## **Clinical Trial Protocol Deviation Report**

## **General Information**

Protocol Title	
Protocol Number	_
Site Name	_
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	_
Subject ID	_
Date of Deviation	
Reported By	)
Date Reported	_
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Deviation Details	
Description of Deviation	
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Type of Deviation	
Type of Deviation	•
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Relevant Protocol Section(s)	<u>•</u> ]
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Relevant Protocol Section(s)  Actions & Assessment  Immediate Actions Taken  Impact Assessment  Corrective/Preventive Actions	
Relevant Protocol Section(s)  Actions & Assessment  Immediate Actions Taken  Impact Assessment  Corrective/Preventive Actions  Review & Sign-off	
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