

Joint Research Office

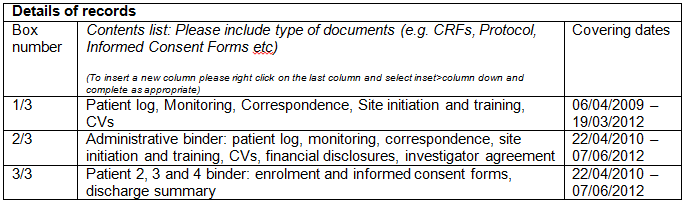
**RESEARCH RECORDS TRANSFER FORM**

**INSTRUCTIONS**

* Please contact the UCL Records Office ([records.office@ucl.ac.uk](mailto:records.office@ucl.ac.uk)) to request boxes first. Boxes not supplied by the UCL Records Office **will not** be accepted. Box dimensions are as follows 360mm (L) x 140mm (H) x 255mm (W). Please stipulate:

1. Number of boxes required
2. Location boxes should be delivered to

* Once you have the boxes write a temporary running order (in pencil only) on the front of each box (1,2,3). Do not write or stick anything else on the boxes
* Put the records in the boxes. Remove papers from bulky ring-binders and lever arch files as these take up space. Do not place additional boxes (e.g. magazine files) inside the boxes.
* List the box number, and contents of that box on this form as shown below. Ensure you complete the form in Microsoft Word format and email as an attachment to [randd@uclh.nhs.uk](mailto:randd@uclh.nhs.uk).



* The boxes will be registered in Records Office System (ROS) by the Joint Research Office and you will be provided with a receipt to put in the box and a unique reference number which will have to be written on the box. One UCL ROS output form per box needs to be included.
* JRO will then arrange collection of the box for storage.

**PLEASE NOTE**

* Only the Investigator Site File (ISF) and Case Report Forms (CRFs) should be transferred offsite. Under no circumstances should patient notes/medical records or other source documents leave UCLH.
* Please ensure the ISF contains all records stipulated by the study sponsor as per their SOP. In the absence of a sponsor SOP for the Site File please use the UCLH SOP 8 for Essential Documents and the Study File (TMF/ISF).

**YOUR DETAILS**

|  |  |
| --- | --- |
| **Details of depositor** | |
| Name of person transferring records |  |
| Job Title (e.g. Research Nurse, Data Manager) |  |
| Email and telephone number |  |

|  |  |
| --- | --- |
| **Details of transfer** | |
| Number of boxes |  |
| Date form completed |  |
| Location to be collected from (please be as specific as possible) |  |

|  |  |
| --- | --- |
| **Study details** | |
| R&D number |  |
| Short title |  |
| Full title of study |  |
| P.I. name |  |
| Sponsor name |  |

|  |  |  |
| --- | --- | --- |
| **Details of records in each box** | | |
| Box number | *Contents list: Please include type of documents (e.g. CRFs, Protocol, Informed Consent Forms etc.)*  *(To insert a new column please right click on the last column and select inset>column down and complete as appropriate)* | Covering dates |
|  |  |  |
|  |  |  |

**(For JRO use ONLY)**

**------------------------------------------------------------------------------------------------------------------------------------------------------------------------**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Short Ref** | **Box number** | **R&D No** | **JRO Ref Number** | **Archive End Date** | **ROS Archive Ref Number (This reference will have to be written on the box)** |
|  |  |  |  |  |  |