Checklist to Validate a Protocol in Vestigo

Protocol#/IRB: _____ Built by: _____ Validated by _____

	Review and check for accuracy: - Main page - Local page - Contacts - Billing/Budget (if using) - Arms	Validated by _____
EACH DRUG	- Drug description & generic name - Inventory Units - Drug Strength & Units - DAR Dose Form/Strength - DAR Bottle Size - Drug Schedule - Supplier Code - Source - Hazardous Category Assessment - Default NDC - Inventory tracking - Drug Storage requirements - Control Inventory Location	- Receiving Location - Cycle Count Interval - Temperature Excursion Action and comments - Default Supplier/Manufacturer - Default DARF - Reorder type - Ordering instructions - Destruction instructions - Destruction and Return Requirements - Drug Comments - Required Verifications Validated by _____
EACH ORDER	- Order Description - Order Type - Order Items - Label Name - Ensure match for active & placebo drug in double-blind studies - Patient Schedule Type - Dosing Weight Required - Order Units - Default Dose Description - Route - Blinding - Directions - Special Instructions - Accountability Log Comments	- Drug Expiration - Double Check - Thaw Time Required - Preparation Time Required - Requires Inventory Validation (if applicable) - Patient Return Required - Arms - Default Label - Bar Code for Label - Dispensing Workload - Track Cost Impact Dispensing Fee - Default Workflow (if applicable) Validated by _____