

SWOG COVID-19 Deviation Log

Study: _____ Site Name / CTEP ID: _____ Site Primary Investigator: _____

Investigator/Designate Signature (*at time of data entry into Rave/CRA Workbench*): _____ Date _____

SWOG Patient ID	Date <i>(Date of planned treatment procedure, test/scan, etc. that deviated)</i>	Brief Summary of Deviation <i>(Specify the detail of the protocol deviation and justification on why it is considered major/minor)</i>	Deviation Code*	Reason for Deviation <i>(COVID Outbreak vs COVID Infection)</i>	Major/Minor	If Major Deviation	
						Notified SWOG? If Yes, Date	Notified IRB? If Yes, Date

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* Deviation Codes:

1. Cycle treatment Given Early or Late
2. Cycle of Treatment Missed
3. Phone or Virtual/Video Visit
4. Late or Missed Study Visit
5. Late or Missed Study Procedure
6. Late or Missed Study Lab
7. Late or Missed Imaging Procedure
8. Late or Missed QOL/PRO
9. Late or Missed Study Specimen
10. Changes to Specimen Shipment Schedule
11. Other

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