connect. Tissue Dis.	HRT	OTC Therapy	Urology
Crohn's Disease	IBS	Otolaryngology	Weight Loss
Dentistry	Immunology	Pain	Women's Health
	Infectious Disease	Pediatrics	

Other(s)–please specify: _____

Available Site Facilities: (Circle or underline as appropriate)

BMD Testing	Exam Rooms	Outpatient Surgery	Stress
Centrifuge	Freezer (-20 C)	Pharmacy	Sigmoid/Colonoscopy
Chem/Hema/Urin	Freezer (-80 C)	Phlebotomy	Slit Lamp Exams
Clinical Lab	Laboratory	Physical Therapy	Treadmill
Echocardiogram	Locked Storage	Pregnancy Test	Ultrasound
EKG/ECG	Microlab	Pulmonary Function	Virology/Serology
Electrophysiology	MRI	Radiology/PET/CT	X-Ray
Endoscopy	MUGA	Remote Data Entry	

Other(s)–please specify: _____

Additional Notes: _____

Is this the first time that you have provided us with your information or is it an update?
New Updated

If New – how did you hear about us? _____

Thank you for completing our Investigator Profile.