Clinical Trial Observation Checklist

Trial & Observer Information

Study Title

Protocol Number

Site

Date

Observer Name

Role

Checklist

Item	Yes	No	Not Applicable	Comments
Informed Consent obtained and documented	☐	☐	☐	
Study drug/device administered as per protocol	☐	☐	☐	
Eligibility criteria verified	☐	☐	☐	
Adverse events monitored and recorded	☐	☐	☐	
Protocol deviations noted	☐	☐	☐	
CRF completed and up to date	☐	☐	☐	

General Observations

Action Items / Follow-Up

Observer Signature

Date