OPERATIONAL HANDBOOK
OF IR-4
TO FULFILL THE
REQUIREMENTS OF EPA
FOR
GOOD LABORATORY PRACTICES

The IR-4 Project
Providing Safe and Effective Pest Management Solutions for Specialty Crop Growers
PREFACE

On October 16, 1989, the U.S. Environmental Protection Agency (EPA) promulgated regulations to implement Good Laboratory Practice (GLP) standards for the development of data that are used to support the registration of pesticides. The regulations were expanded to include magnitude of the residue determinations for tolerance setting purposes. This includes both the field and laboratory phases. Any studies conducted by scientists cooperating with the IR-4 program must adhere to the standards if the data are to be used in support of a tolerance and registration. These standards, commonly referred to as GLPs, are quite explicit in their intent and well-defined under 40 CFR 160. They are intended to assure the quality and integrity of data submitted to EPA. The United States Department of Agriculture (USDA), State Agricultural Experiment Stations (SAES) and cooperating institutions and the IR-4 program fully support EPA in its implementation of GLPs.

The IR-4 program was prepared to meet the GLP standards when they were implemented. The program had taken several steps in this direction prior to October of 1989. ARS developed a set of generic SOPs for its field and laboratory locations in 1988. The IR-4 Headquarters (HQ) staff revised the protocol and reporting forms so they contained more of the detail needed to meet GLP, and provided raw data notebooks and generic standard operating procedures (SOPs) to scientists in the program. Each of the regions and the Agricultural Research Service (ARS) developed mechanisms for archiving data and for quality assurance. Directors (Study, Field Research, Laboratory Research) were assigned and an improved tracking system of projects, and a master schedule was developed.

The IR-4 system has evolved into a highly complex, dynamic and sophisticated program that is continually reviewed and improved. This Handbook attempts to bring together all of its components to show how IR-4 operates, to designate responsibilities and provide guidelines for implementation of procedures to follow to assure that all studies conducted by IR-4 meet the EPA GLP regulations. This manual has been developed to serve those needs and to provide a clear understanding of how the IR-4 program is meeting GLP requirements. This is its 7th revision to bring Handbook up to date.

Chair, Project Management Committee (Date)  
Chair, Administrative Advisers (Date)  
Executive Director of IR-4 (Date)

VERSION 7.0 01/06
# TABLE OF CONTENTS

**PREFACE** ................................................................................................................................. i

**PERSONNEL GUIDELINES FOR GLP COMPLIANCE** ................................................................. 1

**GLP DEFINITIONS** ....................................................................................................................... 2
  Archives ......................................................................................................................................... 2
  Protocol ......................................................................................................................................... 2
  Quality Assurance Unit .................................................................................................................. 2
  Sponsor ......................................................................................................................................... 3
  Study ........................................................................................................................................... 3
  Study Director .............................................................................................................................. 3
  Testing Facility ............................................................................................................................ 3

**IR-R DEFINITIONS** ...................................................................................................................... 3
  Field Research Director ................................................................................................................ 3
  Laboratory Research Director ..................................................................................................... 3
  Quality Assurance Coordinator .................................................................................................... 4
  Research Test Site ........................................................................................................................ 4
  Regional Field Coordinator .......................................................................................................... 4
  Regional Laboratory Coordinator ............................................................................................... 4

**INTER-RELATIONSHIPS** ............................................................................................................. 5

**SPECIFIC RESPONSIBILITIES** .................................................................................................. 5
  Non-compliance ........................................................................................................................... 5
  Generally Correctable .................................................................................................................. 5
  Non-Correctable .......................................................................................................................... 6

**INTERACTIONS OF PROGRAM PERSONNEL** .......................................................................... 6

**PROGRAM GUIDELINES FOR GLP COMPLIANCE** ................................................................. 7

**STANDARD OPERATING PROCEDURES** .................................................................................... 9

**DATA REVIEW** .......................................................................................................................... 10
  Field Data Book Flow Chart ....................................................................................................... 11

**IR-4 GLP TRAINING PROGRAMS** ............................................................................................ 12

  **CHART 1: HIGHLIGHTS OF GLP RESPONSIBILITIES** .......................................................... 13
  **CHART 2: GLP COMMUNICATIONS FLOW CHART** ............................................................ 14

**Appendix 1: GUIDELINES FOR ROLES & RESPONSIBILITIES** ............................................ 15
**Appendix 2: 30-MONTH TIMELINE** ......................................................................................... 18
PERSONNEL GUIDELINES FOR GLP COMPLIANCE

Administratively, the program has two committees that serve to provide policy (Administrative Advisers) and management guidance (Project Management Committee or PMC) under the rules for cooperative research within the Cooperative State Research Education and Extension Service (CSREES). More detail concerning the organization, structure, role and function of the other units of the IR-4 program can be found in the IR-4 Project Statement. A copy of the statement can be obtained from:

Executive Director
IR-4 Project
The Technology Centre of New Jersey
681 U.S. Highway #1 South
North Brunswick, NJ 08902-3390
(732) 932-9575

The IR-4 program consists of several independent State, Federal and Private organizations that cooperate to assist U.S. specialty crop growers in obtaining pest control tools that also benefit consumers and food processors. Those involved in the development of data to support clearances of pest management solutions consist of the following (also see Chart 1 and Appendix 1 for additional information):

1. IR-4 Headquarters (HQ): A staff of professional and technical personnel employed at Rutgers, The State University of New Jersey, coordinate the program among the regions and USDA-ARS, and provide functions including:
   a. GLP oversight including Study Director (SD) and Quality Assurance (QA).
   b. Prepare research protocols.
   c. Review, analyze, and archive raw data.
   d. Prepare, review, and submit petitions to establish and maintain tolerances.
   e. Interact with EPA and cooperating registrants.
   f. Maintain a database to track projects.
   g. Oversee Manufacturer and Contract Laboratories

The office is administered by an Executive Director (Management Representative).

2. Regional Research Programs. Each Regional Program is administered by a Regional Director who has overall responsibility for GLP compliance at the regional level. The Regional Director has Regional Laboratory, Field and QA Coordinators who work with state scientists within their region and provide them with research support. USDA-ARS also provides laboratory and field support administered by an ARS National IR-4 Director. On occasion, registrant and contract scientists will also be used to assist IR-4 with field, laboratory support.

   a. Regional Laboratory Coordinator (RLC): Oversees and coordinates regional laboratories and their satellite laboratories, and some contract laboratories, conduct analyses to determine test substance residues on crop samples.
   b. Regional Field Coordinator (RFC): Oversees and coordinates the activities of field cooperators (Field Research Directors (FRD)) consisting of state, industry and contract scientists who conduct field trials by applying the test substance, providing crop samples for laboratory analysis, and collecting GLP compliant data.
   c. Regional QA Coordinator: Monitors the field and laboratory operations in each
region to assure that they are meeting GLP requirements.

3. ARS Programs Research Personnel. The ARS Program is administered by an ARS National IR-4 Director who has overall responsibility for GLP compliance at the ARS Facilities. The ARS National IR-4 Director supports USDA-ARS residue laboratories and scientists (Laboratory Research Directors) that conduct analyses and determine test substance residues on crop samples and ARS Field Sites and Scientists (Field Research Directors) who conduct field trials by applying the test substance, providing crop samples for laboratory analysis, and collecting GLP compliant data.

**GLP DEFINITIONS**

**Archives:** The Executive Director of IR-4 will establish an archive at HQ or other suitable locations. All raw data developed by the IR-4 program will be archived as required under 40 CFR 160.190. Archivists will be designated by the Executive Director for IR-4 HQ. SOPs to describe the operation and maintenance of the archives in accordance with the requirements of GLP as specified in 40 CFR 160.190 will be developed. An index of archived laboratory data from the RLCs will be sent periodically to the HQ Archivist.

**Protocol:** The regulations require an approved written protocol for each study. The SD is responsible for the development of the protocol, which is prepared in accordance with the information as outlined under 40 CFR 160.120. Protocols will contain both the field and laboratory phases and detail the proposed sites for the research. The Regulations require that the protocol be approved by the SD and sponsor by signing and dating. The Chair of the PMC (sponsor) delegates approval of the protocols to the Executive Director or his/her designee.

Every IR-4 study has only one official protocol. Since 1993, the protocol has been written as a single document. The FRD and the LRD receive the entire protocol to provide information on rates of test substance application and crop sampling, as well as information pertaining to laboratory analysis. The FRD and LRD are identified in the protocol and the estimated research dates for the field and laboratory sites are to be provided to HQ to assist in maintaining an accurate master schedule. **No trial should be initiated until the FRD has a signed protocol in their possession.**

**Quality Assurance Unit:** This unit, as defined by the EPA, “means any person or organizational element, except the SD, designated by testing facility management to perform the duties relating to quality assurance of the studies.” The Quality Assurance Unit (QAU) consists of a HQ QA Manager, Regional QA Coordinators, and other QA personnel as required. The QAU assists in education and training of the field and laboratory personnel in IR-4 to meet GLP regulations. They conduct facility inspections at all IR-4 test locations and conduct critical phase inspections of each study at intervals adequate to ensure study integrity. All QA audits from facility and critical phase inspections will be provided to the appropriate SD and Management (IR-4 Executive Director) for review, appropriate response and corrective action, and signature. Those reports that require action may be forwarded to the Regional Directors as necessary. The HQ QA Manager will maintain a copy of the Master Schedule for all IR-4 studies. Updated copies of the Master Schedule are provided to QA Coordinators on an appropriate quarterly basis (See Chart 1 for GLP Responsibilities).
Sponsor: The sponsor is the person who initiates and provides financial or other support for a study. The IR-4 Project Management Committee will act as the sponsor for IR-4 studies under GLP and has designated the Executive Director as sponsor for the purposes of GLP. The Executive Director may delegate individuals to act as Sponsor Rep to sign the protocol, etc.

Study: For the purposes of IR-4, a study is an experiment conducted at the IR-4 Research Facilities (or contract facilities) to determine the magnitude of the residue (test substance) in or on a given commodity. The purpose of these studies is to collect and analyze treated and untreated residue samples from appropriate field sites according to the application parameters (outlined in the IR-4 Project Clearance Request [PCR or PR]) to provide the sponsor with residue chemistry data to support a pesticide tolerance.

Study Director: EPA requires each study to have a Study Director (SD). The SD represents the single point of study control, and is responsible for the overall conduct of the study. The accountability provided by a single SD (who plans, oversees, and controls the interpretation, analysis, documentation, and reporting of the results) is one of the most important aspects of the GLP standards. For IR-4 studies, the SD oversees the research of FRD and LRDs who are responsible for carrying out the field and analytical duties. The RLCs, RFCs, and ARS National IR-4 Director assist the SDs in meeting their responsibilities. The SDs will be appointed by the Test Facility Management (Executive Director) as overseen by the Assistant Director Registrations.

Testing Facility: According to the EPA definition, the testing facility “means the organization that actually conducts the study, i.e., actually uses the test substance in a test system.” It “encompasses only those operational units that are being or have been used to conduct studies.” IR-4 HQ serves as the testing facility for the purposes of GLP. The Executive Director will represent testing facility management, and the SDs and QAU will report to the Executive Director.

IR-4 DEFINITIONS

The specific designations of responsibility for the above terms have been made to meet the requirements of GLP as the EPA has defined them. To assist personnel at IR-4 HQ so that personnel resources, facilities, equipment, materials and methodologies are available as scheduled and that personnel clearly understand the function they are to perform, duties are delegated to those in the best position to carry them out. This section shows how these delegations have been made. The key personnel cooperating with the IR-4 program, their titles and duties are defined below.

Field Research Director: A person and their staff with sufficient training and experience to conduct the field trials as outlined in the protocols. Conducting field trials includes all activities specified in the protocol such as maintaining a crop; applying the test substance; harvesting, storing, and shipping samples; accurately completing the Field Data Book on time; and timely, prompt responses to QA audits. The FRD, or his/her designate, also reports all deviations from the protocol or SOPs to the SD.

Laboratory Research Director: A person with sufficient training and experience to be able to conduct the laboratory analysis and appoint adequate personnel to assure this function will be carried out for all studies. The LRD will report all deviations from the protocol or the SOPs to the SD.

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1 Also see Chart 1 and Appendix 1 for Roles and Responsibilities
Quality Assurance Coordinator (QAC) and Officers (QAO): These persons, designated by the Regional Director or Executive Director, report the findings of their audits to the SD, to the Executive Director (Testing Facility Management) and to other research associated personnel. The QAC/QAO must have a good working knowledge of GLP including associated guidance documents and quality assurance procedures. The QAC/QAO will monitor studies, including facilities, equipment, personnel, methods, practices, records and controls, for compliance with GLP. The QAU reviews the final report to assure that it accurately reflects the raw data of the study and prepares and signs a Quality Assurance Statement noting dates the inspections and findings were reported to the SD and SD Management. As appropriate in this document, QAC will also cover QAO. The IR-4 QA unit is comprised of HQ and Regional staff whose responsibility is to assure management that the monitoring of IR-4 GLP studies is in compliance with the GLPs (40 CFR 160.35). The HQ QA staff (comprised of QA Manager and support staff) work with the regional QA staff to coordinate the necessary monitoring and reporting for IR-4 studies.

Research Test Site: This is the location where a part of the study is conducted such as the state agricultural experiment stations or USDA-ARS field sites where plots are established to obtain data for a trial, or the laboratory where the samples are analyzed. Field and LRD will be responsible for the conduct of the research at the test sites.

Regional Field Coordinator: This person assigns field-testing sites within his/her region (or at an ARS facility), provides sample bags, reviews Field Data Books for accuracy and completeness, and facilitates the Field Research Director conduct of a field trial.

Regional Laboratory Coordinator: This person assigns laboratory-testing sites within his/her region for residue analyses conducted by the leader laboratory, its satellites, and private contract laboratories.

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1 Also see Chart I and Appendix I for Roles and Responsibilities

VERSION 7.0 01/06
INTER-RELATIONSHIPS

The purpose of this section is to provide a clearer understanding of inter-relationships and the responsibilities and authorities of the personnel involved in studies as they relate to GLP (also see Charts 1 and 2).

SPECIFIC RESPONSIBILITIES

To assist SDs in meeting their responsibilities, the following personnel will be held accountable that the data generated by IR-4 personnel fulfill the requirements of GLP:

1. Regional Laboratory Coordinator (RLC) for residue analyses conducted by the regional laboratory, its satellites, industry laboratories and private contract laboratories¹.

2. Regional Field Coordinator (RFC) for field trials conducted by scientists (state or contract) under IR-4 protocols¹.

3. ARS National IR-4 Director for all trials (field and laboratory) conducted by ARS scientists or others funded by ARS scientists under the ARS minor use program¹.

A facility that cannot conduct research in compliance with GLP will be terminated as a test location for IR-4. Assurances must be made that a facility can meet the requirements of GLP before any IR-4 GLP research is initiated; determinations will be made based on QA monitoring audits/reports (see page 6).

Non-compliance:

There are a number of situations where a study may not be in compliance with GLP. These situations should either be corrected or noted in the compliance statement. Some situations may warrant cancellation of the study.

Generally Correctable: Indicated below are some examples of non-compliance if one or more of the following occurs. These items generally can be corrected; however, the SD will make the final determination regarding the impact of these items on the study.

1. Personnel records are not up-to-date.
2. Failure to have access to personnel records and make them available within a reasonable period of time; such records should consist of curriculum vitae which includes education, training, experience and job description.
3. Failure to document the replacement of the Field or Laboratory Research Director.
4. SOPs exist but are not up-to-date and minor modifications will correct this deficiency.
5. Failure to have evidence of a characterization of the test, control, or reference substances. This information may be held by the company or IR-4 HQ but some documentation must be available to show possession.
6. Failure to record some of the required raw data.
7. Failure to maintain logs and other records as required.
8. Deviating from protocol and/or SOPs without SD approval.

¹ Also see Chart 1 and Appendix 1 for Roles and Responsibilities
Non-Correctable: The following are items which cannot be corrected and will result in termination of a trial or cancellation of a study for data not acceptable for submission to the EPA.

1. Failure to designate a Field or Laboratory Research Director when study is in progress.
2. Starting or completing a trial without an authorized protocol.
3. Falsification of raw data, records or personnel files.
4. Any deviation from the protocol or SOP’s that would significantly affect the outcome of the trial and the SD recommends the termination of the trial.
5. Failure to provide original raw data associated with field trial to the SD.

INTERACTIONS OF PROGRAM PERSONNEL:

The IR-4 Regional Directors (RD), RLCs, and RFCs and the ARS National IR-4 Director will work with the Field and Laboratory Research Directors, Quality Assurance Unit (QAU) and SDs to meet the responsibilities as outlined above. They will provide guidance to the Field and LRD regarding GLP research and SOP development. The Field or Laboratory Research Director will develop SOPs to reflect the needs of their research facility and submit them to the RLC or RFC for approval. The RD/RLC/RFC reserves the right to use the facility in the program based on whether or not the facility is in compliance with GLP. If needed, and in cooperation with the QAU, the RD/RLC/RFC should make constructive suggestions on how the facility may be brought into compliance. Research should not be initiated until the RD/RLC/RFC are confident that the facility is in compliance.

A facility inspection of each test site should be conducted at a minimum of once every three years by the QAU. Facility inspections are recommended prior to placement of a study at any new facility or facilities with significant personnel change. A report of the results of the inspection should be provided to the testing facility management (Executive Director) and the SD(s) at IR-4 HQ, the Field or Laboratory Research Director and RLC/RFC. Any problems which are likely to affect study integrity shall be brought to the attention of the SD(s) immediately. The Research Director will notify the SD of any deviations from the protocol or SOP’s and obtain approval for the deviation(s) from the SD. The RD/RLC/RFC will be kept informed of these actions by the Field or Laboratory Research Director.

The QAU will develop a system to monitor studies to assure that they are in compliance with GLP. A set of QAU SOPs are in place for this purpose. The inspections will provide the research facility with guidance on how to improve its GLP compliance. Critical phase inspections will be conducted at intervals necessary to protect the integrity of the study (at least once per study). The QAU report of the results of an inspection will be provided to the SD, Testing Facility Management and Field or Laboratory Research Director for comment according to IR-4 QAU Standard Operating Procedures. Responses to QA reports are returned to QA (to HQ QAU in the case of Field Data Book audits) with a copy to the RFC or RLC. The QA report and responses are forwarded to the SD and Testing Facility Management to fulfill our GLP requirements. The Executive Director brings to the attention of the RD (Project Management Committee member) any administrative actions required. The SD interacts with the Field or Laboratory Research Director on any actions required (also see Charts 1 and 2 and Appendix 1).

1 All RLC’s are also LRD’s

VERSION 7.0 01/06
PROGRAM GUIDELINES FOR GLP COMPLIANCE

This section will provide guidance primarily to the Field/Laboratory/Processing Research Directors and to the QA Personnel in conducting field trials and laboratory analysis under GLP. These guidelines are not intended to supplant Standard Operating Procedures. They are to be used as a uniform standard in the interpretation of the GLP regulations. The personnel involved in the conduct of the trials and their responsibilities have already been addressed in the preceding section. This section will deal with the conduct of the trial and how GLP regulations impact it.

FACILITIES

Field Plots: Trials in the greenhouse or in the field as container grown or field grown should be conducted with enough distance between treatments so that no cross contamination of the test substance can occur. IR-4 trials should be separate from other research trials at the location. Untreated plots should be far enough away from treated plots so that no contamination of the untreated plots is possible through drift or runoff.

Laboratory: The laboratory facilities are to be designated as acceptable for the procedures required by the Regional Director or the ARS chemist in charge at the location where the analyses are to be conducted. Since these facilities are under the control of the institution where the research is being performed, no uniform equipment requirements are possible. The regulations only require that separate space be provided as needed for the performance of the procedures required.

Processing: The processing facilities are to be designated as acceptable for the procedures required by the SD as outlined in the study protocol. Since these facilities are under the control of the facilities where the processing is being performed, no uniform standards are possible. The regulations only require that separate space be provided as needed for the performance of the procedures required by the trials.

Test/Reference Substances: The regulations require that the facility have separate areas for the following:

1. Receipt and storage.
2. Mixing with a carrier.
3. Storage with adequate housing to preserve the identity, strength, purity and stability of the test/reference substance.

The intent of this requirement is to prevent a mix-up or contamination. It is not necessary to have separate rooms for this purpose in the laboratory. Separate areas within the same room can be designated to meet the above requirements as long as they are adequate to avoid a mix-up or contamination. In the field, a separate building or room should be designated for pesticide storage and used for the sole purpose of chemical storage, mixing and handling. If this facility also houses non-IR-4 chemicals and other non-IR-4 personnel are using the facility, then an area should be designated for the IR-4 chemicals. Maintenance chemicals, used to prevent non-target pest damage to the test system (crop), do not need to be designated as IR-4 and can be stored with non-IR-4 chemicals. Temperature in the storage area should be monitored to allow verification that test/reference substances were held at temperatures that would not adversely affect their stability during the period from receipt through final application to the crop, or use in the laboratory.
Areas designated for test substances should be isolated from those areas where plant parts or samples that will undergo residue analysis are handled to prevent any possible contamination.

**Supply Storage:** This part applies to the adequacy of storage areas for those items necessary to grow and maintain the crop. Maintenance chemicals such as pesticides and fertilizers were discussed above. Non-chemical items such as seed, transplants, potting soil, other supplies and equipment should have facilities adequate for their storage during the trial period. Where appropriate for the trial, the Field Research Director should designate these areas at the facility so that they are clearly identified as to purpose and content for the IR-4 program.

**EQUIPMENT**

Equipment, as defined in this section, refers to equipment used in the generation, measurement or assessment of data and for environmental control of the facility where the crop is maintained. It does not refer to equipment used to grow and maintain the crop such as tractors used in soil preparation for planting or the associated equipment used on the tractor for this purpose. All equipment should be adequately inspected, cleaned and maintained to insure its proper operation.

The following equipment should also be adequately tested, calibrated and/or standardized and a log kept for repair, maintenance and calibration for each device as per facility SOPs but generally in accordance with the following guidelines:

**Devices to Measure or Record Weather Data:** If maintained by the Field Research Director, calibrate just prior to the beginning of the season as per SOPs.

**Other Laboratory and Field Equipment:** As determined by the Laboratory/Field Research Director and as designated in SOP’s.

Some equipment used in the development of data need not be subject to these requirements. This equipment, such as graduated cylinders and volumetric flasks, are pre-calibrated and do not need to be re-calibrated. This determination should be made by the Field/Laboratory Research Director and a list of such equipment should be compiled and displayed in the work location.

**Pesticide Application Equipment:** Check and match with current protocol requirements.

**Scales:** Calibrate before each day’s use. Note: scales used to weigh residue samples (crop) in the field need not be maintained under GLP (see IR-4 Advisory 2003-05 at the IR-4 web site).
REAGENTS AND SOLUTIONS

The GLP standards require all reagents and solutions in the laboratory area to be labeled to indicate identity, titer or concentration, storage requirements, and expiration date. This requirement can be difficult to accomplish when there is a mix of IR-4 and non-IR-4 personnel utilizing the laboratory and sharing the chemicals or when the chemical is stable and has a long shelf life. The following is to be used as a guide for meeting the labeling requirement:

1. Identity can be the common name(s), CAS number or chemical name of the reagent or reagents in solution or mixture.
2. If the labeling of the original container provides the identity, concentration, storage requirements (if any) and expiration date or shelf life, no additional information is needed. If the labeling does not contain this information, than a supplemental label containing the missing information should be permanently attached to the container where it does not obscure other critical information.
3. All mixtures of chemicals prepared by laboratory personnel for use in IR-4 trials should have labels with the information as shown in 2 above.
4. Expiration dates for stable chemicals should be determined by the Laboratory Research Director following methods outlined in their SOPs.
5. Adequate precautions should be taken to avoid contamination of reagents and solutions so that purity of their content is preserved.

CHARACTERIZATION OF SUBSTANCES

Analytical Reference Standards: Documentation of the characterization of the standards used in the analytical trial should be obtained by the Laboratory Research Director and a copy sent to the SD along with the Analytical Summary Report of the trial.

Test Substance: A GLP characterized test substance should be obtained from the source identified in the study protocol for use in the field trial by the Field Research Director. Documentation of the characterized test substance should be available to the SD from the registrant. See study protocol for specific information regarding the test/reference substance requirements and GLP status. The GLP status of the test substance must be known before its use in a study.

STANDARD OPERATING PROCEDURES

Responsibility for the development of a comprehensive set of SOPs that address the development, monitoring, and reporting of data from specific trials conducted at the research test site is the responsibility of each Field/Laboratory Research Director at that site.

RLCs, and RFCs and the ARS National IR-4 Director provide guidance for and approval of SOPs.

In addition, SOPs are needed for the Quality Assurance Unit and the archives. The Quality Assurance Unit will develop specific SOPs for their functions. The IR-4 HQ and other locations designated as Archives will provide the Executive Director with written SOPs for the archives facilities.
DATA REVIEW

Outlined below are the procedures and responsibilities for review of Field Data Books, Analytical Summary Reports and Final Reports.

ASSIGNED QA. Shortly after a Study has been planned (after the National Research Planning Meeting), but prior to initiation of the study, a QA unit is assigned to each Study (Assigned QA). The Assigned QA for each study is determined at the annual QA planning meeting, based primarily on the laboratory responsible for residue analysis. In general, for studies where the laboratory raw data will be sent to HQ, such as ARS and contract laboratories, the HQ QAC is the Assigned QAC. A list of all the studies and assigned QACs is made available to SDs, Field Coordinators, Lab Coordinators and other interested parties shortly after the annual QA planning meeting.

FIELD DATA BOOKS. The FRD complete the field trial and the Field Data Book (FDB). They make a copy of the FDB and submit the original to the Regional/ARS Field Coordinator. The Regional Field/ARS Coordinator (RFC) or a competent reviewer appointed (contracted) by the RFC, reviews the FDB and completes a FDB review checklist/summary. The RFC contacts the Field Research Director regarding any deficiencies in the FDB. After the FDB is found to be acceptable by the RFC, the original FDB, along with the FDB checklist/summary, is sent to the assigned QA Coordinator (QAC). A copy of the FDB checklist/summary is also sent to IR-4 HQ (IR-4 HQ) SDs. The Assigned QAC conducts an audit on the original FDB and sends the original to IR-4 HQ. The QA at HQ will route the audit to management and the SD. A copy will also be sent to the QAC. The Assigned QAC sends a copy to the Field Research Director and requests that any findings be addressed. The FRD can consult with the SD to address findings. Once the QA audit is complete, the original FDB is sent to the Assistant Director Registrations at IR-4 HQ (see figure attached). The FDB is forwarded to the SD for review, use in preparation of the final report, and archiving.

ANALYTICAL SUMMARY REPORTS: The LRD completes analysis of the residue samples and prepares the Analytical Summary Report (ASR). The ASR is audited by the Regional or Laboratory QAC and findings are addressed by the Laboratory Research Director. After completion, the ASR is sent to the Assistant Director Registrations at IR-4 HQ. For ARS reports, after the QA audit is complete and findings addressed, the ASR will be sent to the ARS IR-4 Director for review, then on to the Assistant Director Registrations at IR-4 HQ. At IR-4 HQ, the ASR is forwarded to the SD for review, used in preparation of the final report, and archiving.

FINAL REPORTS: Final reports should not be submitted for QA review until all QA audits and all corrective actions for field and laboratory portions of the study are received at IR-4 HQ. Once sufficient data are present at IR-4 HQ to consider the study complete, the SD will complete a draft of the Final Report from the FDBs and ASR(s). Final Reports are prepared in accordance with the submission schedule prepared by the Assistant Director Registrations. The draft Final Report will be routed to the Assigned QAC associated with the study. The draft final report will be audited using the information contained in the draft final report and the data located at the site of the audit. The Assigned QAC will provide the SD with the QA audit of the final report and the SD will address findings. After the findings are addressed and a QA closure review of the final report is complete, the HQ QA will provide a signed QA Statement and the SD will finalize (sign) the report, completing the study.
FIELD DATA BOOK (FDB) REVIEW (flow chart)

Field Research Director

- Completes field data book (FDB),
  - Makes a copy and forwards
- Original FDB to the RFC

Regional/ARS Field Coordinator

- The Regional/ARS Field Coordinator reviews the Field Data Book. Contacts the Field Research Director to correct deficiencies and approve edits
- Original Field Data Book (with RFC’s Review) is sent to an assigned QA for review

Assigned QA Coordinator

- Assigned QA reviews FDB
- Sends findings to Field Research Director and HQ QA for routing to SD and Management
  (Regional QA Coordinator is copied on QA report and findings)
- Assigned QAC sends original FDBs to IR-4 HQ (Assistant Director Registrations) for log in, review and archiving (makes copy if desired)
- Field Research Director, RFC and SD address findings.
  Field Research Director sends responses and additional data (if needed) to HQ QA who provides the QA report to The SD and Management.
  A copy of the responses is sent to the Assigned QAC and RFC

- Final reports (include FDB summaries and ASRs) will be drafted after all QA audits and all corrective actions for field and laboratory portions of the study are received at IR-4 HQ
- The draft Final Report will be routed to the Assigned QAC and audited.
  The Assigned QAC will provide the SD with the QA audit of the final report and the Study Director will address the findings. QA conducts closure review of draft final report.

- After the findings are addressed, the QA will provide a signed QA Statement and the Study Director will finalize (sign) the report

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1A copy of the RFC’s Review is sent to HQ
2Assigned QA is determined primarily by laboratory responsible for residue analysis (assigned QA will conduct the Final Report Audit).
3QA findings/reports are sent to HQ QA for routing to Management and SD. Assigned QA has option with SD’s consent to return FDB to FRC for corrections.
4The FDB is forwarded to the SD for review, use in preparation of final report, and archiving.
IR-4 GLP Project Training Programs

1. **IR-4 Training Committee (TC).** This committee provides oversight for technical and GLP training matters regarding IR-4 research; the charge of the committee includes providing general curriculum guidelines for training, assisting in the development of educational materials, and serving as spokespersons for their respective components.” TC membership includes representatives of each component of the IR-4 program: FRDs (6, including one from ARS), QA (1), RFC (1), LRD (1), IR-4 Communications Coordinator add hoc (1), PMC/Regional Director (1), HQ SD (1/2), and HQ Assistant Director Registrations (1).

2. **IR-4 Recommended Training for new FRDs.** All new FRDs are requested to participate in the following training activities before conducting GLP research, unless they already have significant training:
   
   a. Basic GLP training required as soon as possible, before beginning any field trials
   b. Opportunity to visit one relevant established FRD and the RFC for hands-on training and question/answer time
   c. Opportunity for regional QA personnel to meet the new FRD for the purpose of orienting them to the GLP audit procedures and expectations related to IR-4 field trials
   d. TC make available various training references and IR-4 orientation documents for new FRD training and orientation to IR-4

3. **Recommended Training Schedule for IR-4.** A national training event is recommended to be organized by the IR-4 TC every third year for the benefit of everyone participating in IR-4 GLP research across the country (including IR-4 partners in NAFTA). All IR-4 FRDs and their technicians, LRDs and their analysts/technicians, RFCs and Quality Control reviewers, QA officers, SDs, PMC members, and any others involved in IR-4 GLP research are encouraged to attend. In the years between National events, IR-4 Regions should individually, or jointly with another region, organize local training events primarily for regional researchers. These events are to be open (especially to new researchers) to others outside the host Region(s), to the extent possible as determined by the event organizers.

4. **IR-4 Advisories.** The purpose of IR-4 Advisories is to serve as a tool to communicate resolution of questions/issues raised by anyone in the IR-4 Project, for which the resolution could be valuable for many within IR-4. The approved procedure is as follows:

   (1) Issues/questions from anyone in IR-4 are directed to the chairperson of the TC, who evaluates/determines (with others as needed) whether formulating an IR-4 Advisory is the most appropriate means to communicate a resolution, and then drafts an Advisory. (2) The draft advisory is sent to members of the TC for review/comment. The TC chair incorporates revisions and distributes the revised draft Advisory to RFCs, SDs, TC and QA, etc. for another review/comment. (3) New suggested revisions are incorporated and the Advisory is distributed for a final review/comment by the IR-4 PMC. (4) Upon favorable review by PMC, the Advisory is “published” and becomes part of IR-4 policy. The IR-4 Advisories are posted on the IR-4 website, and distributed electronically to PMC, SDs, RFCs, FRDs, QA, etc.
## Highlights of GLP Responsibilities IR-4 Headquarters (Testing Facility)

<table>
<thead>
<tr>
<th>Role</th>
<th>Responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>EXECUTIVE DIRECTOR</strong></td>
<td>(Designated by PMC as Sponsor Rep. and Testing and Facility Management)</td>
</tr>
<tr>
<td>APPOINTS</td>
<td>Assistant Director Registrations to designate Study Directors</td>
</tr>
<tr>
<td></td>
<td>Quality Assurance Manager</td>
</tr>
<tr>
<td></td>
<td>Archives Librarian</td>
</tr>
<tr>
<td></td>
<td>Maintains Data on Test Substance Characterization</td>
</tr>
<tr>
<td><strong>STUDY DIRECTOR</strong></td>
<td>Prepares Protocol</td>
</tr>
<tr>
<td></td>
<td>Archives Raw Data and Reports</td>
</tr>
<tr>
<td></td>
<td>Signs Off on GLP Forms (protocol etc)</td>
</tr>
<tr>
<td></td>
<td>Prepares, finalizes and submits Study Report</td>
</tr>
<tr>
<td><strong>QUALITY ASSURANCE UNIT</strong></td>
<td>Provide Guidance and Policy</td>
</tr>
<tr>
<td></td>
<td>Maintains a copy of Master Schedule</td>
</tr>
<tr>
<td></td>
<td>Maintain access to CV of Study Personnel</td>
</tr>
<tr>
<td></td>
<td>Provide Education and Training</td>
</tr>
<tr>
<td></td>
<td>Inspects Facilities and Studies</td>
</tr>
<tr>
<td></td>
<td>Audits data and reports</td>
</tr>
<tr>
<td><strong>ARCHIVES LIBRARIAN</strong></td>
<td>Provides for Orderly Storage and Retrieval of Records</td>
</tr>
</tbody>
</table>

### Regional IR-4 Programs/Offices (Regional Management)

<table>
<thead>
<tr>
<th>Role</th>
<th>Responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>REGIONAL DIRECTOR</strong></td>
<td>APPOINTS</td>
</tr>
<tr>
<td></td>
<td>Field and Laboratory Coordinators</td>
</tr>
<tr>
<td></td>
<td>Quality Assurance Coordinator</td>
</tr>
<tr>
<td><strong>FIELD/LABORATORY COORDINATOR</strong></td>
<td>Approve SOPs</td>
</tr>
<tr>
<td></td>
<td>Assure Facility is in Compliance</td>
</tr>
<tr>
<td></td>
<td>Coordinates and Tracks Trials</td>
</tr>
<tr>
<td><strong>QUALITY ASSURANCE COORDINATOR</strong> or designee</td>
<td>Inspects Facilities and studies and audits data and reports.</td>
</tr>
</tbody>
</table>

### FIELD/LABORATORY/PROCESSING FACILITY

<table>
<thead>
<tr>
<th>Role</th>
<th>Responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>RESEARCH TEST SITE PROVIDES</strong></td>
<td>Field/Laboratory/Processing Research Director and Resources to Conduct Trial(s)</td>
</tr>
<tr>
<td><strong>FIELD/LABORATORY/PROCESSING RESEARCH DIRECTOR</strong></td>
<td>Supervise/Conduct Trial (s)</td>
</tr>
<tr>
<td></td>
<td>Provide CV for Trial Personnel</td>
</tr>
<tr>
<td></td>
<td>Revise and Maintain SOPs</td>
</tr>
<tr>
<td></td>
<td>Assure SOPs &amp; Protocol are followed</td>
</tr>
<tr>
<td></td>
<td>Provide Deviations to Protocol &amp; SOPs</td>
</tr>
<tr>
<td></td>
<td>Address QA Findings</td>
</tr>
<tr>
<td></td>
<td>Prepare and submit reports and raw data</td>
</tr>
</tbody>
</table>
GLP COMMUNICATIONS FLOW CHART

SPONSOR
IR-4 Project Management Committee (PMC)

TESTING FACILITY
IR-4 HEADQUARTERS
Executive Director
Study Director
Quality Assurance Unit
Archives

REGIONAL IR-4 OFFICE
Regional Director
ARS/Field/Laboratory Coordinators
Quality Assurance Coordinator

RESEARCH TESTING FACILITY
Test Site
Field/Laboratory Research Director

1 Critical study information
APPENDIX 1: GUIDELINES FOR ROLES & RESPONSIBILITIES OF IR-4 PERSONNEL

A **Role** refers to the focus, behavior and performance of individuals related to the various positions they occupy.

**Responsibilities** are the specific functions and tasks for which a person is held accountable while occupying one or more roles.

**Role of Study Director**
1. Sole point of study control
2. Study submission to the EPA – develop data to support tolerances
3. Oversee study conduct – from start to finish
4. Defined under GLP

**Responsibilities of Study Directors**
1. Protocols and protocol changes
2. Review data and write final report
3. Assure GLP compliance to the EPA
4. Monitor study progress
5. Develop data to establish tolerance, and follow up on necessary paperwork
6. Provide scientific guidance for studies
7. Be primary point of control for studies
8. Interpret regulations and apply to IR-4 studies

**Role of QA Unit**
1. Act as a work partner in GLP compliance
2. Monitor protocols, data and reports for compliance with the EPA GLPs
3. Inspect and audit facilities and studies to assure Management that they meet EPA standards

**Responsibilities of the QA Unit**
1. Inspect lab and field studies in process (in-life inspections)
2. GLP compliance evaluations – field and lab facility inspections
3. Audit raw data to ensure integrity and reproducibility of study inputs
4. Communication of audit and inspection results to Study Directors and Management – maintain objective viewpoint
5. Assure management that protocols and SOPs are followed
6. Coordinate interactions between personnel and EPA inspectors during EPA compliance inspections
7. Interpretation of the regulations and assist with the resolution of issues as necessary
8. Training during GLP compliance audits and inspections
9. In house training of staff about GLP requirements
10. Act as a conduit of information regarding GLP compliance from the field and laboratory test sites to appropriate regional personnel and HQ.
Role of the Regional/ARS Field Coordinators (RFC)
1. Uncover needs through field contacts and submit Project Clearance Requests
2. Communicate IR-4’s Mission and Purpose and other IR-4 information to growers, State Liaison Representatives (SLR), CLC and others
3. Seek and coordinate funding from growers/grower groups, etc.
4. Provide education and training to SLRs and FRD
5. Facilitate conduct of field trials

Responsibilities of the RFC
1. Communicate frequently with all stakeholders by visits, phone, e-mail, travel, meetings and presentations. Key responsibility in this area is to solicit needs of growers, data review for groups and introduction of new technology
2. Seek and secure contracts with FRDs
3. Make site visits for training, SOP review and approval, etc.
4. Facilitate PCR submissions by stakeholders
5. Do or assign data reviews – i.e. QC, protocols, SOPs, complete check list, summarize, etc.
6. Grant writing to various grower, state and industry groups
7. General regional “bookkeeping” duties
8. Provide information to support (Special Local Needs) SLNs and Section 18s
9. Manage field budget and resources
10. Communicate/facilitate issues regarding Field Trials to Study Directors

Role of the RLCs/Laboratory Chemists at Satellite and ARS Labs
1. Coordinate and monitor residue analyses
2. Provide leadership and oversight for laboratory personnel at local facilities
3. Ensure lab capabilities and facilities are adequate

Responsibilities of the RLC and Laboratory Chemists
1. Supervise analyses
2. Maintain GLP compliance in labs (generate SOPs, training records, etc.)
3. Select projects for the region
4. Manage laboratory budget and resources
5. Prepare Analytical Summary Reports
6. Communicate study status and progress to RDs and SDs
Role of the Field Research Director (FRD)
1. Conduct GLP field residue trials
2. IR-4 Partner – outreach to local growers
3. Budget and funding of IR-4 Field Research Center

Responsibilities of the FRD
1. Conduct/oversee field trials according to the protocol and GLP standards.
2. Act as work partner in GLP compliance (understand & implement)
3. Collect and submit data in a timely manner
4. Develop, update and implement SOPs
5. Provide oversight of science/agronomics of field research
6. Communicate and provide feedback to SD, QA, and Staff
7. Respond promptly to QA questions
8. Provide leadership and training to personnel
9. Maintain Research Facility
10. Working partnership within IR-4 (RFC, SD, QA, etc.)
11. Review protocols and provide comments to the SD
12. Serve as knowledgeable resource on crop production in region
13. Provide solutions to trial problems in conjunction with SD on day-to-day problems
14. Educate public and administration on role of IR-4. Communicate IR-4 mission to growers and other stakeholders
15. Develop budget for the IR-4 Field Research Center. Provide funds and “physical” resources
16. Find additional sources of funding for equipment/employees

GLP disclaimer for FRDs: GLP standards are not required by the EPA for ornamental performance data research and other performance data research, except for public health use.
Appendix 2: IR-4 Project Completion Timeline, Critical Phases and Data Flow

Pre-Start Activity

NRPM = National Research Planning Meeting
QA = Quality Assurance
 RFC = Regional Field Coordinator
RLC = Regional Lab Coordinator
MFG = Registrant
HQ = Headquarters
 GLP = Good Laboratory Practices
MSS = Master Study Schedule
FDB = Field Data Book
SD = Study Director
ASR = Analytical Summary Report
EPA = Environmental Protection Agency
FRD = Field Research Director

NRPM

SD Draft Protocols
Send draft protocols to QA, RFC, FRD RLC, MFG for
Protocols reviewed
comments provided to SD

Protocols finalized,
Signed, time line starts

FRD and LRD receive signed protocol package
GLP dates from FRD/LRD provided to HQ for MSS
Field conduct/Samples collected and FDB shipped

FDB received and reviewed by RFC
QA receives and reviews FDB
FDB received at HQ
SD reviews FDB

Last sample received at the laboratory/residue analysis and completion
ASR drafted and submitted to QA
ASR QA review complete

ASR received at HQ
SD reviews ASR, all data received at HQ
SD drafts final report (includes ASR and FDB’s summaries)

QA 1 audit of report
SD addresses QA findings
OA closure review of report and completes review
SD addresses QA and MFG findings and finalized
Report is sent to EPA

Timeline (Months)
0
2
10
22
30

QA Planning Meeting